



Access Healthcare LLC

Employee Handbook – Traveling Staff

May 4, 2026

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Core Policies

Welcome

A Welcome Policy

Welcome! You have just joined a dedicated organization. We hope that your employment with Access Healthcare LLC will be rewarding and challenging. We take pride in our employees as well as in the products and services we provide.

The Company complies with all federal and state employment laws, and this handbook generally reflects those laws. The Company also complies with any applicable local laws, although there may not be an express written policy regarding those laws contained in the handbook.

The employment policies and/or benefits summaries in this handbook are written for all employees. When questions arise concerning the interpretation of these policies as they relate to employees who are covered by a collective-bargaining agreement, the answers will be determined by reference to the actual union contract, rather than the summaries contained in this handbook.

Please take the time now to read this handbook carefully. Sign the acknowledgment at the end to show that you have read, understood, and agree to the contents of this handbook, which sets out the basic rules and guidelines concerning your employment. This handbook supersedes any previously issued handbooks or policy statements dealing with the subjects discussed herein. The Company reserves the right to interpret, modify, or supplement the provisions of this handbook at any time. Neither this handbook nor any other communication by a management representative or other, whether oral or written, is intended in any way to create a contract of employment. Please understand that no employee handbook can address every situation in the work place.

If you have questions about your employment or any provisions in this handbook, contact Human Resources.

We wish you success in your employment here at Access Healthcare LLC!

At-Will Employment

Your employment with Access Healthcare LLC is on an "at-will" basis. This means your employment may be terminated at any time, with or without notice and with or without cause. Likewise, we respect your right to leave the Company at any time, with or without notice and with or without cause.

Nothing in this handbook or any other Company document should be understood as creating a contract, guaranteed or continued employment, a right to termination only "for cause," or any other guarantee of continued benefits or employment. Only the CEO has the authority to make promises or negotiate with regard to guaranteed or continued employment, and any such promises are only effective if placed in writing and signed by the CEO.

If a written contract between you and the Company is inconsistent with this handbook, the written contract is controlling.

Nothing in this handbook will be interpreted, applied, or enforced to interfere with, restrain, or coerce employees in the exercise of their rights under Section 7 of the National Labor Relations Act.

This policy may not be appropriate in its entirety for employees working in Montana.

Introductory Language and Policies

Business Code of Ethics

As an employee of Access Healthcare LLC, I have a responsibility to maintain high standards of conduct, to encourage client independence and to contribute to clients' welfare.

To accomplish these goals I will:

- Treat each individual with respect and accept that all individuals have worth.
- Maintain the confidentiality of information acquired through my employment and only disclose this information when authorized or legally obligated to do so;
- Follow policies and procedures as developed by Access Healthcare LLC.
- Ensure that my personal activities do not interfere with my judgement and competence.
- Fulfill my obligations and responsibilities in a dependable and honorable manner.
- Provide client-centered care by encouraging the client to make his/her own decisions.
- Promote client involvement in his/her own affairs, including appropriate family and community involvement.
- Encourage the client to contribute to his/her own welfare by doing tasks of which he/she is capable.

Access Healthcare LLC will conduct business honestly and ethically wherever operations are maintained. We strive to improve the quality of our services, products, and operations and will maintain a reputation for honesty, fairness, respect, responsibility, integrity, trust, and sound business judgment. Our managers and employees are expected to adhere to high standards of business and personal integrity as a representation of our business practices, at all times consistent with their duty of loyalty to the Company.

The first element of the Code of Business Ethics is putting the interests of the client facilities and ultimately the patient above our personal and individual interests. It is in the best interest of Access Healthcare LLC to avoid conflicts of interest between the client hospital, employees and staff.

Access Healthcare LLC has developed corporate compliance guidelines to supplement and reinforce our client facilities' existing policies and procedures. It is also meant to assist Access Healthcare LLC comply with all applicable laws, rules and regulations.

- All employees are responsible for conducting their jobs in a manner reflecting standards of ethics that are consistent with accepted criteria for personal integrity
- Preserving Access Healthcare LLC reputation for integrity and professionalism is an important objective. The manner in which employees carry out their responsibilities is as important as the results they achieve.
- All activities are to be conducted in compliance with both the letter of the law and spirit of the law, regulations, and judicial decrees.
- No employee should, at any time take any action on behalf of Access Healthcare LLC, which is known or should be known to violate any law or regulation.
- Information about healthcare provider's medical condition and history is required during the hiring process. Access Healthcare LLC recognizes this health information and electronic information must be held securely and in confidence. It is the policy of Access Healthcare LLC that clinical staffs' specific information is not to be released to anyone outside of Access Healthcare LLC without a court order, subpoena of applicable statute.
- Marketing materials, regardless of medium, shall accurately describe the services, facilities and resources of Access Healthcare LLC
- To maintain high standards of performance, Access Healthcare LLC employs only those individuals it believes are most qualified without regard to race, color, religion, sex, age, national origin, handicap or disability in compliance with all federal and state laws regarding discrimination.
- Access Healthcare LLC is committed to maintaining a work place environment in which employees are free from sexual harassment.

- Access Healthcare LLC will not tolerate violence or threats of violence in the workplace, including but not limited to abusive language, threats, intimidation, inappropriate gestures and/or physical fighting by any employee. These actions are strictly prohibited and may lead to severe disciplinary action up to and including termination.
- Access Healthcare LLC recognizes that its employees and clinical staff are its most valuable assets and is committed to protecting their safety and welfare. Employees are required to report accidents and unsafe practices or conditions to their supervisors or other management staff. Timely action will be taken to correct unsafe conditions.
- Employees that are licensed or certified in any profession shall follow all applicable rules and professional codes of conduct pertaining to that profession, in addition to the rules stated herein.
- Access Healthcare LLC prohibits the use or possession of illegal drugs and alcohol abuse on Access Healthcare LLC property or while engaged in company activity.
- Access Healthcare LLC is committed to providing initial and ongoing education for all employees regarding their responsibilities to uphold the code of business ethics and this set of Access Healthcare LLC's Corporate Compliance guidelines.
- Access Healthcare LLC prohibits field staff to discuss bill rates of hospitals or special rates of Access Healthcare LLC with other healthcare providers.
- Access Healthcare LLC prohibits field staff to discuss personal or business affairs of any employee (field or office staff) with any individual not directly involved with the said personal or business affair.
- Access Healthcare LLC is committed to protecting the privacy, confidentiality and security of personal (education, employment and health) information of its employees. This policy is designed to assure compliance with applicable state and federal laws and regulations.
- Access Healthcare LLC is committed to protecting its own and its client's trade secrets, proprietary information and other internal information.
- It is the desire of Access Healthcare LLC to provide authorized third parties with information whenever requested while committing to our responsibility to control the release of information to protect the privacy and confidentiality of the employee and/or corporate information.
- Employees are not authorized to issue any statement, written or oral, to any news media representative or grant any public interview pertaining to the company's operations or financial matters.

Any employee that becomes aware of any ethical issues or unethical practices must immediately report it to their supervisor. If the supervisor is unavailable or you believe it would be inappropriate to contact that person, because of their involvement in the situation, you should immediately contact the Access Healthcare LLC Corporate Office or any other member of management. Any employee can raise concerns and make reports without fear of reprisal or retaliation.

All reports and inquiries are handled confidentially to the greatest extent possible under the circumstances. You may choose to remain anonymous, though in some cases that can make it more difficult to follow up and ensure resolution to the situation.

Access Healthcare LLC wants every employee to report violations of our ethical or other principles whenever you see them or learn about them. In fact, it is a requirement of your employment. If you do not know whether something is a problem, please ask a member of management.

Violation of the Code of Ethics can result in discipline, up to and including termination of employment. The degree of discipline imposed may be influenced by the existence of voluntary disclosure of any ethical violation and whether or not the violator cooperated in any subsequent investigation.

Revisions to Handbook

This handbook is our attempt to keep you informed of the terms and conditions of your employment, including Access Healthcare LLC policies and procedures. The handbook is not a contract. The Company reserves the right to revise, add, or delete from this handbook as we determine to be in our best interest, except the policy concerning at-will employment. When changes are made to the policies and guidelines contained herein, we

will endeavor to communicate them in a timely fashion, typically in a written supplement to the handbook or in a posting on company bulletin boards.

Availability of Access Healthcare LLC Office Staff

The Access Healthcare LLC office, located in Princeton, NJ is open Monday through Friday from the hours of 9:00 AM – 5:00 PM. Our local telephone number is (800) 257-5837. Outside of normal business hours and in the event of an emergency, please contact us at the same number. Access Healthcare LLC's on call staff will be available to assist you.

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

Hiring and Orientation Policies

Orientation

Hospital orientation information or requirements will be provided to Access Healthcare LLC Employee prior to assignment start by a representative of the client facility.

Clinical Supervision

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

Floating Policy

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

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

- The healthcare provider will immediately notify Access Healthcare LLC,
- The Access Healthcare LLC employee is obligated to inform the hospital of the professional limitations based upon the Nurse Practice Act standards and upon Access Healthcare LLC client contract specifications as they relate to the assignment.
- The President or Clinical Liaison at Access Healthcare LLC will work within the bounds of each discipline's Professional Association or State Governing Body and the client agreement to resolve the issue.
- Access Healthcare LLC will pay healthcare professional for hours worked up until the end of the shift.
- Access Healthcare LLC will pay nurse for hours worked up until the end of the shift.

Diversity, Equity and Inclusion Policy

Added 7/29/24

Access Healthcare LLC is committed to fostering, cultivating and preserving a culture of diversity, equity and inclusion.

Our human capital is the most valuable asset we have. The collective sum of the individual differences, life experiences, knowledge, inventiveness, innovation, self-expression, unique capabilities and talent that our employees invest in their work represents a significant part of not only our culture, but our reputation and company's achievement as well.

We embrace and encourage our employees' differences in age, color, disability, ethnicity, family or marital status, gender identity or expression, language, national origin, physical and mental ability, political affiliation, race, religion, sexual orientation, socio-economic status, veteran status, and other characteristics that make our employees unique.

Access Healthcare LLC diversity initiatives are applicable—but not limited—to our practices and policies on recruitment and selection; compensation and benefits; professional development and training; promotions; transfers; social and recreational programs; layoffs; terminations; and the ongoing development of a work environment built on the premise of gender and diversity equity that encourages and enforces:

- Respectful communication and cooperation between all employees.
- Teamwork and employee participation, permitting the representation of all groups and employee perspectives.
- Work/life balance through flexible work schedules to accommodate employees' varying needs.
- Employer and employee contributions to the communities we serve to promote a greater understanding and respect for the diversity.

All employees of Access Healthcare LLC have a responsibility to treat others with dignity and respect at all times. All employees are expected to exhibit conduct that reflects inclusion during work, at work functions on or off the work site, and at all other company-sponsored and participative events. All employees are also required to attend and complete annual diversity awareness training to enhance their knowledge to fulfill this responsibility.

Any employee found to have exhibited any inappropriate conduct or behavior against others may be subject to disciplinary action.

Employees who believe they have been subjected to any kind of discrimination that conflicts with the company's diversity policy and initiatives should seek assistance from a Supervisor or Human Resources.

Equal Employment

Updated 7/29/24

Access Healthcare LLC provides equal employment opportunities to all qualified individuals without regard to race, color, religion, sex, gender identity, sexual orientation, pregnancy, age, national origin, physical or mental disability, military or veteran status, genetic information, or any other Federal, state or local protected classification. Equal employment opportunity includes, but is not limited to, hiring, training, promotion, demotion, transfer, leaves of absence, and termination. The Company takes allegations of discrimination, harassment, and retaliation seriously and will promptly investigate when such behavior is reported.

For specific the EEO Statement & Nonharassment policy for the state in which you are employed, reference the individual state supplement.

Religious Accommodation

Updated 7/29/24

Access Healthcare LLC recognizes the diversity of religious beliefs and is committed to providing equal employment opportunities to all employees, regardless of their religious beliefs and practices or lack thereof.

Consistent with this commitment, the Company complies with Title VII of the Civil Rights Act of 1964 and all applicable state and local laws that prohibit employment discrimination on the basis of religion. The Company will reasonably accommodate the sincerely held religious beliefs of employees if the accommodations would resolve a conflict between the individual's religious belief or practice and a work requirement, unless doing so would create an undue hardship.

Requesting a Religious Accommodation

If you need an accommodation because of your religious beliefs or practices, make the request with your Supervisor or Human Resources. You may be asked to include relevant information such as:

- A description of the proposed accommodation.
- The reason you need the accommodation.
- How the accommodation will help resolve the conflict between your religious beliefs or practices (or lack thereof) and your work requirements.

After receiving your request, the Company will engage in an interactive dialogue with you to explore potential accommodations that could resolve the conflict between your religious beliefs or practices and work requirements. The Company encourages you to suggest specific reasonable accommodations. However, the Company is not required to make the specific accommodation requested by you and may provide an alternative accommodation, to the extent any reasonable accommodation can be made without imposing an undue hardship on the Company.

The Company will not discriminate or retaliate against employees who, in good faith, request a religious accommodation under this policy.

Disability Accommodation

Access Healthcare LLC complies with the Americans with Disabilities Act (ADA), the Pregnancy Discrimination Act, and all applicable state and local fair employment practices laws, and is committed to providing equal employment opportunities to qualified individuals with disabilities, including disabilities related to pregnancy, childbirth, and related conditions. Consistent with this commitment, the Company will provide reasonable accommodation to otherwise qualified individuals where appropriate to allow the individual to perform the essential functions of the job, unless doing so would create an undue hardship on the business.

If you require an accommodation because of your disability, it is your responsibility to notify your Supervisor. You may be asked to include relevant information such as:

- The reason you need an accommodation.
- A description of the proposed accommodation.
- How the accommodation will help you perform the essential functions of your job.

After receiving your request, the Company will engage in an interactive dialogue with you to determine the precise limitations of your disability and explore potential reasonable accommodations that could overcome those limitations. Where appropriate, we may need your permission to obtain additional information from your medical provider. All medical information received by the Company in connection with a request for accommodation will be treated as confidential.

The Company encourages you to suggest specific reasonable accommodations that you believe would allow you to perform your job. However, the Company is not required to make the specific accommodation requested by you and may provide an alternative accommodation, to the extent any reasonable accommodation can be made without imposing an undue hardship on the Company.

Where state or local law provides greater protections to employees than federal law, the Company will apply the law that provides the greatest benefit to employees.

If leave is provided as a reasonable accommodation, such leave may run concurrently with leave under the federal Family and Medical Leave Act and/or any other leave where permitted by state and federal law.

The Company will not discriminate or retaliate against employees for requesting an accommodation.

Accommodations for Pregnancy, Childbirth, and Related Medical Conditions

Updated 7/29/24

Access Healthcare LLC recognizes the importance of supporting employees experiencing limitations related to pregnancy, childbirth, or related medical conditions by providing reasonable accommodations. We are committed to complying with the federal Pregnant Workers Fairness Act (PWFA) and any applicable state or local laws offering additional protections.

Examples of reasonable accommodations include:

- Additional break time for restroom use, meals, hydration, and rest.
- Seating options allowing for sitting or standing as needed.
- Schedule changes, part-time work, and paid and unpaid leave.
- Flexible work hours to accommodate medical appointments and physical needs.
- Telework (remote work).
- Closer parking spots to the workplace entrance.
- Light duty.
- Making existing facilities accessible or modifying the work environment.
- Job restructuring.
- Temporarily suspending one or more essential functions of your job.
- Acquiring or modifying equipment, uniforms, or devices.
- Adjusting or modifying examinations or policies.

If you require an accommodation, notify your Supervisor. In instances where the need for a particular accommodation is not obvious, you may be asked to provide:

- The reason an accommodation is needed.
- A description of the proposed accommodation.
- Information on how the accommodation will effectively address your limitations.

Medical documentation will not be required in the following situations:

- When the limitation and need for an accommodation is obvious.
- If the Company is already aware of the limitation due to previous disclosures.
- When requesting accommodations such as additional restroom breaks, fluid intake, food breaks, or seating arrangements, which are considered presumptively reasonable.
- For any lactation accommodations.
- When a similar accommodation has been provided to other employees without requiring documentation.

The Company will engage in an interactive process with you to identify suitable accommodations. While we strive to accommodate all requests, certain accommodations may not be provided if they would result in undue hardship to the Company. Factors considered include the nature and cost of the accommodation, the overall financial resources of the facility, and the impact on operations, including safety and efficiency.

If leave is provided as a reasonable accommodation, it may run concurrently with leave under the federal Family and Medical Leave Act (FMLA) and/or any other applicable leave as permitted by law.

The Company strictly prohibits retaliation against employees who request or utilize an accommodation under this policy.

Employment Authorization Verification

New hires will be required to complete Section 1 of federal Form I-9 on the first day of paid employment and must present acceptable documents authorized by the U.S. Citizenship and Immigration Services proving identity and employment authorization no later than the third business day following the start of employment with Access Healthcare LLC. If you are currently employed and have not complied with this requirement or if your status has changed, inform your Supervisor.

If you are authorized to work in this country for a limited period of time, you will be required to submit proof of renewed employment eligibility prior to expiration of that period to remain employed by the Company.

Conflicts of Interest

Access Healthcare LLC is concerned with conflicts of interest that create actual or potential job-related concerns, especially in the areas of confidentiality, customer relations, safety, security, and morale. If there is any actual or potential conflict of interest between you and a competitor, supplier, distributor, or contractor to the Company, you must disclose it to your Supervisor. If an actual or potential conflict of interest is determined to exist, the Company will take such steps as it deems necessary to reduce or eliminate this conflict.

Wage and Hour Policies

Hours of Work

Hours of work are any period of time within a 24-hour period, 24 hours a day.

Pay Period

At Access Healthcare LLC, the standard pay period is weekly for all employees.

The workweek is Sunday through Saturday, payday is the following Friday.

If a pay date falls on a holiday, you will be paid on the preceding workday.

Review your paycheck for accuracy. If you find an issue, report it to the Payroll Dept. immediately at hellipayroll@accesshealthcarestaffing.com.

Recording Time

Access Healthcare LLC is required by applicable federal, state, and local laws to keep accurate records of hours worked by certain employees.

To ensure that the Company has complete and accurate time records and that employees are paid for all hours worked, nonexempt employees are required to record all working time using the client's timekeeping application and procedures.

You must accurately record all of your time to ensure you are paid for all hours worked, and must follow established Company procedures for recording your hours worked. Time must be recorded as follows:

- Immediately before starting your shift.
- Immediately after finishing work, before your meal period.
- Immediately before resuming work, after your meal period.
- Immediately after finishing work.
- Immediately before and after any other time away from work.

Notify Access Healthcare LLC's payroll dept of any pay discrepancies, unrecorded or misrecorded work hours, or any involuntarily missed meal or break periods.

Falsifying time entries is strictly prohibited. Falsifying time entries includes working "off the clock." If you falsify your own time records, or the time records of co-workers, or if you work off the clock, you will be subject to discipline up to and including termination. Immediately report to Human Resources any employee, supervisor, or manager who falsifies your time entries or encourages or requires you to falsify your time entries or work off the clock.

Paycheck Deductions

(revised 02.04.26)

Access Healthcare LLC is required by law to make certain deductions from your pay each pay period, including deductions for federal income tax, Social Security and Medicare (FICA) taxes, state income taxes, state unemployment taxes, state disability or family insurance taxes if applicable, etc., and any other deductions required under law or by court order for wage garnishments. The amount of your tax deductions will depend on your earnings and the information you list on your federal Form W-4 and applicable state withholding form. Permissible deductions for exempt employees may also include, but are not limited to, deductions for full-day absences for reasons other than sickness or disability and certain disciplinary suspensions. You may also authorize certain voluntary deductions from your paycheck where permissible under state law. Your deductions will be reflected in your wage statement. If you have any questions about deductions from your pay, contact your Supervisor.

Access Healthcare LLC will not make any changes to an employee's payroll withholdings. It is the employee's responsibility to manage these changes. Access Healthcare LLC will calculate withholdings based on the information provided in an employee's most recently submitted Form W-4 and/or state withholding form, if applicable. If you need to make changes to your withholdings, please visit www.paycom.com, go to **Payroll** on the main menu, click **Tax Setup**, select a federal or state tax, click **Sign and Update**.

The Company will not make deductions to your pay that are prohibited by federal, state, or local law. Review your paycheck for errors each pay period and immediately report any discrepancies to your Supervisor.

You will be reimbursed in full for any isolated, inadvertent, or improper deductions, as defined by law. If an error is found, you will receive an immediate adjustment, which will be paid no later than your next regular payday.

The Company will not retaliate against employees who report erroneous deductions in accordance with this policy.

Meal and Rest Periods Policy

Access Healthcare LLC strives to provide a safe and healthy work environment and complies with all federal and state regulations regarding meal and rest periods.

The Company requests that employees accurately observe and record meal and rest periods. Access Healthcare LLC Employee agrees to clock in and out for a minimum of thirty (30) minutes and up to a maximum of one (1) hour for meal periods, unless otherwise specified by facility policy. If the facility requests Access Healthcare LLC employee to work their lunch period due to patient care and safety, Access Healthcare LLC Employee agrees to obtain a supervisor signature from a Client Manager for each applicable shift and to have the supervisor sign off their approval on the sign-in sheet in the nursing office.

Work with your assigned client regarding procedures and schedules for rest and meal breaks. If you have questions or concerns regarding meal and rest periods, please contact Human Resources.

Attendance Policy

If you know ahead of time that you will be absent or late, provide reasonable advance notice to your Supervisor. You may be required to provide documentation of any medical or other excuse for being absent or late where permitted by applicable law.

Access Healthcare LLC reserves the right to apply unused paid time off to unauthorized absences where permitted by applicable law. Absences resulting from approved leave, or legal requirements are exceptions to the policy.

Accommodations for Nursing Mothers

Nursing mothers will be provided reasonable unpaid break time to express milk for their infant child(ren) for up to one year following the child's birth.

If you are nursing, you will be provided with a space, other than a restroom, that is shielded from view and free from intrusion from co-workers and the public.

Break time should, if possible, be taken concurrently with any other break time already provided. If you are nonexempt, clock out for any time taken that does not run concurrently with normally scheduled rest periods.

You must make reasonable efforts to not disrupt our clients' operations. You are encouraged to discuss the length and frequency of these breaks with the client.

This policy applies only to employees classified as nonexempt under the Fair Labor Standards Act.

Job Abandonment

If you fail to show up for work or fail to call in with an acceptable reason for the absence for a period of three consecutive days, you will be considered to have abandoned your job and voluntarily resigned from Access Healthcare LLC.

Performance, Discipline and Termination

Open Door/Conflict Resolution Policy

Access Healthcare LLC strives to provide a comfortable, productive, legal, and ethical work environment. To this end, we want you to bring any problems, concerns, or grievances you have about the work place to the attention of your Supervisor and, if necessary, to Human Resources or upper level management. To help manage conflict resolution we have instituted the following problem solving procedure:

If you believe there is inappropriate conduct or activity on the part of the Company, management, its employees, vendors, customers, or any other persons or entities related to the Company, bring your concerns to the attention of your Supervisor at a time and place that will allow the person to properly listen to your concern. Most problems can be resolved informally through dialogue between you and your immediate Supervisor. If you have already brought this matter to the attention of your Supervisor before and do not believe you have received a sufficient response, or if you believe that person is the source of the problem, present your concerns to Human Resources or upper level management. Describe the problem, those persons involved in the problem, efforts you have made to resolve the problem, and any suggested solution you may have.

Standards of Conduct

Access Healthcare LLC wishes to create a work environment that promotes job satisfaction, respect, responsibility, integrity, and value for all our employees, clients, customers, and other stakeholders. We all share in the responsibility of improving the quality of our work environment. By deciding to work here, you agree to follow our rules.

It is the responsibility of every member of Access Healthcare LLC's clinical field staff to exercise appropriate judgment and conduct themselves in a manner that reflects the highest standards of professional and personal ethics and behavior.

EMPLOYEE RESPONSIBILITIES

Access Healthcare LLC Employees are and shall be duly licensed to practice their profession in any State where Access Healthcare LLC Field Employee is assigned and shall maintain current professional standing at all times. Evidence of such licensing shall be submitted to Access Healthcare LLC prior to commencing the Assignment. Access Healthcare LLC Field Employee agrees to give immediate notice to Access Healthcare LLC in the case of suspension or revocation of his/her license, initiation of any proceeding that could result in suspension or revocation of such licensing, or upon the receipt of any notice or any other matter which may challenge or threaten such licensing.

Access Healthcare LLC Field Employee agrees to submit to Access Healthcare LLC, before commencing any Assignment, all requested documentation that is necessary to comply with Joint Commission, Client and Access Healthcare LLC expectations 10 days prior to Assignment start date in Assignment Detail.

Access Healthcare LLC Field Employee agrees to and shall observe and comply with the applicable policies, procedures, rules and regulations established by Client.

Access Healthcare LLC Field Employee agrees to work all scheduled shifts as directed by Client (including weekends and holidays).

Access Healthcare LLC Field Employee agrees to adhere fully with all quality assurance, peer review, risk management program or other programs that may be established by Client to promote appropriate professional standards of medical care. Access Healthcare LLC Field Employee agrees to accept both clinical and operational supervision from his/her immediate supervisor.

Access Healthcare LLC Field Employee agrees that patient records and charts shall at all times remain the property of the Client. Access Healthcare LLC Field Employee agrees to maintain the confidentiality of all information related to patient records, charges, expenses, quality assurance, risk management or other programs derived from, thru, or provided by clients and all information related to this Agreement.

Access Healthcare LLC Field Employee agrees to immediately provide written notice to Access Healthcare LLC as to any legal proceeding instituted or threatened, or any claim or demand, made against Access Healthcare LLC Field Employee or Access Healthcare LLC with respect to Access Healthcare LLC Field Employee's rendering of services under this Agreement.

Access Healthcare LLC Field Employee agrees to notify Client of any unscheduled absence at least two (2) hours prior to beginning a shift and to notify Access Healthcare LLC within twenty-four (24) hours to report the unscheduled absence.

Any injury or illnesses suffered by Access Healthcare LLC Field Employee must be reported to an Access Healthcare LLC representative within 24 hours of the incident. If injury occurs while working, notify your supervisor immediately, and if applicable, seek appropriate medical attention and follow the Client's specific injury procedures.

Employee agrees not to disclose any Access Healthcare LLC trade secrets or any confidential or proprietary information of Access Healthcare LLC, Access Healthcare LLC employees, Clients, or patients of Clients.

Access Healthcare LLC Field Employee further agrees not to compete either as a direct competitor or with a competing company at the Client assignment where Access Healthcare LLC Field Employee has been placed by Access Healthcare LLC

GENERAL STANDARDS

The following set of standards, are to inform and guide, all staff assigned to work in hospital units. The guidelines below include but are not limited to the following:

- Patient care providers are to render care in a manner that enhances the personal dignity and rights of each patient. Any form of patient abuse and/or neglect will not be tolerated, and patient care providers are to support Access Healthcare LLC's policies and procedures in this regard.
- Interactions with all hospital patients, visitors, employees, physicians, vendors, etc., must be conducted in a courteous and professional manner at all times ensuring that Access Healthcare LLC is always presented in the most favorable light.
- The practice of counseling of the patient regarding personal problems and / or participation of the Access Healthcare LLC patient care provider in conversations with patients about topics not relevant to the plan of care--is discouraged and unacceptable.
- Patients are to be dealt with equally and fairly and the selection of "favorites" is not acceptable
- Appropriate language is to be used at all times when an Access Healthcare LLC patient care staff member is at an Access Healthcare LLC client facility, and in any patient care area private and / or public. Abusive, profane, threatening, demeaning, language resulting in violation of HIPPA regulations or compromising patient confidentiality can result in immediate termination
- Touching patients, except in the direct delivery of care or by a greeting, is prohibited
- Socializing with patients and/or patient's significant others outside of the facility is unacceptable
- Socializing with patient's and/or patients' significant others after discharge from the Hospital is prohibited. Staff are not to call, date, nor develop personal or social relationships with patients, former patients, or family/significant others of patients, including giving of personal information or residential phone numbers. Staff should discuss with their manager, any matter of concern regarding their contacts with current or former patient/family members of patient's significant others.
- All staff will uphold all rules and regulations related to patient confidentiality in all areas including patient care, public and non-patient care areas. These rules and regulations include but are not limited to the following:
 - Patient care providers are not to divulge to anyone any information or records concerning any patient without proper authorization. Unauthorized release of confidential information may constitute ground for termination and/or civil action.
 - Conversations regarding patients are not to be held in the presence of other patients or any other person not privileged to this communication.
 - Problems of a patient are not to be discussed with another patient.
 - Patients are not to be named or discussed with anyone in or outside of the facility who does not have the legal right to receive information about the patient.
 - Personal problems, concerns or personal life information of patient care providers are not to be discussed with any patient, patient group or family/significant others.
- Staff is not to discuss disagreements or criticize other patient care providers or physicians within the earshot of patients/families/significant others. A professional difference of opinion must be discussed in an appropriate private space.
- Behavior in patient areas and at the nurses' station shall be oriented toward patient care. Personal reading and conversations, including personal phone calls, are not to be conducted in these areas.
- Employees must avoid any situation, which involves a possible conflict between their personal interests and those of Access Healthcare LLC Staff shall not solicit, and are encouraged not to accept gifts or compensation of any kind from any individual or Access Healthcare LLC outside of Access Healthcare LLC as a consequence of their position at Access Healthcare LLC. **This does not apply to Minnesota employees.**
- Any inappropriate interactions between patients and staff, staff and staff, or staff and others within the hospital will be met with investigation and quick response within the framework of Access Healthcare LLC policy and procedure.

- Employees who are licensed or certified in any profession shall follow all applicable rules or professional codes of conduct pertaining to that profession, in addition to the rules stated herein.
- All Access Healthcare LLC patient care staff will be expected maintain English proficiency standards and use English exclusively during all paid working hours.
- The client's name badge must be worn at all times while on assignment, above the waist with name and title fully visible.
- While at the hospital, all employees must follow these basic rules:
 - Eating and drinking are only permitted in the cafeteria, designated employee lounges, unit conference rooms and in private offices, when not in use for patient care.
 - Sleeping is not permitted during paid working hours.
 - Personal phone calls on the unit during work time are prohibited, except in emergency situations
 - Assigned duties must be carried out in a timely, efficient manner as directed or delegated.
- When entering a patient room and/or when greeting a patient, practice the following.
 - Knock before entering
 - Greet the patient by name
 - If it is first contact of the day, introduce yourself by name and title
 - Tell the patient why you are in the room.
- When exiting a patient's room Access Healthcare LLC patient care staff is expected to:
 - Inform the Patient / Family that you are leaving
 - State time you expect return
 - Ask if there is anything the pt. / family needs before you leave

Criminal Activity/Arrests

Access Healthcare LLC will report all criminal activity in accordance with applicable law. Involvement in criminal activity while employed by the Company, whether on or off Company property, may result in disciplinary action including suspension or termination of employment.

You are expected to be on the job, ready to work, when scheduled. Inability to report to work as scheduled may lead to disciplinary action, up to and including termination of employment, for violation of an attendance policy or job abandonment.

Outside Employment

Outside employment that creates a conflict of interest or that affects the quality or value of your work performance or availability at Access Healthcare LLC is prohibited. The Company recognizes that you may seek additional employment during off hours, but in all cases expects that any outside employment will not affect your attendance, job performance, productivity, work hours, or scheduling, or would otherwise adversely affect your ability to effectively perform your duties or in any way create a conflict of interest. Any outside employment that will conflict with your duties and obligations to the Company should be reported to your Supervisor. Failure to adhere to this policy may result in discipline up to and including termination.

Resignation Policy

Access Healthcare LLC hopes that your employment with the Company will be a mutually rewarding experience; however, the Company acknowledges that varying circumstances can cause you to resign employment. The Company intends to handle any resignation in a professional manner with minimal disruption to the workplace.

Notice

The Company requests that you provide a minimum of 30 days written notice of your resignation. Written notice with reason for termination shall be emailed to info@accesshealthcarestaffing.com.

Cancellation Fee

An Employee who does not provide 30 days written notice of termination shall be subject to a \$2000 cancellation fee as per signed contract agreement. **This does not apply to Minnesota employees.**

Final Pay

The Company will pay separated employees in accordance with applicable laws and other sections of this handbook.

Notify the Company if your address changes during the calendar year in which resignation occurs to ensure tax information is sent to the correct address.

Return of Property

Return all Company property at the time of separation. Failure to return some items may result in deductions from your final paycheck where state law allows.

General Policies

Certifications

Access Healthcare LLC requires all nurses to be up to date with all required certifications (BLS, ACLS, etc.)

Employees are responsible, at their own cost, to maintain their certifications.

Personal Appearance

Your personal appearance reflects on the reputation, integrity, and public image of Access Healthcare LLC. All employees are required to report to work neatly groomed and dressed. You are expected to maintain personal hygiene habits that are generally accepted in the community, including clean clothing, good grooming and personal hygiene, and appropriate attire for the workplace and the work being performed. This includes wearing uniforms or protective safety clothing and equipment, depending upon the job. Use common sense and good judgment in determining what to wear to work.

Uniform

The uniform is an integral part of the professional image of **Access Healthcare LLC** and therefore all employees are required to adhere to the uniform and dress code policy.

- The uniform shall be consistent with the recommendations of the current facility you are assigned to.
- A nametag or I.D. tag as supplied by the facility. The nametag or I.D. tag remains the property of the facility and must be returned upon termination of employment with the facility.

Dress Code

As a representative of **Access Healthcare LLC**, a professional image must be maintained at all times.

- The employee must wear a uniform during working hours unless approved by the company to do otherwise.
- Appropriate pants or skirts may accompany the uniform.
- If required, an appropriate undershirt, shirt, turtleneck or blouse may be worn underneath the uniform.
- As per workers compensation regulations, shoes must be closed sole with good traction and support. Shoes must be clean, in good repair, provide good support and protection and allow for quick and efficient movement as necessary in the performance of job duties, including emergencies. Heels should

not be more than two-and-a-half inches high. Open-toed and open-back shoes are not permitted. Socks or stockings must be worn at all times.

- Sandals, sock feet or bare feet is not acceptable.
- Hair should be clean and controlled so as not to impede the employee's vision or to come in contact with a patient.
- In keeping with environmental sensitivities, the wearing of fragrances such as perfume should be limited.
- Jewelry is to be kept at a minimum and be in keeping with the general safety and infection control practices for the employee and the patient. Long dangling earrings, large or excessive necklaces and/or bracelets and sharp rings are not acceptable.
- Fingernails must be kept short, clean and natural; no artificial applications are to be worn.
- Hair must be neat and well-groomed.

The Company, in accordance with applicable law, will reasonably accommodate employees with disabilities or religious beliefs that make it difficult for them to comply fully with the personal appearance policy unless doing so would impose an undue hardship on the Company. Contact your Supervisor to request a reasonable accommodation.

Failure to comply with the personal appearance standards may result in being sent home to groom or change clothes. Frequent violations may result in disciplinary action, up to and including termination of employment.

Personal Cell Phone/Mobile Device Use

The use of personal cell phones and mobile devices at work can be distracting and disruptive and cause a loss of productivity. Thus, you should use such personal devices during nonworking time, such as breaks and meal periods. During this time, use devices in a manner that is courteous to those around you.

You must adhere to client's specific cell phone use policies.

You are expected to comply with Company policies regarding the protection of confidential and proprietary information when using personal devices.

Nothing in this policy is intended to prevent employees from engaging in protected concerted activity under the NLRA.

You will be subject to disciplinary action up to and including termination of employment for violation of this policy.

Personal Data Changes

It is your obligation to provide Access Healthcare LLC with your current contact information, including current mailing address and telephone number. Inform the Company of any changes to your tax withholding status. Failure to do so may result in loss of benefits or delayed receipt of W-2 and other mailings. To make changes to this information, contact Human Resources.

Business Liability Insurance

Access Healthcare LLC is covered by General & Professional Insurance.

Nonsolicitation/Nondistribution Policy

Updated 7/29/24

Access Healthcare LLC prioritizes a harmonious work environment that minimizes disruption to business operations and respects the focus of employees, visitors, and others. Our nonsolicitation/nondistribution policy aims to ensure a balanced approach to interactions within the workplace.

Solicitation

For the purposes of this policy, **solicitation** includes various activities such as selling items or services, seeking contributions, or seeking support for an organization. Solicitation, whether conducted verbally, in writing, or electronically, falls under this policy's scope.

During your assigned working hours, soliciting other employees is prohibited. **Working hours** refers to periods when either you or the employees you intend to solicit are expected to be actively engaged in work-related activities. You are permitted to engage in solicitation during authorized nonworking times, such as breaks, provided that the recipients of the solicitation are also on nonworking time.

Distribution

To ensure cleanliness, organization, and safety, the distribution of nonwork-related literature or items within working areas is prohibited at all times. Working areas do not include break/rest areas, lunchrooms, and parking lots. Electronic distribution of materials during work hours is also not allowed. Any literature that violates the Company's equal employment opportunity (EEO) and nonharassment policies, or knowingly spreads false information, is strictly prohibited. Nonemployees are not permitted to distribute materials on company premises under any circumstances.

Statutory Rights and Communication

This policy is not meant to curtail the statutory rights of employees, including their right to discuss terms and conditions of employment. Open communication remains a vital part of our workplace culture.

Reporting Violations

If you become aware of violations of this policy, report them to your Supervisor.

We appreciate your cooperation in maintaining a respectful and focused work environment.

Access to Personnel and Medical Records Files

Access Healthcare LLC maintains separate medical records files and personnel files for all employees. Files containing medical records are stored separate and apart from any business-related records in a safe, locked, inaccessible location. The medical file is the repository for sensitive and confidential information related to an individual's health, health benefits, health-related leave and/or accommodations, and benefits selections and coverage. Medical records are kept confidential in compliance with applicable laws and access is on a "need-to-know" basis only.

Management may have access to your personnel file for possible employment-related decisions. If you wish to review your personnel or medical records file, you must give the Company reasonable notice. Inspection must occur in the presence of a Company representative.

All requests by an outside party for information contained in your personnel file will be directed to Human Resources, which is the only department authorized to give out such information.

Social Media Policy

Access Healthcare LLC acknowledges that social media has become an integral part of modern life that provides us with unique opportunities to communicate and share information with others. However, we also want to educate employees that their social media use can:

- Pose risks to the Company's confidential and proprietary information, reputation, and brand;
- Expose the Company to discrimination, harassment, and other claims; and
- Jeopardize the Company's compliance with business rules and laws.

To minimize legal risks, avoid loss of productivity and distraction, and ensure that the Company's IT resources and communications systems are used appropriately, all employees must abide by the following policy regarding social media use.

Social Media

For purposes of this policy, **social media** refers to any means of posting content on the internet, including personal websites, social networking sites, blogs, chat rooms, and other online platforms, whether affiliated with the Company or not.

Use Good Judgment

While the Company respects your right to personal expression, you should assume that anything you do on social media—whether on a business or personal account—could be viewed by a colleague, supervisor, partner, supplier, competitor, investor, customer, or potential customer. As such, any social media activity, even from your personal account, reflects on the Company as well as on yourself. It is important to remember that anyone can see what you post (or what you posted five years ago).

Guidelines for Posting on Social Media

When posting:

- Protect trade secrets, intellectual property, and confidential information related to the Company.
- Do not make statements that are maliciously false or defamatory or would constitute unlawful harassment or discrimination.
- Do not make express or implied threats of violence.
- Avoid linking personal accounts to the Company as an official source.
- Respect copyright, trademark, and third-party rights.
- Do not use the Company's email addresses to register on social media platforms for personal use.
- If you identify yourself as an employee of Access Healthcare LLC on your personal account and are posting about the Company, make it clear that your views are your own and that you are not speaking on behalf of the Company.

Using Social Media at Work

Do not use social media while on your work time, unless it is work related as authorized by your Supervisor or consistent with policies that cover equipment owned by the Company.

Media Contacts

If you are not authorized to speak on behalf of the Company, do not speak to the media on behalf of the Company. Direct all media inquiries for official Company responses to info@accesshealthcarestaffing.com.

Retaliation

Retaliation against those reporting policy violations or cooperating in investigations is prohibited. Retaliatory actions may lead to disciplinary measures.

Violations

Violations of this policy may result in discipline, up to and including termination.

This policy does not limit employees' rights to discuss wages, hours, or other terms and conditions of employment. All employees have the right to engage in or refrain from such activities.

Confidentiality and Nondisclosure of Trade Secrets

Confidentiality is an important aspect of the client – company relationship. Employees of Access Healthcare LLC represent the company at all times while in the presence of the client.

Therefore all information, discussions, records or matters pertaining to the clients, past clients or their families are to be kept in the strictest confidence and not discussed with anyone outside of personnel that are directly related to the care of the client.

Employees are required to sign a confidentiality agreement on an annual basis. The confidentiality agreement will be kept in your personnel file.

Deviation from the confidentiality agreement will result in disciplinary action up to and including termination.

Customer Service

It is important for all Access Healthcare LLC nurses to promote our culture of service excellent while on assignment at a client facility. Every time you interact with a customer and patient, you are representing Access Healthcare LLC

Behaviors of Exceptional Customer Service

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

Standards of Service Excellence

1. Use L.E.A.P: if you receive a patient complaint, OWN IT!
 - a. L- Listen
 - b. E- Empathize
 - c. A- Ask questions
 - d. P- Produce a solution
2. Customer perceptions are reality: Deliver service the customer wants (not what you think they want)
3. Provide SMART feedback to team members. Everyone wants feedback. Build positive relationships with coworkers by recognizing their strengths, successes and weaknesses. Be:
 - a. S- Sensitive
 - b. M- Meaningful
 - c. A- Accurate
 - d. R- Reinforcing
 - e. T- Timely

You are expected to treat every customer with the utmost respect and courtesy during your working time. You should never argue or act in a disrespectful manner towards a client or client's employees or patients during your working time. If you are having problems with a client notify Human Resources immediately.

Benefits

Exempt Personnel

If you are classified as exempt at the time of your hiring, you are not eligible for overtime pay as otherwise required by federal, state, or local laws. If you have a question regarding whether you are exempt or nonexempt, contact Human Resources for clarification.

Nonexempt Personnel

If you are classified as nonexempt at the time of your hiring, you will be eligible for minimum wage and overtime pay in accordance with federal, state, and local laws. If you have a question regarding whether you are exempt or nonexempt, contact Human Resources for clarification.

Holidays

If you are required to work on a paid holiday honored by the facility where you are contracted to work, you will be paid time and 1/2 of your regular time hourly rate, as per the pay mandate of the facility, for all such work performed.

Parental Leave

Access Healthcare LLC provides up to 12 weeks of unpaid parental leave to employees following the birth of an employee's child or the placement of a child with an employee in connection with adoption or foster care. The purpose of parental leave is to enable the employee to care for and bond with a newborn or a newly adopted or newly placed child.

This policy will run concurrently with Family and Medical Leave Act (FMLA) leave, and/or state and local parental or family leave acts, as applicable. This policy will be in effect for births, adoptions or placements of foster children.

Eligibility

Eligible employees must meet the following criteria

Have been employed with the company for at least 3 months (the 3 months do not need to be consecutive but must be within the last 12 (6) month period).

- Be actively contracted with an Access Healthcare LLC client.
- Be a full- or part-time, regular employee (temporary employees and interns are not eligible for this benefit).

In addition, employees must meet one of the following criteria:

- Have given birth to a child.
- An employee's spouse or committed partner gives birth to a child
- Have adopted a child or been placed with a foster child (in either case, the child must be age 14 or younger). The adoption of a new spouse's child is excluded from this policy.

Amount, Time Frame and Duration of Unpaid Parental Leave

- Eligible employees will receive a maximum of 12 weeks of unpaid parental leave per birth, adoption or placement of a child/children. The fact that a multiple birth, adoption or placement occurs (e.g., the birth of twins or adoption of siblings) does not increase the 12-week total amount of unpaid parental leave granted for that event. In addition, in no case will an employee receive more than 12 weeks of unpaid parental leave in a rolling 12-month period, regardless of whether more than one birth, adoption or foster care placement event occurs within that 12-month time frame.
- With management approval, unpaid parental leave may be taken at any time during the 12-month period immediately following the birth, adoption or placement of a child with the employee. Parental leave may not be used or extended beyond this 12-month time frame.
In the event of an employee who has given birth, the 12 weeks of parental leave will commence at the conclusion of disability leave provided to the employee for the employee's own medical recovery following childbirth.
- Employees must take parental leave in one continuous period of leave and must use all unpaid parental leave during the 12-month time frame indicated above. Any unused parental leave will be forfeited at the end of the 12-month time frame.

Coordination with Other Policies

- Parental leave taken under this policy will run concurrently with leave under the FMLA; thus, any leave taken under this policy that falls under the definition of circumstances qualifying for leave due to the birth or placement of a child due to adoption or foster care, the leave will be counted toward the 12 weeks of available FMLA leave per a 12-month period. All other requirements and provisions under the FMLA will apply. In no case will the total amount of leave granted to the employee under the FMLA exceed 12 weeks during the 12-month FMLA period. Please refer to the Family and Medical Leave Policy for further guidance on the FMLA.
- The Company's parental leave will run concurrently with applicable state or local parental and family leave laws. Refer to the employee handbook state addendums for specifics.
- The company will maintain all benefits for employees during the unpaid parental leave period just as if they were taking any other company unpaid leave.
- An employee who takes unpaid parental leave that does not qualify for FMLA, or state or local leave, will be afforded the same level of job protection for the period of time that the employee is on parental leave as if the employee was on FMLA-qualifying leave.

Requests for Unpaid Parental Leave

The employee will provide human resources with notice of the request for leave at least 30 days prior to the proposed date of the leave (or if the leave was not foreseeable, as soon as possible). The employee must complete the necessary HR forms and provide all documentation as required by the HR department to substantiate the request.

As is the case with all company policies, the organization has the exclusive right to interpret this policy.

Bereavement Leave

Updated 09/11/23

Access Healthcare LLC understands bereavement leave is important, however we leave it up to the facilities' discretion to grant unpaid time off for bereavement. Bereavement leave is unpaid and not required by law, unless state law dictates otherwise.

Family and Medical Leave (FMLA) Policy

In accordance with the Family and Medical Leave Act of 1993 (FMLA), Access Healthcare LLC provides up to 12 or 26 weeks of unpaid, job-protected leave in a 12-month period to covered employees in certain circumstances.

Eligibility

To qualify for FMLA leave, you must:

1. Have worked for the Company for at least 12 months, although it need not be consecutive;
2. Worked at least 1,250 hours in the last 12 months; and
3. Be employed at a worksite that has 50 or more employees within 75 miles.

Leave Entitlement

You may take up to 12 weeks of unpaid FMLA leave in a 12-month period for any of the following reasons:

- The birth of a child and in order to care for that child (leave must be completed within one year of the child's birth);
- The placement of a child with you for adoption or foster care and in order to care for the newly placed child (leave must be completed within one year of the child's placement);
- To care for a spouse, child, or parent with a serious health condition;
- To care for your own serious health condition, which makes you unable to perform any of the essential functions of your position; or
- A qualifying exigency of a spouse, child, or parent who is a military member on covered active duty or called to covered active duty status (or has been notified of an impending call or order to covered active duty).

The 12-month period is a **"rolling" 12-month period measured backward**.

You may take up to 26 weeks of unpaid FMLA leave in a single 12-month period, beginning on the first day that you take FMLA leave to care for a spouse, child, or next of kin who is a covered service member and who has a serious injury or illness related to active duty service.

As used in the policy:

- **Spouse** means a husband or wife as recognized under state law for the purposes of marriage in the state or other territory or country where the marriage took place.
- **Child** means a biological, adopted, or foster child, a stepchild, a legal ward, or a child of a person standing in loco parentis, who is either under age 18 or age 18 or older and incapable of self-care because of a mental or physical disability at the time FMLA leave is to commence. A child for the purposes of military exigency or military care leave can be of any age.
- **Parent** means a biological, adoptive, step, or foster parent or any other individual who stood in loco parentis to you when you were a child.
- **Next of kin** for the purposes of military care leave is a blood relative other than a spouse, parent, or child in the following order: brothers and sisters, grandparents, aunts and uncles, and first cousins. If a military service member designates in writing another blood relative as his or her caregiver, that individual will be the only next of kin. In appropriate circumstances, you may be required to provide documentation of next of kin status.
- **Serious health condition** means an illness, injury, impairment, or physical or mental condition that involves either inpatient care or continuing treatment by a health care provider. Ordinarily, unless complications arise, cosmetic treatments and minor conditions such as the cold, flu, ear aches, upset stomach, minor ulcers, headaches (other than migraines), and routine dental problems are examples of conditions that are not serious health conditions under this policy. If you have any questions about the types of conditions that may qualify, contact Human Resources.

- **Health care provider** means a medical doctor or doctor of osteopathy, physician assistant, podiatrist, dentist, clinical psychologist, optometrist, nurse practitioner, nurse-midwife, clinical social worker, or Christian Science practitioner licensed by the First Church of Christ. Under limited circumstances, a chiropractor or other provider recognized by our group health plan for the purposes of certifying a claim for benefits may also be considered a health care provider.
- **Qualifying exigencies** for military exigency leave include:
 - Short-notice call-ups/deployments of seven days or less (**Note:** Leave for this exigency is available for up to seven days beginning the date of call-up notice);
 - Attending official ceremonies, programs, or military events;
 - Special child care needs created by a military call-up including making alternative child care arrangements, handling urgent and nonroutine child care situations, arranging for school transfers, or attending school or daycare meetings;
 - Making financial and legal arrangements;
 - Attending counseling sessions for yourself, the military service member, or the military service members' son or daughter who is under 18 years of age or is 18 or older but incapable of self-care because of a mental or physical disability;
 - Rest and recuperation (**Note:** Fifteen days of leave is available for this exigency per event);
 - Post-deployment activities such as arrival ceremonies, re-integration briefings, and other official ceremonies sponsored by the military (**Note:** Leave for these events are available for 90 days following the termination of active duty status). This type of leave may also be taken to address circumstances arising from the death of a covered military member while on active duty;
 - Parental care when the military family member is needed to care for a parent who is incapable of self-care (such as arranging for alternative care or transfer to a care facility); and
 - Other exigencies that arise that are agreed to by both the Company and you.
- A **serious injury/illness** incurred by a service member in the line of active duty or that is exacerbated by active duty is any injury or illness that renders the service member unfit to perform the duties of his or her office, grade, rank, or rating.

Notice and Leave Request Process

If the need for leave is foreseeable because of an expected birth/adoption or planned medical treatment, you must give at least 30 days' notice. If 30 days' notice is not possible, give notice as soon as practicable (within one or two business days of learning of your need for leave). Failure to provide appropriate notice may result in the delay or denial of leave.

In addition, if you are seeking intermittent or reduced schedule leave that is foreseeable due to planned medical treatment or a series of treatments for yourself, a family member, or covered service member, you must consult with the Company first regarding the dates of this treatment to work out a schedule that best suits your needs or the needs of the covered military member, if applicable, and the Company.

If the need for leave is unforeseeable, provide notice as soon as possible. Normal call-in procedures apply to all absences from work, including those for which leave under this policy may be requested. Failure to provide appropriate notice may result in the delay or denial of leave. You may obtain a Leave Request from Human Resources.

Certification of Need for Leave

If you are requesting leave because of your own or a covered relative's serious health condition, you and the relevant health care provider must supply appropriate medical certification. You may obtain Medical Certification forms from Human Resources. When you request leave, the Company will notify you of the requirement for medical certification and when it is due (at least 15 days after you request leave). If you provide at least 30 days' notice of medical leave, you should also provide the medical certification before leave begins. Failure to provide requested medical certification in a timely manner may result in denial of FMLA-covered leave until it is provided.

At our expense, the Company may require an examination by a second health care provider designated by us. If the second health care provider's opinion conflicts with the original medical certification, we, at our expense, may require a third, mutually agreeable, health care provider to conduct an examination and provide a final and binding opinion. Subsequent medical recertification may also be required. Failure to provide requested certification within 15 days, when practicable, may result in delay of further leave until it is provided.

The Company also reserves the right to require certification from a covered military member's health care provider if you are requesting military caregiver leave and certification in connection with military exigency leave.

Call-In Procedures

In all instances of absence, the call-in procedures and standards established for giving notice of absence from work must be followed.

Leave Increments

Intermittent Leave

If medically necessary, FMLA leave for a serious health condition may be taken intermittently (in separate blocks of time due to a serious health condition) or on a reduced leave schedule (reducing the usual number of hours you work per workweek or workday). FMLA leave may also be taken intermittently or on a reduced leave schedule for a qualifying exigency relating to covered military service.

As FMLA leave is unpaid, the Company will reduce your salary based on the amount of time actually worked. In addition, while you are on an intermittent or reduced schedule leave that is foreseeable due to planned medical treatments, the Company may temporarily transfer you to an available alternative position that better accommodates your leave schedule and has equivalent pay and benefits.

Parental Leave

Leave for the birth or placement of a child must be taken in a single block and cannot be taken on an intermittent or reduced schedule basis. Parental leave must be completed within 12 months of the birth or placement of the child; however, you may use parental leave before the placement of an adopted or foster child to consult with attorneys, appear in court, attend counseling sessions, etc.

Family Care, Personal Medical, Military Exigency, and Military Care Leave

Leave taken for these reasons may be taken in a block or blocks of time. In addition, if a health care provider deems it necessary or if the nature of a qualifying exigency requires, leave for these reasons can be taken on an intermittent or reduced-schedule basis.

Paid Leave Utilization During FMLA Leave

FMLA leave is unpaid. If you are taking personal medical leave, you must utilize available sick days during this leave. If you are receiving short- or long-term disability or workers' compensation benefits during a personal medical leave, you will not be required to utilize these benefits. However, you may elect to utilize accrued benefits to supplement these benefits.

Fitness for Duty Requirements

If you take leave because of your own serious health condition (except if you are taking intermittent leave), you are required, as are all employees returning from other types of medical leave, to provide medical certification that you are fit to resume work. You will not be permitted to resume work until it is provided.

Health Insurance

Your health insurance coverage will be maintained by the Company during leave on the same basis as if you were still working. You must continue to make timely payments of your share of the premiums for such coverage. Failure to pay premiums within 30 days of when they are due may result in a lapse of coverage. If this occurs, you will be notified 15 days before the date coverage will lapse that coverage will terminate unless payments are promptly made.

Alternatively, at our option, the Company may pay your share of the premiums during the leave and recover the costs of this insurance upon your return to work. Coverage that lapses due to nonpayment of premiums will be reinstated immediately upon return to work without a waiting period. Under most circumstances, if you do not return to work at the end of leave, the Company may require reimbursement for the health insurance premiums paid during the leave.

Reinstatement

Upon returning to work at the end of leave, you will generally be placed in your original job or an equivalent job with equivalent pay and benefits. You will not lose any benefits that accrued before leave was taken.

Spouse Aggregation

If you and your spouse are both employed by the Company, the total number of weeks to which you are both entitled in the aggregate because of the birth or placement of a child or to care for a parent with a serious health condition will be limited to 12 weeks per leave year. Similarly, spouses employed by the Company will be limited to a combined total of 26 weeks of leave to care for a military service member. This 26-week leave period will be reduced, however, by the amount of leave taken for other qualifying FMLA events. This type of leave aggregation does not apply to leave needed for your own serious health condition, to care for a spouse or child with a serious health condition, or because of a qualifying exigency.

Failure to Return

If you fail to return to work or fail to make a request for an extension of leave prior to the expiration of the leave, you will be deemed to have voluntarily terminated your employment. The Company is not required to grant requests for open-ended leaves with no reasonable return date under these policies or as disability accommodations.

Alternative Employment

While on leave of absence, you may not work or be gainfully employed either for yourself or others unless express, written permission to perform such outside work has been granted by the Company. If you are on a leave of absence and are found to be working elsewhere without permission, you will be subject to disciplinary action up to and including termination. **This does not apply to Minnesota employees.**

Interaction with State and Local Laws

Where state or local family and medical leave laws offer more protections or benefits to employees, the protections or benefits that are more favorable to the employee, as provided by these laws, will apply.

Abuse of Leave

If you are found to have provided a false reason for a leave, you will be subject to disciplinary action up to and including termination.

Designation of Leave

If the Company becomes aware of any qualifying reason for FMLA leave, the Company will designate it as such. An employee may not refuse FMLA designation under this policy.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Health Insurance Policy

Access Healthcare LLC offers group health insurance benefits to all eligible full-time employees and their eligible dependents. Health plan benefits are described in detail in the Summary Plan Description (SPD), which may be obtained from Human Resources.

Your group health benefits are paid in part by the Company. The remainder of the costs are paid by you through deductions from your paycheck.

Benefits may be canceled or changed at the discretion of the Company, unless otherwise prohibited by law.

If you or a dependent become ineligible for benefits due to a change in work hours or through a life event, or you leave employment with us, you may have the right to continue your health benefits under federal or state law. In such event, the Company will provide you with information about your rights to continue your benefits coverage.

401(k) Plan

(revised 02.04.26)

Access Healthcare LLC is proud to offer a 401(k) retirement plan through Empower. Eligible employees may participate in the Access Healthcare LLC 401(k) plan.

Employees age 21 or over are eligible to enroll in the plan.

Employee contributions begin immediately after completing 90 days of employment. After completing 270 days (9 months) of employment, Access Healthcare LLC offers a 50% match of the first 3% of employee contributions (max employer contribution is 1.5%). Employer match is 100% vested after three years of employment. This is subject to change at any time at the discretion of the Company.

Contact Human Resources to find out if you are eligible to participate in the Company 401(k) plan. Refer to your Summary Plan Description (SPD) for plan specifics.

This benefit, as well as other benefits, may be canceled or changed at the discretion of the Company, unless otherwise required by law.

Regular Full-Time Personnel

Regular full-time employees are those who have completed their introductory period and are regularly scheduled to work more than 36 hours per week. Unless stated otherwise or specifically permitted by law, all the benefits provided to employees at Access Healthcare LLC are for regular full-time employees only. This includes paid time, holiday pay, health insurance, and other benefits coverage.

Regular Part-Time Personnel

All employees who work fewer than 36 hours per week are considered part time. Part-time employees are not eligible for Access Healthcare LLC benefits unless specified otherwise in this handbook, in the benefit plan summaries, or specifically permitted by law.

Unemployment Compensation Insurance Policy

Unemployment compensation insurance is paid for by Access Healthcare LLC and provides temporary income for employees who have lost their job under certain circumstances. Your eligibility for unemployment compensation will, in part, be determined by the reasons for your separation from the Company.

Workers' Compensation Insurance Policy

Workers' compensation is a no-fault system designed to provide benefits to all employees for work-related injuries. Workers' compensation insurance coverage is paid for by employers and governed by state law. The workers' compensation system provides for coverage of medical treatment and expenses, occupational disability leave, and rehabilitation services, as well as payment for lost wages due to work related injuries. If you are injured on the job while working at Access Healthcare LLC, no matter how slightly, you are to report the incident immediately to your Supervisor. Consistent with applicable state law, failure to report an injury within a reasonable period of time could jeopardize your claim for benefits.

To receive workers' compensation benefits, notify Human Resources immediately of your claim. If your injury is the result of an on-the-job accident, you must fill out an accident/injury report. You will be required to submit a medical release before you can return to work.

Military Leave (USERRA)

Access Healthcare LLC complies with applicable federal and state law regarding military leave and re-employment rights. A military leave of absence will be granted to members of the uniformed services in accordance with the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA; with amendments) and all applicable state law. You must submit documentation of the need for leave to Human Resources. When returning from military leave of absence, you will be reinstated to your previous position or a similar position, in accordance with state and federal law. You must notify your Supervisor of your intent to return to employment based on requirements of the law. For more information regarding status, compensation, benefits, and reinstatement upon return from military leave, contact Human Resources.

Jury Duty Leave

Access Healthcare LLC encourages employees to fulfill their civic duties related to jury duty. If you are summoned for jury duty, notify your Supervisor as soon as possible to make scheduling arrangements.

If you are classified as exempt, you will not incur any deduction in pay for a partial week's absence due to jury duty. If you are classified as nonexempt, you will not be compensated for time spent on jury duty, *unless state law dictates otherwise*. You may opt to use paid time off in place of unpaid leave.

The Company reserves the right to require employees to provide proof of jury duty service to the extent authorized by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Voting Leave

If your work schedule prevents you from voting on Election Day, Access Healthcare LLC will allow you a reasonable time off to vote. The time when you can go to vote will be at the discretion of the client, consistent with applicable state and local legal requirements.

Referral Bonus

All employees are eligible to participate in our employee referral program. An employee who refers a nurse that becomes placed at a facility, is eligible to receive up to a \$500 bonus which is to be paid out in two installments via direct deposit on the second and final weeks of the referrals contract.

Safety Management

Life Safety (Fire) Management

General Rules

When fire strikes, the actions taken during the first few minutes make the difference between containment and catastrophe. It is with the training of personnel that proper action can be taken during these very important first few minutes and disaster averted.

Important locations you need to know:

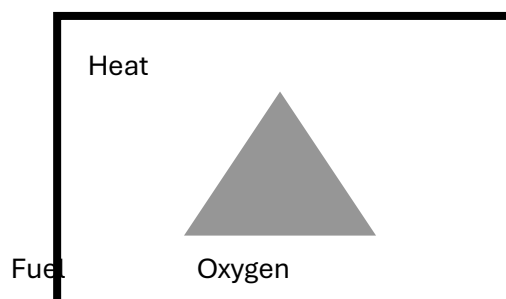
- Fire extinguisher in your department
- Closest fire-alarm pull
- Evacuation route
- Fire doors and walls
- Next safe fire zone (smoke compartments)

Important facility conditions to maintain:

- Keep emergency exits, firefighting equipment and fire-alarm pull stations clear at all times
- Never put door wedges under doors that prevent doors from closing.
- Keep doors closed unless they are controlled by an electromagnetic system.
- Keep all corridors and exits clear of all unnecessary traffic and/or obstruction.
- Keep telephone lines clear for fire control.

Creation of fire

A fire requires that the following three elements (known as the fire triangle) are present at the same time to burn:



If the sides of the triangle are not allowed to meet – if the triangle does not form, there will be no fire.

In the event of a fire, follow the below action plan:

- R Rescue- remove everyone in immediate danger from the fire area.
- A Alarm- Pull the nearest FIRE ALARM box and alert PBX to announce a Code Red
- C Contain- Close the door and isolate the fire
- E Extinguish/evacuate- With proper extinguisher, fight fire without endangering yourself

When using a fire extinguisher, follow the below action plan:

- P Pull- Pull out the safety pin
- A Aim- Aim the nozzle at the base of the fire, standing about 10 feet away from the fire.
- S Squeeze- Squeeze the handle
- S Sweep- Sweep the nozzle from side to side

Environmental Safety

In every facility, it is important to follow security procedures. By taking simple security precautions, you can help to:

- Protect personal, patient, and institutional property
- Maintain a safe environment.

Personal Property

There are a number of security precautions that you can take at your facility to help protect your own personal property:

1. Lock car doors.
2. Secure all valuables.
3. Keep purses and wallets in a locked area or locker.

Patient Property

Patients should be encouraged to leave their valuables at home. If patients choose to bring their valuables into the facility with them, you can help to keep them safe by:

1. Securing patient valuables
2. Educating patients about security.

Follow your facility policy for securing patient valuables. For example, valuables may be placed in the facility safe according to policy. You can educate patients by explaining the visitor policy, including who can visit, visiting hours, and any restrictions. You should also explain how patients can identify staff.

Institutional Property

There are also things you can do to protect institutional property:

1. Keep restricted areas locked
2. Report missing or damaged equipment.

“Security-sensitive” Areas

Some areas in your facility may be restricted or "security-sensitive." This means that only people who need to be in these areas should be there.

Security-sensitive areas may include the following:

- Pharmacy
- Operating rooms
- Obstetrics (especially the Nursery)
- Pediatrics
- Medical Information Systems
- Medical Records
- Billing.

If you work in a security-sensitive area, follow facility policies and procedures to keep them secure. Procedures that should be followed all the time, especially in security-sensitive areas may include:

1. Wearing your ID badge
2. Keeping doors locked
3. Reporting missing or damaged equipment.

You should wear your ID badge according to facility policy. If you lose your badge, you should report it and have it replaced immediately. It is important for you to be properly identified. It is also important to insure no-one else uses your badge.

In addition to wearing your own ID badge, you should be suspicious of people who are not wearing proper identification. Remember, wearing a lab coat or scrubs does not mean someone is an employee.

You should also be sure to keep doors to security-sensitive areas locked. Do not prop doors open that are supposed to be secure. If you do see someone acting suspiciously, report it to your security personnel.

There are good reasons that some areas need to be secure. For example, the pharmacy must restrict access to drugs. In Obstetrics (particularly the Nursery), it is important to guard against infant abduction. Medical Records contains sensitive personal information. By following procedures, you can help keep these areas secure.

In addition to protecting personal, patient, and institutional property, it is important to ensure your personal safety. Take the following simple precautions:

- Do not walk alone to your car at night.
- Park in well-lit areas.
- Do not keep valuables in your car.
- Report any potential security hazards.
- For your own safety, do not walk alone to your car at night or any time you feel uncomfortable. Follow your facility procedure to get an escort. Park in well-lit areas and do not keep valuables in your car, especially in plain sight. If you do have valuables in your car, lock them in the trunk.

- Report anything that you feel might be a security hazard. This includes such things as burned out lights in a stairwell or garage. If you feel someone is acting suspiciously, notify security personnel immediately.

Some areas in your facility are "security-sensitive areas." These are areas with limited or restricted access. Security-sensitive areas may include the following:

- Pediatrics and Obstetrics (especially the Nursery), because of the risk of infant or child abduction
- Pharmacy, because of access to drugs
- Medical Information Systems and Medical Records, because of access to confidential information.
- Billing
- Your facility may have policies restricting access to these areas. There may also be security devices, such as alarms and video cameras. Restricted access to security areas applies to everyone, even staff. Only people who need to be in a restricted area should be there.

Emergency Preparedness/Disaster Safety

Emergencies or disasters can be classified as either "internal" or "external."

An internal emergency is one that directly involves the facility and is a threat to the staff and patients, such as an in-house fire, a toxic chemical spill, or a natural disaster such as a tornado, earthquake, or hurricane that causes damage to the facility.

An external emergency is one that occurs outside of the facility and does not directly threaten the staff, patients and others inside the building(s). The indirect effect on the facility is the possibility of large numbers of casualties arriving for treatment. External disasters include such things as:

- Accidents involving buses, trains, airplanes or multiple vehicles
- Explosions
- Chemical spills
- Large fires
- Violent incidents involving a large group of people
- Natural disasters occurring outside the facility such as tornadoes or floods.

All organizations must have an emergency management plan or disaster plan so that patient care can continue if a disaster occurs.

Hospital disaster/emergency management plans must:

- Address both external and internal disasters
- Include general activities that will occur no matter what the emergency situation
- Allow specific responses to the types of disasters the facility might face
- Include a plan for evacuation of the hospital if all or part of the facility is damaged or non-functional.

When there is an emergency situation that could affect many workers, a hospital's hospital wide-notification system will be activated to let you know what is going on and the location. The notification will direct you to take action according to the type of emergency.

Evacuation

Hospital evacuation is an entirely different process than is recommended for schools and factories. Leaving the hospital is the very last resort, while in other establishments the objective is to clear the building as quickly as possible.

Familiarity with several types of evacuation is a necessity in any hospital. There are four types of evacuation. Each may be separate and complete operation, or all four may have to be used in successive stages if circumstances so require.

1. **Partial Evacuation:** This is removing one or more patients from a dangerous room or ward. When the patients are removed, an attempt must be made to subdue the fire with the extinguisher and hose line. If this is impossible the door must be closed and the threshold sealed with a wet towel or blanket. If the fire continues to grow, then the next step is to proceed with the horizontal or vertical evacuation.
2. **Horizontal Evacuation:** This type of evacuation takes place when fire or heavy smoke from a single room or ward threatens to spread to the adjoining area. All patients should be moved laterally by bed, cart, wheelchair, gurney, blanket or other conveyance to the nearest and safest protected area. Patients in immediate danger should be moved first, including those who might be separated from safety if the fire enters the corridor. Next to move (and contrary to some opinion) should be the ambulatory patient. Panic is never caused by helpless people. Those who are ambulatory should be pre-instructed to line up outside their rooms, form a chain by holding hands and follow a lead person into the safe area. The rooms should be checked for stragglers and all windows and doors closed. When horizontal evacuation is ordered, the personnel in the receiving area should assist in the removal of the patients if needed.
3. **Vertical Evacuation:** This is the downward movement of patients to a safe area. This may be one or two floors below, or it may be down and out of the building. If the movement is out of the building, it should be an area far enough from the building to be safe and also to be out of the way of the fire department. In most cases, this movement will be preceded by a horizontal movement to a safe stairwell. The priority for movement is the same for a horizontal movement.
4. **Total Evacuation:** This means vacating all floors to a place of safety. Cause would be possible conflagration or an enemy air attack warning, or dense smoke and fumes. A place of safety might mean the basement, or even leaving the building, or even leaving the city. It would be necessary to use all stairways and safe elevators. It would require the help of everyone available. This action must be undertaken floor by floor with enough trained help above and below to keep traffic moving quickly and properly by stair and elevator.

Untrained or unassigned personnel would report to the manpower pool under the direction of personnel. Remember this, more good work could be accomplished and less panic created by the work of two dozen competent people than by 300 anxious but untrained volunteers.

There should be carrying teams to get the patients downstairs and fire escapes. These practically trained people should be called loaders, movers and carriers. It would certainly be much more orderly arrangement than for a single team to tackle all three phases.

Emergency Removal

In a hospital fire, the first duty of the personnel is to remove the patient(s) who are in immediate danger. This may require moving one person or many. If eight out of twenty-five are helpless as acknowledged, then it seems sensible to assume that the proper time to learn removal techniques would be before rather than during the fire.

Three considerations may be dominant factors in emergency patient handling:

1. The nature of the emergency
2. The weight and condition of the patient
3. The strength and adaptability of the rescuer

Of all the possible equipment for evacuation, the BLANKET is more important than any other. It can be used to smother fire, drag a patient from the room, made into a stretcher with or without poles, used for carrying in halls, on stairs, or fire escapes. Eight or ten infants can be carried easily and safely in a blanket.

There should be no uncertainty in bed fires. The rule is to get the patient on the floor. In oxygen tank fire: **FIRST SHUT OFF THE OXYGEN, THEN GET THE PATIENT ON THE FLOOR.** In both situations, if you throw a blanket on the floor, you can use it to smother fire or as a drag. The fear of handling people who are on fire is undeserved. Bodies do not burn, they cook. So really all you have to contend with is the night clothing and the hair, once you free the patient from the bed.

Personnel working in orthopedics should carry a small sharp pocket knife. Do not depend on the pair of scissors in the desk, someone else may need them, too. Remove the small pair in your pocket because they may severely injure you or the patient you are moving. If there is any question of responsibility in removing someone from traction, just remember that there is always a chance of recovering from an aggravated fracture, but never from cremation or asphyxiation.

In case of fire, do not be surprised to find the patient on the floor. He/she will get out of the bed if he/she can. If the patient is supposed to be in the room and you cannot see or feel him, look under the bed, or in the closets or elsewhere.

Earthquake/Disaster Preparedness

1. Attempt to familiarize yourself with the facility/unit earthquake preparedness plan. You can reduce injuries to co-workers and patients and lessen the possibility of panic after the disaster has occurred by planning for all eventualities.
2. At least 2 persons in each unit or on each floor should assume leadership roles after the disaster has occurred. It is the facility's responsibility to be sure they are properly trained.
3. Understand how to protect yourself (and patients if possible) during an earthquake: Get under a desk or table or stand in a doorway away from the glass. Do not leave the building during the quake.
4. Attempt to locate and have available for immediate use, the telephone numbers and alternative means of communication with public safety agencies. When given the chance, participate in drills; take advantage of the opportunity to prepare for possible disasters.
5. In medication rooms, patient rooms, clean and dirty utility rooms be aware of high or top-heavy shelves, cabinets, machinery or any other equipment that could fall during a tremor. Heavy objects should not be on top shelves, but stored in lower places.
6. Be aware of possible necessity to shut off lights, gas and water.
7. Attempt to locate several alternate routes of evacuation in the various parts of the unit and or facility, should you need to leave your work area because it is unsafe.
8. Consider the possibility that you may not be able to leave the premises and attempt to locate supplies on hand that may be needed.
9. Provide assistance for physically compromised patients and co-workers who are unable to leave the building without the aid of another person.
10. Attempt to locate areas of the facility that may be suitable as shelter areas should employees and patients be required to stay there after the disaster.
11. Be sure the fire extinguishers are kept in good working order and that you know how to use them.
12. If your building is windowless, consider alternative means of ventilation and lighting if the power is off.
13. Attempt to locate contingency plans for continued operation of the hospital based on total and/or partial shut downs due to building/utility/communication/transportation failures. Try to identify key

personnel, communication systems, utilities and other support needs for 24 hours, 72 hours, one week and one month, if available.

14. Organize Interdisciplinary Team and patients for whom they are responsible and determine what steps are to be taken in accordance with the hospital's earthquake plans.
15. Immediately check for injuries among fellow workers and render first aid as needed. Seriously injured persons should not be moved unless they are in danger of further injury. Be sure your entire area is checked for the injured.
16. In the event of fatalities, cover bodies and notify the coroner. They should not be moved.
17. Check for fires and fire hazards, especially for gas leaks and damaged electrical wiring.
18. See that these are turned off at main values and switches if required. Check for building damage and move patients to safe areas.
19. Do not use elevators or to run into the street.
20. Flashlights should be used if power is off, since sparks from a match or light switch could ignite leaking gas.
21. Immediately clean up dangerous materials that may have spilled.
22. Limit use of "land line" and mobile telephones for outside calls except in genuine emergencies. Use battery-powered radios for damage reports and information from public safety agencies.
23. Check closets and storage areas very carefully, watching for falling objects.
24. After a major earthquake prepare for aftershocks which will be occurring and may cause more damage.
25. Check that all telephones are correctly "on hook" so the system does not indicate "busy" to incoming or internal calls.

Electrical Safety

Much of the work to support patient care depends on electrical devices. A few basic reminders will help you to maintain a safe work place.

- All outlets are "grounded" outlets, accepting three-prong plugs. Never try to introduce another kind of plug into the outlets.
- Water and electricity a bad mix. Never try to plug something in, or run an appliance, if water is in the area. Clean up the water first. Electricity passes easily through water and can cause serious harm to you and others around.
- If you notice an electrical hazard, contact your supervisor immediately.

Chemical Safety/Hazardous Communications

A variety of chemicals are used to support patient care, including things as simple as cleaning agents or complicated medications such as chemotherapy drugs. It is your legally protected right to know about these chemicals.

Understanding the Material Safety Data Sheet (MSDS)

The Hazard Communication Standard is also known as the Workers' Right-to-Know standard. You have the right to know about the chemical hazards in your workplace. The MSDS and manufacturer's product label(s) are a fast and easy way to obtain information about how to work safely with a specific product.

A hazardous substance is one, which causes physical or related health hazards, may be found on Lists issued by the State of California such as: "List of Regulated Substances," "Pesticide 200 Ingredients" and/or "The Safe Drinking Water and Toxic Enforcement Act of 1986" also popularly known as "Proposition 65."

Information within the MSDS

1. Identification of product: You will find the product name, manufacturer's name, address, telephone and emergency number.
2. Hazardous ingredients: Lists of all the ingredients in the product.
3. Physical data: Provides information on how to work with the chemical and describes the physical characteristics.
4. Fire and Explosion Hazard data: Specifies if the material may present a fire or explosive hazard and under what conditions the hazard exists.
5. Health hazard data: Identifies the symptoms related to overexposure (nausea, vomiting, and dizziness).
6. Reactivity Data: Describes what materials will react with the chemical you're using.
7. Spill/leak procedures: Addresses how to respond to an accident spill or leak.
8. Control measures and special precautions: Specifies the type of PPE that you should wear when handling the product.
9. Handling and storage precautions: Describes how to safely store and handle materials.

The following are examples of some important information one may find on an MSDS.

Physical Hazards

The coverage of physical properties associated with the specific material may include the following information:

1. Compressed gas: such as high-pressure oxygen and nitrous oxide cylinders.
2. Explosive: substance that can explode under certain conditions of release.
3. Flammable or combustible: substance that burns easily such as alcohol.
4. Organic peroxide: derivative of hydrogen peroxide.
5. Pyrophoric: ignites spontaneously in air under certain conditions.
6. Unstable: reactive substance.
7. Water reactive: such as strong acids and bases when mixed with water.

Health Hazards

Disseminated as hazardous to your health are chemical substances. Both liquids and solids may be identified on a MSDS and are indicated as:

1. Carcinogens: these cause cancer, reproductive toxicity in males or females, reproductive toxins can result in fetus damage.
2. Toxic: a substance that acts as a poison.
3. Irritants: these may cause irritation to any body part.
4. Corrosives: these can cause damage to body tissue.
5. Sensitive: these can cause allergic reaction.
6. Hepatoxin: this is a liver poison.
7. Nephrotoxin: this is a kidney poison.
8. Neurotoxin: this is a nerve poison.
9. Hematopoietic System: Act on the system resulting in blood poisoning.
10. Substance compounds: damaging to lungs, skin, eyes or mucous membranes upon contact.

Acute and Chronic Exposure

An acute exposure is a short-term exposure to a substance and can cause dermatitis, headaches, or rashes.

A chronic exposure is a long-term exposure and can cause cancer or permanently damage a biological system.

Routes of Entry

1. Through inhalation (painting, stripping floors, anesthesia gas waste).
2. Through absorption (handling formaldehyde and glutaraldehyde).
3. Through ingestion (this can occur if you handle poisonous chemicals and do not wash your hands before eating, smoking or applying cosmetics. This can also occur if containers are not properly handled, labeled, sealed).
4. Injection (accidental needle sticks).

Your responsibilities when handling hazardous materials

1. Read the label and MSDS of new chemicals you are working with.
2. Follow warnings and precautions
3. Use appropriate PPE
4. Learn emergency procedures for the chemicals with which you work.
5. Act in a sensible manner, be a safe and responsible worker.
6. Never use hazardous material substances you're not trained to use
7. Never place a chemical substance into an unlabeled container.
8. Never mix substances without asking your supervisor first.
9. Always ask your supervisor if you have a question about any substance.

Handling Hazardous Materials

Infectious waste: Separate infectious waste from other waste as soon as the material becomes a waste

Blood or body fluids: Minimize your risk by containing, removing, and disinfecting all blood or body fluid spills as quickly and effectively as possible.

Wear PPE: PPE stands for "Personal Protective Equipment." A PPE is an item you use for safety when working with chemicals. Some examples of PPE are Utility gloves, Safety glasses, Goggles, Gowns, Ventilators and Masks PPE is listed on the MSDS (Material Safety Data Sheet) for all the chemicals you work with. The PPE necessary for each substance are determined by the ways the substance can harm you.

There are three ways that a chemical substance may harm you:

- Breathing the chemical
- Having physical contact with the chemical
- Swallowing the chemical

Breathing the chemical

The chemical may have toxic fumes that can injure your lungs if you breathe them. For example, cleaning materials, especially bleach, are toxic when inhaled.

Appropriate PPE for toxic fumes may include:

- Special mask
- Ventilator

In addition, always use these products in a well-ventilated area. If you begin to feel dizzy or weak or have difficulty breathing when using a product, you need to leave the area immediately.

Having physical contact with the chemical

The chemical may injure any part of the body that comes in contact with it. Your eyes are in danger from liquid splashing into them. Any exposed skin is also at risk.

Appropriate PPE to prevent physical contact may include:

- Goggles, safety glasses, or other eye protection
- Gown
- Gloves
- Mask

In addition, flushing with water is usually the most immediate treatment for any accidental splashing of solutions in your eyes or on your skin.

Swallowing the chemical

Some chemicals are dangerous if swallowed. To prevent swallowing a solution that may have splashed on your fingers, always wash your hands thoroughly after coming in contact with anything that should not be swallowed.

Appropriate PPE to prevent swallowing may include:

- Mask (that covers your nose and mouth to prevent the solution from being splashed onto your lips)
- Gloves (to protect against hand to mouth transfer).

In addition, if you should accidentally swallow a harmful chemical, tell your supervisor immediately. You will probably be sent to the Employee Health Nurse or to your Emergency Department.

Drug and Alcohol Policy

Access Healthcare LLC is committed to providing a safe, healthy, and productive work environment. Consistent with this commitment, it is the intent of the Company to maintain a drug and alcohol-free workplace. Being under the influence of alcohol, illegal drugs (as classified under federal, state, or local laws), or other impairing substances while on the job may pose a serious health and safety risk to others, and will not be tolerated.

Prohibited Conduct

The Company expressly prohibits employees from engaging in the following activities when they are on duty or conducting Company business or on Company premises (whether or not they are working):

- The use, abuse, or being under the influence of alcohol, illegal drugs, or other impairing substances.
- The possession, sale, purchase, transfer, or transit of any illegal or unauthorized drug, including prescription medication that is not prescribed to the individual, or drug-related paraphernalia.
- The illegal use or abuse of prescription drugs.

While the use of marijuana has been legalized under some state laws for medicinal and/or recreational uses, it remains an illegal drug under federal law. The Company does not discriminate against employees solely on the basis of their lawful off-duty use of marijuana. You may not consume or be under the influence of marijuana while on duty or at work. If you have a valid prescription for medical marijuana, refer to the Company Disability Accommodation policy for additional information.

Nothing in this policy is meant to prohibit your appropriate use of over-the-counter medication or other medication that can legally be prescribed under both federal and state law, if it does not impair your job performance or safety or the safety of others. If you take over-the-counter medication or other medication that can legally be prescribed under both federal and state law to treat a disability, inform your Supervisor if you believe the medication may impair your job performance, safety, or the safety of others or if you believe you need a reasonable accommodation before reporting to work while under the influence of that medication.

In accordance with the Drug-Free Work-Place Act of 1989, as a condition of employment, patient care providers must comply with this policy and notify management within five (5) days of conviction for any use of, or distribution of a controlled substance. Failure to do so will result in immediate termination of employment pending the outcome of any legal investigation and conviction.

For the protection of our employees, the public and to insure an environment as free from the influence of illegal drugs as is reasonably and practically possible, the company requires a pre-employment drug screen, annual drug employment screen and reserves the option to conduct a “for cause” drug screen for the presence of illegal drugs under certain conditions. Consent to the testing program will be a condition of further employment of each and every employee. If any director, manager, supervisor or other company officer or client representative has any suspicion that an employee under his or her supervision may be affected by or under the influence of illegal drugs, the employee under suspicion will be asked to undergo a laboratory test to determine the presence of illegal drugs. Refusal to take the test will subject the employee to immediate termination. Additionally, consistent with the law, drug and alcohol screening tests will be given after accidents or near misses, or upon reasonable suspicion of alcohol or drug use, when a client requires pre-assignment testing, or upon any other circumstances which warrant a test.

Violations

Violation of this policy may result in disciplinary action, up to and including termination of employment.

Policy Against Workplace Violence

As the safety and security of our employees, vendors, contractors, and the general public is in the best interests of Access Healthcare LLC, we are committed to working with our employees to provide a work environment free from violence, intimidation, and other disruptive behavior.

Zero Tolerance Policy

The Company has a zero tolerance policy regarding workplace violence and will not tolerate acts or threats of violence, harassment, intimidation, and other disruptive behavior, either physical or verbal, that occurs in the workplace or other areas. This applies to management, co-workers, employees, and non-employees such as contractors, customers, and visitors.

Workplace violence can include oral or written statements, gestures, or expressions that communicate a direct or indirect threat of physical harm, damage to property, or any intentional behavior that may cause a person to feel threatened.

Prohibited Conduct

Prohibited conduct includes, but is not limited to:

- Physically injuring another person.
- Threatening to injure a person or damage property by any means, including verbal, written, direct, indirect, or electronic means.
- Taking any action to place a person in reasonable fear of imminent harm or offensive contact.
- Possessing, brandishing, or using a firearm on Company property or while performing Company business except as permitted by state law.
- Violating a restraining order, order of protection, injunction against harassment, or other court order.

Reporting Incidents of Violence

Report to Human Resources, in accordance with this policy, any behavior that compromises our ability to maintain a safe work environment. All reports will be investigated immediately and kept confidential, except where there is a legitimate need to know. You are expected to cooperate in any investigation of workplace violence.

Violations

Violating this policy may subject you to criminal charges as well as discipline up to and including immediate termination of employment.

Retaliation

Victims and witnesses of workplace violence will not be retaliated against in any manner. In addition, you will not be subject to discipline for, based on a reasonable belief, reporting a threat or for cooperating in an investigation.

If you initiate, participate, are involved in retaliation, or obstruct an investigation into conduct prohibited by this policy, you will be subject to discipline up to and including termination.

If you believe you have been wrongfully retaliated against, immediately report the matter to Human Resources.

Nonsmoking Policy

Access Healthcare LLC is concerned about the effect that smoking and secondhand smoke inhalation can have on its employees and clients.

Employees are required to follow clients' workplace nonsmoking policies and procedures; as well as state law. Failure to do so will lead to disciplinary action.

Joint Commission Education

The Joint Commission emphasizes prevention - identifying problems and correcting them before anything happens. The organization has definitions that you need to know for the following terms:

- Error
- Sentinel Event
- Near Miss
- Hazardous Condition

Error

An Error is an unintended act of either omission or commission, or an act that does not achieve its intended outcome. In other words, an Error is:

- Something done by accident
- Something that should have been done but was not
- Something that was done that did not have the expected result.

An example of an Error is a patient's blood pressure not being measured when it should have been.

Sentinel Event

A Sentinel Event is an unexpected occurrence which actually happened and which either resulted in death or serious physical or psychological injury or carried a significant risk thereof. Serious injury specifically includes loss of limb or function.

An example of a Sentinel Event is the wrong dose of medication being given to an infant, causing death.

Certain types of events are reported to The Joint Commission under their Sentinel Event policy, whether they actually or potentially resulted in death or serious injury. These events are:

- Rape
- Patient suicide
- Infant abduction or discharge to the wrong family
- Hemolytic transfusion reaction involving administration of blood or blood products
- Surgery on the wrong patient or wrong body part.

Near Miss

This term is used to describe any process variation which could have led to a Sentinel Event, but the Sentinel Event did not actually happen because of some kind of intervention. A recurrence of the process variation carries a significant chance of a serious adverse outcome.

Here is an example of a Near Miss. By mistake, a patient is handed a medication to which she is allergic, and which could lead to death or serious illness. Fortunately, she recognizes the medication is different from what she is usually given, questions staff about it, and ultimately receives the correct medication, instead. In this case, the process variation is that the patient is not wearing a wrist band listing her allergies, and that the information about her allergies is not available to staff anywhere else.

Hazardous Condition

This refers to any set of circumstances (other than the disease or condition for which the patient is being treated) which significantly increases the likelihood of a serious adverse outcome.

In other words, a Hazardous Condition is:

- Something that could cause the patient harm
- Something other than the patient's disease or condition.

An example of a Hazardous Condition is a power outage and simultaneous failure of the back-up generator that shuts down life-support systems for some patients, meaning staff must manually ventilate affected patients until power is restored.

All hospitals must have a plan to identify risks to patient safety. They must also have policies for reporting and investigating sentinel events, near misses, and hazardous conditions.

Annual National Patient Safety Goals

The National Patient Safety Goals are derived primarily from informal recommendations made in the Joint Commission's safety newsletter, Sentinel Event Alert. The Sentinel Event database, which contains de-identified aggregate information on sentinel events reported to the Joint Commission, is the primary, but not the sole, source of information from which the Alerts, as well as the National Patient Safety Goals, are derived.

1. Improve the accuracy of patient identification

- Use at least two patient identifiers (neither to be the patient's room number) whenever administering medications or blood products; taking blood sample and other specimens for clinical testing, or providing any other treatments or procedures. For example, use the patient's name and date of birth.

2. Improve the effectiveness of communication among caregivers

- For verbal or telephone orders or for reporting critical test results over the telephone, verify the complete order or test result by having the person receiving the order or test result “read-back” the complete order or test result.
- Standardize a list of abbreviations, acronyms and symbols that are not to be used throughout the organization.
- Measure, assess and, if appropriate, take action to improve the timeliness of reporting, and the timeliness of receipt by the responsible licensed caregiver, of critical test results and values.
- Implement a standardized approach to “hand off” communications, including an opportunity to ask and respond to questions.

3. Improve the safety of using medications

- Have on hand a small supply of the medicines that are used in the hospital
- Create a list of medicines with names that look alike or sound alike and update the list every year. This will prevent errors involving the interchange of these drugs.
- Label all medications, medication containers (e.g., syringes, medicine cups, basins), or other solutions on and off the sterile field in perioperative and other procedural settings.
- Take extra care with patients who take medicines to thin their blood.

4. Prevent infection

- Comply with current Centers for Disease Control and Prevention (CDC) hand hygiene guidelines
- Report death or injury to patients from infections that happen in the hospital.

5. Check patient medicines

- Find out what medicines each patient is taking. Make sure that it is OK for the patient to take any medicines with their current medicines.
- Give a list of the patient’s medicines to the patient’s next caregiver. Give this same list to the patient before they leave the hospital.

6. Prevent patients from falling

- Find out which patients are most likely to fall. For example, is the patient taking any medicines that might make them weak, dizzy or sleepy? Take action to prevent falls for these patients.

7. Help patients to be involved in their care

- Tell each patient and their family how to report their complaints about safety.

8. Identify patient safety risks

- Find out which patients are most likely to try to kill themselves.

9. Watch patients closely for changes in their health and respond quickly if they need help

- Create ways to get help from specially trained staff when a patient’s health appears to get worse.

10. Prevent errors in surgery

- Create steps for staff to follow so that all documents needed for surgery are on hand before surgery starts.
- Mark the part of the body where the surgery will be done. Involve the patient in doing this.

Do-Not-Use List

Joint Commission has created a list of abbreviations, acronyms, symbols, and dose designations that are not to be used throughout organization. The Do-Not-Use list applies to all orders and medication-related documentation and information that is handwritten or computer entered as free text

Do Not Use	Why	Use Instead
U (unit)	Mistaken for “0” (zero), the number “4” (four) or “cc”	Write “unit”
IU (International Unit)	Mistaken for IV (intravenous) or the number 10 (ten)	Write “International Unit”
Q.D., QD, q.d., qd (daily)	Mistaken for each other. Period after the Q mistaken for “I” and the “O” mistaken for “I”	Write “daily”
D.O.D., QOD, q.o.d., qod (every other day)		Write “every other day”
Trailing zero (X.0 mg)*	Decimal point is missed	Write X mg
Lack of leading zero (.X mg)		Write 0.X mg
MS	Can mean morphine sulfate or magnesium sulfate. Confused for one another.	Write “morphine sulfate”
MSO ₄ and MgSO ₄		Write “magnesium sulfate”

Infection Control: Universal Precautions and Bloodborne Pathogens

Access Healthcare LLC strives to educate employees on nosocomial infections and their method of transmission and to provide education on work practices; engineering control and personal protective equipment prevent the spread of nosocomial infections.

Nosocomial Infections

Nosocomial infections are infections which are a result of treatment in a hospital or a healthcare service unit, but secondary to the patient's original condition. Infections are considered nosocomial if they first appear 48 hours or more after hospital admission or within 30 days after discharge. This type of infection is also known as a hospital-acquired infection.

Nosocomial infections are even more alarming in the 21st century as antibiotic resistance spreads. Reasons why nosocomial infections are so common include:

- Hospitals house large numbers of people who are sick and whose immune systems are often in a weakened state.
- Increased use of outpatient treatment means that people who are in the hospital are sicker on average;
- Medical staff move from patient to patient, providing a way for pathogens to spread;
- Many medical procedures bypass the body's natural protective barriers;
- Routine use of anti-microbial agents in hospitals creates selection pressure for the emergence of resistant strains

The Spread of Germs

Germs can be spread through 4 different modes of transmission

1. Airborne transmission: Occurs by dissemination of either airborne droplet nuclei (small-particle residue of evaporated droplets containing microorganisms that remain suspended in the air for long periods of time) or dust particles containing the infectious agent. Microorganisms transmitted by airborne transmission include *Mycobacterium tuberculosis* and the rubeola and varicella viruses.
2. Droplet transmission: Contact of the mucous membrane of the nose, mouth or eye with infectious articles can be produced by coughing, sneezing, talking or procedures such as bronchoscopy or suctioning. Droplet transmission requires close contact between the source and the susceptible person because particles remain airborne briefly and can travel. Microorganisms transmitted by droplet transmission include the common cold and flu.
3. Blood borne transmission: Germs can live in the bloodstream and in other body fluids that contain blood components. A person's skin prevents germs from entering into the body, but if the skin is broken because of a cut, it is possible for infected blood of another individual to enter. Mucous membranes, found in the mouth, vagina, or rectum may also allow germs to spread through contact with blood and/or secretions containing blood. Unprotected sexual contact can lead to this method of transmission.
4. Direct Contact Method: Infectious agents can spread directly or indirectly from one infected person to another, often on contaminated hands. The best protection is proper hand washing (Please see Centers for Disease Control and Prevention Hand Hygiene Guideline for more information on proper hand washing).

General Prevention

General steps to follow to prevent the spread of germs are:

- Following the Infection Control policies of your facility
- Identifying the people, patients, and staff, who are most at risk
- Washing your hands
- Staying healthy by getting plenty of rest, eating properly, and exercising
- Getting vaccinated against flu and hepatitis B
- Washing your hands
- Following the standard recommended precautions with everyone
- NOT coming to work if you are sick.

CDC Hand Hygiene Guidelines

Improved adherence to proper hand hygiene has been shown to terminate outbreaks in health care facilities, to reduce transmission of antimicrobial resistant organisms and reduce overall infection rates.

The Centers for Disease Control (CDC) has released the following guidelines to improve adherence to hand hygiene in health care settings.

The six steps in routine hand washing are:

1. Wet hands thoroughly under running water. Warm or hot water is best.
2. Lather with soap from a dispenser
3. Wash hands thoroughly, for 15 seconds, using friction.
4. Be sure to include the backs, palms, wrists, between fingers, and under fingernails.
5. Rinse hands thoroughly under running water.
6. Leave the water running and use a paper towel or an air dryer to dry hands thoroughly.

The four steps to round alcohol hand rubs are:

1. Pour the alcohol hand rub in the palm of one hand
2. Rub both hands together
3. Rub all parts of the wrist, hand, and fingers
4. Rub until completely dry

Standard Precautions

Standard Precautions combine the major elements of Universal Precautions and Body Substance Isolation. Standard Precautions call for the use of gloves and other personal protective equipment to guard against anticipated or accidental contact with any body fluid, secretion, or excretion.

Personal Protective equipment is to be utilized when there is a break in the skin or when working around mucus membranes. All employees shall follow Standard Precautions in order to minimize and/or eliminate exposure to blood borne pathogens and communicable diseases. All body substances shall be treated as a potential source of infection and all facilities shall provide an adequate supply of Personal Protective Equipment in appropriate sizes to ensure all personnel have access when required.

At a minimum, all employees should follow these basic practices:

1. Hand protection

Protect your hands by wearing latex/hypoallergenic gloves (the correct size) when:

- Emptying a Foley catheter
- Emptying a bedpan
- Starting an IV
- Dealing with trauma in the emergency room
- Pricking the finger for blood glucose
- Handling blood specimens
- Drawing arterial or venous blood
- Cleaning biomedical equipment.

2. Body protection

Wear gown, mask, and goggles to cover any part of your body that could be splashed or sprayed (or otherwise come in contact with) the blood and/or body fluids of another person (for example, when caring for a trauma patient in the Emergency Department or when assisting in a procedure where exposure is possible).

3. General protection

- Dispose of all materials containing blood in the proper waste containers.
- Use a barrier device instead of performing direct mouth-to-mouth ventilations during CPR.
- Avoid contact with blood from needles by using safety devices provided by your facility.
- Never recap a needle (if you miss, you could jab your finger).
- Dispose of all sharps (needles, blades, IV catheters) in the proper disposal box.
- Wash your hands after removing gloves.
- Do not eat, drink, and apply make-up or contact lenses in areas where exposure to body fluids is possible.

Post Exposure and Follow up Plan

An exposure incident to blood borne pathogens involves specific eye, mouth, mucous membrane, or parenteral contact with blood or other potentially infectious materials that result from the performance of an employee's duties. All employees involved in direct patient care should be familiar with appropriate

decontamination procedures, Access Healthcare LLC shall make immediately available a confidential medical evaluation and follow-up with the exposed individual. Post-exposure follow-up shall be:

- Made available at no cost to the employee
- Performed by or under the supervision of a licensed healthcare professional who has a copy of all relevant information related to the incident.
- Made available at a reasonable time and place.

Access Healthcare LLC's post-exposure and follow-up, shall include the following:

- Documentation of the route(s) of exposure, and the circumstances under which an exposure incident occurred.
- Identification and documentation of the source individual
- Collection and testing of blood for HIV and HBV serological status
- Post-exposure prophylaxis, as recommended by the U.S. Public Health Service
- Counseling
- Evaluation of reported illness

The company maintains confidential medical records for each employee with occupational exposure. Records are kept for the duration of employment plus thirty (30) years. Each record shall contain the employee's name, social security number, hepatitis B vaccine history, and a record of all post-exposure follow-up.

Bloodborne Pathogens

The Occupational Safety and Health Administration (OSHA) has a Standard which was developed to protect the healthcare worker. The Bloodborne Pathogen Standard addresses the potential exposure of healthcare workers to blood and body fluids in the work environment. Bloodborne pathogens are Hepatitis B, C and Human Immunodeficiency Virus (HIV).

Hepatitis

Hepatitis is a serious disease of the liver, an organ necessary for life. Hepatitis B and C, the two most serious kinds of hepatitis, are similar kinds of liver infection that are caused by different viruses. Methods of blood-borne transmission of both Hepatitis B and C include:

- Blood splashes from minor cuts and nosebleeds
- Procedures that involve blood (especially in health care)
- Hemodialysis (using kidney machines)
- Sharing personal items like nail clippers, razors, and toothbrushes
- Sharing needles for intravenous drug use

In order to prevent the spread of Hepatitis:

- Follow Standard Precautions.
- Receive the Hepatitis B vaccine at no cost, if you are not already immune to the virus.
- Maintain good personal hygiene habits.

Human Immunodeficiency Virus (HIV)

HIV is the virus that causes AIDS. A condition in which the immune system begins to fail, leading to life-threatening opportunistic infections. Once this virus enters and infects the body, the person is said to be "HIV

Positive." However, the person may be infected with the virus for up to 10 years or more before developing AIDS. The routes of transmission for HIV are:

- Sexual route: Acquired through unprotected sexual relations, wherein infected sexual secretions of one partner come into contact with the genital, oral or rectal mucous membranes of another
- Blood/blood product route: Accounts for infections in intravenous drug users, hemophiliacs and recipients of blood transfusions and other blood products.
- Mother-to-child: Occurs in utero during pregnancy and intrapartum at childbirth.

In order to prevent the spread of HIV:

- Follow Standard Precautions
- Wear protective equipment
- Abstain from sex or sex-related activities when the HIV status of your partner is doubtful or not known.
- If you are HIV infected and pregnant, take appropriate medication to reduce the chances of passing the virus to your unborn child.
- If you are HIV infected, DO NOT breastfeed.
- NEVER share needles, including needles used for tattoos, body piercing, or injecting steroids.

Tuberculosis

Tuberculosis is a common and deadly infectious disease caused mainly BY *Mycobacterium tuberculosis*. Tuberculosis most commonly attacks the lungs (but can also affect the central nervous system, the lymphatic system, the circulatory system, the genitourinary system, bones, joints and even the skin. Tuberculosis is curable, but it involves taking medication for a very long time. TB is caused by airborne bacteria and spreads through coughing, sneezing, talking, laughing, and breathing.

Healthcare professionals and persons exposed to TB need to have a Purified Protein Derivative (PPD) skin test or a chest X-ray.

- Positive test results indicate the person is infected with TB but may not have TB disease. Preventive therapy may be given to kill germs that are not doing any damage now but could break out later. If exposed, healthcare professionals must contact Access Healthcare LLC's Human Resources department immediately. Results of the PPD skin test or chest X-ray must be provided to Human Resources.
- Negative TB test results should be retested 8 to 10 weeks after the last known exposure. For consistency, the same type of TB test (e.g., TB blood test or TB ski test) should be used upon hire (i.e., preplacement) and for any follow-up testing. Results of the re-test must also be given to Access Healthcare LLC's Human Resources department.
- Healthcare personnel with a documented history of a positive TB test result do not need to be re-tested after exposure to TB; instead they should receive a TB symptom screen and if they have symptoms of TB, they should be evaluated.
- If you are experiencing Tuberculosis symptoms after exposure, you may be temporarily relived from duty.

To protect yourself and others from contracting tuberculosis, follow your facility's recommended Special Precautions in addition to Standard Precautions.

Special Precautions for the treatment of TB patients:

- Place TB patients in private rooms.
- Ventilate rooms directly to the outside if possible, to prevent the circulation of TB germs to other areas of the facility.
- Wear a special "fit-tested" mask (and receive training in how to wear it correctly) when entering the room and while in the room.

- Explain to patients and visitors how to use special masks.
- Keep patients in their rooms as much as possible.
- Encourage patients to cough or sneeze directly into tissues and to dispose of them.
- Have patients wear masks when being transported to other areas of the hospital.

IMPORTANT:

Any infection claims, virus exposures or needle-stick/sharps injury need to be reported to Access Healthcare LLC's Human Resources department (ATTN: HR@accesshealthcarestaffing.com) within 24-48 hours.

Medication Safety and Documentation

What are medication errors?

Medication errors are errors involving drugs that cause, or could cause, harm to a patient. They may be errors in prescribing, dispensing or administering, and they include both errors that reach the patient as well as those errors that do not reach the patient. They can occur in any patient care area or in the pharmacy.

What are common sources of medication errors?

- Lack of knowledge about drugs: with so many new drugs being developed each year, it's never been more important to understand what each drug can do and how to use it properly.
- Lack of patient information: Ensuring medication safety means it's important to know key information about each patient, including his/her age, weight, clinical status, known drug allergies and use of other medications (herbs, supplement, vitamins, other holistic remedies) and the potential for interactions.
- Poor communication: Problems can result from things such as:
 - Not using standardized abbreviations
 - Handwriting that's hard to read
 - Verbal miscues (for example, mispronouncing a drug's name)
 - Unclear decimal points
- Storage and stocking of drugs: For example, the risk of someone picking up the wrong drug is higher when the two drugs are similarly packaged (but are very different).
- Equipment used to administer drugs: Variations in the design of IVs and infusion pumps can cause confusion. Poor maintenance and not understanding how to program automated equipment also increases the risk of medication errors.
- Patient identifications: A good system to identify patients, such as armbands, may be in place. However, the system must be utilized (i.e. the armbands must be checked) in order for it to work
- Distractions: Ringing telephones, too much conversation, and interruptions can cause even the most careful healthcare worker to lose concentration.

How can medication errors be prevented?

Contrary to popular belief, most medication errors are not due to a careless individual act but are related more directly to some type of system failure or inefficiency. Medication errors can be prevented if everyone in the organization:

- Works together across departments, including physicians, pharmacists, nurses, support staff and administrators
- Focuses on systems, which means improving procedures to help prevent mistakes.
- Takes blame away from employees and looks at the process(es) that led to the error
- Helps patients understand their medications, follow their treatment plans, and take an active role in their care at every step along the way.
- Uses benchmarks to compare challenges and successes of other health care organizations with their own.

- Reports errors voluntarily so that a root cause analysis can be done. A root cause analysis is a step-by-step method to understand what went wrong and why. It allows us to make improvements in a system and monitor changes to see how well they are working.

Medication Administration and safety

- Administered by a licensed nurse upon a written order by a staff physician
- Pour medications immediately before administration. No pre-pouring!
- Always check patient ID band and Medication Sheet. Two forms of identification must be used.
- Patients must take all medications in the presence of the administering nurse.
- Medications can be given ½ hour before or ½ hour after the scheduled time.
- Double check all insulin, chemotherapy agents, anticoagulants and PCA narcotics with another licensed nurse.

Medication Documentation

- Document the time the medication was given on the Medication Administration Record (MAR)
- Include injection site for all injectables
- Chart on the Nurses' Notes and MAR all PRN medications and the results
- When the patient is discharged, place all unused medications in a labeled bag and return to the pharmacy.
- Document the medication at the time it is administered- No pre-charting!

Narcotics

- Two nurses must witness and sign any narcotic wasted.
- Every narcotic must be signed for on the narcotic sheet
- The narcotic count must be correct before you leave at the end of the shift. Discrepancies must be brought to the immediate attention of the unit manager/supervisor.

Intravenous - IV

- Nurse may monitor or discontinue IV therapy
- IV certified LVNs may start and superimpose IV fluids through a peripheral line
- Only an RN can add or regulate IV medications
- IV tubing is to be labeled at the time of initial use with the date, time and expiration date
- All IV tubing is to be changed every 72 hours, except TPN tubing, which is changed every 24 hours
- IV sites must be assessed every 2 hours

Why is clinical documentation so important?

- Communication
- Quality of care issues
- Compliance: reimbursement verification
- Fulfills federal, state, regulatory and accreditation requirements
- Supports if Standard of Care was met
- Memories fade, aids in defense in lawsuits when present
- May be used as teaching tools

Basic charting tips

- Use a pen, black ink is preferred
- Print legibly
- Date, time and sign all entries
- Don't use white out or obliterate entries

- Use approved abbreviations
- Record objective information- be clear and concise

Good Documentation Habits

- Use language that patient understands for discharge instructions and patient education material
- Documentation of actions, conversations with the patient, family members, physicians
- Documentation of safety precautions reviewed with the patient and/or family
- Description of unusual incidents
- Documentation of contacts with the provider
- Contemporaneous, chronological
- Do not editorialize, criticize, add 'hearsay'
- Avoid blaming another person or department
- Complete all boxes / forms accurately
- Do not leave open lines on records between documentation entries
- Verification informed consent was obtained
- Instructions given to patient/verbalization of understanding
- Do not alter entries

Alteration of Records

- Medical records should never be 'edited' after the fact
- Never document in anticipation of an event
- Never chart for someone else

- Exceptions

- Code situations
- Supervisor starting an IV per your request
 - You may be personally assessed for penalties related to falsification of documentation
 - Alterations in a record can make the case indefensible

Late Entries

- Late entries are placing additional information in the medical record when pertinent information was missed or not written in a timely manner.
- A general guideline when late entries can be added is within 7 days. Consult your Supervisor or Risk Manager for guidance if necessary.
- Should not be used if there has been adverse outcome to patient or there is known litigation
- Must have a 'home' – notation should specify the date and time. See below.

Example:

4/20/07 1600: Late Entry for 4/19/07 at 0800:

Patient also complained of pain at base of neck and bleeding from nose. Dr. Jones notified, CT of head ordered along with CBC & diff, INR.

Corrections

Draw single line through entry, initial; write the correct information. Review your hospital's policy for corrections. Sign and date the entry.

Example:

4/19/07 0800: Pt found on floor in room LN hallway; BP:165/66

VS: 36.8-136-20

Dr. Jones notified. Orders for MRI obtained

Suspected Abuse: Identification, Treatment and Reporting

Elder/Adult Abuse

With an elderly person (65 years of age or older) or disabled adult (18 years of age or older), abuse means the willful infliction of injury, unreasonable confinement, intimidation, or cruel punishment with resulting physical harm or pain or mental anguish or the willful deprivation by a caretaker or one's self of goods or services which are necessary to avoid physical harm, mental anguish, or mental illness.

Signs and Symptoms of Elder/Adult Abuse

- Patient or family member states that abuse is happening in the home
- Explanation for injuries is inconsistent with the injury
- Family or caregiver attempts to conceal injury
- Indications that someone is exploiting patient's finances or property
- Delay in seeking treatment
- Multiple bruises or injuries in various stages of healing
- Human bite marks
- Burns especially on back or buttocks
- Bruises in the shape of a hand or fingers
- Patient's behavior changes in the presence of the family or caregiver

Child Abuse

With a child (under 18 years of age), abuse includes:

1. Mental or emotional injury that results in an observable and material impairment in the child's growth, development, or psychological functioning;
2. Causing or permitting the child to be in a situation in which the child sustains a mental or emotional injury that results in an observable and material impairment.
3. Physical injury that results in substantial harm to the child or the genuine threat of substantial harm from physical injury to the child
4. Failure to make a reasonable effort to prevent an action by another person that results in substantial harm to the child;
5. Sexual contact, sexual intercourse, or sexual conduct;
6. Failure to make a reasonable effort to prevent sexual contact, sexual intercourse, or sexual conduct.

Signs and Symptoms of Child Abuse

- Burns on the soles of the feet (from forced standing in hot places)
- Burns on buttocks, thighs, hands or feet (from submersion in hot water)
- Explanation for injury does not match developmental stage (for example, caregiver explains a broken leg by saying the patient fell down, but the patient is too young to stand up)
- Evidence of sexually transmitted disease
- Bruising or tearing around the genital area

Neglect

With an adult, neglect means failure to provide...the goods or services, which are necessary to avoid physical harm, mental anguish, or mental illness.

With a child, neglect includes leaving the child in a situation where the child would be exposed to a substantial risk of harm, i.e., and failure to seek or follow through with medical care, failure to provide food, clothing, or shelter.

Signs and Symptoms of Elder/Adult Neglect, Including Self-Neglect

- Malnutrition
- Dirty, unkempt
- Unattended medical conditions
- Alcohol or substance abuse by caretakers

Signs and Symptoms of Child Neglect

- Chronic truancy (caregivers do not send child to school)
- Failure to thrive (unexplained weight loss)
- Unexplained delay in development
- Accidental injuries that suggest poor supervision.

Spousal/Partner Violence

Spousal/partner violence involves the situation where a victim has been involved in an intimate, romantic or spousal relationship with the perpetrator. It encompasses violence against both men and women and includes violence in same-sex relationships. It consists of a pattern of behaviors that establish power over another adult

Signs and Symptoms of Spousal/Partner Violence

Signs and symptoms of spousal/partner violence can include the usual signs and symptoms of abuse and neglect. Violence in a relation may not result in physical evidence. For example, the abuser may deny the victim the ability to communicate with friends or relatives. The abuser may abandon the victim in a dangerous place, refuse help when sick or injured or prohibit access to money or other basic necessities.

Exploitation

- The illegal or improper act or process or a caretaker using the resources of an elderly or disabled person for monetary or personal benefit, profit, or gain.
- The treatment team may identify possible history of abuse, neglect, or exploitation
- Any staff member suspecting child and or adult abuse and/or neglect is required to report suspicions according to local law and the rules and regulations of the state's Department of Human Services (DHS) or appropriate agency. If clarification is necessary concerning the criteria for reporting in Adult Protective Supervisor will occur without disclosing the identity of the patient and/or family.
- The report to DHS may be made orally or in writing. It shall include:
 - The name, age, and address of the person
 - The name address of the person responsible for care
 - The nature and extent of the person's condition
 - The basis of the reporter's knowledge
 - Any other relevant information
 - Documentation shall occur in the appropriate section of the patient record.
- If circumstances allow, the reporting procedure will be discussed with the patient and/or family involved, prior to the report being made. Consent will be obtained if deemed appropriately by the treatment team.

- Outside agency personnel requesting information about the family should be referred to the patient's physician or other appropriate staff.
- Any act of omission is reportable. A reportable suspicion includes a child victims or abuse shall be documented in the appropriate section of the medical record.
- Symptoms resulting from abuse will be addressed by the patient's treatment team.
- Documentation of physical marking should include photographic documentation (with appropriate patient identification) and included in the appropriate portion of the patient's medical record.
- Any other evidentiary material of abuse released by the patient will be included in the appropriate portion of the patient's medical record.
- Adult patients shall be given information regarding legal counsel
- Physical injuries requiring medical attention will be treated as deemed necessary by the patient's physician.

Abuse Reporting

All healthcare practitioners are mandated reporters. Social workers are not on site 24 hours/day, so practitioners need to know appropriate procedures to take when abuse is suspected. Failure to report child, spousal or elder abuse or neglect is a misdemeanor punishable by up to six months in jail and a \$1000 fine. The law requires that the suspected abuse be reported immediately by telephone and followed up with a written report within 26 hours. In order to recognize these situations, it is important to know signs and symptoms of abuse.

Suspected abuse, neglect and/or exploitation should be reported directly to the Nurse Manager/Nurse Director/Charge Nurse and should include:

- a. A description of the incident
- b. To whom the incident happened
- c. When the incident occurred
- d. Where the incident occurred
- e. Who was responsible for the neglect/abuse?

Nursing Essentials

RESTRAINTS

It is the policy of Access Healthcare LLC that the patient has right to be free from any physical or chemical restraints unless it is necessary for patient's safety or safety of others. Restrictive devices/restraints will be applied when the safeties of the patient and/or others are in jeopardy when less restrictive measures have proved inadequate. Restraints shall not be used in a manner that causes injuries. Employees must provide safely for patients and employees and prevent injuries.

BEHAVIOR MODIFICATION RESTRAINT: "Behavior modification restraint means the use of a physical or mechanical devise to involuntarily restrain the movement of the whole or a portion of a patient's body for the reason of controlling his/her physical activities in order to protect him/her or others from injury (such as the use of 5-point restraints to keep a patient from injury or soft ties to keep a confused patient from self-injury). The following are not behavior modification restraint:

1. Safety Restraint;
2. The use of side rails or, in the case of infants, the use of a safety net to keep patients from falling out of bed;
3. handcuffs applied by peace officers;
4. isolation for control of communicable disease.

Behavior modification restraints shall only be used when alternative methods are not sufficient to protect the patient or prevent injury.

There are two types of behavior modification restraint: psychiatric behavior modification restraint (“psychiatric restraint” used hereunder). A psychiatric restraint is used for patient signs of acute mental illness who appear to be a danger to themselves or others. A medical restraint is used for patients whose primary diagnosis is medical and for whom psychiatric hospitalization is not indicated.

Of limbs, attentions should be given to the patient’s needs including hydration, elimination and nutrition. A report of the clinical assessment shall be recorded in the medical record. All restraints shall be released at least every two hours.

Medical Restraint with Permission of Patient/Family

When other forms of medical restraint are to be imposed (for example, to restrain a confused patient from pulling at naso-gastric tube or intravenous line), a separate consent should be obtained when possible. In the case of a minor, consent should be obtained from the parents or guardian. In the case of a confused or comatose adult, consent may be obtained from the immediate family or conservator.

Steps to follow:

1. A physician’s order is required.
2. In addition to usual nursing evaluation and care, the patient’s needs, including hygiene, elimination and nutrition, shall be assessed at least every two hours.
3. Supports shall be released at least every two hours.

Medical Restraint without Permission

It is not always possible to get the consent of the patient, family or conservator for the imposition of medical restraint. In such cases, the following procedures should be used:

Steps to follow:

1. An assessment of the patient, either by physician or a registered nurse, is required prior to instituting medical restraint. The assessment shall consider the use of less restrictive means to protect the patient and shall be documented in the medical record.
2. Medical restraint shall be imposed upon the order of a licensed independent practitioner. In an emergency, a registered nurse may initiate the use of a medical restraint (without consent). The emergency implementation shall continue beyond one hour only with a physician’s order. Verbal orders may be accepted.
3. All physician orders for medical restraint shall be time limited. PRN orders shall not be given or accepted. Upon expiration of the time-limited order, a physician must review and renew the order.
4. Devices to be used may include soft ties, Posey vests, mittens, etc. Hard leather restraints shall not be used for medical restraint.
5. Any patient in medical restraint (without consent) shall be observed at intervals not greater than fifteen minutes. The exact time interval of observation may be more frequent and shall be determined by the clinical condition of the patient. Staff shall document these observations in the medical record at the end of each shift or more frequently as the condition of the patient or findings of the observation dictate.
6. Each patient in restraint shall be assessed by an appropriate clinical staff member at least every two hours. At the time of the patient assessment the clinical staff member shall comment on the patient’s clinical condition, circulation, condition of limbs and attention should be given to the patient’s needs including hydration, elimination and nutrition. A report of the clinical assessment shall be recorded in the medical record.

Safety Restraint

There are two types of safety restraint: adaptive support and patient protection.

1. **Adaptive Support:** Adaptive support is the use of mechanisms or devices intended to permit a patient to achieve maximum normative bodily functioning (such as the use of orthopedic appliances, braces, splints to prevent contracture or devices intended to give postural support).
2. **Patient Protection:** In the context of the policy, “patient protection” means the use of mechanisms intended to compensate for a specific physical deficit or prevent safety incidents not related to cognitive dysfunction (such as the use of bedrail with safety net to keep the patient from falling out of bed during sleep.). (NOTE: The use of side rails alone is not considered restraint. This is a protective measure taken to keep all hospital patients from falling out of bed).

Steps to follow:

1. A physician’s order is required. PRN orders may be used.
2. In addition to usual nursing evaluation and care, the patient’s needs, including hygiene, elimination and nutrition, shall be assessed at least two hours.
3. Supports shall be released at least every two hours.

Routine Treatment Immobilization

Routine treatment immobilization means the use of mechanisms employed during medical, diagnostic or surgical procedures that are considered a regular part of such procedures (such as body restraint during general anesthesia, board immobilization of the site of intravenous therapy, immobilization during magnetic resonance imaging, etc.). The patient’s consent for the procedure includes or implement consent for necessary positioning and support. No separate order is required for such immobilization. Documentation of the immobilization is part of the documentation of the procedure itself.

General Restraint Guidelines

1. Restraints shall not be ordered on a PRN basis.

Restraints shall be only employed on the written order of a physician after personal evaluation of the patient’s physical and mental status. When the physician is not immediately available to assist the patient and make a determination regarding his/her need to be restrained can be made by a registered nurse (RN), after careful assessment of the patient. All registered nurses shall be authorized to initiate or terminate the use of restraints as permitted by individual facility policy.

2. Evaluation of Patient

All patients using restraints shall be evaluated for ongoing need of restraints and continued use shall be closely monitored, with the maximum time between observations being two hours.

3. Responsibilities of the Physician

The physician shall assess the patient to ascertain the restraint is justified. After consideration of the alternatives to restraint, an order for restraints must be written on the order sheet and should include:

a) type of restraint; b) the starting and ending times; c) indications for use; and d) level/frequency of evaluation. Verbal orders must be signed within 24 hours of implication.

4. Responsibilities of Nursing

Documentation in the medical record shall include:

- Time and type of restraint applied, noting skin condition and color
- Reason for application of restraints

- Time restraint are released/removed
- Needs of the patient are addressed: ADLs hygiene, fluids, and elimination
- Prior alternatives considered and lack of effectiveness
- Functional assessment

5. Monitoring of Patients in Restraints

All patients in restraints of any kind shall be closely monitored, with the maximum time between observations being two hours. Monitoring shall include condition of skin, observations that support adequate circulation, and observation for bruises, abrasions, and lacerations.

6. Application of Restraints

Restraints must be carefully selected to be of appropriate size for the patient. Restraints are to be secured to the bed frame, if the patient is in bed; never to the side rails. Use of restraints will be discontinued as soon as feasible.

When using wrist and ankle restraints, a finger's width of space must be maintained between the skin of the wrist/ankle and the restraining device.

Vest Restraints are to be applied with the crossing ties in the back, as per manufacturer's directions. The patient must be able to maximally expand their chest wall without hindrance.

Soft leather restraints shall be used only for severely combative individuals.

Mittens are placed on the hand with the palm on the smooth side of the mitt. Mittens shall be removed every two hours to prevent contracture and the circulation assessed.

End of Life Care

As with all patient care, end of life care must emphasize comfort, relief of pain and distress, with provision of physical and emotional support. The patient and family as desired must be included in making decisions based on their personal beliefs and values. Many people do not consider their personal definitions regarding the meaning and purpose of life until crisis, illness, and/or suffering force the awareness of life as a finite experience. Staff will act with awareness of the psychological and spiritual aspects of support and care, participating in an interdisciplinary team that "affirms life and regards dying as a normal process," allowing the patient to die with dignity, while supporting the family during the final illness and their bereavement.

Emergency Codes

In all cases, you should know what your department-specific responsibilities are. Each hospital has a disaster plan designed to direct how to carry out patient care during an internal and external disaster. Always be prepared to respond to the following situations: Actual colors associated with specific emergency situations may vary from one facility to another.

- Code Red: Fire
- Code Blue: Life Threatening situation
- Code White: Life threatening situation for pediatrics
- Code Pink: Infant abduction
- Code Purple: Child Abduction
- Code Orange: Hazardous Materials Spill
- Code Gray: Potential or real violence occurring in the facility

- Code Yellow: Bomb threat
- Code Silver: Person with weapon or hostage situation

What is my role in a disaster?

If you are on duty when a disaster strikes, you have certain duties to perform:

- Contact your Supervisor to find out where to report, or if you should continue your work assignment. Use pay phones if personal calls are necessary.
- Wear your photo identification badge at all times. Your photo ID will get you through Police roadblocks

Communication

The backup communication system includes: use of pay phones, use of FAX machines, the distribution of 2-way radios to all patient care areas; and the use of runners in a disaster.

Supplies and Equipment

Backup supplies and equipment are available for disasters.

Age Specific Education

As people age, they continue to experience physical and emotional changes. These changes are the result of the many experiences and influences, including the genes we inherit and the lifestyles we choose. This review will outline the common changes that occur with age. It will provide some tips for helping you to remain sensitive to our patients.

Early Older Adulthood (60-75 years)

The average American lives to be 77.2 years old. Most adults will live well into early older adulthood. People in early older adulthood usually have at least one chronic disease. High blood pressure, arthritis, heart disease and cancer are the most common. Most people in this age group will need eyeglasses to read. Many will suffer from the loss of hearing associated with old age. Most women have gone through menopause. Many in this group require daily medications.

People in this age group are beginning to lose friends and loved ones to the inevitable process of death and dying. Hospitalization may cause fear as patients confront their mortality. Other concerns relate to limited income, since many have retired. Fear of permanent disability may be a worry for hospitalized patients in early older adulthood. Arthritis is common in this age group. Older adults often experience both chronic and acute pain. Consistent use of the pain scale will help older adults evaluate their pain.

You can help to create an environment that is friendly to aging patients. Adjust lighting to help patients better navigate the hospital environment. Provide extra time for learning to help older adults retain the information presented. Use verbal as well as written instruction to help them learn. Make sure the telephone is within reach, the call light is close by and that the room is clutter-free to promote safety and independence.

Middle Older Adulthood (75-85 years)

The average 75-year-old has three chronic conditions and takes about 5 medications a day. Many in this group feel their body is "wearing out." Almost all need glasses to see. Most have reduced hearing. Hospitalization can be frightening in particular ways for this group. Many have been struggling to live independently and most

do not want to be placed in a nursing home. As a result of these fears, patients may make health decisions that are not in their best interest, like ignoring signs of disease, because they are afraid of the consequences.

People in this group are vulnerable to depression which may not be obvious to you. Assessment should include an evaluation of coping skills. Providing spiritual and social services can be especially helpful for this age group, since it can take time to get someone to open up about these issues.

Many patients in this group, like those in the previous group, live with arthritis pain. They may not talk about this pain unless you specifically ask about joint or muscle aches. Good pain management will help them participate in physical activities like walking and physical therapy.

Late Older Adulthood (85 plus years)

With age the number and severity of disabilities increases. Chronic diseases progressively get more severe and many patients are diagnosed with new illnesses. Most in this group are frail and increasingly dependent on other people to assist them with their daily tasks. Older adults fear changes to their routine, so a hospitalization can be particularly stressful.

Care for adults at this stage in life should focus on improving or maintaining function. Allow the patient to express needs and then tailor the care environment to meet those needs. Maintaining a user-friendly environment will promote independence.

Some older adults may not report pain due to fear of losing independence. Others have been living with arthritis and other pain so long that they no longer express their discomfort verbally. Look for nonverbal signs of pain including confusion, inability to ambulate, grimacing, and decreased range of motion. Adults in this age group have decreased cough ability and decreased swallowing skills. Aspiration precautions should be used with all frail older adults. In this age group, skin becomes thin. Patients become at risk for skin tears and pressure ulcers.

People of any age can become confused while hospitalized, but the likelihood is greater for older patients. Memory loss is not necessarily a part of the aging process. So if you speak with someone who seems to be losing memory, that patient should probably be evaluated for underlying illness. In many cases, we can find a cause and a solution. Confusion that is normal at admission may develop into delirium. This condition may indicate an underlying illness, such as infection, that needs to be treated. Frequent reminders about time, date, season and weather may help older adults regain a sense of security and confidence.

Patients who have lived this long have experienced many losses. Life review is common in this group. Many will enjoy telling you about “how it used to be.” Reviewing the past can help people achieve closure. Pastoral care and social work can provide assistance to patients beginning this profound and affecting final journey.

Emergency Treatment of Patients (EMTALA)

Federal law requires that a facility take care of any patients who need emergency care, regardless of their ability to pay for care. Unless the patient is pregnant and in labor, a facility can transfer the patient to a more appropriate hospital once the patient has been stabilized and once the facility has verified that the next facility has room.

Access Healthcare LLC provides special education with regards to this legislation. You should be aware that if someone asks you about getting emergency treatment for any condition, you should refer that person to the Emergency Department or call the House Supervisor. It is against the law to send a patient away who seeks treatment for an emergency condition.

If you will be working in ER, please make sure you receive and complete Access Healthcare LLC's education module on EMTALA.

The HIPAA Privacy Rule

A patient's right of privacy and confidentiality is protected by law. No one, including spouses, friends, or attorneys, is permitted to review the patient's medical record without prior written authorization, except as required by law (court order or subpoena) or other regulation.

- Only information that is pertinent to a patient's treatment may be disclosed to other practitioners. Only authorized hospital personnel have access to medical records. All requests for medical information must be referred to the Health Information Management department.
- All employees are required to sign a confidentiality statement upon employment.
- To decrease the risk of uninvolved persons overhearing or seeing confidential patient information:
- Confine discussion of patient care information to the patient care areas
- Keep computer ID/passwords confidential. Unauthorized use of ID/passwords may be subject to disciplinary action.
- Exit computer programs and log off before leaving the work station.

What is HIPAA?

The HIPAA Privacy Rule is a Federal Law that went into effect on April 14, 2003. The law protects the confidentiality of our patients' protected health information, or PHI. Protection of patient privacy and confidentiality is also required by the Center for Medicaid Services (Access Healthcare LLC) and the Joint Commission.

Healthcare has a tradition of privacy. People have kept patient information private as far back as the fourth century BC with the Hippocratic Oath. However, with the advanced communications technologies in use today, safeguarding the privacy of patient information is more of a challenge. The HIPAA Privacy Rule reflects these new concerns.

The HIPAA law is complex. Protecting patients' healthcare information involves two considerations: Privacy and Security. There are differences between the two that you should know.

"Privacy" is concerned with the disclosure of information about a patient to the patient directly, or to those to whom we reasonably believe the information can be disclosed if it is consistent with good health care professional practices. (See HIPAA Privacy.)

"Security" is concerned with the processes, procedures, and technologies that we use to make sure that the people viewing or changing the information are really the ones who are authorized to do so. (See HIPAA Security.)

What information is protected?

All patients (including celebrities and our own employees) have the right to privacy, and this extends to their personal health information, referred to in the HIPAA Privacy Rule as "Protected Health Information," or PHI.

What types of information is protected?

- Paper records
- Computerized information
- Oral communication

What are examples of PHI?

- Face sheets
- Results of exam/evaluation
- Test results
- Treatment and appointment information
- Patient bills
- Photographs
- Paper records
- Computerized patient records and information

Releasing Patient Health Information (PHI)

What information can be released only with the Patient's approval?

As a general rule, Medical Records can only be released to outside parties with the patient's approval, or if there is a law requiring release. (See following section, below.) Again, as a general rule, this information can be released to outside parties only by the Health Information Management Department (Medical Records), or in some cases, the Records Custodian of each department.

Who are the Records Custodians?

Each department or unit that maintains PHI has a "records custodian" to approve access to PHI, for purposes other than routine treatment, payment or operations purposes. Records Custodians may include department leaders and supervisors, unit secretaries, or other persons designated by department leaders

What are the Authorization Requirements?

A written authorization, signed by the patient or legal representative, must be obtained for any release of information except when the release is required by law, or when the information is used for the routine purpose of treatment, payment, or operations. For example, we are permitted to share our patients' PHI with other providers such as physicians to treat the patient, or we may submit PHI to insurance companies to obtain payment, all without patient authorization.

What about releasing Patient's Protected Health Information (PHI) verbally in discussions with friends and family?

When the patient is present and has the capacity to make his or her decisions, we may disclose PHI to friends and families, if one of the following conditions is met:

- We obtain the oral agreement of the patient or legal representative;
- We provide the patient with an opportunity to object to the disclosure, and the patient does not object;
- We infer from the circumstances that the patient does not object to the disclosure. For example, when a friend has brought the patient to the emergency room for treatment.

When the patient is not present, or when the patient is incapacitated due to an emergency, it's okay to make the disclosure if our decision is consistent with good health care professional practices. For example, when a patient is brought to the emergency room, we may inform relatives and others involved in the patient's care that the patient has suffered a heart attack and we may provide updates on the patient's progress and prognosis when the patient is unable to make decisions about such disclosures.

Whatever information we disclose to the patient's friends or families should be directly relevant to that person's involvement. For example, a neighbor picking up a patient can be told that the patient is unsteady on his feet; however, the neighbor should not be told that a tumor was removed.

How is Protected Health Information handled for Minors?

If a patient is a minor (under 18 years of age), the patient's parents or guardian may receive or direct the use and disclosure of PHI on behalf of the patient, except for "Emancipated Minors."

Emancipated Minors are children who have been released from the control of parents or guardians, and may control their own PHI, in the same manner as an adult:

- Anyone who is not yet 18 years old but is legally married or who is a parent.
- Anyone who is not yet 18 years old, but has been legally married and is now divorced, or a widow or widower.
- Anyone who is not yet 18 years old but is maintaining his or her own residence and is self-supporting. A reasonable effort to contact parents must be made.
- Anyone who is not yet 18 years old, and is pregnant.

Minors Who Are Not Emancipated: Any minor (under 18 years of age) may without parents' consent, approval, or notification have the right, in the same manner as an adult, to protect their health information for the voluntary treatment of:

- Alcohol or drug abuse
- Testing and treatment for sexually transmitted disease

Body Mechanics

With the use of proper body mechanics and ergonomics (the undersigning of the work place to fit the worker), most injuries are preventable. The following prevention points, when adhered to, will promote safety.

Lifting

- Assess the situation and plan how to accomplish it before beginning.
- Use the muscles of the legs, hips and arms – the strongest in the body. Keep a neutral spine.
- Bend knees and hips avoid bending at the waist, and lift with your legs, not your back
- Keep feet at shoulder width to provide a broad base of support.
- Make sure the object is close to you, do not over reach, and carry the load close to you.
- Avoid lifting higher than your waist.
- Push and don't pull.
- Ask for help.

Sitting

- Use chairs that provide support to the back, particularly the lower back.
- Both feet should be able to rest flat on the floor.
- Avoid slouching, walk around and stretch occasionally, or change position often to avoid strain.
- Avoid twisting and over-reaching
- Position yourself directly in front of your work and make sure your work is at eye-level to avoid neck strain.

Standing

- Stand close to your work area with your back erect, chin in, pelvis tucked under and knees slightly flexed.
- Maintain a broad base with your feet and ensure even weight bearing.
- Avoid prolonged positions and slouching – stretch occasionally.

Back Care and Points for Prevention

- Use good posture at all times and proper body mechanics.
- Change position frequently.
- Exercise regularly and eat a well-balanced diet to control your weight.
- Ensure enough rest at night.
- Practice stress reduction techniques, such as yoga and relaxation.
- Ask for help in lifting or moving heavy objects.
- Keep work area safe – clean up spills, wet floor signs; ensure no loose equipment, boxes on flooring, no loose power cables, close drawers. Notify appropriate personnel immediately, such as maintenance.
- Wear shoes with non-skid soles.
- Walk and don't run.
- Report any accidents of patients or visitors to staff supervisor immediately.
- Monitor safety of patients closely.
- Ensure breaks are applied to wheelchair or bed when moving patients.
- Adjust height of bed or table to waist / mid-to-upper thigh level when moving patient.
- Maintain ergonomics at all times.

Understanding Cultural Diversity

Ineffective culturally diverse relations can lead to prejudice, discrimination and racism.

All three are due to a combination of factors.

- Lack of understanding of culturally diverse groups other than one's own.
- Stereotyping of members of culturally diverse groups without consideration of individuals within the group.
- Judgment of culturally diverse groups according to standards /values of one's own group.
- Assigning of negative attributes to the members of other culturally diverse groups.
- View of the quality and experience of other groups as inferior to those of one's own group.

Ethnocentrism

Because culture influences people so strongly including the way they feel, think, act, and judge the world is not typical for people to subconsciously restrict their view of the world to the point of inability to accept other cultures. This is called ethnocentrism.

Ethnocentrism can prevent one from accepting others and can lead to clash of values, shaky interpersonal relationships and poor communication.

Approaches to Minimize Conflict in a Cultural Setting

- Deliver patient care that emphasizes the interrelationships among persons, cultures, health and medicine.
- Facilitate the medical employees/client's relationship through the development of special resources such as translators and multicultural workforce.
- Establish norms allowing family involvement in the healing process.
- Identify and increase knowledge about non-traditional community resources such as local herbalist or specialty stores.
- Explain community health practices to clients and assess their level of acceptance.
- Include cultural diversity concept in the education of medical personnel and the orientation of hospital employees.

Cross Cultural Communications for Healthcare Workers

In the business of healthcare, 90% of activities involve communication. Achieving effective communication is a challenge to managers even when the workforce is culturally homogenous. Communication is the exchange of meaning. Communication includes any behavior that another human being perceives and interprets. The meaning interpreted by the receiver may be different from the information being conveyed by the communicator. Translating meanings and behaviors, that is into meaning based on a person's cultural background and is not the same for each person. The greater the differences in backgrounds between the sender and the receiver the greater the difference in meaning attached to particular words and behaviors. Cross-cultural communication occurs when a person from one culture sends a message to a person from another culture.

There are ways to increase the chances to accurately understanding people who speak a different language.

Verbal Behavior

- Speak clearly and slowly.
- Repeat each important idea.
- Use simple sentences
- Use active verbs.

Non-Verbal Behavior

- Visual restatements (use pictures, graphs, etc.)
- Gestures (use facial and hand gestures).
- Demonstration: Act out the themes
- Pause, more frequently

Attribution

- SILENCE: when there is silence, wait. Do not jump to fill in the silence. The other person is probably thinking.
- INTELLIGENCE: Do not equate poor grammar and mispronunciation with lack of intelligence. It is a sign of second language use.
- DIFFERENCES: If unsure, assume differences rather than similarities.

Comprehension

- UNDERSTANDING: Do not assume that they understand. Assume that they do not
- CHECK: Have the people repeat their understanding
- BREAKS: Take more breaks, second language comprehension is exhausting.

Motivation

- ENCOURAGEMENT: Verbally and non-verbally encourage and reinforce.
- REINFORCEMENT: Do not embarrass speakers.

Strategies to Communicate Effectively

Strategies to overcome our natural parochial tendencies do exist. With care, the default option can be avoided. We can learn to understand and control our own cultural conditioning. In facing foreign cultures, we can emphasize description rather than interpretation or evaluation and thus minimize self-fulfilling stereotypes and premature closure. We can recognize and use our stereotypes as guides rather than rejecting them as simplification. Effective cross-cultural communication pre-supposes the interplay or alternative realities. It rejects the actual or potential domination of one reality over another.

Miscommunication is a frequent problem in healthcare organizations. The most obvious case is when the patient and the hospital personnel do not speak the same language. Also, patients and staff's may operate on different beliefs, values, clocks, causing confusion and resentment for all parties.

Time

When is the right time? People of different cultural background may give different answers to this question. Some people count time by a watch. They see time as money saved, spent, squandered. Others see only the rhythm or cycles of growth of people or things.

- Make allowances for the fact that differences about time can be legitimate cultural differences. Do not jump to conclusions that others are irresponsible. Do not assume that you are stupid or insensitive because you don't manage time the way they do.
- If you cannot adapt to the other person's sense of time, negotiate something that will work for both of you.
- Remember that culture runs deep. It is one thing to make an agreement and another to create a habit. Changes here will take patience, persistence with others and yourself.

Space

How large space depends on your background and culture. Getting too close may make another think you are intrusive, aggressive, or pushy. Staying too far may give them the impression that you are cold, impersonal, afraid or disinterested.

- Learn to be flexible
- Know that others may feel differently about space. Stay put and let the other people adjust to where they feel comfortable with you.

Touching

When people touch physically it means different things.

- I have power
- Hello/Goodbye
- I want you to understand
- I like you
- I want to congratulate

Communicate

When you communicate, be aware of:

- Tone of voice
- Body posture
- Breathing rate
- Distance
- Timing and pacing of speech patterns

Discharge Planning

This Fact Sheet discusses a hospital's responsibilities to assist with nursing home placement and right to challenge hospital discharge decisions. All of the information applies only to persons on Medicare, although there are similar rights under other health insurance programs.

WHAT IS HOSPITAL DISCHARGE PLANNING?

Hospital discharge planning is a service to assist patients in arranging the care needed following a hospital stay. Discharge planners help arrange services including home care, nursing home care, rehabilitative care, out-patient medical treatment and other help. Hospital discharge planning is usually handled by the hospital's Social Services Department.

If a patient needs help arranging nursing home care, ask the doctor to contact the Social Work Department. If a hospital discharge planner does not contact the patient within a short time, contact the Social Work Department directly for assistance.

Discharge planning services in Medicare certified hospitals must meet the following standards:

- Hospitals must identify and evaluate persons who may need discharge planning assistance.
- The evaluation must be done on a timely basis and must determine the need for services after the hospital stay and the availability of these services.
- The results of the evaluation must be discussed with the patient or patient's representative.
- If requested by the patient's physician, the hospital must help develop and implement a discharge plan for the patient.
- Discharge planning must be provided or supervised by a social worker, registered nurse or other appropriately qualified person.

If a patient needs nursing home care, the hospital's discharge planner should provide information about local nursing homes, and should help identify homes that have vacancies.

The hospital cannot force a patient to go to any particular nursing home or discharge a patient to a nursing home without the patient's legal representative's consent. If the hospital believes that a patient no longer needs hospital care and is refusing appropriate discharge, it must issue notice to the patient of its determination. This notice can cause the patient to become responsible for payment of continuing hospitalization, subject to the patient's right to appeal. The notice and appeals rights are discussed below.

Patient Rights and Responsibilities

Access Healthcare LLC employees must uphold their role as advocates and recognize the consumer/patients' right to dignity, individual value systems, access to medical care and confidentiality. In being that advocate, nurses should be able to speak up to protect the health and safety of patients in their care without fear of retaliation.

The Patient's Bill of Rights

The Patients' Bill of Rights was conceived in 1998 by the U.S. Advisory Commission on Consumer Protection and Quality in the Health Care Industry. Its purpose is to promote healthcare quality and support the public as they navigate through the healthcare system. The seven areas of rights and responsibilities are:

1. **Information Disclosure:** Patients have the right to accurate and easily-understood information about their health plan, health care professionals, and health care facilities. If a patient speaks another language, has a physical or mental disability, or just don't understand something, assistance must be provided so that the patient can make informed health care decisions.
2. **Choice of Providers and Plans:** Patients have the right to a choice of health care providers who can provide high-quality health care when needed.
3. **Access to Emergency Services:** Patients who have severe pain, injury, or sudden illness that convinces them they are in serious danger, have the right to be screened and stabilized using

emergency services. These services should be provided whenever and wherever needed, without the need to wait for authorization and without any financial penalty.

4. **Participation in Treatment Decisions:** Patients have the right to know their treatment options and to take part in decisions about their care. Parents, guardians, family members, or others that a patient selects can represent them if they cannot make their own decisions.
5. **Respect and Non-discrimination:** Patients have a right to a considerate, respectful care from doctors, health plan representatives, and other health care providers without discrimination.
6. **Confidentiality of Health Information:** Patients have the right to talk privately with health care providers and to have their health care information protected. Patients also have the right to read and copy their own medical record. Patients have the right to ask that a doctor change their record if it is not accurate, relevant, or complete.
7. **Complaints and Appeals:** Patients have the right to a fair, fast, and objective review of any complaint they have against their health plan, doctors, hospitals or other health care personnel. This includes complaints about waiting times, operating hours, the actions of health care personnel, and the adequacy of health care facilities.

The Six Ethical Principles of the Patient's Bill of Rights

The Patients' Bill of Rights supports six basic principles of ethics:

1. **Autonomy:** Independence, self-direction, and freedom of choice. When patients choose a healthcare provider, a healthcare facility, or make decisions about treatment, they are exercising autonomy. The Patients' Bill of Rights supports autonomy by supporting the patients' right to the choice of plan and healthcare providers that ensures access to appropriate health care. The healthcare professional's duty is to support patients' autonomy by ensuring that patients understand their treatment options.
2. **Beneficence:** Acts of charity or kindness. As a principle of ethical care it means that treatment provided is for the good of the patient. The principle of beneficence means that patients should receive considerate and respectful care and have the opportunity to let healthcare workers know when they are not receiving the quality or value of care necessary. Healthcare professionals should assist patients to voice their concerns through a complaint procedure. The principle of beneficence indicates that healthcare providers must provide competent care so the patient is safe and is treated with respect.
3. **Confidentiality:** Private or secret. As a principle of ethical care it means that information about patients and their care is protected and shared only with those who have the right or the need to know. The patient also has a right to know how information about him will be used by others, and who will receive that information. The principle respects that patients have the right to know about their treatment and to review their own records.
4. **Fidelity:** Faithfulness, as in a pledge or duty. As a principle of ethics it means healthcare workers have a duty to be patients' advocates and to protect patients' rights. Fidelity is demonstrated by upholding the Patients' Bill of rights.
5. **Veracity:** Truthfulness. As a principle of ethics it means supporting both information disclosure and the right to make treatment decisions as described in the Patients' Bill of Rights. Correct and truthful information helps patients to make informed choices.
6. **Justice:** Impartiality or fairness. As a principle of ethics it means that all patients and their families are treated the same, without favoritism or discrimination based on race, color, gender, economic status, social status, or any other personal trait. All people have the right to fair and unbiased treatment.

Informed Consent

Informed consent is a process in which consent is obtained for a treatment or healthcare service when the patient knows about and understands the treatment, including its implications, benefits and risks, and the alternatives. The patient must know they have the right to accept or refuse the treatment or service.

Before undergoing treatment, patients must give consent. Some patients may not be capable of giving consent because of age, mental competence, or other possible factors. As such, a designated guardian (such as parent, relative, friend or caregiver) represents that patient. Healthcare workers must ensure that the consent is "informed" and signed by either the patient or the guardian.

Advance Directives

Advance Directives: Documents written in advance of serious illness or injury which state choices for medical treatment or names someone to make treatment decisions on behalf of that individual should he/she become unable to make or communicate such decisions. Advance directives promote an individual's control over his/her own healthcare decisions. All patients entering the healthcare system must be given the opportunity to complete an advance directive document which will define the patients' preferences in end-of-life decisions or at any time that they are unable to convey their own wishes regarding healthcare. Advance directives are voluntary and are supported by the Patient's Bill of Rights dependent upon state law, there may be two or more types of advance directives: the living will and the durable state of attorney/healthcare surrogate, as examples.

Living Will: A "Living Will" is a document that gives direction about the medical care, and limitations of medical care, desired by the patient when he or she is either in a permanent vegetative state with no hope of recovery or has an imminently terminal condition and is unable to make his or her needs known.

Healthcare Surrogates/Durable State of Attorney: A document which names someone to make medical care decisions for another, should that person become unable to make them for themselves. This document may include instructions about treatments and individuals that he/she may or may not want, should he/she become seriously ill or injured.

Guidelines

Written information regarding advance directives may be available to anyone and most often is administered through the admission department, Social Work department, Pastoral Care department, Medical Records department. It is the responsibility of the registered nurse to assure this documentation is available in the medical record.

Any competent patient may sign a living will or durable power of attorney for healthcare. Witnesses to a living will may not be:

- Related to the patient by blood or marriage
- The patient's physician or employee of the physician
- An employee of the hospital if the employee is providing direct care to the patient or is involved in the hospital's financial affairs
- Be a patient of the hospital
- Have a claim against the hospital

Witnesses to a durable power of attorney for healthcare may not be:

- The person appointed as agent in the document
- A provider of health or residential care
- The operator of a community care facility
- An employee or operator of a healthcare facility

Each adult (or their representative), who registers as an inpatient, should be asked if they have living will and/or durable power of attorney for healthcare. If the patient has a living will and/or durable power of attorney for healthcare, it shall be noted on the appropriate form and be made part of the medical record.

If a patient decides to revoke a written advance directive, the appropriate department should be notified by the patient's physician or staff nurse. Said department shall explicitly mark the advance directive as being revoked and should clearly document the date of the revocation. A patient may revoke an advance directive at any time, regardless of the patient's mental state of competency.

Utility Management

Utilities are basic building services. They include:

- **Electricity:** Emergency Electrical Service is supplied from a hospital's emergency powerhouse generators. When normal service fails, the generators support essential building systems, fire safety systems and pre-designated medical equipment. Most hospitals have an Uninterruptible Power Supply (UPS) System. It permits power sensitive equipment to function normally during transitions in power supply.
- **Water:** Water is needed for drinking, cooking, bathing, cleaning, flushing the toilet, steam production, heating and cooling systems and cooling some clinical equipment.
- **Sewer:** The Sewer Service allows for waste disposal from the facility.
- **Natural gas:** Hospitals use natural gas as the primary fuel for the boilers to make steam and hot water. Natural gas also supports food service and lab processes. The hospital may have a backup diesel fuel supply to fire the boilers if the natural gas supply fails.
- **Piped Medical gases:** Medical gases include oxygen, nitrogen, nitrous oxide and carbon dioxide. They are supplied from the hospital medical gas storage systems. Medical Gases are distributed to specific outlets throughout the hospital. Medical Air is also distributed via special outlets throughout the hospital.
- **Heating, Ventilation and Air Conditioning Systems (HVAC):** The functions of HVAC include heating to support room comfort, ventilation to support air quality and infection control and cooling to support human comfort and in some locations, equipment function.
- **Fire Protection System:** Fire protection systems are operated and maintained by the Hospital's Physical Plant and Maintenance Departments. Smoke detection systems are designated to operate at all times. Fire sprinklers turn on when a defined temperature is reached. Fire alarms are triggered by either the smoke detection or fire sprinkler systems. They produce audible alarms and visual strobe signals.
- **Pneumatic tube systems**
- **Telephones**
- **Computers**

Code White: Utility Failure

The purpose of a Code White is to alert employees to a hospital-wide failure of one or more of the above utility systems. All departments and units have Utility Failure Plans that identify what action you need to take in the event of one or more utility failures. Make sure you know the location of the Utility Failure Plan and contact the Hospital Safety Management, Department Manager or Safety Coordinator if you have any questions.

Patient Education

Patient/family teaching has been recognized as an essential activity fundamental to every nursing, medical and allied specialty. The growing awareness that individuals can be more responsible and participate in their own

health is prompting the providers, policy makers, regulatory agencies and payers to strengthen patient and family education in every phase of patient care.

Patient and family education is interactive and appropriate to the patient's age and length of stay. It includes, but is not limited to:

- Helping the patient adopt or function more independently
- Information about access to additional resources
- When and how to obtain further treatment
- Safe and effective use of medication and medical equipment
- Potential drug – food interaction
- Nutrition information/counseling on modified diets as appropriate
- Rehabilitative techniques, including activity and assistive devices
- Maintenance of good standards for personal hygiene and grooming, including brushing teeth, bathing, caring for hair and nails, and using the toilet
- Information on patient/family responsibilities for the patient's health care need (e.g. self-care, signs and symptoms to report, etc.) including the knowledge and skills to carry out these responsibilities.

How is Patient/Family Education Implemented?

- Patient teaching is based on assessed learning need
- Assessment includes consideration of cultural and religious practices
- Barriers to learning are identified
- Age-appropriate teaching is matched with developmental stage
- Education is provided by the appropriate health care professionals (Pharm D, MD, RN, LCSW, RD, RCP, RT, OT, SLP and other disciplines involved with the patient's care)
- Educational materials (video and print) utilized are medically current, instructionally correct, cost effective and developmentally coordinated through the Patient Education Committee.

The Nurse Role in Patient Education

- Asses/re-assess patient including cultural and religious beliefs
- Identifies learning barriers
- Identifies learning need
- Provides in room orientation
- Plans for patient teaching in collaboration with patient/family and involves interdisciplinary team
- Demonstrates use of equipment, rehabilitative techniques, assistive devices
- Explains treatment plan, verifies patient's knowledge about procedures
- Explains medication in collaboration with clinical pharmacist
- Teaches/demonstrates self-care, personal hygiene
- Provides discharge instructions such as:
- Follow up appointment with physician
- Danger signals and symptoms to report
- Medications, food-drug interactions
- Provides patient with education materials
- Self-care
- Activity, assistive devices
- Access to resources
- Pain Management
- Return to work and driving

Medical Equipment Management

The Safe Medical Devices Act, in an effort to monitor incidents involving equipment, requires all healthcare personnel to follow up on problems or incidents involving equipment promptly. If a piece of equipment does not function properly:

- Take it out of service and generate a work order generated for its repair.
- If the item has been involved in an incident causing serious illness or injury to anyone in our facility, the equipment should be isolated and saved for Risk Management to examine.
- Fill out an incident report.
- Report the incident immediately to Risk Management. Risk Management staff will evaluate the incident for reporting to the FDA and manufacturer.

In order to provide quality patient care with the least amount of risk possible, all Facilities have developed an Equipment Management Program. All equipment (clinical or non-clinical) must be inspected by the Facilities Management Department prior to its initial use. "Equipment" is defined as all equipment, fixed or portable, that is used for the diagnosis, treatment, monitoring or care of patients, which could pose a physical and/or clinical risk to a patient and/or operator during use.

- All employees who operate, monitor or maintain clinical equipment must be trained to do so safely.
- Employees are required to be familiar with the clinical equipment inspection stickers affixed to each piece of equipment.
- All equipment should have the facility's inspection sticker on it that indicates the equipment was inspected; the equipment passed the electrical safety test and how frequently the equipment is tested.

Clinical Equipment

In order to provide quality patient care with the least amount of risk possible, the Facilities Management Department has developed a Clinical Equipment Management Program.

Clinical equipment is defined as all equipment, fixed or portable, that is used for the diagnosis, treatment, monitoring or care of patients, and which could pose a physical and/or clinical risk to a patient and/or operator during use.

All equipment (clinical or non-clinical) must be inspected by the Facilities Management Department prior to its initial use.

Many different types of clinical equipment are used to help treat patients in your facility. Some of these are:

- Ventilators
- IV (Intravenous) pumps
- Glucose-testing monitors
- Cardiac monitors
- Enteral pumps
- Radiant warmers
- Hypothermia blankets
- EKG (Electrocardiograph) machines
- Electric beds

Clinical equipment can be an important part of a patient's treatment, but there are things that can go wrong. There are three types of risk factors, or potential problems, that can arise in the use of clinical equipment:

1. Malfunction
2. Improper use
3. Damage to equipment

It is important that you do not use any equipment that you have not been trained to use. You need to know the following information about any equipment you use:

1. How to operate it
2. The purpose of the equipment and the intended results
3. Monitoring and observation activities - what to observe, frequency precautions, and adverse reactions
4. Contraindications - warning signs
5. Troubleshooting - including how to respond to alarms
6. Care and maintenance
7. Backup procedures and equipment

In addition to proper training, there are other things you can do to help ensure that equipment functions properly and safely:

1. Teach patients and their families about any equipment, including how it works, its purpose, safety precautions, signs of problems, what to do if problems arise, and when to notify staff.
2. At the first sign of a malfunction, take equipment out of use. Label it so that others do not use it, and follow the policy of your facility for repair.
3. If equipment has a battery backup, keep it plugged in whenever possible so that it stays fully charged.
4. Remove equipment from rooms when it is no longer needed to prevent it from being damaged and to make it available for others to use. Follow the policy of your facility to prepare the equipment for use with another patient, including disinfecting, cleaning, re-inspecting, and recalibrating where required.
5. If any equipment is dropped, take it out of service immediately. Even though it may seem intact, there might have been damage to some components that could pose a safety hazard.
6. Cellular phones have been found to interfere with some electrical equipment. Your facility may have a policy that bans cell phones in the facility or within certain areas.

Pain Management

Pain management is a complex, subjective and highly unpleasant sensory or emotional experience caused by a physical, neurological or emotional response to noxious stimuli. Pain can be acute or chronic in nature. No two people experiences or express their pain alike. The most reliable indication of the existence and intensity of pain is the patient's testimony, and its measurement is considered the 5th vital sign. Many factors can influence the severity of pain, including the personal meaning of pain, additional anxiety, tension, depression, fatigue, and sleeplessness. Chronic pain is the most frequent cause of reduced quality of life. Untreated acute pain in hospitalized patients can cause longer hospital stays, delayed healing and fear and anxiety.

When you are providing care, moving, lifting a patient or performing procedures, ask the patient if they are having pain. Do not assume a patient is not in pain just because he or she doesn't speak up. Often, careful moving or re-positioning may help.

Patient pain level will be assessed using ETRMC's Universal Pain Assessment 10-point scale. Pain management includes main assessment, planning, intervention, reassessment of patient responses to pain management measures, and education of patient and family regarding pain management. Patient assessment, reassessment and education must be documented on the medical record.

Pain control measures fall into two categories:

1. Pharmacological interventions
2. Non-pharmacological interventions

Pharmacological interventions are pain control methods that use medications. These include:

1. Opiates, such as morphine and codeine
2. Non-opiates, such as acetaminophen
3. Adjuvants, a variety of drug types that are usually used to supplement opiates or non-opiates.

Non-pharmacological interventions are alternative measures that do not use drugs. The methods that are selected will depend on the needs of the patient. Non-pharmacological pain management methods include:

1. Relaxation and distraction techniques
2. Physical interventions.

Relaxation and distraction techniques

These techniques work best if they are practiced before they are needed for pain relief. They include:

- Deep breathing (with focus on breathing techniques)
- Listening to music
- Guided imagery
- Biofeedback
- Hypnosis.

Physical Interventions

Physical interventions that can help in the treatment of pain include:

- Massage
- Exercise (especially for chronic pain)
- Application of heat or cold (not longer than 20 minutes; be careful of extremes of heat or cold that could damage tissue)
- Acupuncture
- Position change
- TENS unit (trans-electrical nerve stimulation therapy).

A TENS unit controls pain by stimulating the nerves at the pain location and helping to block pain signals.

When using drugs to control pain, the best strategy is to use the least strong drug which still gives adequate pain relief. If the intervention does not relieve the pain, it may require:

- An increase in dosage
- An increase in frequency
- An increase to the next level of drug.

Usually, pain control measures begin with non-opiates (non-narcotic) drugs. Non-opiates, such as acetaminophen (Tylenol) are generally available in both over-the-counter and prescription strengths. Non-opioids are usually taken orally or by suppository. The most common side effect of acetaminophen is hepatotoxicity (liver involvement). This is most common with an overdose.

Non-opiates also include NSAIDS (non-steroidal anti-inflammatories), such as Advil and Motrin. These may also be used in combination with opiates. The most common side effects of NSAIDS are:

- Gastric irritation
- Prolonged bleeding time.

The name, opiates, refers to drugs that are based on opium. They can be either natural or synthetic. Opiates are used for moderate to severe pain.

Pure Agonists

One class of opiates, known as "pure agonists", which refers to their specific mechanism for pain relief, includes:

- Morphine
- Hydromorphone (Dilaudid)
- Fentanyl
- Codeine.

Increased dosage of pure agonists provides increased analgesia (pain relief) and side effects. Side effects include:

- Euphoria
- Sedation
- Constipation
- Nausea
- Vomiting
- Itching
- Urinary retention
- Hypotension
- Respiratory distress.

Over time, patients may develop a tolerance for opiates, meaning they require higher dosages to achieve the same pain relief. However, the usual reason for increasing dose is because of disease progression. Patients who have received opiates for a long period of time may experience withdrawal when the drug is stopped. This means that patients should not be taken off the drug suddenly but should gradually decrease the drug level over several days.

There are two important things to remember about opiates and other pain drugs:

1. Drug-seeking behavior is NOT a sign of addiction.
2. Drug-seeking behavior IS a sign of inadequate pain relief.

Other opiates

Other types of opiates, nalbuphine (Nubain) and butorphanol (Stadol), provide less analgesia, but also fewer side effects. There is also a limit to their effectiveness. After a point, higher doses do not increase analgesia. These drugs are sometimes used to reverse analgesia and side-effects caused by pure agonists.

Administration of opiates

Opiates can be given orally. As pain level increase, they are administered in other ways which deliver a higher level of pain relief:

- Sublingually (under the tongue)
- Bucally (placed in the cheek area if patient unable to swallow)
- Dermal patch (for continuous release)
- Intravenous (IV) by continuous infusion or intermittent dosage

- Patient-controlled analgesia (PCA) using intravenous delivery
- Intramuscular or subcutaneous injection
- Suppository.

Adjuvants

Other drugs that may help in pain control are called adjuvants. These include:

- Corticosteroids
- Antidepressants
- Local anesthetics
- Anticonvulsants.

These drugs are used to:

1. Enhance the effectiveness of a primary analgesic
2. Limit the side effects of a primary analgesic (usually an opiate)
3. Treat concurrent symptoms that increase pain
4. Provide analgesia for certain types of pain that are not relieved by opiates.

Radiation Safety

Time, Distance and Shielding prevent unnecessary exposure to radiation. Spend only the needed time in the radiation area, keep your distance from the source of radiation and use proper shielding when radiation equipment is being used. To do this, routine testing and evaluation of equipment, procedures, personnel monitoring and continuing education are critical. Those involved with Radiation need to attend an annual refresher course on Radiation Safety. The classes are listed in the Memorial Academy catalog.

- Always observe radiation warning signs
- Enter areas employing radioactive sources only for authorized and necessary purposes.
- Do not attempt to clean up spills on floors and counter tops labeled “Caution: Radioactive Materials.” These may be radioactive and require special clean-up procedures.

Fall Prevention

Most facilities have developed a Fall Prevention Program to identify those patients who are at highest risk to fall, with the intent of reducing injuries.

A patient fall may also result in:

- Longer hospital stays
- Permanent injury
- Disability
- Death

There are things you can do to help prevent patient falls:

- Orient patients to their surroundings.
- Show them how to use the call light and explain how and when to get assistance
- Ensure good lighting in rooms and bathrooms
- Keep beds at a low height
- Make sure path to bathroom is clear

You can also learn to recognize patients who are at risk for falls. These include:

- Infants and young children
- Older adults
- Sedated patients.

Infants and young children

These patients are immature, and they often do not understand what they should or should not do. Their motor skills are still developing, so they can fall easily. They are also full of curiosity.

Older adults

The majority of falls occur in patients over 65 with the highest number in the 80-89 age group. These patients may be unsteady on their feet. They may also have problems with hearing and eyesight.

Sedated patients

Patients who are sedated may not be able to understand instructions. They often cannot recognize dangers and may become confused.

Patient education can also help prevent falls. Teach patients and their families about:

- The hospital environment
- Potential hazards
- Equipment being used.

In addition to patient falls, there are other types of injuries. These include injuries from misuse of equipment and burns from hot liquids. These injuries are less frequent than falls, but all have one thing in common:

Most injuries can be prevented!

There are several things you can do to help prevent injuries:

1. Identify and correct safety hazards.
2. Take care in using equipment.
3. Follow the standard of care when doing procedures and treatments.

Identify and correct safety hazards

- Slips, such as water on the floor, should be cleaned up.
- Trips, or obstacles, should be removed.
- Sharps, such as needles or glassware, should be properly disposed of.

Complaint Resolution (Staff and Customer)

A Customer Service Complaint is any complaint and/or concern from one of our valued customers regarding a situation or incident that results in dissatisfaction of that customer. The purpose of our complaint policy is to:

- To have a positive impact in improving customer service and satisfaction.
- To understand the causes that underlie a complaint and to focus on making changes to systems and processes to reduce the probability of a similar complaint in the future.

- To prevent potentially compensable events and to protect corporate financial resources potentially jeopardized by customer dissatisfaction.
- To analyze and trend data to identify opportunities for organizational performance improvement.

All Access Healthcare LLC patient care providers and internal office staff are entitled to full and equal accommodations, advantages, facilities, privileges and services provided by the company.

Access Healthcare LLC accepts complaints from persons who believe that they have experienced a violation of their rights. The following guidelines shall be followed in resolving complaints.

- Complaints must be filed within 30 days of the alleged act.
- The complaint is the written document that describes the occurrence and why the person filing the complaint believes the action or incident was in violation of his/her rights.
- An individual seeking to file a complaint needs to contact Access Healthcare LLC management. An intake interview or phone interview will be conducted with the complaining party.
- After a careful screening process, the complaint is investigated to determine if there is sufficient evidence to support the allegation. The complaint documentation must contain a claim which constitutes a violation of the complaining person's rights.
- A complaint may be settled at any time after it is filed. Opportunities will be given to all parties involved to ask questions, provide information, and suggest witnesses in order to resolve the complaint.
- As the investigation proceeds, individuals will be interviewed and pertinent records and documents will be reviewed.
- The person filing the complaint must cooperate fully by providing accurate information and by supplying documents to support the allegations.
- All information gathered in the course of an investigation is subject to disclosure unless otherwise protected by the individual's right to privacy (e.g. medical records).
- If the complaint is substantiated, a reconciliation conference to settle the complaint will be scheduled. Settlement terms may require:
 - Restoration of previously denied rights.
 - Compensation of any out-of-pocket losses incurred by person filing complaint
 - Correction of other harm(s) resulting from the violation(s).
 - Modification of practices that adversely affect persons protected under law
 - Other actions to eliminate the effects of violation of rights.

Our goal is to always provide you with a consistent level of service. If for any reason you are dissatisfied with our service or the service, we encourage you to contact the Access Healthcare LLC Management to discuss the issue. Access Healthcare LLC has processes in place to resolve complaints in an effective and efficient manner. If the resolution does not meet your expectation, we encourage you to call the Access Healthcare LLC corporate office at (800) 257-5837. A corporate representative will work with you to resolve your concern. Any individual that has a concern about the quality and safety of patient care delivered by Access Healthcare LLC health care professionals, which has not been addressed by Access Healthcare LLC management, is encouraged to contact the Joint Commission at www.jointcommission.org or by calling the Office of Quality Monitoring at (630) 792-5636. Access Healthcare LLC demonstrates this commitment by taking no retaliatory or disciplinary action against employees when they do report safety or quality of care concerns to the Joint Commission.

Human Resources: Employment Application Process

In keeping with our standard of excellence, Access Healthcare LLC's initial application process and ongoing quality assurance initiatives are designed with the primary goal to provide the highest quality of nursing professionals possible. Our objectives include:

- To recruit and employ those professionals who are dedicated to quality care with proven skill histories.
- To provide a thorough orientation for each nurse so that he/she may perform his/her work in a safe and effective manner.
- To provide consistent opportunities for staff education via our in-service training and staff development program.
- To monitor the quality of nursing performance through regular on-site evaluations
- To work closely with clients while modifying our service concepts to meet their needs.

Each applicant undergoes a stringent screening process to verify skills and commitment to nursing excellence.

Proof of Citizenship or Ability to Work as Required by Law

Access Healthcare LLC verifies eligibility to work in the United States. The U.S. Immigration and Naturalization Service require that employees show proof of citizenship/eligibility to work by completing an Employment Eligibility Verification Form (I-9). Failure to produce the necessary proof according to the applicable laws will result in the postponement of employment.

Background Checks

Access Healthcare LLC may perform criminal background checks on applicants, which may include a felony and misdemeanor search in the state the applicant resides and may also include states and counties of residence/employment for the previous 7 years when specified in the written agreement between Access Healthcare LLC and its clients. Criminal background checks can also be conducted post-employment based upon a reasonable suspicion of criminal activity.

In addition, Access Healthcare LLC verifies that applicants are not included in the Office of Inspector General's (OIG) or the Excluded Parties List System (EPLS) databases of excluded providers.

COVID-19 Credentialing Extension Policy

Due to the COVID-19 virus pandemic, the various authorities and regulatory bodies have taken actions in exercising regulatory flexibilities to help healthcare providers enter into assignments as rapidly as possible to treat patients during the spread of 2019 Novel Coronavirus Disease (COVID-19).

As a result, the following blanket waivers are in effect, with a retroactive effective date of March 1, 2020, through the end of the emergency declaration. The following will be waived for 60 days after the state of emergency is lifted in your area.

- BLS/CPR/ACLS/PALS/NRP/Fire Cards (including any other expiring specialty certification)
- Background Checks
- Health Screening
- Out of State Licenses - As pertaining to the location of practice during the state of emergency. Healthcare provider must obtain the license for the state in which they are working or no longer work past the date of the ending of the local state of emergency

If the local (state, county city) state of emergency is enforced longer than the national state of emergency Access Healthcare LLC will utilize the end date of the local state of emergency to enforce the 60-day credentialing deadline. If credentials were due during the time period of the state of emergency, the employee would have an additional 60 days to become compliant.

License/Certification/Education Verification

Applicants may be required to provide valid, original professional licenses to practice their profession in the state of the assignment, Basic Cardiac Life Support (BCLS) certification and any other professional

certifications required for the practice of their specialty when specified in the written agreement between Access Healthcare LLC and its clients. Access Healthcare LLC conducts primary source verification of professional licenses in all states where Access Healthcare LLC Inc. is employing the provider or offering placement for the provider, with the appropriate licensing bodies to verify issue date, expiration date, active status of license and to determine if a license has ever been suspended, revoked, restricted, reprimanded, sanctioned or disciplined. Any disciplinary action on a professional license can be terms for non-employment with Access Healthcare LLC and falsification of any documentation will render applicant completely ineligible for employment with Access Healthcare LLC

Positions that require a specific educational requirement and/or certification must have verification of such. Where education and licensure are required, but the license may not be obtained without meeting the education requirements, it is not necessary to confirm education, but only to verify the license (Specific example would be an RN where state licensure is required and completion of an approved nursing program or completion of a certain number of continuing education units. In this case, the individual may not obtain state licensure or renewal without completion of an approved program or continuing education units, therefore only license verification would be required. If the position requires state licensure as an RN and a Master's degree, then both the licensure and the education would need to be verified).

It is the employee's responsibility to maintain a current valid license. Failure to do so will result from removal from duties and progressive discipline. Employees are required to immediately notify Access Healthcare LLC if a license/certification is suspended or revoked prior to education.

Reference Checking

Access Healthcare LLC verifies at least one reference from previous employers or from clinical peers that may provide information related to the applicant's knowledge and applied job skill proficiency or confirm dates of employment.

Pre-Employment Skills and Competency Assessment

To ensure that work is performed safely and efficiently in the hospital setting, all applicants are required to complete a competency self-assessment for every unit and specialty to which they will be assigned. All current competency assessment tools are maintained in their personnel file.

Applicants must also complete a competency examination for every specialty to which they would like to be assigned and receive a passing score of at least 80%. Any applicant not receiving a passing score on their first time will be given one additional opportunity to re-take the competency exam and pass. Failure to achieve a passing score of at least 80% within the first two attempts is automatically ineligible for employment with Access Healthcare LLC in addition, all staff must complete a Pharmacology examination and receive a passing score of at least 80%. Any applicant not receiving a passing score on their first time will be given one additional opportunity to re-take the Pharmacology exam and pass. Failure to achieve a passing score of at least 80% within the first two attempts is automatically ineligible for employment with Access Healthcare LLC

Health Screening

Applicants may need to go through a screening process when specified in the written agreement between Access Healthcare LLC and its clients, to demonstrate that they are free from communicable disease and are free from any health impairment that is of potential risk to the patient, caregiver, other employees, or that may interfere with the performance of duties. All applicants may need to provide:

- Clearance for Work: are only required when specified in the written agreement between Access Healthcare LLC and its clients. If required, the applicant will submit a written clearance for work

conducted within the last twelve months prior to hire date. The Clearance for Work shall include whatever specifications are in the written agreement between Access Healthcare LLC and its clients, which may or may not include a medical history, physical examination, laboratory work as indicated, and a written report to indicate that the employee is physically and medically qualified to perform the duties to be assigned. In addition, annual physicals are required thereafter

- Tuberculosis Test: are only required when specified in the written agreement between Access Healthcare LLC and its clients. TB tests if required may need to be conducted within the last twelve months prior to hire date. The TB test may show a negative result. Applicants who test positive as a tuberculin reactor are required to submit documentation of a negative chest x-ray showing no abnormalities and/or provide proof of prophylactic antibiotic therapy. One clear chest x-ray is required for individuals following a positive skin test or documented history of positive skin test, repeat chest X rays thereafter are not required for those who present positive skin results, repeat chest x rays are only required when specified in the written agreement between Access Healthcare LLC and its clients. Applicants with positive TB results must also complete a TB questionnaire upon hire and annually thereafter when specified in the written agreement between Access Healthcare LLC and its clients.
- Vaccinations: are only required when specified in the written agreement between Access Healthcare LLC and its clients. If required the applicant will Submit proof of exposure to or immunization to Rubella, Rubeola, mumps, and Varicella zoster.
- Drug Test: are only required when specified in the written agreement between Access Healthcare LLC and its clients. If required the applicant will submit a drug screen that may screen any or all of the following: amphetamines, barbiturates, benzodiazepines, cannabinoids, cocaine, meperidine, Methadone, Opiates, Phencyclidine, Propoxphene
- Hepatitis B: are only required when specified in the written agreement between Access Healthcare LLC and its clients. Must provide proof of vaccination to Hepatitis B or sign waiver/declination. The Hepatitis B vaccine and vaccination series shall be made available at no cost to all employees. Employees shall not receive the vaccination if they have previously received the Hepatitis B vaccination series or have antibody resting which reveals the employee is immune or for whom the vaccine is contraindicated for medical reasons.

*** Please note that random drug screening and drug screening for cause may occur at any time.

Interview and Education

Applicants whose qualifications are in question are interviewed by the President or Clinical Liaison. Interviews are designed to determine applicant's knowledge, competence and skills in specified areas of expertise. Interviews are based on actual events and circumstances that applicants are likely to encounter in the work environment.

Applicants are also oriented to Access Healthcare LLC's general policies and procedures, as well as specific administrative policies on overtime and scheduling. Orientation for select hospitals is also provided, as specified by select client hospitals.

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

- Medication: administration, safety and prevention of errors
- Abuse: Child, elder and reporting, SCAN
- Sexual and domestic violence, assault, rape
- Drugs in the workplace, workplace violence
- Safety: electrical, fire, environmental, safety signals
- Hazardous materials
- Infection control and CDC Hand Guidelines
- OSHA and bloodborne pathogens

- Dress code and fingernail policy
- JCAHO education, National Patient Safety Goals, List of Abbreviations/Do-not-use
- Patient rights/advance directives
- Emergency preparedness
- End-of-life care
- Code situation policies
- Sentinel event policies and procedures
- Restraints
- Age-specific education
- HIPAA
- Pain Management
- Body Mechanics
- Documentation: of patient care, transcribing of physician orders
- Conscious Sedation
- Patient safety and education
- Fall prevention

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

Maintaining Nursing Personnel Files

All personnel files are maintained by HR, HR monitors relevant requirements and expirations of any requirements. Requirements are kept current through daily alerts of soon-to-expire or expired requirements.

Orientation

Access Healthcare LLC will provide all new employees with an orientation to the company's policies and procedures. Each employee will receive an Employee Handbook.

Some facilities require some form of orientation. The amount of time required by each facility varies. Some facilities require computer training classes and orientation prior to the first shift worked. The Recruiter will explain required orientation to all employees prior to scheduling first shift with a facility. Orientation time worked at the facility is paid at the orientation rate. (Usually less than regular pay rate)

Some facilities require that their specific pre-employment orientation "packets" be completed by the prospective caregiver at Access Healthcare LLC before the first shift is worked, and there is no pay for this required activity.

The first time you visit a facility the following guidelines should be followed:

- Report approximately one (1) hour early for orientation (it may vary for each facility).
- Carry photo ID for evidence of identity when reporting for assignment
- Take your nursing license and certifications with you
- Report to the appropriate supervisor
- It is expected that the healthcare practitioner locates and comply with the facility policy and procedures manual, locate fire pulls, crash cart, med. room, linen cart, and appropriate exits before your shift starts.
- Always dress in proper attire when working at the facility. Orientation is only paid when the time has been properly verified by facility staff.

Occasionally, an Access Healthcare LLC employee may show up early as directed for orientation shift and no one is available for orientation. Please take it upon yourself to utilize this time to become familiar with the floor layout and the location of vital items you may need in order to function effectively on your shift. It will be to your advantage to have knowledge of the location of the policy and procedures manual, fire pulls, crash cart, med. room, linen cart, and appropriate exits prior to the onset of your shift.

Access Healthcare LLC attempts to provide a comprehensive and thorough pre employment orientation and in service training that reflects current compliance and promotes safe healthcare delivery. The program includes, but is not limited to the following:

- Age Specific
- Disaster Preparedness
- Cultural Diversity
- Environmental Safety
- Hazardous Chemicals
- HIPAA
- Infection Control/Blood borne Pathogens
- Abuse
- Domestic Violence
- Ethics for Healthcare
- Annual National Patient Safety Goals
- Pain Awareness
- Patient Restraints
- Patient Rights

Performance Improvement and Education Program

The purpose of performance management is to enhance the knowledge, skills and behaviors of all employees. This is accomplished by providing a means of measuring employee's effectiveness on the job; identifying areas of development where employees are in need of training, growth, improvement and/or additional resources; maintaining a high level of motivation through feedback with management and establishing individual performance goals.

Initial Assessment

Upon hire, one of Access Healthcare LLC's Recruiters must inform new hires of all the competencies that must be met. For the initial assessment, the competency self-assessments will serve as the baseline assessment. Review and education for errors on any competency exams, pharmacology exams and additional examinations will also serve as areas of improvement.

Quarterly Assessments

Access Healthcare LLC has attempted to implement a continuous, systematic and coordinated approach to measure and assess hospital's feedback on all agency personnel being utilized. The following assessments are utilized to ensure employee performance and customer satisfaction:

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

Any unsatisfactory scores will be reviewed and discussed with each nurse and methods for improvement recommended by Access Healthcare LLC's President or Clinical Liaison. For more information on Access Healthcare LLC's Progressive Discipline Program, please see Progressive Discipline Program.

Periodic Assessments

Access Healthcare LLC's President or Clinical Liaison conducts annual assessments of all staff. Quarterly performance evaluations are solicited via phone calls from to review clinical performance based on client feedback. The President or Clinical Liaison and clients evaluate employee job performance based on the functions and standards as outlines in the job descriptions. The President or Clinical Liaison and employee will identify strengths, accomplishments and areas for improvement and development. All hospital reviews, including initial and random assessments are also incorporated into the ninety-day and annual performance review. Employees will also update their competency self-assessments at this time.

If Performance Improvement is required, written recommendations identifying the performance expected will be created and will be used to gain the employee's commitment to perform to those expectations. The President or Clinical Liaison will provide written coaching, resources and suggestions to assist the employee in working toward the performance expectations established in this phase. In the event that a Performance Plan is created, it is expected that the President or Clinical Liaison conduct Progress Checks, or informal reviews of performance to determine if the agreed-upon goals and objectives are being achieved, to recognize achievements, to discuss developmental needs, and/or to provide assistance in the accomplishment of performance goals.

Employee Performance Review

Every healthcare professional employed by Access Healthcare LLC, who is currently working and has worked in the last year, will have an annual performance evaluation carried out by the Access Healthcare LLC, during the month of December or at the anniversary of their date of hire.

- Traveling providers are eligible for annual evaluations if the provider has worked a minimum of one 13-week assignment during the preceding year and are active at during the current year in at the anniversary of their date of hire.
- Per Diem providers are eligible for annual evaluations if the provider has worked a minimum of 8 hours during the preceding year and are active during the current year at the anniversary of the date of hire.
- Access Healthcare LLC will attempt to obtain feedback from client representatives regarding clinical staff competence and ongoing performance of professional employee. Unfortunately, some clients will not cooperate with Access Healthcare LLC in this regard, so Access Healthcare LLC conducts phone solicitation of feedback from its clients.
- Feedback from our clients regarding clinical and/or professional performance is addressed with our employees immediately. Follow-up with our clients is completed within an appropriate time frame.
- Annual skills checklists which apply to specialty area of work will be completed by every health professional employed by Access Healthcare LLC
- When training needs are identified, an opportunity to complete the training will be provided at the earliest possible occasion.
- The company assesses aspects of employee's competence at hire, at performance evaluation and as needed or required by state licensing agencies, to ensure that employees have the skills or can develop the skills to perform and continue to perform their duties.
- President or Clinical Liaison is responsible to ensure that any areas of development that are identified are addressed.

Education

Ongoing continuing education is the responsibility of Access Healthcare LLC employees to ensure that all clinical staff has a current knowledge and practice base. Access Healthcare LLC maintains information on available resources for BLS, ACLS, PALS, etc. The following online education programs are also available for continuing education; however this is not an inclusive list of available resources: www.nursetesting.com, www.nursingspectrum.com, and www.lww.com. Evidence of continuing education and annual required in-service education are part of the ongoing competency assessment program and will be maintained in your personnel file. Please provide Access Healthcare LLC with copies of your continuing education certificates.

Disciplinary Action

Access Healthcare LLC has established workplace standards of performance and conduct as a means of maintaining a productive and cohesive working environment. A positive, progressive approach is taken to solve discipline problems, which appeals to an employee's self-respect, rather than create the fear of losing a job. Our system emphasizes correction of the offensive behavior. If correction of the problem and sustained improvement does not occur, termination may result.

While it is impossible to list everything that could be considered misconduct in the workplace, what is outlined here is a list of common-sense infractions that could result in discipline, up to and including immediate termination of employment. This policy is not intended to limit our right to discipline or discharge employees for any reason permitted by law.

The following may be grounds for disciplinary action, up to and including termination:

- Accepting an assignment and not reporting to work or not notifying us.
- Unauthorized possession, use, or removal of property belonging to Access Healthcare LLC or any client of Access Healthcare LLC
- Failure to comply with all safety rules and regulations, including the failure to wear safety equipment when instructed.
- Reporting to work under the influence of alcohol, illegal drugs, or in possession of either item on company premises or work sites of client companies.
- Lewd, unacceptable behavior, possession of weapons or explosives and provoking, instigating or participating in a fight is prohibited at Access Healthcare LLC and/or at its client hospitals.
- Violation of the harassment policy.
- Insubordination of any kind is grounds for immediate termination. (For example, refusal to carry out your supervisor's reasonable works request).
- Leaving an assignment without notice i.e. patient or assignment abandonment.
- Falsifying records, including but not limited to time records or claims pertaining to injuries occurring on company premises or work sites of client companies or personnel records.
- Disclosing confidential information without authorization.
- Disregard for established policies and procedures.
- Excessive cancellations or tardiness.
- Discourtesy to clients or fellow employees.

Do Not Send Policy and Process

Access Healthcare LLC is committed to providing a higher standard of service to our clients and to the delivery of safe, quality patient care. As an Access Healthcare LLC employee, you play a very valuable role in our success in delivering excellent customer service and in our ability to achieve Joint Commission Certification. We are implementing a "Do Not Send" Prevention Program.

Below is the Termination Policy. Following the Termination Policy are the Do Not Send Prevention Curriculum and the Do Not Send Prevention Quiz

You will be held responsible for the information in the curriculum and quiz in both your clinical and professional / behavioral performances every time you work for Access Healthcare LLC

Please take the quiz and return only the answer sheet to us within 14 days in the enclosed self-addressed-stamped-envelope.

When a performance issue arises, Access Healthcare LLC will use the point system outlined below. As you can see, significant performance issues or ongoing performance issues could result in termination. By implementing this program, it is our goal to reduce the number of performance issues and/or Do Not Sends.

Termination Policy

The following point system is used to determine termination as a result of Do Not Sends.

1 Point

- Attitude / lack of professionalism / customer service

2 Points

- Clinical incompetence – poor clinical performance
- Poor time management
- Medication Error
- Documentation Deficiencies Lack of Compassion

3 Points

- Danger to patient.
- No call No show.
- Departing facility before end of shift secondary to dissatisfaction with assignment.
- Do Not Send from any Travel Assignment regardless of origin

5 Points

- Illegal Behavior (Includes false identity; falsified documentation, use or distribution of controlled substances etc.)
- Pt. abandonment. When nurse is under investigation for above behavior they will be considered terminated until exonerated from all accusations.
- Error resulting in Pt. Death or Permanent physical or mental damage
- Self-terminating travel assignment without proper notice to facility or Staffing Agency.

A nurse who receives 5 points will be considered for termination.

Any nurse involved in illegal activity will be terminated immediately

Please feel free to contact the Access Healthcare LLC office, if you have any questions

Do Not Send Prevention: Curriculum

Do Not Sends are usually subjective in nature. However, there are things we as Agency nurses can do to avoid Do Not Sends.

1. Be on time to all shifts.

- Be 30 to 45min early, arriving to the floor, when working at a hospital for the first time.
- To ensure being on time, preparation begins the night before, or day of your night shift.
- Have clothes, nursing tools, lunch etc. prepared before sleeping.
- Get to bed early to ensure 8 hrs. of sleep.
- Awake early enough to eat before you leave for shift.
- Make sure you have accurate directions and facility phone number before you begin driving to the shift.
- Do not sign in and out at the same time!

Rationale: Arriving early allows the Agency nurse to familiarize themselves with the unit, get organized, meet the Charge Nurse and make a positive first impression. Signing in and out at the same time is fraud.

2. Take a detailed report.

- Head to toe, system by system, Neuro to Skin.
- Review your patient's charts, (ten to twenty minutes per chart) after report, and before lunch.

Rationale: This is of paramount importance! Sets the tone for the start of the shift, provides the foundation for the plan of care, focus of initial assessments and interventions.

Taking a detailed report and reviewing the patient's chart during the first half of your shift also prepares the Agency nurse to give a knowledgeable, relevant report.

3. Show Initiative.

- Find the Charge nurse, introduce yourself, ask to be shown around, and inquire who your resource person may be for the shift (if initial shift @ facility), if not the Charge nurse.
- Communicate early and often any relevant information to the Charge nurse such as: changes in patient condition, difficulty with or questions about; assignment, staff, equipment or documentation tools.

Rationale: Allows Charge nurse to make adjustments or provide assistance in a timely manner, in order to provide the safest patient care and prevent a delay in patient treatment.

4. Avoid handling personal business during shift.

Talking on mobile phones or using facility information systems for personal use (other than in an emergency or away from patient care area during breaks) is a sure way to make an impression that will reflect poorly on the Agency nurse.

Rationale: This behavior often leads directly to a Do Not Send.

5. When in Rome... Make every attempt to do things, the way the Facility you are working in, does things.

Some Facilities want two nurses to sign off on all insulin administration, narcotic administration and lab specimens.

Please respect all of our facilities policies and procedures, without complaint or argument.

However, if you have been asked to perform a task or procedure you feel will place a patient in danger or you feel unqualified to perform, contact your immediate supervisor and/or go up the chain of command until you feel you have been able to express your concern professionally and respectfully.

If one of us as agency nurses encounters a situation in which you feel obligated to challenge a request, in order to maintain the safest patient care environment. It is of vital importance that you:

1. Communicate with Access Healthcare LLC
2. Document the incident in your own words before leaving the facility.
3. Furnish signed and dated copies of your documentation of the incident to Access Healthcare LLC, the Nursing Supervisor of the facility in which you were working and retain a copy for yourself.

Rationale: Knowledge of, and compliance with each facilities policies and procedures are fundamental elements of professionalism, providing safe patient care and creating an impression that makes a facility ask for an Agency nurse by name.

6. Practice the 6 rights of medication administration.

1. Right Patient

2. Right Medication
3. Right Dose
4. Right Time
5. Right Route
6. Right Rate
7. Right Reason
8. Right Documentation
9. Right Assessment
10. Right Education
11. Right Evaluation

If an agency nurse is confused regarding any aspect of the medication administration process, clarification with the physician becomes an immediate priority, to ensure safe medication administration.

Rationale: Medication errors are serious, and can lead to negative patient outcomes, extended hospitalization, severe injury and death. Most importantly for a careful, knowledgeable and conscientious Agency nurse, medication errors are almost always preventable.

7. Be conscious of Joint Commission National Patient Safety Goals in your practice.

1. Improve the accuracy of patient identification.
2. Improve the effectiveness of communication among caregivers.
3. Improve the safety of using medications.
4. Reduce the risk of health care-associated infections.
5. Accurately and completely reconcile medications across the continuum of care.
6. Reduce the risk of patient harm resulting from falls.

A complete and current set of National Patient Safety Goals should be posted or easily accessible on any unit in any Acute Care Facility.

Rationale: “The mission of Joint Commission is to continuously improve the safety and quality of care provided to the public” through the “support of performance improvement in healthcare organizations.”

8. Ask the Charge nurse to Audit your Charting a few hours before end of shift.

Having the charge nurse review our documentation, within a couple of hours of the end of your shift, displays exceptional accountability, reduces the healthcare provider and facility’s exposure to liability. Thorough documentation also helps convey important information to the following shift and ensures the necessary facts will be available when and if the chart is reviewed in the future.

Rationale: Complete documentation, is an essential component of effective, efficient nursing. Since many Agency nurses work in multiple facilities in a short period of time, it is not an easy task to dot every “i” and cross every “t”, without help from a knowledgeable source.

9. Practice excellent customer service.

Customer service extends further than our patients and their families; it includes every person we come into contact with while we are working. Our customers are every nurse, pharmacist, physician, respiratory care practitioner, etc. Every time we interact with another human being at work it is imperative that we greet that person with a friendly and helpful attitude.

Rationale: Treating our patients, their families, our colleagues and interdisciplinary team members with friendliness, respect and kindness creates an environment where being helpful and taking the extra step to solve someone’s problem is not the exception but the “norm”.

10. Take excellent care of your patient(s).

The reason hospitals exist is because people who are ill, injured or have had major surgery require 24-hour care. The necessity of 24-hour care is the reason why tens of thousands of hospitals across the US continue to operate, often at a loss.

Keep the person you are taking care of clean. Be gentle. Communicate kindly and effectively. Listen carefully. Show respect, for your patient's privacy, age, culture, family and human existence. Spend time teaching them, explaining what is happening at any given moment. Explain what you are doing or giving your patients and why.

Rationale: As direct patient care providers taking good care of our patients what we should expect of ourselves, it is what we are expected to do. It is our ethical obligation. It is our job.

11. Remember This! ... When we are working for a TEMPORARY Staffing Firm "We are PERMANENTLY on PROBATION"

There are common reasons many of us work for Staffing Firms. We enjoy the flexibility, often making our own schedules, increased pay, getting paid sooner, working in new environments and meeting new people. We also need to be aware that there are trade-offs or things we give away for those benefits.

We are not employees of the facilities in which we are working. We are not "on staff". We are not members of the union. We cannot expect to receive fair treatment. We will almost never get the best assignment. We might be "ganged up" on. We might not get help as soon as we ask for it. If we complain we can expect to be asked not to return. We have to out-perform our colleagues "on staff" every shift. We can never get comfortable.

Rationale: The key to being "successful" and enjoying our careers as providers who work for temporary staffing forms... is having as many places to work as possible. Having a wide range of choices will allow us to minimize interruptions to income when our favorite places do not need us. The sooner we let go of our expectations of being treated as if we were employees of the facilities we work in, on a TEMPORARY basis the greater chances we have of being successful.

Do Not Send Prevention: Quiz

1. Its 4:45 a.m. and La Tasha Davis has just been confirmed for the day shift at a Medical Center across town from her. La Tasha lives in across town from and has never been to the Medical Center. Which of the sequences will below provide La Tasha with greatest chances of making a great first impression and having a successful shift?
 - a. Wake up at 6:15 a.m., take a shower, get dressed, hit the road @ and head in general direction of the facility and call for directions from the car.
 - b. Get out of bed at 0500 obtain detailed directions and the nursing office phone number. Eat a small healthy breakfast, shower, dress neatly, gather nursing tools (ID badge, medication book, stethoscope etc.) and be on the road by 0545.
 - c. Get out of bed at 0500 go to the gym, come home, shower, get dressed, walk the dog, be on the road at 0705, call the staffing firm and say she got lost.
 - d. Refuse to go to the Medical Center located across town, call the staffing firm at 0730 and ask if the hospital she usually works at has any late call needs.
2. Lynn Carson RN is alone at the Nursing station in a facility in which she has been working twice a week, for over year, she is faxing a new order to the Pharmacy. Before Lynn leaves the Nursing station the phone rings, and several lines are blinking. Which of the following answers is the best example of excellent customer service?
 - a. Lynn looks around and sees the unit secretary speaking to the charge nurse, the nurse manager, and two executives with hospital badges and wearing suits and yells out to the secretary that the "phones are ringing!" and walks away from the Nursing station.

- b. Lynn answers the phone lines and politely explains to every caller that she is not the unit secretary and cannot help them before hanging up, and walking away from the Nursing station.
- c. Lynn finishes faxing her new medication order to the Pharmacy, doesn't acknowledge any of the phones ringing and walks away from the nursing station.
- d. Lynn sits down at the nursing station answers all the lines and directs the calls courteously and professionally. Lynn then remains at the nursing station, handling the phones for a few minutes until unit secretary returns. Lynn then passes along all relevant information upon being relieved.
3. Kenny Slater RN has an extremely heavy assignment working day shift in a very busy Telemetry unit for the first time. Kenny's patients tell him he has done a great job. However, the night shift Charge Nurse makes Kenny a Do Not Send, stating incomplete documentation as the reason. Which of the options below is the most reliable way to prevent this from happening in the future?
- a. Kenny could have communicated the condition of his patients, explained how busy he was, asked for help and requested the dayshift Charge Nurse to audit his charts several hours before his shift ended.
- b. Kenny could have avoided fulfilling his pts requests, not followed up on MD orders, and missing medications and made completing his documentation his first priority.
- c. Kenny could have stated that his assignment was unfair and unsafe then complained to his patients and their families.
- d. Kenny could have done nothing more, it wasn't his fault. It was the hospital's fault for giving him such a hard assignment and not showing him all the details of the documentation process in the first place.
4. An MD on a pediatric floor orders .1mg of M.S. prn q 1o and a Dig level QD. Please write in the correct versions of the abbreviations used above, which comply with Joint Commission National Patient Safety Goals.
- a. 0.1mg of Morphine Sulfate prn q 1 hour, Digoxin level daily
5. Its 0930 and Ude Amin RN, who also works as a Real Estate agent, is working in the ICU. At the end of her morning break, Ude checks her voice mail. Ude finds out an offer for a 2-million-dollar property, from one of her clients, has been accepted! Which of the following actions would be appropriate?
- a. Ude tells the Charge RN she has a severe family emergency and leaves the facility immediately.
- b. Ude excitedly calls the seller's broker back from the Nursing station, and asks him to fax the counter offer to the ICU, so she can fax it to her client right away.
- c. Ude waits until her lunch break to call the seller's broker back. She uses her mobile phone outside of the hospital.
- d. Ude uses the nursing station computer, logs on to the internet, and prints out pictures of the 2-million-dollar house she just sold. She then borrows another RN's calculator to estimate the commission she expects to earn from the sale.

Reporting Any Issues

Assignment Issues

Issues may arise while an employee is on assignment for Access Healthcare LLC. As a representative of Access Healthcare LLC and as a responsible and mature nursing professional, it is important that professionalism and integrity are maintained throughout the conflict resolution process and that above all, patient safety is the priority.

Common issues that may arise are:

- Conflict with hospital staff
- Conflict with patient and/or patient family members
- Unfair patient assignments, or “dumping”
- Assignment to a unit for which you are incapable of safely performing your duties

In the event of any of the above events:

1. Contact the nursing supervisor for assistance
2. If escalation is required, contact Access Healthcare LLC for mediation
3. Complete an incident report at the facility (if required)
4. Complete an incident report at Access Healthcare LLC (if required)

Blood Borne Exposure

An exposure incident to blood borne pathogens involves specific eye, mouth, mucous membrane, or parenteral contact with blood or other potentially infectious materials that result from the performance of an employee’s duties. All employees involved in direct patient care should be familiar with appropriate decontamination procedures.

In the event of exposure to any blood borne pathogens:

1. Adhere to appropriate decontamination procedures
2. Contact the charge nurse or nursing supervisor for assistance
3. Inform Access Healthcare LLC immediately of exposure

Access Healthcare LLC shall make immediately available a confidential medical evaluation and follow-up the exposed individual. Post-exposure follow-up shall be:

- Made available at no cost to the employee
- Performed by or under the supervision of a licensed healthcare professional who has a copy of all relevant information related to the incident.
- Made available at a reasonable time and place.

Access Healthcare LLC’s post-exposure and follow-up, shall include the following:

- Documentation of the route(s) of exposure, and the circumstances under which an exposure incident occurred.
- Identification and documentation of the source individual
- Collection and testing of blood for HIV and HBV serological status
- Post-exposure prophylaxis, as recommended by the U.S. Public Health Service
- Counseling
- Evaluation of reported illness

The company maintains confidential medical records for each employee with occupational exposure. Records are kept for the duration of employment plus thirty (30) years. Each record shall contain the employee’s name, social security number, hepatitis B vaccine history, and a record of all post-exposure follow-up.

Clinical Incidents and Sentinel Events

As a healthcare provider, it is your duty and responsibility to promptly report any unsafe condition, sentinel event or unusual event that can result in a sentinel event. Everyone is expected to participate in maintaining a safe environment for patients, visitors, physicians and their coworkers. This means taking an active role in reporting any and all unsafe conditions, unusual or sentinel events. All such events should always be reported

immediately to your charge nurse, nursing supervisor and Access Healthcare LLC's President or Clinical Liaison.

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

A Clinical Incident is any event or series of events that resulted in or had the potential to result in an adverse patient outcome. Clinical staff should notify Access Healthcare LLC of any clinical incidents that occur while on assignment, regardless of an adverse outcome.

A sentinel event is an unexpected occurrence involving death or serious physical or psychological injury, or the risk thereof. Serious injury specifically includes loss of limb or function. The phrase "or the risk thereof" includes any process variation for which a recurrence would carry a significant chance of a serious adverse outcome.

Such events are called "sentinel" because they signal the need for immediate investigation and response.

Examples of Clinical Events

- Omission of treatment
- Deviation from policy
- Medication errors
- Improper equipment usage
- IV or Blood complications
- Patient fall
- Inaccurate clinical assessment
- Patient or physician complaint

Examples of Sentinel Events

- Any patient death, paralysis, coma or other major permanent loss of function associated with a medication error
- A patient commits suicide within 72 hours of being discharged from a hospital setting that provides staffed around-the-clock care.
- Any development, that in unauthorized departure, of a patient from an around-the-clock care related setting resulting in death (suicide, accidental death, or homicide) or in a temporary or major loss of function.
- A hospital operates on the wrong side of the patient's body.
- Any intrapartum (related to the birth process) maternal death.
- Any perinatal death related to a congenital condition in an infant having a birth weight greater than 2500 grams.
- A patient is abducted from the hospital where he or she receives care, treatment or services.
- Assault, homicide, or other crime resulting in patient death or major permanent loss of function.
- A patient fall that results in death or major permanent loss of function as a direct result of the injuries sustained in the fall
- Hemolytic transfusion reaction involving major blood group incompatibilities
- A foreign body, such as some sponge or forceps that was left in a patient after surgery

Joint Commission's Sentinel Event Policy

The Joint Commission has defined a sentinel event policy that you should be aware of. This policy has four goals:

1. To have a positive impact in improving patient care, treatment and services and preventing sentinel events

2. To focus the attention of an organization that has experienced a sentinel event on understanding the root causes that underlie the event, and on changing the organization's systems and processes to reduce the probability of such an event in the future.
3. To increase the general knowledge about sentinel events, their causes, and strategies for prevention.
4. To maintain the confidence of the public and accredited organizations in the accreditation process

In the event of deviation of practice according to the professional practice act, fraudulent behaviors, narcotic abuse or deviation and/or other aberrant or illegal behavior, each event is documented, and a report is made, which includes information from the customer. The President or Clinical Liaison reports each situation according to the guidelines of the appropriate professional association.

Alabama Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race, color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected

class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify Human Resources, hr@accesshealthcarestaffing.com; Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Alaska Policies

Hiring and Orientation Policies

EEO Statement and NonHarassment Policy

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- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
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- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

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If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com

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We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of eight hours in a day or 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Paid Sick Leave (Accrual Method)

Access Healthcare LLC provides paid sick leave to eligible employees in accordance with Alaska law.

Eligibility

Most Alaska employees are eligible for paid sick leave. If you have questions regarding your eligibility, contact Human Resources.

Reasons for Leave

Sick leave may be used for the following reasons:

- For your own or a family member's mental or physical illness, injury, or health condition; medical diagnosis, care, or treatment; or preventative medical care.
- For your own or a family member's absence due to domestic violence, sexual assault, or stalking to:
 - Obtain medical or psychological attention;
 - Obtain services from a victim's aid organization;
 - Relocate or take steps to secure an existing home; or
 - Obtain legal services, including participation in any investigation or civil or criminal proceeding.

Accrual and Usage

Eligible employees accrue one hour of sick leave for every 30 hours worked, up to an annual cap of 40 hours. You will begin accruing sick leave on July 1, 2025, or on your first day of work, whichever is later. If you are classified as exempt, you are presumed to work 40 hours per week, unless your normal workweek is less than 40 hours, in which case sick leave accrues based on your normal workweek.

Employees may use sick leave as it is accrued, up to a maximum of 40 hours per leave year. For purposes of this policy, the leave year is calendar year.

Unused sick leave is carried over to the following leave year; however, you still may only accrue and use 40 hours of sick leave in any given leave year.

Compensation

You will be compensated for sick leave at your regular rate of pay.

Notice

If the need for leave is foreseeable, you must make a good faith effort to provide notice of the need for leave in advance and make a reasonable effort to schedule the leave so that it does not unduly disrupt Company operations. If unforeseeable, provide notice as soon as practical. You will not be required to search for or secure a replacement worker as a condition for using sick leave. When possible, notice should include the expected duration of the absence.

Documentation

If leave is being used for four or more consecutive workdays, the Company may require you to provide reasonable documentation establishing that the leave is for a qualifying reason.

Documentation signed by a healthcare professional indicating that sick leave is necessary will be considered reasonable documentation.

In cases of domestic violence, sexual assault, or stalking, the following will be considered reasonable documentation:

- A police report;
- A written statement from a witness advocate confirming services from a victim's aid organization;
- A court document indicating relevant legal action; or
- A written statement from you affirming that you or your family member is using sick leave for a qualifying purpose.

The documentation is not required to explain the nature of the illness, details of the underlying health needs, or the details of the domestic violence, sexual assault, or stalking, unless otherwise required by law. Any information obtained related to your request for sick leave will be treated as confidential and will not be disclosed to others without your written permission.

Payment upon Termination

You will not be paid for any unused, accrued sick leave when your employment ends.

Transfers

If you transfer to another Company division, entity, or location within Alaska, you will retain all unused, accrued sick leave and may use it as described in this policy.

Reinstatement of Leave upon Rehire

If you separate from the Company and are rehired within six months, the Company will reinstate previously unused, accrued sick leave.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy. You are encouraged to notify the Company if you feel your rights have been violated.

Arizona Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race, color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;

- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Crime Victim Leave

Access Healthcare LLC is committed to providing victim's leave to eligible employees in accordance with Arizona's victim leave law (Ariz. Rev. Stat. § 13-4439; § 8-420). This law authorizes employees who are victims of crimes to leave work to exercise the right to be present at legal proceedings related to the crime.

A **victim** is:

- A person against whom the criminal offense has been committed; or
- If the person is killed or incapacitated, the person's immediate family (victim's spouse, parent, child, sibling, grandparent, or lawful guardian) or other lawful representative (person who is designated by the victim or appointed by the court and who acts in the best interests of the victim), except if the person is in custody for an offense or is the accused.

Legal proceedings include:

- Initial appearances and detention hearings.
- Post-conviction release proceedings.
- Plea negotiations and sentencing.
- Disposition and pre-disposition proceedings.
- Probation modification, revocation, disposition, or termination proceedings.
- Re-examination proceedings.
- Order of protection (an injunction against harassment or any other injunctive relief to help ensure the health, safety, or welfare of the victim or the victim's child).

Prior to taking leave, you must provide your Supervisor with a copy of the notice of each scheduled proceeding that is provided by the agency responsible for providing notice, a court order to which you are subject, or any other proper documentation, unless advance notice is not feasible. If advance notice is not feasible, you must provide appropriate documentation within a reasonable time after the absence.

The Company will keep all records related to your leave confidential.

The leave provided to attend proceedings is unpaid; however, you may choose to use accrued benefits, such as existing vacation time, sick time, personal leave time, or other accrued paid time off.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Paid Sick Leave (Accrual Method)

Access Healthcare LLC provides paid sick leave in accordance with Arizona's Fair Wages and Healthy Families Act.

Eligibility

All Arizona employees are eligible for sick leave.

Reasons for Leave

Sick leave may be taken for the following reasons:

- To care for your own or a family member's mental or physical illness, injury, or health condition; need for medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition; or need for preventive medical care.
- Workplace closure due to a public health emergency.
- To care for your child whose school or place of care has been closed due to a public health emergency.
- To care for yourself or a family member when it has been determined by the health authorities or by a healthcare provider that you or your family member's presence in the community may jeopardize the health of others because of an exposure to a communicable disease, whether or not you or your family member has actually contracted the communicable disease.
- Absences due to domestic violence, sexual violence, abuse, or stalking.

Family member means:

- Your children of any age (including biological, adopted, or foster children, legal wards, children of a domestic partner, or children for whom you stand in loco parentis).
- Your parents or your spouse or domestic partner's parents (including biological, foster, and step parents; adoptive parents; legal guardians; or persons who stood in loco parentis when you, or your spouse or domestic partner, was a minor child).
- Your spouse or domestic partner.
- Your or your spouse or domestic partner's grandparents, grandchildren, or siblings (including foster, adoptive, or step relationships).
- Any other individual related to you by blood or affinity whose close association is the equivalent of a family relationship.

Accrual and Usage

Eligible employees accrue one hour of sick leave for every 30 hours worked. New employees begin accruing sick leave on their first day of employment. For this calculation, employees exempt from overtime under the Fair Labor Standards Act will be assumed to work 40 hours each workweek, unless their normal workweek is less than 40 hours (in which case accrual is based on their normal workweek).

You may only accrue or use 24 hours of sick leave per leave year and may use accrued sick leave 90 calendar days after the start of employment. For purposes of this policy, the leave year is calendar year.

Unused sick leave is carried over to the following leave year; however, you still may only use 24 hours of sick leave in any given leave year.

Notice

If the need for sick leave is foreseeable, you must make a good faith effort to provide advance notice and schedule the leave in a manner that does not unduly disrupt business operations. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Documentation

Where sick leave is used on three or more consecutive workdays, the Company may require reasonable documentation that the leave was used for purposes permitted by Arizona law.

Reasonable documentation includes documentation signed by a healthcare professional indicating that the sick leave is necessary. In the case of domestic violence, sexual violence, abuse, or stalking, the following documents are considered reasonable:

- A police report indicating that you or your family member was a victim of domestic violence, sexual violence, abuse, or stalking.
- A protective order, injunction against harassment, general court order, or other evidence from a court or prosecuting attorney that you or your family member appeared, or is scheduled to appear, in court in connection with an incident of domestic violence, sexual violence, abuse, or stalking.
- A signed statement from a domestic violence or sexual violence program, or victim services organization, affirming that you or your family member is receiving services related to domestic violence, sexual violence, abuse, or stalking.
- A signed statement from a witness advocate affirming that you or your family member is receiving services related to domestic violence, sexual violence, abuse, or stalking.
- A signed statement from an attorney, member of the clergy, or a medical or other professional affirming that you or your family member is receiving services related to domestic violence, sexual violence, abuse, or stalking.
- A legible, written statement by you concerning you or your family member's status as a victim of domestic violence, sexual violence, abuse, or stalking that signals your identity and (if applicable) relationship to the family member.

Payment upon Termination

You will not be paid for any unused sick leave when your employment ends.

Reinstatement of Sick Leave upon Rehire

The Company will reinstate previously accrued, unused sick leave if you separate and are rehired within nine months.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Complaints

You are encouraged to notify the Company if you feel your rights have been violated. You also have the right to file a complaint with the Industrial Commission of Arizona. For details, visit <https://www.azica.gov/forms/earned-paid-sick-time-claim-form>.

Arkansas Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation on the basis of the following protected classes: age (40 and older); race; color; national origin; ancestry; religion; sex; sexual orientation (including transgender status, gender identity or expression); pregnancy (including childbirth, lactation, and related medical conditions); sensory, physical, or mental disability; genetic information (including testing and characteristics); veteran status; uniformed servicemember status; or any other status protected by federal, state, or local laws. Discrimination based on race and natural origin includes discrimination based on natural, protective, or cultural hairstyles, including, but not limited to, afros, dreadlocks, twists, locs, braids, cornrow braids, Bantu knots, curls, and hair styled to protect hair texture or for cultural significance.

The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Bone Marrow and Organ Donation Leave

Access Healthcare LLC will provide eligible employees with up to 90 days of unpaid leave to serve as a bone marrow or organ donor.

All employees in Arkansas are eligible for bone marrow or organ donation leave; however, if you are eligible for leave under the federal Family and Medical Leave Act, you may not take leave under this policy. To request leave under the policy, provide reasonable written notice of the need for leave to your Supervisor.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Crime Victim Leave

Access Healthcare LLC will provide employees who are the victim, or the representative of a victim, of a violent crime or sex offense with time off to:

- Participate, at the prosecuting attorney's request, in the preparation of a criminal justice proceeding relating to the crime; or
- Attend a criminal justice proceeding if attendance is reasonably necessary to protect the interests of the victim.

You will be eligible for time off if you are:

- The victim of the violent crime (felony resulting in physical injury to the victim or involving the use of a deadly weapon, terroristic threatening, and stalking) or sex offense at issue in the proceedings;
- A minor who is a victim of kidnapping, false imprisonment, permanent detention, or restraint;
- The victim's spouse, child by birth or adoption, stepchild, parent, stepparent, or sibling; or
- An individual designated by the victim or by a court in which the crime is being, or could be prosecuted.

Time off under this policy will be unpaid; however if you are classified as exempt you may be paid as required by applicable federal or state law. If you are accountable for the crime or a crime arising from the same conduct, you will not be eligible for leave under this policy.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

California Policies

Hiring and Orientation Policies

Drug and Alcohol Rehabilitation Accommodation

Access Healthcare LLC will reasonably accommodate employees who wish to voluntarily participate in an alcohol or drug rehabilitation program, provided that the accommodation will not impose an undue hardship on the Company.

A reasonable accommodation may include unpaid time off. If you have a serious health condition and are otherwise eligible, time off for alcohol and/or drug rehabilitation may also be covered by the Family and Medical Leave Act (FMLA) or the California Family Rights Act (CFRA). If so, the Company will request approval and medical certification as it would for FMLA and CFRA leave requests, and the leaves will run concurrently. You may use accrued sick days, if any, for all or part of the time spent in entering or participating in a rehabilitation program.

The Company may discharge or refuse to hire an individual because of their current use of alcohol and/or drugs, because they are unable to perform their duties, or because they cannot perform their duties in a manner that would not endanger their own or another's health and safety.

Requests to participate in a rehabilitation program will be kept confidential. Direct all requests to participate in a rehabilitation program to Human Resources.

The Company will not retaliate against employees who request or obtain an accommodation in accordance with this policy.

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of unlawful harassment, discrimination, or retaliation based on the following protected classes: age (40 and over), race (including traits associated with race, which include, but are not limited to, hair texture and protective hairstyles such as braids, locs, and twists), color, religion, religious creed (including religious dress and grooming practices), national origin, ancestry, citizenship, physical or mental disability, medical condition (including cancer and genetic characteristics), genetic information, marital status, reproductive health decision-making, sex (including pregnancy, childbirth, breastfeeding, or related medical conditions), gender (including gender identity and gender expression), sexual orientation, veteran and/or military status, protected medical leaves (requesting or approved for leave under the Family and Medical Leave Act or the California Family Rights Act), status as a victim of violence or family member's status as a victim of violence, political affiliation, off-duty and off-premises use of cannabis, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a confidential, prompt, and thorough investigation of all allegations of discrimination, harassment, retaliation, or any violation of the Equal Employment Opportunity Policy. The Company will take appropriate corrective and remedial action, if and where warranted. The Company prohibits retaliation against any employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class.

This policy protects all applicants and employees (including managers and supervisors) from unlawful harassment and discrimination. This includes harassment by employees, managers, supervisors, contractors, interns, volunteers, vendors, suppliers, and customers. In addition, this policy extends to conduct connected with an individual's work, even when the conduct takes place away from the workplace, such as a business trip or business-related social function.

Harassment

Harassment means disrespectful or unprofessional conduct, including disrespectful or unprofessional conduct based on an individual's membership in a protected class.

While it is not possible to list all the circumstances that may constitute other forms of workplace harassment, some examples of conduct that may constitute workplace harassment include:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above-protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above-protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Sexual Harassment

Sexual harassment means harassment based on sex or conduct of a sexual nature and includes harassment based on sex (including pregnancy, childbirth, breastfeeding, or related medical conditions), gender, gender identity, or gender expression. It may include all of the actions described above as harassment, as well as other unwelcome sex-based conduct, such as unwelcome or unsolicited sexual advances, requests for sexual favors, conversations regarding sexual activities, or other verbal or physical conduct of a sexual nature. Sexually harassing conduct need not be motivated by sexual desire and may include situations that began as reciprocal relationships, but that later cease to be reciprocal.

Sexual harassment is generally categorized into the following two types:

- Quid pro quo sexual harassment ("this for that"), which includes:
 - Submission to sexual conduct when made explicitly or implicitly a term or condition of an individual's employment.
 - Submission to or rejection of the conduct by an employee when used as the basis for employment decisions affecting the employee.

- Hostile work environment sexual harassment is conduct of a sexual nature or on the basis of sex by any person in the workplace that unreasonably interferes with an employee's work performance and/or creates an intimidating, hostile, or otherwise offensive working environment. Examples include:
 - Unwelcome sexual advances, flirtation, teasing, sexually suggestive or obscene letters, invitations, notes, emails, voicemails, or gifts.
 - Sex, gender, or sexual orientation-related comments, slurs, jokes, remarks, or epithets.
 - Leering, obscene or vulgar gestures, or sexual gestures.
 - Displaying or distributing sexually suggestive or derogatory objects, pictures, cartoons, or posters or any such items.
 - Impeding or blocking movement, unwelcome touching, or assaulting others.
 - Any sexual advances that are unwelcome as well as reprisals or threats after a negative response to sexual advances.
 - Conduct or comments consistently targeted at one gender, even if the content is not sexual.

Retaliation

Retaliation means any adverse employment action taken against an employee because the employee engaged in activity protected under this policy. Protected activities may include, but are not limited to, reporting or assisting in reporting suspected violations of this policy and/or cooperating in investigations or proceedings arising out of a violation of this policy.

Adverse employment action is conduct or an action that materially affects the terms and conditions of the employee's employment status or is reasonably likely to deter the employee from engaging in protected activity. Even actions that do not result in a direct loss of compensation may be regarded as an adverse employment action when considered in the totality of the circumstances.

Examples of retaliation under this policy include, but are not limited to: demotion, suspension, reduction in pay, denial of a merit salary increase, failure to hire or consider for hire, refusing to promote or consider for promotion because of reporting a violation of this policy, harassing another employee for filing a complaint, denying employment opportunities because of making a complaint or cooperating in an investigation, changing someone's work assignments for identifying harassment or other forms of discrimination in the workplace, treating people differently such as denying an accommodation, not talking to an employee when otherwise required by job duties, or otherwise excluding the employee from job-related activities because of engagement in activities protected under this policy.

Reporting Discrimination, Harassment, and/or Retaliation

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate corrective and/or remedial action where we find a claim has merit. If the Company begins an investigation, we will endeavor to conduct the investigation in a timely manner and will keep the investigation confidential to the extent possible. In the same way, anyone involved in an investigation of harassment has an obligation to keep all information about the investigation confidential. That is why the Company will only share information about a complaint of harassment with those who need to know about it. Failure to keep information about an investigation confidential may result in disciplinary action. Investigations will be documented and tracked for timely resolution.

When the investigation has been completed, the Company will normally communicate the results of the investigation to the complaining individual, to the alleged harasser, and, if appropriate, to others who are directly involved. If our policy against harassment is found to have been violated, appropriate corrective action, up to and including termination, will be taken against the harasser so that further harassment will be prevented. Both the rights of the alleged harasser and the complainant will be considered in any investigation and subsequent action.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

In addition to our internal complaint procedure, employees may also contact either the Equal Employment Opportunity Commission (EEOC) or the California Civil Rights Department (CRD) to report unlawful harassment. You must file a complaint with the CRD within three years of the alleged unlawful action. The EEOC and the CRD serve as neutral factfinders and will attempt to assist the parties to voluntarily resolve their disputes. For more information, contact the Office of Human Resources or the nearest EEOC or CRD office.

Filing of Complaints Outside Company

You may file formal complaints of discrimination, harassment, or retaliation with the agencies listed below. Contact these agencies directly for more information about filing processes.

California Civil Rights Department

651 Bannan Street, Suite 200

Sacramento, CA 95811

Voice: 800-884-1684

TTY: 800-700-2320

California Relay Service: 711

Email: contact.center@calcivilrights.ca.gov

Main website: <https://www.calcivilrights.ca.gov>

Online sexual harassment training courses: <https://www.calcivilrights.ca.gov/shpt/>

U.S. Equal Employment Opportunity Commission

450 Golden Gate Avenue 5 West

P.O. Box 36025

San Francisco, CA 94102-3661

Phone: 800-669-4000

Fax: 415-522-3415

TTY: 800-669-6820

ASL Video Phone: 844-234-5122

Website: <https://www.eeoc.gov/field-office/sanfrancisco/location>

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work

overtime when requested or working unauthorized overtime may result in disciplinary action, up to and including termination.

If you are nonexempt and work more than eight hours in any workday or more than six days in any workweek, you will be paid overtime at a rate of:

- One and one-half times your regular rate of pay for all hours worked in excess of eight hours up to and including 12 hours in any workday, and for the first eight hours worked on the seventh consecutive day of work in a workweek.
- Two times your regular rate for all hours worked in excess of 12 hours in a workday or in excess of eight hours on the seventh consecutive day of work in a workweek.

If you are nonexempt and work more than 40 hours in a workweek you may be entitled to overtime after any daily overtime hours are subtracted. The same hours are never counted against different overtime limits.

Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

General Policies

Whistleblower Protections

When employees notify a supervisor, manager, or an appropriate government or law enforcement agency that they have reason to believe their employer is violating a state or federal statute, or violating or not complying with a state or federal rule or regulation, those employees are protected from retaliation. As such, Access Healthcare LLC has a strict policy that prohibits retaliation against employees who make such reports while employed in any form of employment. The Company also does not permit retaliation against employees who refuse to participate in an activity that would result in a violation of a state or federal statute, or a violation or noncompliance with a state or federal rule or regulation.

If you have information regarding possible violations of state or federal statutes, rules, or regulations, or violations of fiduciary responsibility by the Company, we encourage you to report it immediately to Human Resources or to the CEO. Alternatively, you may contact the California State Attorney General's Whistleblower Hotline at (800) 952-5225. The Attorney General will refer your call to the appropriate government authority for review and possible investigation.

Benefits

Leave and Accommodations for Victims of Violence

If you are a victim of violence, or the family member of a victim of violence, Access Healthcare LLC will provide you leave and/or accommodations in accordance with California law. A *Survivors of Violence and Family Members of Victims Right to Leave and Accommodations* notice, which outlines your rights and protections under the law, has been attached as an addendum to this handbook.

The Company will not discriminate or retaliate against employees who request and/or obtain leave or an accommodation in accordance with this policy.

Reproductive Loss Leave

Access Healthcare LLC will provide eligible employees up to five days of unpaid reproductive loss leave in accordance with the California Fair Employment and Housing Act.

Eligibility

To be eligible for reproductive loss leave, you must:

- Be employed by the Company for at least 30 days prior to the start of leave.
- Experience a qualifying reproductive loss event.

Reproductive loss event means the day or, for a multiple-day event, the final day of a failed adoption, failed surrogacy, miscarriage, stillbirth, or an unsuccessful assisted reproduction.

Reasons for Leave

Reproductive loss events include:

- A **failed adoption**, which means the dissolution or breach of an adoption agreement with the birth mother or legal guardian, or an adoption that is not finalized because it is contested by another party. To be a qualifying event, you must be a person who would have been a parent of the adoptee if the adoption had been completed.
- A **failed surrogacy**, which means the dissolution or breach of a surrogacy agreement, or a failed embryo transfer to the surrogate. To be a qualifying event, you must be a person who would have been a parent of a child born as a result of the surrogacy.
- A **miscarriage**. To be a qualifying event, the miscarriage must have been experienced by you, your current spouse or domestic partner, or another individual that would have made you a parent to the child.
- A **stillbirth**. To be a qualifying event, the stillbirth must result from your pregnancy, the pregnancy of your current spouse or domestic partner, or another individual that would have made you a parent to the child.
- An **unsuccessful assisted reproduction**, which means an unsuccessful round of intrauterine insemination or of an assisted reproductive technology procedure. To be a qualifying event, the unsuccessful assisted reproduction event must have been experienced by you, your current spouse or domestic partner, or another individual that would have made you a parent to the child.

Use of Leave

Eligible employees will be provided up to five days of unpaid leave for a reproductive loss event. The five days of leave do not have to be taken consecutively.

Leave must be completed within three months of the event entitling you to leave. If you experience more than one reproductive loss event within a 12-month period, the maximum amount of reproductive loss leave you can take is 20 days.

You may substitute any portion of your unpaid reproductive loss leave with available appropriate paid leave.

Reproductive loss leave will run concurrently with any other leave entitlement when permissible under applicable law.

Notice

Provide notice of your need for reproductive loss leave as soon as practical.

All information received by the Company regarding your request for reproductive loss leave will be treated as confidential and will not be disclosed except to internal personnel or counsel, as necessary, or as required by law.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Civil Air Patrol Leave

Access Healthcare LLC will provide eligible employees with at least 10 days of unpaid Civil Air Patrol leave per calendar year to respond to an emergency operational mission of the California Wing of the Civil Air Patrol.

Eligibility

To be eligible for Civil Air Patrol leave, you must:

- Be employed by the Company for at least 90 days before beginning leave; and
- Be a volunteer member of the California Wing of the Civil Air Patrol.

Use of Leave

Civil Air Patrol leave for a single emergency operation may not exceed three days, unless an extension of time is granted by the governmental entity that authorized the emergency operational mission, and the extension of the leave is approved by the Company.

You will not be required to exhaust any paid leave in order to take Civil Air Patrol leave.

Notice

If eligible, you must provide as much notice as possible of the intended dates leave will begin and end.

The Company is not required to grant Civil Air Patrol leave to you if you are required to respond to either the same or other simultaneous emergency operational mission as a first responder or disaster service worker for a local, state, or federal agency.

Certification

The Company may require certification from the proper Civil Air Patrol authority verifying your eligibility for the leave requested or taken. The Company may deny the leave if you fail to provide the required certification.

Restoration

Upon return from leave, you will be restored to your previous position or a position with equivalent seniority status, employee benefits, pay, and other terms and conditions of employment.

Retaliation

The Company will not retaliate or discriminate against employees who request or take leave in accordance with this policy.

Bone Marrow and Organ Donation Leave

Access Healthcare LLC will provide employees, who have been employed with the Company for at least 90 days, with a paid leave of absence for the purpose of donating organs or bone marrow. When donating an organ, you may take up to 30 paid business days in any one-year period. When donating bone marrow, you may take up to five paid business days in any one-year period. The one-year period for both leaves is measured from the date leave begins.

The Company will also provide employees with an additional unpaid leave of absence of up to 30 business days in a one-year period when donating an organ. The one-year period is measured from the date leave begins.

You are required to provide as much advance notice as possible if you wish to take leave to donate an organ or bone marrow. Provide Human Resources with verification from a physician that the donation will take place and that there is a medical necessity for the donation.

Leave taken under this policy does not constitute a break in service for health insurance coverage, accrual of vacation or sick pay, or seniority; however, the leave may not run concurrently with federal Family and Medical Leave Act or California Family Rights Act leave.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

California Family Rights Act (CFRA) Leave

Access Healthcare LLC provides unpaid family and medical leave to eligible employees in accordance with the California Family Rights Act (CFRA).

Eligibility

To be eligible for CFRA leave, you must:

- Have been employed for at least 12 months (52 weeks) with the Company prior to beginning CFRA leave; and
- Have worked for the Company for at least 1,250 hours during the 12-month period immediately before the leave is to start.

Reasons for Leave

You may take CFRA leave for the following reasons:

- The birth, adoption, or foster care placement of a child.
- To care for your own or your family member's serious health condition (not including disability due to pregnancy, childbirth, or related medical conditions).
- A qualifying exigency related to your spouse, domestic partner, child, or parent who is a military member on covered active duty or called to covered active duty status (or has been notified of an impending call or order to covered active duty).

As used in this policy:

- **Family member** means your child, parent, grandparent, grandchild, sibling, spouse, domestic partner, or designated person.
- Child means a biological, adopted, or foster child; a stepchild; a legal ward; a child of a domestic partner; or a person to whom you stand in loco parentis.
- **Designated person** means any person related to you by blood or whose association to you is the equivalent of a family relationship.
- **Parent** means a biological, foster, or adoptive parent; a parent-in-law; a stepparent; a legal guardian; or a person who stood in loco parentis to you when you were a child.
- **Sibling** means a person related to another person by blood, adoption, or affinity through a common legal or biological parent.

You may identify your designated person at the time you request CFRA leave. You may make this designation once per 12-month period for purposes of CFRA leave.

Leave Usage

Eligible employees may take up to 12 workweeks of leave per leave year. For purposes of this policy, the leave year is the calendar year.

CFRA leave is generally unpaid; however, you may elect to use applicable accrued leave to cover some or all of the leave taken. You may also be eligible for partial wage replacement benefits under California's Paid Family Leave (PFL) or State Disability Insurance (SDI) programs depending on your reason for leave. For additional information, contact Human Resources.

CFRA leave will run concurrently with other federal/state laws when permitted by law.

Intermittent Leave

When medically necessary, leave may be taken on an intermittent or a reduced work schedule.

Notice

If the need for leave is foreseeable (such as the birth of a child or planned medical treatment), you must provide reasonable advance notice and make a reasonable effort to schedule leave so that it will not unduly disrupt Company operations. If unforeseeable, provide notice as soon as practical. Notice should include the anticipated timing and duration of the leave.

Failure to comply with these notice rules is grounds for, and may result in, deferral of the request for leave until you comply with the notice requirement.

Certification

Where leave is requested for your own or a covered family member's serious health condition, the Company may require you to provide certification from your own or the Company's healthcare provider.

If leave is for your own serious health condition, certification must include:

- The date when the serious health condition began.
- The probable duration of the condition.
- A statement that, due to the serious health condition, you are unable to perform the function of your position.

If leave is for a covered family member's serious health condition, certification must include:

- The date when the serious health condition began.
- The probable duration of the condition.
- An estimate of the amount of time that the healthcare provider believes you are needed to care for the family member.
- A statement that the family member's serious health condition requires you to provide care during the period of treatment or supervision.

The Company may require subsequent recertification of your own serious health condition if additional leave is required.

If the Company has reason to doubt the validity of the certification provided, the Company may require, at its own expense, that you obtain a second opinion from a healthcare provider designated or approved by the Company. If the second opinion differs from the original certification, the Company may again require, at its own expense, that you obtain a third opinion from a different healthcare provider designated or approved jointly by you and the Company. The third opinion will be considered final and binding.

Return to Work

If you take leave for your own serious health condition, you must obtain certification from your healthcare provider that you are able to resume work.

Reinstatement

Upon return to work at the end of leave, you will be placed in your original job or an equivalent job with equivalent pay and benefits. You will not lose any benefits that accrued before leave was taken. You may not, however, be entitled to discretionary raises, promotions, bonus payments, or other benefits that become available during the period of leave.

Benefits

If the Company provides you with health benefits under a group health plan, the Company will maintain and pay for your health coverage for up to 12 weeks at the same level and under the same conditions as coverage would have been provided if you had not taken CFRA leave.

Failure to Return to Work

If you fail to return to work or fail to request an extension of leave prior to the expiration of the leave, you will be considered to have voluntarily terminated your employment. If you fail to return from leave, the Company may require reimbursement of the health insurance premiums paid during the leave under certain circumstances.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Disability Insurance

If you are unable to work for at least eight days due to a non-work-related illness or injury, or a pregnancy-related disability, you may be eligible for disability insurance benefits. Disability insurance is a component of California's State Disability Insurance (SDI) program, which is administered by the California Employment Development Department (EDD) and is funded by workers through SDI payroll deductions. Disability insurance provides eligible employees with up to 52 weeks of partial wage replacement benefits. Benefit amounts are based on a percentage of your wages paid during a specific 12-month base period, determined by the date your claim begins.

To apply for this benefit, you must provide written notice of the disability, including a doctor's certificate stating the nature of the disability and your expected date of return to work.

The SDI program does not create a right to a leave of absence, job protection, or job reinstatement.

You are responsible for filing your claim and other forms promptly and accurately with the EDD. To learn more about the SDI program, including eligibility requirements and benefits, or to make a claim for DI benefits, contact the EDD (www.edd.ca.gov).

Access Healthcare LLC will be notified that you have submitted a disability insurance claim.

Military Spouse Leave

Access Healthcare LLC provides up to 10 days of job-protected, unpaid leave to employees who are the spouse or registered domestic partner of a military member who is home on leave during a period of military

deployment.

To be eligible for military spouse leave you must:

- Work an average of 20 or more hours per week; and
- Be the spouse or registered domestic partner of a member of the Armed Forces, National Guard, or Reserves who is on leave from deployment during a period of military conflict.

Notify your Supervisor of your need for leave within two business days from the day you receive official notice that your spouse or registered domestic partner will be on leave from deployment. You must also provide written documentation certifying that your spouse or registered domestic partner will be on leave from deployment during the time you are requesting leave.

You may elect to use any available paid time off for which you are eligible under Company policy for the purpose of taking military spouse leave, and such paid time off will run concurrently with the leave afforded under this policy.

The Company will not discriminate or retaliate against employees who request or take leave in accordance with this policy.

Paid Family Leave Insurance

California's Paid Family Leave (PFL) insurance program provides eligible employees with up to eight weeks of partial wage replacement in any 12-month period to take time off from work to:

- Bond with a new child (either by birth, adoption, or foster care placement);
- Care for a seriously ill family member (child, parent, parent-in-law, grandparent, grandchild, sibling, spouse, or registered domestic partner); or
- Participate in a qualifying exigency related to the covered active duty, or call to covered active duty, of your spouse, domestic partner, child, or parent in the U.S. Armed Forces.

The 12-month period begins on the day a claim is submitted.

PFL insurance is funded entirely by workers through state disability insurance (SDI) payroll deductions. If you are currently receiving benefits from SDI or workers' compensation insurance, you may not be eligible to receive PFL benefits. The California PFL insurance program does not create a right to a leave of absence, job protection, or job reinstatement.

The PFL insurance program makes benefits available to eligible employees through the California Employment Development Department (EDD). Apply for PFL insurance directly with the EDD. Contact the EDD for information on eligibility or to obtain a claim form. Medical and other documentation may be required.

Paid Sick and Safe Leave (Accrual Method)

Access Healthcare LLC provides paid sick and safe leave to all eligible employees in accordance with California's Healthy Workplaces, Healthy Families Act.

Eligibility

All employees who have worked in California for at least 30 days within a year after beginning employment are entitled to earn sick and safe leave.

Reasons for Leave

Sick and safe leave may be taken for the following reasons:

- The diagnosis, care, or treatment of an existing health condition, or preventive care for you or your family member.
- To serve on an inquest or trial jury.
- To appear in court or as a witness in compliance with a subpoena or other court order.
- To attend judicial proceedings related to certain crimes if you or your family member was a victim.
- For certain reasons related to you or your family member (if your employer has 25 or more employees) being a victim of violence.
- For specific reasons related to victims of a qualifying act of violence. Refer to the Leave for Victims of Violence Policy for additional details.

Accrual and Usage

Eligible employees begin to accrue sick and safe leave upon employment at a rate of one hour for every 30 hours worked. You may not accrue more than 80 hours (10 days) of leave for any reason. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick leave accrues based on your normal schedule.

You may begin using sick and safe leave on your 90th day of employment. Once you have accrued 80 hours of leave, you will not accrue any more leave until you use some. You may only use up to 40 hours (five days) of your available sick and safe leave per leave year. For the purposes of this policy, the leave year is calendar year. You may not use more sick and safe leave than you have accrued or receive an advance of sick and safe leave that has not yet been accrued. Earned but unused sick and safe leave will carry over to the following leave year up to the 80-hour maximum accrual cap.

Compensation

If you are nonexempt, you will be compensated for sick and safe leave at your regular rate of pay. If you are exempt, you will be compensated for sick and safe leave in the same manner as the Company calculates wages for other forms of paid leave time.

Notice

If your need for leave is foreseeable, you must provide reasonable advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Documentation

In certain circumstances, the Company may request documentation verifying the appropriate use of leave.

Payment upon Termination

You will not be paid for any unused sick and safe leave when your employment ends.

Reinstatement of Leave upon Rehire

The Company will reinstate previously accrued, unused sick and safe leave if you separate and are rehired within one year.

Interaction with Other Leave

Sick and safe leave will run concurrently with other types of leave when permitted under applicable law.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Pregnancy Disability Leave

If you are disabled by pregnancy, childbirth, or a related medical condition, Access Healthcare LLC will provide you with up to four months of unpaid pregnancy disability leave (PDL).

Eligibility

To be eligible for PDL, you must suffer from a pregnancy-related disability. A ***pregnancy-related disability*** is a physical or mental condition related to pregnancy or childbirth that prevents you from performing the essential duties of your job, or would cause undue risk to you or your pregnancy's successful completion.

Conditions for which PDL is available include, but are not limited to:

- Severe morning sickness.
- Prenatal or postnatal care.
- Doctor ordered bed rest.
- Gestational diabetes.
- Pregnancy-induced hypertension.
- Preeclampsia.
- Post-partum depression.
- Lactation conditions such as mastitis.
- Loss or end of pregnancy.
- Recovery from loss or end of pregnancy.

Use of Leave

PDL may be taken before or after birth during any period of time (not to exceed four months) where you are physically unable to work due to your pregnancy-related disability. You may take PDL all at once or intermittently.

Where applicable under state and federal law, employees who qualify and are entitled to take PDL may also be eligible for leave under the California Family Rights Act (CFRA) and the federal Family and Medical Leave Act (FMLA). PDL and FMLA run concurrently. CFRA leave will be counted separately from PDL. CFRA leave will also be counted separately from FMLA leave taken for pregnancy disability, childbirth, or related medical conditions. An additional 12 weeks of bonding leave may also be available to qualified individuals. Speak with your Supervisor about your eligibility for these leaves.

Notice and Leave Request Process

Foreseeable Need for Leave

If the need for leave is foreseeable because of an expected birth/adoption or planned medical treatment, you must give at least 30 days' notice. If 30 days' notice is not practicable, give notice as soon as possible. You are expected to complete and return a leave request form prior to the beginning of leave. Failure to provide appropriate notice and/or complete and return the necessary paperwork will result in the delay or denial of leave.

Unforeseeable Need for Leave

If the need for leave is unforeseeable, provide notice as soon as practicable and possible under the facts of the particular case. Normal call-in procedures apply to all absences from work including those for which leave under this policy may be requested. Complete and return the necessary leave request form as soon as possible to obtain the leave. Failure to provide appropriate notice and/or complete and return the necessary paperwork on a timely basis will result in the delay or denial of leave.

Leave Request Process

To request leave under this policy, obtain a leave request form from Human Resources and return the completed form to Human Resources. If the need for leave is unforeseeable and you will be absent more than three days, contact Human Resources by telephone and request that a leave form be mailed to your home. If leave will be fewer than three days, complete and return the leave request form upon returning to work.

Call-In Procedures

In all instances of absence, follow the call-in procedures and standards established for giving notice of absence from work.

Paid Leave Utilization During Pregnancy Leave

You will be required to use available sick leave during PDL; however, you may opt to use any available vacation during your PDL in order to receive compensation.

If you are on PDL for eight or more consecutive calendar days, you may be eligible for partial wage replacement benefits under the California State Disability Insurance (SDI) program. You are responsible for applying for these benefits and can obtain forms from your health care provider.

Certification and Fitness for Duty Requirements

When requesting PDL, you must provide certification from a health care provider to qualify for leave. Such certification must be provided within 15 days of the request for leave unless it is not practicable under the circumstances despite your diligent efforts. Failure to provide certification may result in leave being delayed, denied, or revoked. At the discretion of the Company, you may also be required to obtain a second and third certification from another health care provider at Company expense (except for military care leave). Recertification of the continuance of a serious health condition or an injury/illness of a military service member will also be required at appropriate intervals.

Temporary Transfer and Other Accommodations

If you are suffering from a pregnancy related disability, you are entitled to a temporary transfer to another position or other reasonable accommodation based on the pregnancy-related disability if you request the transfer or reasonable accommodation and the request is based on the medical certification of a health care provider that a transfer or reasonable accommodation is medically advisable, and the request can be reasonably accommodated by the Company. All employees who are transferred to accommodate a pregnancy-related disability have the same reinstatement and other rights described below with respect to pregnancy-related disability leaves.

The Company may also require you to transfer temporarily to an available alternative position with the same pay and benefits in order to accommodate your need for intermittent leave or a reduced work schedule.

Benefits

If the Company provides you with health benefits under a group health plan, the Company will maintain and pay for your health coverage at the same level and under the same conditions as coverage would have been provided if you had not taken pregnancy disability leave. If you do not return to work at the end of your

pregnancy disability leave, the Company may recover the payment for your premiums under certain circumstances.

Return to Work

Upon returning to work at the end of leave, you will be placed in your original job or an equivalent job with equivalent pay and benefits. You will not lose any benefits that accrued before leave was taken. You may not, however, be entitled to discretionary raises, promotions, bonus payments, or other benefits that become available during leave.

At the completion of PDL, you will be required to obtain a release to return to work from your health care provider stating that you are able to resume your original job or duties.

Failure to Return

If you fail to return to work or fail to make a request for an extension of leave prior to the expiration of the leave, you will be deemed to have voluntarily terminated your employment.

Alternative Employment

While on leave of absence, you may not work or be gainfully employed either for yourself or others unless express, written permission to perform such outside work has been granted by the Company. If you are on a leave of absence and are found to be working elsewhere without permission, you will be automatically terminated.

False Reason for Leave

You will be terminated if you provide a false reason for a leave.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

School Disciplinary Leave

Access Healthcare LLC will provide eligible employees with unpaid leave, where permitted by law, to appear at their child's school if the child has been suspended and, for reasons specified in the California Education Code, they have been requested to attend a portion of a school day in the classroom of their child or ward.

Eligibility

All employees who are the parent or guardian of a student are eligible for school disciplinary leave.

Notice

You must provide documentation from the school of your need to take school disciplinary leave.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Witness Leave

Access Healthcare LLC realizes that, on occasion, employees may be subpoenaed or otherwise compelled to serve as witnesses in a judicial proceeding; in such case, you will be provided with unpaid leave to attend. You may opt to use any available paid leave (including paid sick leave) in place of the unpaid leave.

Upon receiving a subpoena (or other document compelling your attendance), notify your Supervisor as soon as possible to make scheduling arrangements.

The Company reserves the right to require you to provide proof of the need for leave to the extent authorized by law.

The Company will not discriminate or retaliate against employees who request or take leave in accordance with this policy.

San Diego Paid Sick and Safe Leave

Access Healthcare LLC provides paid sick and safe leave to eligible employees in accordance with the San Diego Earned Sick Leave Law and California's Healthy Workplaces, Healthy Families Act.

Eligibility

All employees who work at least two hours in a calendar week within the geographic boundaries of San Diego and who qualify as an employee entitled to minimum wage under California law are eligible for paid sick and safe leave.

Reasons for Leave

Sick and safe leave may be taken for the following reasons:

- Your own injury, illness, or medical condition; need for professional diagnosis or treatment of a medical condition; or for other medical reasons such as pregnancy or obtaining a physical examination.
- To provide care or assistance to a family member with an illness, injury, or medical condition, including assistance in obtaining professional diagnosis or treatment of a medical condition.
- If you or a family member are the victim of domestic violence, sexual assault, or stalking, time used to:
 - Seek medical attention;
 - Obtain services from a victim services organization;
 - Obtain psychological or other counseling;
 - Seek relocation; or
 - Seek legal services or take legal action, including preparing for or participating in any civil or criminal legal proceeding related to or resulting from the domestic violence, sexual assault, or stalking.
- Closure of your place of business by order of a public official due to a public health emergency.
- To care for your child whose school or place of care is closed due to a public health emergency.
- Any reason permitted under California's Healthy Workplaces, Healthy Families Act (see the California Paid Sick and Safe Leave policy).

Family member means:

- Your child (including biological, adopted, or foster child; stepchild; legal ward; child to whom you stand in loco parentis; or the child of your domestic partner).
- Your spouse or registered domestic partner.
- Your parent (including biological, foster, or adoptive parent; stepparent; legal guardian; or person who stood in loco parentis to you when you were a minor child).

- Your grandparent.
- Your grandchild.
- Your sibling (including half blood, whole blood, adopted, or step).
- Any person who would be considered a family member under California's Healthy Workplaces, Healthy Families Act (see the California Paid Sick and Safe Leave policy).

Accrual and Usage

Eligible employees accrue one hour of sick and safe leave for every 30 hours worked in San Diego, up to a maximum accrual of 80 hours. New employees begin accruing sick and safe leave on their first day of employment. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick leave accrues based on your normal schedule.

You may begin using sick and safe leave on your 90th day of employment, and you may use up to 40 hours of sick and safe leave per leave year. Unused, accrued sick and safe leave will be carried over to the following leave year, up to the accrual cap of 80 hours. For purposes of this policy, the leave year is calendar year.

Compensation

If you are nonexempt, you will be compensated for sick and safe leave at your regular rate of pay. If you are exempt, you will be compensated for sick and safe leave in the same manner as the Company calculates wages for other forms of paid leave time.

Notice

If the need for leave is foreseeable, you must provide reasonable advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Interaction with Other Leave

Sick and safe leave will run concurrently with other types of leave when permitted under applicable law.

Payment upon Termination

You will not be paid for any unused sick and safe leave when your employment ends.

Reinstatement of Leave upon Rehire

The Company will reinstate previously accrued, unused sick and safe leave if you separate and are rehired within one year.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

City of Los Angeles Paid Sick and Safe Leave

Access Healthcare LLC provides paid sick and safe leave to eligible employees in accordance with the City of Los Angeles Minimum Wage and Sick Time Benefits Law and California's Healthy Workplaces, Healthy Families Act.

Eligibility

To be eligible for sick and safe leave, you must:

- Work at least two hours in a particular week within the geographic boundaries of the City of Los Angeles;
- Qualify as an employee entitled to minimum wage under California law; and
- Have worked in the City of Los Angeles for the Company for 30 days or more within any 12-month period.

Reasons for Leave

Sick and safe leave may be taken for the following reasons:

- The diagnosis, care, or treatment of an existing health condition or preventive care for you or your family member.
- If you are a victim of domestic violence, sexual assault, or stalking, to:
 - Seek legal or equitable relief to help ensure the health, safety, and welfare of you or your child (e.g. a restraining order).
 - Seek medical attention caused by domestic violence, stalking, or sexual assault.
 - Obtain services from a domestic violence shelter, domestic violence program, rape crisis center, or victim services organization or agency.
 - Obtain psychological counseling (including mental health services).
 - Participate in safety planning and take other actions to increase safety from future domestic violence, assault, or stalking, including temporary or permanent relocation.
- Any reason permitted under California's Healthy Workplaces, Healthy Families Act (see the California Paid Sick and Safe Leave policy).

Accrual and Usage

Eligible employees accrue one hour of sick and safe leave for every 30 hours worked in the City of Los Angeles, up to a maximum of 80 hours (10 days). New employees begin accruing sick and safe leave on their first day of employment. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick and safe leave accrues based on your normal schedule. For purposes of this policy, the leave year is **calendar year**.

You may begin using sick and safe leave on your 90th calendar day of employment. Once you have accrued 80 hours of leave, you will not accrue any more leave until you use some. You may use up to 48 hours of sick and safe leave per leave year. Unused, accrued sick and safe leave will be carried over to the next leave year, up to the accrual cap of 80 hours.

Compensation

If you are nonexempt, you will be compensated for sick and safe leave at your regular rate of pay. If you are exempt, you will be compensated for sick and safe leave in the same manner as the Company calculates wages for other forms of paid leave time.

Notice

If the need for leave is foreseeable, you must provide reasonable advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Interaction with Other Leave

Sick and safe leave will run concurrently with other types of leave when permitted under applicable law.

Payment upon Termination

You will not be paid for any unused sick and safe leave when your employment ends.

Reinstatement of Leave upon Rehire

The Company will reinstate previously accrued, unused sick and safe leave if you separate and are rehired within one year.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Emeryville Paid Sick and Safe Leave

Access Healthcare LLC provides paid sick and safe leave to eligible employees in accordance with the Emeryville Paid Sick Leave Law and California's Healthy Workplaces, Healthy Families Act.

Eligibility

All employees who work at least two hours in a calendar week within the geographic boundaries of Emeryville and who qualify as an employee entitled to minimum wage under California law are eligible for paid sick and safe leave.

Reasons for Leave

Sick and safe leave may be taken for the following reasons:

- To provide care or assistance to, or to obtain medical care (including preventive care), treatment, or diagnosis for your own or your family member's illness or injury or other medical condition (including pregnancy).
- To aid or care for your own or your family member's guide dog, signal dog, or service dog.
- Any reason permitted under California's Healthy Workplaces, Healthy Families Act (see the California Paid Sick and Safe Leave policy).

Family member means:

- Your child (including a biological, adopted, or foster child; legal ward; child of a domestic partner; or child for whom you stand in loco parentis).
- Your spouse, registered domestic partner, or designated person in lieu of a spouse or domestic partner.
- Your parents, or your spouse or registered domestic partner's parents (including biological, foster, step, and adoptive parents; legal guardians; or persons who stood in loco parentis when you, or your spouse or domestic partner, were a minor child).
- Your grandparents.
- Your grandchildren.
- Your siblings.
- Any person who would be considered a family member under California's Healthy Workplaces, Healthy Families Act (see the California Paid Sick and Safe Leave policy).

Accrual and Usage

Eligible employees accrue one hour of sick and safe leave for every 30 hours worked in Emeryville. You may not accrue more than 80 hours (10 days) of leave for any reason. New employees begin accruing leave on their first

day of employment. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick and safe leave accrues based on your normal schedule.

You may begin using sick and safe leave on your 90th calendar day of employment. Once you have accrued 80 hours of sick and safe leave, you will not accrue any more leave until you use some. Unused, accrued leave may be carried over to the following leave year, up to the 80-hour maximum accrual cap. For purposes of this policy, the leave year is calendar year.

Compensation

If you are nonexempt, you will be compensated for sick and safe leave at your regular rate of pay. If you are exempt, you will be compensated for sick and safe leave in the same manner as the Company calculates wages for other forms of paid leave time.

Notice

If the need for leave is foreseeable, you must provide reasonable advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Interaction with Other Leave

Sick and safe leave will run concurrently with other types of leave when permitted under applicable law.

Payment upon Termination

You will not be paid for any unused sick and safe leave when your employment ends.

Reinstatement of Leave upon Rehire

The Company will reinstate previously accrued, unused sick and safe leave if you separate and are rehired within 12 months.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Oakland Paid Sick and Safe Leave

Access Healthcare LLC provides paid sick and safe leave to eligible employees in accordance with Oakland's Paid Sick Leave Law and California's Healthy Workplaces, Healthy Families Act.

Eligibility

All employees who work at least two hours in a week within the geographic boundaries of Oakland and who qualify as an employee entitled to minimum wage under California law are eligible for paid sick and safe leave.

Reasons for Leave

Sick and safe leave may be taken:

- When you are physically or mentally unable to perform your job duties due to illness, injury, pregnancy, or medical condition.

- To obtain a professional diagnosis or treatment of a medical condition or undergo a physical examination.
- To aid or care for a family member who is ill, injured, or receiving medical care, treatment, or diagnosis.
- For any reason permitted under California's Healthy Workplaces, Healthy Families Act (see the California Paid Sick and Safe Leave policy).

Family member means:

- Your child (including biological, adopted, step, or foster child; child of your domestic partner; or in loco parentis relationship), ward, or grandchild.
- Your parent, grandparent, or legal guardian.
- Your sibling.
- Your spouse, registered domestic partner under any state or local law, or designated person in lieu of spouse or domestic partner (with relationships including those from adoption, step, and foster care relationships).
- Any person who would be considered a family member under California's Healthy Workplaces, Healthy Families Act (see the California Paid Sick and Safe Leave policy).

Accrual and Usage

Eligible employees accrue one hour of sick and safe leave for every 30 hours worked in Oakland, up to a maximum of 80 hours (10 days). New employees begin accruing leave on their first day of employment. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick and safe leave accrues based on your normal schedule.

You may begin using sick and safe leave on your 90th day of employment. Once you have accrued 80 hours of leave, you will not accrue any more leave until you use some. The smallest increment of leave you may take is one hour. Unused leave may be carried over to the following leave year, up to the accrual cap of 80 hours. For purposes of this policy, the leave year is **calendar year**.

Compensation

If you are nonexempt, you will be compensated for sick and safe leave at your regular rate of pay. If you are exempt, you will be compensated for sick and safe leave in the same manner as the Company calculates wages for other forms of paid leave time.

Notice

If the need for leave is foreseeable, you must provide reasonable advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Interaction with Other Leave

Sick and safe leave will run concurrently with other types of leave when permitted under applicable law.

Payment upon Termination

You will not be paid for any unused sick and safe leave when your employment ends.

Reinstatement of Leave upon Rehire

The Company will reinstate previously accrued, unused sick and safe leave if you separate and are rehired within 12 months.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

San Francisco Paid Sick and Safe Leave

Access Healthcare LLC provides paid sick and safe leave to eligible employees in accordance with the San Francisco Paid Sick Leave Ordinance and California's Healthy Workplaces, Healthy Families Act.

Eligibility

All employees who perform work within the geographic boundaries of the city and county of San Francisco for at least 56 hours in a calendar year for the Company are eligible for paid sick and safe leave.

Reasons for Leave

Sick and safe leave may be taken for the following reasons:

- For your own illness, injury, medical condition; need for medical diagnosis, care (including preventive care), or treatment; or other medical reasons.
- To care for or assist a family member with an illness, injury, medical condition; need for medical diagnosis, care (including preventive care), or treatment; or other medical reason.
- If you are the victim of domestic violence, sexual assault, or stalking, time used to:
 - Obtain relief to help ensure your own or your child's safety, health, or welfare, including obtaining a temporary restraining order, restraining order, or other injunctive relief;
 - Obtain medical attention for injuries caused by domestic violence, sexual assault, or stalking;
 - Obtain services from a domestic violence shelter, program, or rape crisis center;
 - Obtain psychological counseling; or
 - Participate in safety planning and take other actions to increase safety from future domestic violence, sexual assault, or stalking, including temporary or permanent relocation.
- For purposes related to your donating of bone marrow or an organ to another person, or to care for yourself or a family member who is donating their bone marrow or an organ to another person.
- Any reason permitted under California's Healthy Workplaces, Healthy Families Act (see the California Paid Sick and Safe Leave policy).

Family member means:

- Your child (including biological, adopted, step, or foster child; child of your spouse or domestic partner; or in loco parentis relationship).
- Your own or your spouse or domestic partner's parent (including biological, adopted, step, or foster parent, or person who stood in loco parentis when you were a minor child).
- Your legal guardian or ward.
- Your sibling (including biological, adopted, step, or foster sibling).
- Your grandparent (including biological, adopted, step, or foster grandparent).
- Your grandchild (including biological, adopted, step, or foster grandchild).
- Your spouse or registered domestic partner, or a designated person in lieu of a spouse or domestic partner.
- Any person who would be considered a family member under California's Healthy Workplaces, Healthy Families Act (see the California Paid Sick and Safe Leave policy).

Accrual and Usage

Eligible employees accrue one hour of sick and safe leave for every 30 hours worked in San Francisco, up to 80 hours (10 days). New employees begin accruing leave on their first day of employment. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick and safe leave accrues based on your normal schedule.

You may begin using sick and safe leave on your 90th day of employment. Once you have accrued 80 hours, you will not accrue more hours until you use some. The smallest increment of leave you may take is one hour. Unused, accrued sick and safe leave may be carried over to the following leave year, up to 80 hours. For purposes of this policy, the leave year is **calendar year**.

Compensation

If you are nonexempt, you will be compensated for sick and safe leave at your regular rate of pay. If you are exempt, you will be compensated for sick and safe leave in the same manner as the Company calculates wages for other forms of paid leave time.

Notice

If the need for leave is foreseeable, you must provide reasonable advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Interaction with Other Leave

Sick and safe leave will run concurrently with other types of leave when permitted under applicable law.

Payment upon Termination

You will not be paid for any unused sick and safe leave when your employment ends.

Reinstatement of Leave upon Rehire

The Company will reinstate previously accrued, unused sick and safe leave if you separate and are rehired within 12 months.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Santa Monica Paid Sick and Safe Leave

Access Healthcare LLC provides paid sick and safe leave to eligible employees in accordance with the Santa Monica Minimum Wage and Paid Sick Leave Law and California's Healthy Workplaces, Healthy Families Act.

Eligibility

All employees who work at least two hours in a calendar week within the geographic boundaries of Santa Monica and who qualify as an employee entitled to minimum wage under California law are eligible for paid sick and safe leave.

Reasons for Leave

Sick and safe leave may be taken for the following reasons:

- Diagnosis, care, or treatment of an existing health condition of, or preventive care for, yourself or a family member.
- If you are the victim of domestic violence, sexual assault, or stalking, time used to:
 - Obtain relief to help ensure your own or your child's safety, health, or welfare, including obtaining a temporary restraining order, restraining order, or other injunctive relief;
 - Obtain medical attention for injuries caused by domestic violence, sexual assault, or stalking;
 - Obtain services from a domestic violence shelter, program, or rape crisis center;
 - Obtain psychological counseling; or
 - Participate in safety planning and take other actions to increase safety from future domestic violence, sexual assault, or stalking, including temporary or permanent relocation.
- Any reason permitted under California's Healthy Workplaces, Healthy Families Act (see the California Paid Sick and Safe Leave policy).

Accrual and Usage

Eligible employees accrue one hour of sick and safe leave for every 30 hours worked in Santa Monica, up to a maximum of 80 hours (10 days). New employees begin accruing sick and safe leave on their first day of employment. For purposes of this policy, the leave year is **calendar year**. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick and safe leave accrues based on your normal schedule.

You may begin using sick and safe leave on your 90th day of employment. Unused, accrued sick and safe leave may be carried over to the following leave year, up to the accrual cap of 80 hours.

Compensation

If you are nonexempt, you will be compensated for sick and safe leave at your regular rate of pay. If you are exempt, you will be compensated for sick and safe leave in the same manner as the Company calculates wages for other forms of paid leave time.

Notice

If the need for leave is foreseeable, you must provide reasonable advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Interaction with Other Leave

Sick and safe leave will run concurrently with other types of leave when permitted under applicable law.

Payment upon Termination

You will not be paid for any unused sick and safe leave when your employment ends.

Reinstatement of Leave upon Rehire

The Company will reinstate previously accrued, unused sick and safe leave if you separate and are rehired within one year.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Berkeley Paid Sick and Safe Leave

Access Healthcare LLC provides paid sick and safe leave to eligible employees in accordance with the Berkeley Paid Sick Leave Ordinance and California's Healthy Workplaces, Healthy Families Act.

Eligibility

All employees who work at least two hours in a calendar week within the geographic boundaries of Berkeley and who qualify as an employee entitled to minimum wage under California law are eligible for sick and safe leave.

Reasons for Leave

Sick and safe leave may be used for:

- The diagnosis, care, or treatment of your own, or a family member's, illness or injury.
- Any reason permitted under California's Healthy Workplaces, Healthy Families Act (see the California Paid Sick and Safe Leave policy).

Family member means:

- Your child (including your biological, adopted, step, or foster child, the child of your domestic partner, a child to whom you stand in loco parentis, or legal ward).
- Your parent (including your biological, adopted, step, or foster parent).
- Your grandchild (including your biological, adopted, step, or foster grandchild).
- Your grandparent (including your biological, adopted, step, or foster grandparent).
- Your sibling (including your biological, adopted, step, or foster sibling).
- Your spouse, registered domestic partner under any state or local law, or designated person in lieu of a spouse or domestic partner.
- Any person who would be considered a family member under California's Healthy Workplaces, Healthy Families Act (see the California Paid Sick and Safe Leave policy).

Accrual and Usage

Eligible employees accrue one hour of sick and safe leave for every 30 hours worked in Berkeley, up to a maximum accrual cap of 80 hours (10 days). New employees begin accruing leave on their first day of employment. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick and safe leave accrues based on your normal schedule. For purposes of this policy, the leave year is **calendar year**.

You may begin using sick and safe leave after 90 calendar days of employment. Unused leave will be carried over to the following leave year, up to the accrual cap of 80 hours.

Compensation

If you are nonexempt, you will be compensated for sick and safe leave at your regular rate of pay. If you are exempt, you will be compensated for sick and safe leave in the same manner as the Company calculates wages for other forms of paid leave time.

Notice

If the need for leave is foreseeable, you must provide reasonable advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Interaction with Other Leave

Sick and safe leave will run concurrently with other types of leave when permitted under applicable law.

Payment upon Termination

You will not be paid for any unused sick and safe leave when your employment ends.

Reinstatement of Leave upon Rehire

The Company will reinstate previously accrued, unused sick and safe leave if you separate and are rehired within 12 months.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

San Francisco Paid Parental Leave

In accordance with the San Francisco Paid Parental Leave Ordinance (SF PPLO), Access Healthcare LLC will provide up to eight weeks of supplemental compensation to eligible employees who are receiving California Paid Family Leave (CA PFL) benefits to bond with a new baby, adopted child, or foster child.

Eligibility

To be eligible for SF PPLO benefits, you must:

- Be receiving CA PFL benefits to bond with your new child;
- Have worked for the Company for at least 180 days before CA PFL begins;
- Work at least eight hours per week within the geographical boundaries of San Francisco; and
- Work at least 40% of your total hours within the geographical boundaries of San Francisco.

Amount

Supplemental compensation is the difference between your normal gross weekly wage and the CA PFL benefit amount (up to a maximum cap).

If you contribute to the cost of your health insurance premiums or retirement benefits, the Company may deduct those contributions from your supplemental compensation payment.

Applying for Benefits

To receive SF PPLO benefits, you must do the following:

1. Apply for CA PFL benefits for new child bonding through the California Employment Development Department (EDD).
2. Complete the SF Paid Parental Leave Form (SF PPL Form).
3. Submit the SF PPL Form and EDD Notice of Computation to the Company. You will receive this notice from the EDD, which will include your weekly benefit amount after you apply for CA PFL.
4. If requested, provide the Company with the EDD Notice of Payment (provided to you by the EDD).

For additional information on the SF PPLO or how to apply for benefits, contact Human Resources or the San Francisco Office of Labor Standards Enforcement (OLSE) at:

- Email: pplo@sfgov.org
- Phone: (415) 554-4190
- Online: <http://sfgov.org/pplo>

Retaliation

The Company will not retaliate or discriminate against employees who request or obtain benefits in accordance with the SF PPLO.

Colorado Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation because of an individual's membership, or perceived membership, in a protected class. For purposes of this policy, protected classes include: age (40 or older), sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related conditions), race (including hair texture, hair type, hair length, or a protective hairstyle commonly or historically associated with race, such as braids, locs, twists, tight coils or curls, cornrows, Bantu knots, Afros, and headwraps), national origin, disability, creed, religion, genetic information, ancestry, marital status, military or veteran status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment. Harassment means to engage in any unwelcome physical or verbal conduct or any written, pictorial, or visual communication directed at an individual or group of individuals because of that individual's or group's membership, or perceived membership, in a protected class where such conduct or communication is subjectively offensive to the individual or group alleging harassment and is objectively offensive to a reasonable individual who is a member of the same protected class. The conduct or communication need not be severe or pervasive to constitute discrimination if:

- Submission to the conduct or communication is explicitly or implicitly made a term or condition of the individual's employment;
- Submission to, objection to, or rejection of the conduct or communication is used as a basis for employment decisions affecting the individual; or
- The conduct or communication has the purpose or effect of unreasonably interfering with the individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to list all the circumstances that may constitute workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Prohibited harassment includes sexual harassment. The following are some examples of conduct that may constitute sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Colorado Overtime & Minimum Pay Standards (COMPS) Order Notice

The Company is required to provide you with a copy of the latest Colorado Overtime and Minimum Pay Standards Order (COMPS Order) or COMPS Order poster with this handbook. A copy of the latest COMPS Order poster is included at the end of this handbook.

Meal and Rest Periods

Access Healthcare LLC strives to provide a safe and healthy work environment and complies with all federal and state regulations regarding meal and rest periods. Check with your Supervisor regarding procedures and schedules for rest and meal breaks. The Company requires employees to accurately observe and record meal and rest periods. If you know in advance that you may not be able to take your scheduled break or meal period, let your Supervisor know; in addition, notify your Supervisor as soon as possible if you were unable to or prohibited from taking an uninterrupted meal or rest period.

In Colorado, employees are entitled to an uninterrupted and duty-free unpaid 30-minute meal period for all shifts exceeding five consecutive hours. If practical, these meal periods will be at least one hour after the start and one hour before the end of the shift. If this is not possible or is impractical, you will be permitted to consume an "on duty" meal while performing your work duties, and this meal period will be paid.

Additionally, you are entitled to a paid 10-minute rest period for each four hours of work, or major fraction thereof, as follows:

Periods Required	Number of rest breaks
2 or fewer	0
Over 2, and up to 6	1
Over 6, and up to 10	2
Over 10, and up to 14	3
Over 14, and up to 18	4
Over 18, and up to 22	5
Over 22	6

Rest periods must be in the middle of each four-hour work period, unless it is impractical. It is not necessary that you leave Company property for a rest period. Rest periods will be 10 minutes unless otherwise provided by applicable law.

Required rest periods are "time worked" for the purposes of calculating minimum wage and overtime obligations.

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for hours worked in excess of 40 hours in a workweek, 12 hours per workday, and 12 consecutive hours without regard to the starting and ending time of the workday (excluding duty free meal periods), whichever calculation results in the greater payment of wages. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Paid Public Health Emergency Leave

During a declared public health emergency, in addition to the paid sick leave provided under the Colorado Paid Sick Leave Policy, Access Healthcare LLC will also provide employees with paid public health emergency leave (supplemental paid sick leave) in accordance with the Colorado Healthy Families and Workplaces Act. For purposes of this policy, **public health emergency** means:

- An act of bioterrorism, a pandemic influenza, or an epidemic caused by a novel and highly fatal infectious agent for which 1) an emergency is declared by a federal, state, or local public health agency; or 2) a disaster emergency is declared by the governor; or
- A highly infectious illness or agent with epidemic or pandemic potential for which a disaster emergency is declared by the governor.

Public health emergency leave may be used for the following reasons:

1. To self-isolate due to either being diagnosed with or having symptoms of a communicable illness that is the cause of a public health emergency;
2. To seek diagnosis, treatment, or care (including preventive care) of such illness;
3. Exclusion from work by a government health official or by your employer due to your exposure to, or symptoms of, such illness;
4. Inability to work due to a health condition that may increase your susceptibility or risk of such illness; or
5. To care for a child or other family member who is in category 1, 2, or 3 above, or whose school, childcare provider, or other care provider is either unavailable, closed, or providing remote instruction due to the public health emergency.

Public health emergency leave will be provided, as needed, in addition to any paid sick leave that you have already accrued. If you normally work 40 or more hours in a week, you will be provided with enough public health emergency leave to ensure that you are able to take 80 hours of leave during a public health emergency. If you work fewer than 40 hours per week, you will be provided with enough public health emergency leave to ensure that you are able to take leave equal to the amount of time that you are scheduled to work in a 14-day period or the amount of time you actually work on average in a 14-day period—whichever is greater.

You may use any public health emergency leave that is provided under this policy before using any paid sick leave that you had prior to the public health emergency.

Public health emergency leave expires four weeks after the official termination or suspension of the public health emergency. During a public health emergency, you will continue to accrue paid sick leave as outlined in the Colorado Paid Sick Leave Policy.

You must provide notice of your need for public health emergency leave as soon as practical if your need for leave is foreseeable and the Company is not closed. If the need for leave is unforeseeable, provide notice as soon as possible.

You will not be required to provide any documentation for public health emergency leave.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Paid Family and Medical Leave Insurance

Colorado's Family and Medical Leave Insurance (FAMLI) program provides eligible employees with paid leave to care for themselves or their family members under certain circumstances. The program is administered by the Colorado Department of Labor and Employment, Division of Family and Medical Leave Insurance (FAMLI Division). Program premiums are funded through employee payroll deductions.

Eligibility

To be eligible for FAMLI leave, you must have earned at least \$2,500 in wages in Colorado over the previous year.

Reasons for Leave

FAMLI leave can be taken for the following reasons:

- The birth of a child and to care for that child (leave must be completed within one year of the child's birth).
- The adoption or foster care placement of a child with you and to care for that child (leave must be completed within one year of the child's placement).
- To care for a family member with a serious health condition.
- To care for your own serious health condition.
- A qualifying exigency of a family member who is a military member on covered active duty or called to covered active-duty status (or has been notified of an impending call or order to covered active duty).
- To obtain safe housing, care, and/or legal assistance in response to domestic violence, stalking, sexual assault, or sexual abuse.

Leave Usage

If eligible, you may take up to 12 weeks of FAMLI leave per year. This may be extended by the following additional amounts:

- Four weeks (for a total of 16 weeks) if you have a serious health condition caused by pregnancy or childbirth complications.
- Twelve weeks (for a total of 24 weeks) if your child is receiving inpatient care in a neonatal intensive care unit.

Leave may be taken continuously, intermittently, or in the form of a reduced schedule.

FAMLI leave will run concurrently with other leave when permissible under applicable law.

You may choose, but are not required, to use sick leave or other paid time off before using FAMLI leave.

Notice

If leave is foreseeable, you must provide at least 30 days' notice. If leave is unforeseeable, you must provide notice as soon as practical.

Applying for Leave

You must apply for FAMLI leave with the FAMLI Division. Instructions on how to file are available on the FAMLI Division website (<https://famli.colorado.gov/>). You have up to 30 days after leave has started to apply.

Compensation

FAMLI leave benefits will be paid at a rate based on your average weekly wage. You can estimate your potential benefits by using the calculator at <https://famli.colorado.gov/individuals-and-families/how-famli-works/premium-and-benefits-calculator>.

Continuation of Health Benefits

If the Company provides you with health benefits under a group health plan, the Company will maintain your health coverage at the same level and under the same conditions as if you had been continuously employed. You will be responsible for paying your share of the cost of health benefits as required prior to beginning leave.

Restoration

If you worked for the Company for at least 180 days prior to taking leave, you will generally be restored to your previous position or an equivalent position with equivalent employment benefits, pay, and other terms and conditions of employment.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Family Care Leave

In accordance with Colorado's Family Care Act, if you are eligible for leave under the federal Family and Medical Leave Act (FMLA), you may also take leave to care for a person who has a serious health condition (as defined under the FMLA) if that person:

- Is your partner in a civil union (as defined under Colorado law); or
- Is your domestic partner, and:
 - Has registered the domestic partnership with the municipality in which they reside or with the state, if applicable; or
 - Is recognized by the Company as your domestic partner.

When requesting leave under this policy, you may be required to provide reasonable documentation or a written statement of family relationship, in accordance with the FMLA, to confirm your relationship status. Additionally, you may be required to submit the same certification as required under the FMLA.

Leave will run concurrently with other types of leave where permitted under applicable law.

See the FMLA policy for additional information.

Domestic Violence Leave

Access Healthcare LLC will provide employees who are victims of domestic violence, including sexual abuse, stalking, sexual assault, or any other crime including an act found by a court to be domestic violence, up to three days of unpaid leave time within a 12-month period.

Eligibility

You must have been employed with the Company for 12 or more months to be eligible for this leave.

Use of Leave

You may use leave available under this policy to:

- Seek a civil protection order to prevent domestic abuse.
- Obtain medical care and/or medical health counseling for yourself or your children to address physical or psychological injuries resulting from the act of domestic abuse, stalking, sexual assault, or other crime involving domestic violence.

- Make your home secure from the perpetrator of the crime or seek new housing to escape the perpetrator.
- Seek legal assistance to address issues arising from the crime and attend and prepare for court-related proceedings arising from the act or crime.

Notice

Except in a case of imminent danger, if you are seeking leave from work under this policy you must provide the Company with advance notice of the leave. In addition, the Company may require you to provide documentation verifying the need for the leave. Confidentiality of the situation will be maintained to the extent possible.

Before taking unpaid leave under this policy, you must exhaust any available annual vacation leave, PTO, personal leave, and sick leave, if applicable.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Paid Sick Leave (Accrual Method)

Access Healthcare LLC provides paid sick leave to eligible employees in accordance with the Colorado Healthy Families and Workplaces Act.

Eligibility

All employees who work in Colorado are eligible for sick leave.

Reasons for Leave

Sick leave may be taken for the following reasons:

- To care for your own, or a family member's, mental or physical illness, injury, or health condition; to obtain medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition; or to obtain preventative medical care.
- If you or a family member have been the victim of domestic abuse, sexual assault, or harassment, in order to:
 - Seek medical attention or to recover from a mental or physical illness, injury, or health condition caused by the domestic abuse, sexual assault, or harassment;
 - Obtain services from a victim services organization;
 - Obtain mental health or other counseling;
 - Seek relocation due to the domestic abuse, sexual assault, or harassment; or
 - Seek legal services, including preparation for or participation in a civil or criminal proceeding related to or resulting from the domestic abuse, sexual assault, or harassment.
- Due to a public health emergency, a public official has ordered the closure of:
 - Your place of business; or
 - Your child's school or place of care and you need to be absent from work to care for your child.
- To care for a family member whose school or place of care has been closed due to inclement weather, loss of power, loss of heating, loss of water, or other unexpected occurrence or event.
- To evacuate your place of residence due to inclement weather, loss of power, loss of heating, loss of water, or other unexpected occurrence or event.
- To grieve, attend funeral services or a memorial, or deal with financial and legal matters that arise after the death of a family member.

Family member means:

- A person who is related to you by blood, marriage, civil union, or adoption;
- A child to whom you stand in loco parentis or a person who stood in loco parentis to you when were you were a child; or
- A person for whom you are responsible for providing or arranging health- or safety-related care.

Public health emergency means:

- An act of bioterrorism, a pandemic influenza, or an epidemic caused by a novel and highly fatal infectious agent, for which: 1) an emergency is declared by a federal, state, or local public health agency; or 2) a disaster emergency is declared by the governor; or
- A highly infectious illness or agent with epidemic or pandemic potential for which a disaster emergency is declared by the governor.

Accrual and Usage

Eligible employees accrue one hour for every 30 hours worked up to a maximum accrual of 48 hours in a leave year. You will begin accruing sick leave on your first day of employment. For purposes of this policy, the leave year is calendar year. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick leave accrues based on your normal schedule. You may begin using sick leave as it accrues.

You may use a maximum of 48 hours of sick leave in a leave year. You may carry over up to 48 hours of unused accrued sick leave to the following leave year; however, the maximum amount of leave you may have in your sick leave bank at any given time is 48 hours.

Compensation

You will be compensated for sick leave at the same rate and with the same benefits, including health benefits, as you normally earn during hours worked, not including overtime, bonuses, or holiday pay. In no instance will this be less than the applicable minimum wage.

Notice

If the need for leave is foreseeable, you must make a good-faith effort to provide advance notice and make a reasonable effort to schedule leave in a manner that does not unduly disrupt the Company. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Documentation

If you are absent for four or more consecutive days, you may be requested to provide reasonable documentation as soon as you are reasonably able to provide it, showing that the leave is being taken for permitted purposes.

Payment upon Termination

You will not be paid for any unused sick leave when your employment ends.

Interaction with Other Leave

Sick leave will run concurrently with the federal Family and Medical Leave Act and/or other leaves where permitted under state and federal law.

Transfers

If you transfer to another division, entity, or location, you are entitled to all previously unused sick leave and may use it as described in this policy.

Reinstatement of Sick Leave upon Rehire

The Company will reinstate previously accrued, unused sick leave if you separate and are rehired within six months.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Safety and Loss Prevention

Colorado Workplace Public Health Rights Notice

The Company is required to provide you with information regarding your rights under the Colorado Healthy Families and Workplaces Act (HFWA) and the Colorado Public Health Emergency Whistleblower Law (PHEW). A copy of the latest Colorado Workplace Public Health Rights poster, included at the end of this handbook, satisfies this requirement.

Connecticut Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age, race (including traits historically associated with race, which include, but are not limited to, hair texture and protective hairstyles such as wigs, headwraps, braids, cornrows, locs, twists, Bantu knots, Afros, and Afro puffs), color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), disability (physical, mental, intellectual, or learning), genetic information (including testing and characteristics), erased criminal history record information, marital or civil union status, status as a victim (of domestic violence, sexual assault, or trafficking in persons), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as any unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when: (1) submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of substantially interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment.

Sexual harassment can happen to anyone, regardless of the gender of either the harasser or the person harassed. Employees, interns, temporary workers, and visitors to places of public accommodations are all

protected by sexual harassment laws. Anyone in a workplace could be a sexual harasser, from supervisors and coworkers to vendors and visitors.

Sexual harassment does not have to occur in the workplace for it to be illegal. For example, it can be at an off-site office holiday party or at a happy hour. It also does not have to take place face-to-face but can occur on social media or through text messages.

Examples of **quid pro quo** sexual harassment, which occurs when someone in a position of power offers a benefit in exchange for sexual attention or threatens your job if you refuse sexual attentions, include:

- You are offered a job or promotion in return for sexual favors.
- Your supervisor threatens to cut your hours if you will not date them.
- You are offered a better schedule or a raise if you send your boss nude pictures.
- Your boss threatens you with a poor performance review if you do not go out to dinner with them.

Examples of a **hostile work environment**, which is when a coworker, supervisor, or third party makes repeated inappropriate and unwanted sexual advances, comments, or requests, include:

- People at work talk about sex all day.
- There are posters of scantily dressed models in the workplace.
- People comment about other employees' bodies.
- Someone at work touches you without your consent.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above-protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above-protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

State and Federal Remedies

In addition to the Company reporting process, if you believe you have been subjected to discrimination or harassment, you may file a formal complaint with either or both of the government agencies listed here. Using the Company complaint process does not prohibit you from filing a complaint with these agencies. Note that claims must be filed with the Equal Employment Opportunity Commission (EEOC) and the Connecticut Commission on Human Rights and Opportunities (CCHRO) within 300 days of the alleged act of discrimination or harassment.

Individuals who engage in discrimination or harassment may also be subject to civil and criminal penalties. Remedies for discrimination and/or harassment may include:

- Cease and desist orders.
- Back pay.
- Compensatory damages.
- Hiring, promotion, or reinstatement.

Contact Information

EEOC Boston Office

Address: John F. Kennedy Federal Building, 15 New Sudbury Street, Room 475, Boston, MA 02203-0506

Phone: 800-669-4000

Fax: 617-565-3196

TTY: 800-669-6820

ASL Video Phone: 844-234-5122

Website: <https://publicportal.eeoc.gov/Portal/Login.aspx>

CCHRO

Address: 450 Columbus Blvd., Suite 2, Hartford CT 06103-1835

Phone: 860-541-3400

Toll Free: 800-477-5737

Email: See website for regional office email addresses

Website: <https://portal.ct.gov/chro/>

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Leave of Absence for Public Officials

Access Healthcare LLC will provide employees who leave employment to accept a full-time elective municipal or state office with an unpaid personal leave of absence for up to two consecutive terms of such office.

You must provide written notice to the Company that you are a candidate for a full-time municipal or state office within 30 days of being nominated.

At the expiration of your term of office, and upon reapplication for your original position, you will be reinstated to your original position or to a similar position with equivalent pay and accumulated seniority, retirement, fringe benefits, and other service credits unless the Company's circumstances have so changed as to make it impossible or unreasonable to do so.

The Company will not retaliate against employees who request or take a leave of absence in accordance with this policy.

Employment Protections for Civil Air Patrol Members

If you are a member of the Civil Air Patrol, Access Healthcare LLC will not discriminate against, discipline, or discharge you because of your membership or because you are absent from work due to serving in your role as a Civil Air Patrol member for the purpose of:

- Responding to an emergency declared by the governor, or by the President of the United States;
- Responding to a request for assistance in an emergency, natural disaster, or life-threatening event at the request of the U.S. Air Force or Coast Guard, the Department of Emergency Services and Public Protection, the Division of Emergency Management and Homeland Security within the Department of Emergency Services and Public Protection, the state police, or a local police department; or
- Participating in required emergency services training programs and exercises.

If you are a member of the Civil Air Patrol and are qualified to provide emergency services, you must notify the Company upon hiring or by the date that you join the Civil Air Patrol, whichever is later.

Additionally, you must provide as much notice as possible of the dates you will be absent from work due to your service as a Civil Air Patrol member. Time missed from work while performing the duties above will be treated as unpaid time off. You must provide the Company with written verification from the Civil Air Patrol of the purpose of your absence.

Leave for Victims of Domestic Violence, Sexual Assault, or Trafficking

Access Healthcare LLC will provide reasonable unpaid leave to employees who are the victim of domestic violence, sexual assault, or trafficking in persons or who have a child who is the victim of domestic violence, sexual assault, or trafficking in persons.

Use of Leave

You may use the leave of absence to:

- Seek attention for injuries to you or your child caused by domestic violence, sexual assault, or trafficking in persons, provided you did not commit any act of domestic violence, sexual assault, or trafficking in persons against the child;
- Obtain services, including safety planning, from a domestic violence agency or rape crisis center;
- Obtain psychological counseling for yourself or your child, provided you did not commit any act of domestic violence, sexual assault, or trafficking in persons against the child;
- Take other actions to increase safety from future incidents, including temporary or permanent relocation; or
- Obtain legal services, assist in the offense's prosecution, or otherwise participate in related legal proceedings.

Notice

Advance notice is not required for taking leave under this policy. If advance notice is feasible, however, provide reasonable notice of your intent to take leave for the above reasons. Certification may be requested and must be provided within a reasonable time after the absence, as outlined below.

Certification

Upon return from your leave of absence, you may be asked to provide certification supporting your need for leave. Certification must be one of the following:

- A police report indicating that you or your child was a victim of domestic violence, sexual assault, or trafficking in persons;
- A court order protecting or separating you or your child from the perpetrator;
- Other evidence from the court or prosecutor that you appeared in court; or
- Documentation from a medical professional, domestic violence counselor, or other healthcare provider that you or your child was receiving services, counseling, or treatment for physical or mental injuries or abuse caused by domestic violence, sexual assault, or trafficking in persons.

Interaction with Other Laws

If you have a physical or mental disability due to an incident or series of incidents of domestic violence, sexual assault, or trafficking in persons, you will be treated in the same manner as an employee with any other disability.

Confidentiality

The Company will, to the extent allowed by law, maintain the confidentiality of any information about your status as a victim of domestic violence, sexual assault, or trafficking in persons.

Retaliation

The Company will not retaliate against employees for their status as a victim of domestic violence, sexual assault, or trafficking in persons or for requesting or taking a leave of absence in accordance with this policy.

Connecticut Family and Medical Leave (CTFMLA)

Access Healthcare LLC provides eligible employees up to 12 weeks of unpaid job-protected leave in any 12-month period for certain specified reasons.

Eligibility

To be eligible for CTFMLA leave, you must have been employed by the Company for the three months immediately preceding your request for leave.

Qualifying Reasons for Leave

CTFMLA leave may be taken for any of the following reasons:

- Your own serious health condition.
- The birth of your child.
- The placement of a child for adoption or foster care.
- To care for a family member with a serious health condition.
- To serve as an organ or bone marrow donor.
- Because of any qualifying exigency arising out of the fact that your spouse, son, daughter, or parent is on active duty, or has been notified of an impending call or order to active duty, in the armed forces.

Family member means your spouse, child, parent, sibling, grandparent, grandchild, or any individual related to you by blood or affinity whose close association with you is equivalent to a family relationship.

Duration of Leave

You may take up to 12 weeks of job-protected leave within a 12-month period. For purposes of this policy, the Company uses a 12-month period based on the calendar year.

If you and your spouse are both employed by the Company, your combined CTFMLA leave may not exceed 12 weeks during a 12-month period if leave is taken for:

- The birth or adoption of your child;
- The placement of a foster child; or
- The care of a family member with a serious health condition.

Military Family Leave

The Company also provides employees up to 26 weeks of CTFMLA leave within a 12-month period if they have a spouse, child, parent, or next of kin who is a member of the armed forces and is undergoing medical treatment, recuperation, or therapy, or is on the temporary disability retired list for a serious injury or illness that occurred in the line of duty.

If you and your spouse are both employed by the Company, your combined CTFMLA leave may not exceed 26 weeks during a 12-month period if leave is taken to care for a member of the armed forces.

Military family leave is calculated from the first day you take leave.

Intermittent Leave

If determined to be medically necessary, you may take CTFMLA leave for your own serious health condition, or the serious health condition of your parent, child, or spouse, on an intermittent or reduced schedule basis.

If you require the use of CTFMLA leave on an intermittent or reduced schedule basis, you may be required to temporarily transfer to another position that you are qualified to perform, if that position is deemed by the Company to be more conducive to business operations.

Substitution of Accrued Paid Leave

CTFMLA leave is unpaid. However, you may be required or you may choose to substitute any accrued paid vacation, personal, or sick time you have in excess of two weeks toward your CTFMLA leave.

You may be eligible for partial wage replacement benefits for CTFMLA leave taken under the Connecticut Paid Leave Program. For more information, see the Connecticut Paid Leave Program Policy.

Notice

When possible, you must provide at least 30 days' advance notice of the need for leave where leave is foreseeable (such as the birth of a child or planned medical treatment). If the need for leave is not foreseeable, provide notice as soon as possible. Notice should include the anticipated timing and duration of the leave.

Failure to comply with these notice rules is grounds for, and may result in, delay of the leave until you comply with this notice requirement.

Certification

You will be required to provide medical certification of the need for leave for leave taken for:

- Your own, or your family member's, serious medical condition; or
- Military family leave.

The certification must include:

- The date on which the serious health condition occurred.
- The probable duration of the condition.
- The appropriate medical facts about the condition within the healthcare provider's knowledge.
- For leave taken to care for a family member with a serious medical condition:
 - A statement that you are needed to care for the family member; and
 - An estimate of the amount of time you will be needed to care for the family member.
- For leave taken because of your own serious medical condition, a statement that you are unable to perform the functions of your position.

Additional requirements apply to certain certifications for intermittent leave or leave on a reduced leave schedule.

If the Company has reason to doubt the validity of the certification, the Company may require, at its own expense, that you obtain the opinion of a second health care provider designated or approved by the Company. If the second opinion differs from the original certification opinion, the Company may require, at its own expense, that you obtain the opinion of a third health care provider designated or approved jointly by you and the Company. The third opinion will be considered final and binding.

You may be required to provide subsequent recertifications, at the Company's expense, on a reasonable basis.

If you are requesting personal medical leave, you will also be required to provide a fitness-for-duty certification from your health care provider before returning to work.

Return to Work

When returning to work at the end of leave, you will be placed in your original job or an equivalent job with equivalent pay and benefits. You will not lose any benefits that accrued before leave was taken. You may not, however, be entitled to discretionary raises, promotions, bonus payments, or other benefits that become available during the leave.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Connecticut Paid Leave Program

The Connecticut Paid Leave (CTPL) program provides eligible employees with up to 12 weeks of partial wage replacement benefits during any 12-month period for certain life events covered under the federal Family and Medical Leave Act (FMLA), the Connecticut Family and Medical Leave Act (CTFMLA), and the Connecticut Family Violence Leave Act. The program also provides two additional weeks of compensation for a serious health condition resulting in incapacitation that occurs during a pregnancy. The CTPL program is funded by employee payroll deductions and administered by the CT Paid Leave Authority.

To be eligible for CTPL benefits, you must meet certain income thresholds and employment requirements. To learn more about the CTPL program and apply for benefits, visit www.ctpaidleave.org.

Crime Victim and Witness Leave

Access Healthcare LLC understands that employees may occasionally be victims of crime or otherwise legally compelled to attend a judicial proceeding as a witness. You will be provided unpaid leave if you are:

- A victim of a crime and need to attend or participate in legal proceedings related to that crime.
- Legally compelled to attend a judicial proceeding as a witness.
- An immediate family member or guardian of:
 - A person who suffered direct or threatened physical, emotional, or financial harm because of a crime and is a minor, physically disabled, or incompetent; or
 - A homicide victim.

If your need for leave is foreseeable, provide reasonable advance notice to your Supervisor. If advance notice is not feasible, provide notice as soon as practicable. The Company reserves the right to request verification of your participation in legal proceedings, such as a copy of the summons or subpoena.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Leave for Victims of Family Violence or Sexual Assault

If you are a victim of family violence or sexual assault, Access Healthcare LLC will provide you with up to 12 days of leave during any calendar year for the following reasons:

- To seek medical care or counseling for physical or psychological injury or disability.
- To obtain services from a victim services organization.
- To relocate due to the family violence or sexual assault.
- To participate in any civil or criminal proceeding related to or resulting from such family violence or sexual assault as defined by applicable Connecticut law.

Family violence includes incidents between family or household members that result in physical harm, bodily injury, or assault; acts of threatened violence that result in a fear of imminent physical harm, bodily injury, or assault, including, but not limited to, stalking or a pattern of threatening; or verbal abuse accompanied by a present danger and likelihood that physical violence will result.

Leave under this policy is unpaid; however, you may substitute any applicable paid leave for all or a portion of your unpaid leave.

If the need for leave is foreseeable, you must provide at least seven days' advance notice. If the need for leave is not foreseeable, provide notice as soon as practical. You may be required to submit a signed written statement certifying that the leave is due to family violence or sexual assault, as well as other types of verifying documentation, such as:

- Police or court records; or
- A signed statement from an employee or agent of a victim services organization, an attorney, an employee of the Office of Victim Services within the Judicial Branch or the Office of the Victim Advocate, or a licensed medical professional or other licensed professional from whom you sought assistance.

Documentation provided to the Company will be maintained as confidential and will not be disclosed except as required by federal or state law or as necessary to protect your safety.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Delaware Policies

Hiring and Orientation Policies

Accommodations for Victims of Domestic Abuse, Sexual Offenses and/or Stalking

Access Healthcare LLC will provide reasonable accommodation to the known limitations of employees who have been the victim of domestic violence, sexual offenses, or stalking (as those terms have been defined by state law), when such reasonable accommodations are required to perform the essential functions of his or her job, unless the accommodation would pose an undue hardship on the operation of the Company.

If you require an accommodation, notify your Supervisor. When making your request for an accommodation, make sure to include relevant information, such as:

- A description of the proposed accommodation.
- The reason you need an accommodation.
- How the accommodation will help you perform the essential functions of your job.

After receiving your request, the Company will engage in an interactive dialogue with you to explore potential reasonable accommodations that could help you perform the essential functions of your job. The Company encourages you to suggest specific reasonable accommodations that you believe would allow you to perform your job. However, the Company is not required to make the specific accommodation requested by you and may provide an alternative accommodation, to the extent any reasonable accommodation can be made without imposing an undue hardship on the Company.

The Company will not discriminate or retaliate against employees for requesting an accommodation.

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older); race (including traits historically associated with race, which include, but are not limited to, hair texture and protective hairstyles such as braids, locks, and twists); color; national origin; ancestry; religion; sex; sexual orientation (including transgender status, gender identity or expression); pregnancy (including childbirth, lactation, and related medical conditions); marital status; family responsibilities; reproductive health decisions; physical or mental disability; genetic information (including testing and characteristics); military status (including status as a veteran, uniformed servicemember (active or reserve), or dependent of a servicemember); status as a victim of "domestic violence," "sexual offense," or "stalking" (as those terms are defined by state law); housing status; or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated. The protections of this policy extend to all individuals in the workplace, including employees, applicants, apprentices, staffing agency workers, unpaid interns, and independent contractors.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion towards an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above-protected categories;

- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above-protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Delaware Paid Leave Notice

Access Healthcare LLC complies with the Healthy Delaware Families Act for employees who work in Delaware and are covered by the law. The act provides paid leave under the Delaware Paid Leave program, which includes sick, parental, caregiving, and other leaves for covered employees.

Delaware Paid Leave is a state-run wage replacement program that uses many of the same definitions and 12-month measurement methods as the federal Family and Medical Leave Act (FMLA), including the terms “serious health condition,” “application year,” and “family relationships.” When an employee is eligible for leave under both the FMLA and Delaware Paid Leave, the leaves will generally run at the same time. When an employee is not eligible for FMLA (for example, because the employer has fewer than 50 employees for FMLA purposes) but is eligible under Delaware law, the employee may still receive Delaware Paid Leave benefits.

Delaware employers with 10–24 employees working in Delaware are required to provide the parental leave line of coverage. Delaware employers with 25 or more employees working in Delaware are required to provide all lines of coverage (parental, family caregiving, medical, and qualifying exigency). Employers below these thresholds may voluntarily participate or may be enrolled if their Delaware headcount increases.

Delaware allows employers to satisfy their obligations through the public plan (the state program) or, if approved by the Delaware Department of Labor/Division of Paid Leave and the Delaware Department of Insurance, through an approved private plan. The Company will tell employees which plan applies.

The notice, *Your Employee Rights Under the Healthy Delaware Families Act*, is attached as an addendum to this handbook. The Company provides this notice to covered Delaware employees at hire and whenever a revised version is issued or Delaware requires employers to share updated program information. Employees should review the notice for eligibility, benefit amounts (including the current weekly maximum), how to apply for benefits, interaction with other income-replacement programs, and appeal rights.

Public Health Emergency Leave

Access Healthcare LLC will provide unpaid public health emergency leave to employees needing to isolate or quarantine during a public health emergency.

All employees are eligible for public health emergency leave unless they caused the public health emergency or are quarantined because they refused to comply with an examination, treatment, or vaccination program by the state.

Provide notice of your need for leave as soon as practical.

The Company may require you to provide documentation supporting your need for leave as permitted under applicable law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Crime Victim Leave

If you are the victim of a crime, Access Healthcare LLC will provide you with time off from work to:

- Participate, at the prosecutor's request, in preparation for a criminal justice proceeding.
- Attend any criminal justice proceeding if the attendance is reasonably necessary to protect your interests.
- Attend a criminal justice proceeding in response to a subpoena.

To be eligible for leave under this policy, you must be:

- The victim of the crime at issue in the proceedings;
- The parent, guardian, or custodian of a victim who is unable to meaningfully understand or participate in the legal process due to physical, psychological, or mental impairment;
- The spouse, adult child or stepchild, parent, or sibling of the victim if the victim is deceased; or

- The legal representative of the victim (i.e., a member of the victim's family or an individual designated by the victim or by the court).

If you are a defendant, co-defendant, or co-conspirator with respect to the crime, you are not eligible for time off under this policy.

Time off under this policy will be without pay; however, exempt personnel may receive pay, as required by applicable law. You may choose to use accrued vacation or paid time off (PTO) while attending such proceedings or meetings.

If you wish to take leave under this policy, provide reasonable advance notice to your Supervisor. You may be required to provide a copy of the notice of the proceeding. If advance notice is not feasible, you must provide appropriate documentation within a reasonable time after the absence.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

District of Columbia Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age; race; color; national origin; ancestry; religion; sex; sexual orientation (including transgender status, gender identity or expression); pregnancy (including childbirth, lactation, and related medical conditions); reproductive health decisions; family responsibilities; marital status; personal appearance; matriculation; political affiliation; credit information; employment status; homeless status; physical or mental disability; genetic information (including testing and characteristics); veteran status; uniformed servicemember status; status as a victim or family member of a victim of domestic violence, sexual offense, or stalking; or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, fringe benefits, and other compensation, the application of disability and/or temporary disability policies, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against any employees who provides information about, complains about, or assists in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Harassment is defined as conduct, whether direct or indirect, verbal or nonverbal, that unreasonably alters an individual's terms, conditions, or privileges of employment or has the purpose or effect of creating an intimidating, hostile, or offensive work environment. Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

While it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above-protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above-protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and

- A display of symbols, slogans, or items that are associated with hate or intolerance towards any select group.

Sexual Harassment

Sexual harassment is defined as any conduct of a sexual nature that constitutes harassment (as defined above), including unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against an employee for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Alternative Reporting

In addition to the Company reporting process, if you believe you have been subjected to harassment, you may file a formal complaint with the District of Columbia Office of Human Rights (OHR) or the federal Equal Employment Opportunity Commission (EEOC). Complaints must be filed with the OHR within one year, or with the EEOC within 300 days, of the date you believe you were discriminated against. Using the Company complaint process does not prohibit you from filing a complaint with the OHR or the EEOC.

You can obtain a complaint form or file your complaint online with the OHR at <https://ohr.dc.gov/service/file-discrimination-complaint>. Contact the OHR by phone at (202) 727-4559 or by email at ohr@dc.gov.

To file a claim with the EEOC, contact your local EEOC office. More information about filing a claim with the EEOC is available at <https://www.eeoc.gov/employees/howtofile.cfm>.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Paid Family Leave

Access Healthcare LLC provides paid family leave (PFL) benefits to eligible employees in accordance with the District of Columbia Universal Paid Leave Act. The District's PFL program provides eligible employees with partial wage replacement benefits when they take leave from work to bond with a new child, care for a family member, for their own serious health condition, or for prenatal care during their pregnancy. The PFL program is administered by the DC Office of Paid Family Leave (OPFL), and benefits are funded through a quarterly payroll tax.

Eligibility

You are generally eligible for PFL if you work more than 50% of your time for the Company in the District of Columbia (including teleworking or telecommuting).

You may not receive PFL benefits if you are currently receiving unemployment or long-term disability benefits.

Qualifying Events and Length of Leave

If eligible, you may take leave as follows:

- **Parental leave:** Up to 12 weeks of leave in a 52-week period to bond with your new child after birth, after adoption or foster care placement, or after legally assuming parental responsibility.

- **Family leave:** Up to 12 weeks of leave in a 52-week period to care for a family member with a serious health condition.
- **Medical leave:** Up to 12 weeks of leave in a 52-week period to care for your own serious health condition.
- **Prenatal leave:** Up to two weeks of leave in a 52-week period during your pregnancy for:
 - Routine and specialty appointments, exams, and treatments associated with a pregnancy provided by a healthcare provider, including prenatal check-ups and ultrasounds;
 - Treatment for pregnancy complications;
 - Bedrest that is required or prescribed by a healthcare provider; and
 - Prenatal physical therapy.

Family member means:

- Your biological, adopted, foster, or step child; legal ward; child of your domestic partner; or person to whom you stand in loco parentis.
- Your biological, foster, or adoptive parent; parent-in-law; stepparent; legal guardian; or person who stood in loco parentis to you when you were a child.
- Your domestic partner or spouse.
- Your grandparents (including a biological, adopted, foster, or step parent of your biological, adopted, foster, or step parent).
- Your siblings (including your biological, adopted, foster, half or step sibling, or sibling-in-law).

The maximum amount of leave for any combination of parental, family, and medical leave is 12 weeks. However, pregnant employees are eligible for two weeks of prenatal leave while pregnant and 12 weeks of parental leave after giving birth, for a maximum of 14 weeks.

PFL may be taken intermittently or continuously.

Applying for Benefits

If you have experienced a qualifying event, you must apply for PFL benefits through the OPFL web portal at <https://dcpaidfamilyleave.dc.gov/>. PFL benefits are determined on a sliding scale based on your reported income and are paid at up to 90% of your average weekly wage for each week you are on leave. PFL benefits are funded through a quarterly payroll tax.

For additional information regarding the PFL benefits, refer to the *DC Paid Family Leave Employee Handbook* provided by OPFL.

Notice

If the need for leave is foreseeable, you must provide at least 10 days' written notice. If you are unable to provide 10 days' notice due to an emergency, provide notice as soon as possible or before the first work shift that you would miss due to the event. If you are unable to provide notice before missing work, you or someone on your behalf must give notice no more than two days after the emergency event. Verbal notice must be followed by written notice as soon as possible.

Notice must include:

- The type of leave requested;
- The expected duration of leave;
- The expected start and end dates of leave; and
- Whether the leave will initially be used continuously or intermittently.

Interaction with Other Laws

PFL leave will run concurrently with available leave under the federal Family and Medical Leave Act (FMLA) or the District of Columbia Family and Medical Leave Act (DCFMLA) where permitted by applicable law.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy. If you believe your rights to PFL have been violated, you may file a complaint with the District of Columbia Office of Human Rights (<https://ohr.dc.gov>).

Paid Sick Leave

Access Healthcare LLC provides paid sick leave benefits to eligible employees in accordance with District of Columbia law.

Eligibility

You are eligible to accrue paid sick leave at the beginning of employment if you spend more than 50 percent of your time working for the Company within the District of Columbia.

Qualifying Reasons for Leave

If eligible, you are entitled to paid sick leave for any of the following:

- Your own illness and your own medical or dental appointments.
- The illness and medical or dental appointments of your family member.
- To obtain social or legal services if you or your family member is a victim of stalking, domestic violence, or sexual abuse, in order to:
 - Seek medical attention for physical or psychological injury or disability caused by stalking, domestic violence, or sexual abuse;
 - Obtain services from a victim services organization;
 - Obtain psychological or other counseling;
 - Temporarily or permanently relocate;
 - Take legal action, including preparing for or participating in any civil or criminal legal proceeding; or
 - Take any other actions to enhance your own health or safety or that of a family member, or to enhance the safety of those who associate or work with you.

As used in this policy, **family member** means the following individuals:

- Spouse.
- Domestic partner.
- Child (including foster child or grandchild).
- Parents.
- Parents of a spouse.
- Brothers and sisters.
- The spouse of a child, brother, or sister.
- Other family member to whom you are related by blood, legal custody, or marriage.
- A person you have lived with for the past 12 months, and with whom you maintain a committed relationship.
- A child who lives with you and for whom you have permanently assumed parental responsibility.

Accrual and Usage

You will begin to accrue paid sick leave on your first day of employment at the rate of one hour of leave for every 87 hours worked up to a maximum of three days per calendar year. You will begin to accrue paid sick leave on the date you become eligible.

You may begin to use paid sick leave after 90 days of service. You may only use up to seven days of paid sick leave per calendar year. You may carry over unused leave from year to year.

Unused leave will not be paid out on termination of employment for any reason.

The Company may reduce payment for paid sick leave by any amounts payable to you under any other benefits plan to which the Company contributes or under any federal or state workers' compensation law that covers your absence.

Transfers

If you are transferred to a division, branch, office, or other location outside the District of Columbia and then transferred back to a division, branch, office, or other location within the District, your previously accrued paid sick leave will be reinstated and immediately available for use.

Reinstatement of Paid Sick Leave Upon Rehire

If you are separated from employment with the Company and rehired within 12 months, your previously accrued paid sick leave will be reinstated and immediately available for use (provided you were previously eligible to use the leave).

Notification

You must make reasonable efforts to schedule paid sick leave in a manner that does not unduly disrupt Company operations.

You must submit a written request for paid leave, which must include a reason for the absence involved and the expected duration of the paid leave. If the paid leave is foreseeable, you must submit the request at least 10 days, or as early as possible, in advance of the paid leave. If the paid leave is unforeseeable, you must submit an oral request for paid leave prior to the start of the work shift for which the paid leave is requested. In the case of an emergency, you must notify the Company prior to the start of the next work shift or within 24 hours of the onset of the emergency, whichever occurs sooner.

Certification

The Company may require that paid leave for three or more consecutive days be supported by reasonable certification. Reasonable certification may include:

- A signed document from a health care provider affirming your illness;
- A police report indicating that you were a victim of stalking, domestic violence, or sexual abuse;
- A court order; or
- A signed statement from a victim and witness advocate, or domestic violence counselor affirming that you are involved in a legal action related to stalking, domestic violence, or sexual abuse.

If certification is required, you must provide a copy of the certification to the Company upon your return to work.

The requirements for certification will not require a health care professional to disclose information in violation of § 1177 of the Social Security Act (110 Stat. 2029; 42 U.S.C. § 1320d-6), or the regulations according to § 264(c) of the Health Insurance Portability and Accountability Act of 1996, (110 Stat. 2033; 42 U.S.C. § 1320d-2, note).

Information provided to the Company will not be disclosed by the Company, unless the disclosure is:

- Requested or consented to by you;
- Ordered by a court or administrative agency; or
- Otherwise required by applicable federal or local law.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Parental Leave

Access Healthcare LLC will provide eligible employees up to 24 hours of leave during any 12-month period to attend or participate in school-related events for their children. A school-related event is an activity sponsored by either a school or an associated organization, such as a parent-teacher association (PTA) and includes, but is not limited to, the following:

- A student performance such as a concert, play, or rehearsal.
- The sporting game of a school team or practice.
- A meeting with a teacher or counselor.
- Any similar type of activity.

To be eligible for parental leave, you must be:

- A parent, legal guardian, or individual with legal custody of a child;
- An aunt, uncle, or grandparent of a child; or
- A person married to, or in a domestic partnership with, a parent, legal guardian, individual with legal custody, aunt, uncle, or grandparent of a child.

To qualify for leave under this policy, the child must be involved in the meeting or event as a participant or as the subject; not as a spectator.

You must notify your Supervisor at least 10 calendar days before a school event, unless attendance is not reasonably foreseeable, in which case you must provide as much notice as possible. Your request may be denied if granting leave would unduly disrupt business operations.

Leave under this policy is unpaid; however, exempt employees will not incur any reduction in pay for a partial week's absence. You may elect to substitute accrued vacation/PTO time during the unpaid leave.

You will not lose any employment benefit or seniority accrued while on leave.

The Company will not retaliate against any employees who request or take leave in accordance with this policy.

Florida Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), marital status, race, national origin (including ancestry), disability, creed, religion, genetic information, AIDS/HIV status, sickle-cell trait, COVID-19 status (knowledge or belief of a person's vaccination or COVID-19 post-infection recovery status or failure to take a COVID-19 test), military or veteran status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms conditions and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when: (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;

- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion towards an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above-protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above-protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance towards any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Civil Air Patrol Leave

Access Healthcare LLC will provide eligible employees with at least 15 days of unpaid Civil Air Patrol leave per year to participate in a Civil Air Patrol training or mission.

Eligibility

To be eligible for Civil Air Patrol leave, you must:

- Be employed by the Company for at least 90 days before beginning leave; and
- Be a senior member of the Florida Wing of the Civil Air Patrol with at least an emergency services qualification.

Use of Leave

You will not be required to use paid leave while on Civil Air Patrol leave. However, you may elect to substitute any paid leave for the work time missed on Civil Air Patrol leave.

Notice

Provide as much notice as possible of your intent to take Civil Air Patrol leave.

Certification

The Company may ask you to provide documentation supporting your need for leave.

Restoration

Upon completion of leave, you must promptly notify the Company of your intent to return to work. The Company is not required to permit you to return to work if:

- The Company's circumstances have so changed as to make employment impossible or unreasonable;
- It would impose an undue hardship on the Company;

- Your employment prior to taking leave was for a brief, nonrecurring period, and there was no reasonable expectation that your employment would continue indefinitely or for a significant period; or
- The Company had legally sufficient cause to terminate you at the time you commenced leave.

If you are permitted to return to work, you are entitled to:

- The seniority that you had on the date leave began and any other rights and benefits that are bestowed upon you as a result of such seniority; and
- Any additional seniority that you would have attained if you had remained continuously employed and any other rights and benefits that would have been bestowed upon you as a result of such seniority.

After you have returned to work, you may not be terminated for a period of one year after the date you returned, except for cause.

Retaliation

The Company will not retaliate or discriminate against employees who request or take leave in accordance with this policy.

Domestic/Sexual Violence Leave

Access Healthcare LLC will provide employees who are victims of domestic or sexual violence, or whose family or household member is a victim of domestic violence, with up to three days of unpaid leave in any 12-month period for certain qualifying reasons.

Eligibility

To be eligible for domestic/sexual violence leave you must have worked for the Company for at least three months.

Leave Usage

You may take domestic/sexual violence leave to:

- Seek an injunction for protection against domestic violence or an injunction for protection in cases of repeat violence, dating, or sexual violence.
- Obtain medical care or mental health counseling for yourself or your family or household member to address physical or psychological injuries resulting from domestic violence.
- Obtain services from a victim services organization for yourself or your family or household member.
- Make your home secure from the perpetrator of domestic violence or seek new housing to escape the perpetrator.
- Seek legal assistance in addressing issues arising from domestic violence or prepare for and attend court-related proceedings arising from domestic violence.

Family or household member means your spouse, former spouse, persons related to you by blood or marriage, persons who are presently residing with you as if they are family or who have resided with you in the past as if they are family, and persons who have a child in common with you regardless of whether you have been married to them. With the exception of persons who have a child in common with you, the family or household members must be currently residing with you or have in the past resided with you in the same single dwelling unit.

Notice

Except in the case of imminent danger to your health and safety or that of your family or household member, you must provide reasonable advance notice of your need for leave. You may be required to provide documentation showing evidence of your need for leave.

Compensation

Leave under this policy is unpaid. Leave under this policy is unpaid; however, you may substitute any applicable paid leave for all or a portion of your unpaid leave.

Confidentiality

Information about your request for leave will be kept confidential, except as required by federal or state law or as necessary to protect your safety in the workplace.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Georgia Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race, color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;

- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Court Attendance and Witness Leave

Access Healthcare LLC realizes that, on occasion, employees may be subpoenaed or ordered by a court to attend judicial proceedings. In such cases, notify your Supervisor as soon as possible to make scheduling arrangements.

While attending the judicial proceeding, you will receive your regular compensation. This does not apply if you are attending a judicial proceeding because you have been charged with a crime.

The Company reserves the right to require employees to provide proof of the need for leave to the extent authorized by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Hawaii Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

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- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
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- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
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Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion towards an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
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We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Witness Leave

Access Healthcare LLC realizes that, on occasion, employees may be summoned to serve as witnesses or attend court as prospective witnesses. In such cases, you will be provided unpaid leave to attend. Notify your Supervisor as soon as possible to make scheduling arrangements.

The Company reserves the right to require employees to provide proof of the need for leave to the extent authorized by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Bone Marrow, Stem Cell, or Organ Donation Leave

Access Healthcare LLC will provide eligible employees up to seven days of leave each calendar year to serve as a bone marrow donor or peripheral blood stem cell donor and up to 30 days of leave per calendar year to serve as an organ donor.

You are eligible for this leave if you have worked for the Company for at least one year immediately preceding the leave.

To obtain leave under this policy, you must submit written verification to your Supervisor that you are an organ donor, bone marrow donor, or peripheral blood stem cell donor and that there is a medical necessity for the donation of the organ, bone marrow, or peripheral blood stem cells.

Leave under this policy is unpaid.

A leave of absence under this policy will not constitute a break in your continuous employment for the purpose of the right to salary adjustments, sick leave, vacation, annual leave, or seniority. During a leave of absence under this policy, the Company will maintain and pay for coverage under a group health plan in the same manner as if you were actively at work during the leave period.

Leave provided under this policy will be in addition to, and will not run concurrently with, leave taken under the federal Family and Medical Leave Act (FMLA) or Hawaii Family Leave Law (HFLL).

Upon return from leave, you will be restored to the same position or to a position of equivalent seniority, benefits, pay, and other terms and conditions of employment. However, the Company may decline to restore your position due to conditions unrelated to the exercise of rights under Hawaii's donor leave law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Family Leave

In accordance with the Hawaii Family Leave Law (HFLL), Access Healthcare LLC will allow eligible employees to take up to four weeks of unpaid family leave per leave year for certain reasons.

Eligibility

To be eligible for HFLL leave you must have worked for the Company for at least six consecutive months.

Leave Entitlement

You may take up to four weeks of unpaid HFLL leave per leave year for:

- The birth or adoption of a child; or
- To care for a child, spouse (including a partner to a civil union under Hawaii law or other civil union partnership in another state), reciprocal beneficiary, sibling, grandchild, or parent with a serious health condition.

The leave year under this policy is calendar year.

As used in this policy:

- **Child** means your biological, adopted, foster, or stepchild, or your legal ward.
- **Parent** means your biological, foster, adoptive, or step-parent, parent-in-law, legal guardian, grandparent, or grandparent-in-law.
- **Sibling** means your biological, adopted, or foster brother or sister, or stepbrother or stepsister.

Notice

If your need for HFLL leave is foreseeable, provide the Company with at least 30 days' written notice. If your leave is foreseeable but giving 30 days' written notice is not practicable, you must provide the Company with at least a verbal notification within two business days before your HFLL leave begins. In addition, you must submit a subsequent written notice to confirm the verbal notice as soon as practicable.

If known, notice should include:

- The general reason for the family leave request.
- The anticipated start of leave.
- The anticipated duration of leave.

If your leave is not foreseeable, you must provide the Company with at least a verbal notification within two business days of learning of the need for family leave or as soon as practicable, as well as written notice to follow as soon as practicable.

Failure to provide proper notice may delay the start of your leave.

Certification

If you wish to take HFLL leave, the Company may, at its discretion, require you to provide appropriate written certification as follows:

- For the birth of a child, a written statement issued by a health care provider or the family court.
- For the placement of a child for adoption with you, the petition you filed with the court or a written statement issued by a recognized adoption agency, the attorney handling the adoption, or by the individual officially designated by the birth parent to select and approve the adoptive family.
- For the serious health condition of your child, spouse, reciprocal beneficiary, or parent, a written statement by a health care provider is required. The written certification must provide the information requested in the Hawaii Family Leave Certification of Serious Health Condition form provided by the State of Hawaii, Department of Labor and Industrial Relations, including:
 - The patient's name and relationship to you;
 - The health care provider's name, title, type of practice or field of specialization, location, and signature;
 - A statement that the patient's condition qualifies for family leave as a serious health condition as defined under the HFLL;
 - A statement that you are needed to participate in the care of the patient;
 - A statement that the patient's condition requires hospitalization or the health care provider's continuing treatment or continuing supervision;
 - The approximate date the serious health condition began, and the probable duration that you will be needed to care for the patient with a serious health condition; and
 - Whether it will be necessary for you to take leave intermittently, and if so, the estimated time that you will be needed to care for the patient with a serious health condition.

If the Company requires you to furnish appropriate written certification, this certification must be provided before the family leave begins for foreseeable leave. If the requested leave is unforeseeable, provide written certification no later than two business days after the family leave begins.

Failure to provide the appropriate written certification or to comply with the usual notice and certification requirements in a timely manner may result in delay or denial of leave.

Substitution of Paid Leave

You may substitute accrued but unused sick leave, up to a maximum of 10 days per year, unless a collective-bargaining agreement provides for use of more than 10 days, for any part of your family leave. You must elect to substitute any amount of accrued but unused vacation, personal leave, or paid time off for any part of your family leave.

Interaction with Other Laws

If the reason for leave qualifies you for both HFLL and leave under the federal Family and Medical Leave Act (FMLA), the leaves must run concurrently.

Reinstatement

Upon your return from leave, you will be reinstated to your original position, or if no longer available, an equivalent position with equivalent terms and conditions of employment, including pay and employment benefits. However, you will not be entitled to reinstatement if during your HFLL leave there is a layoff or workforce reduction where you would have lost your position had you not been on leave.

Benefits

Use of HFLL leave will not result in the loss of any employment benefit that accrued before the start of your leave that was not used during leave. In addition, you will be entitled to any changes in pay and benefits as if

you had not taken family leave except where the change is contingent on seniority or accrual by policy or contract.

Abuse of Leave

If you are found to have provided a false reason for a leave, you will be subject to disciplinary action up to and including termination.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Leave for Victims of Domestic/Sexual Violence

If you are a victim of domestic or sexual violence, or have a minor child who is a victim of domestic or sexual violence, Access Healthcare LLC will provide you with a reasonable period of leave from work to:

- Seek medical attention for you or your minor child to recover from physical or psychological injury or disability caused by domestic or sexual violence;
- Obtain services from a victim services organization;
- Obtain psychological or other counseling;
- Temporarily or permanently relocate; or
- Take legal action, including preparing for or participating in any civil or criminal legal proceeding related to or resulting from domestic or sexual violence, or other actions to enhance your or your minor child's physical, psychological, or economic health or safety or to enhance the safety of those who associate with or work with you.

For purposes of this policy:

- **Child** means your biological, adopted, or foster son or daughter; a stepchild; or a legal ward.
- **Reasonable period of leave** means the following time periods:
 - Where due to physical or psychological injury to or disability to you or your minor child, the period of time determined to be necessary by the attending health care provider, considering the condition of the individual and the job requirements.
 - Where due to your need to take legal or other actions, including preparing for or participating in any civil or criminal legal proceeding, obtaining services from a victim services organization, or permanently or temporarily relocating, the period of time necessary to complete the activity as determined by your or your minor child's attorney or advocate, court, or personnel of the relevant victim services organization.

Eligibility

To be eligible for leave under this policy, you must have worked for the Company for at least six consecutive months.

Duration of Leave

Regardless of the reason for the leave, time off under this policy may not exceed 30 days per calendar year.

Interaction with Other Leave

Leave taken under this policy will run concurrently with other leave to which you are entitled.

Notice

You must provide reasonable notice of your intent to take leave under this policy unless doing so is not practicable due to imminent danger to you or your minor child. During the leave, the Company may request weekly reports regarding your leave status and may inquire about your intention to return to work.

Certification for Medical Attention

When seeking leave under this policy to obtain medical attention, you will be asked to provide a certificate from your health care provider estimating the length of the leave and the estimated starting and ending date of the leave. In addition, before returning to work, the Company may require you to provide medical certification from your attending health care provider attesting to your condition and approving your return to work.

The leave will not be protected until the required certification is provided.

Verification of Victim Status

When taking leave under this policy for not more than five calendar days for nonmedical reasons, you must provide a signed statement indicating that you or your minor child are a victim of domestic or sexual violence and that the leave is for a purpose permitted by this policy.

When taking leave under this policy for more than five calendar days for nonmedical reasons, you must provide documentation verifying that you or your minor child are a victim of domestic or sexual violence and that the leave is for a purpose permitted by this policy. Such documentation may include:

- A signed written statement from a person listed below from whom you or your minor child has sought assistance in relation to the domestic or sexual violence:
 - An employee, agent, or volunteer of a victim services organization.
 - Your attorney or advocate.
 - Your minor child's attorney or advocate.
 - A medical or other health care professional.
 - A member of the clergy.
- A police or court record supporting the occurrence of the domestic or sexual violence.

Compensation

Leave under this policy is unpaid. You must exhaust available, accrued paid or unpaid leave that may be used for the purposes addressed in this policy. You are entitled to no more than 30 days of leave under this policy when combined with other available leave.

Reinstatement

Upon return from leave, you will be reinstated to your original position or a position of comparable status and pay without loss of accumulated service credits and privileges.

Confidentiality

The Company will treat information provided under this policy as confidential and will not disclose such information unless agreed to in writing by you or required by law.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Temporary Disability Insurance

If you are unable to work due to a non-work-related illness or injury, or a pregnancy-related disability, you may be eligible for temporary disability insurance (TDI) benefits.

The cost of your TDI coverage is shared between you and the Company through payroll deductions.

You must file a claim for benefits within 90 days of becoming disabled. If you file a claim after 90 days, you may lose part of your benefits unless good cause for the delayed filing can be shown. If you file a claim 26 or more weeks after your disability, you will not be entitled to any benefits.

To file a claim for benefits or for additional information go to the Hawaii Department of Labor, Disability Compensation Division website (<http://labor.hawaii.gov/dcd/>).

Idaho Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race, color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, other compensation, termination, and all other terms, conditions, and privileges of employment.

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- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
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Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Illinois Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. The Illinois Human Rights Act states that employees have the right to be free from unlawful discrimination and sexual harassment. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation because of an individual's actual or perceived age (40 and older), race (including traits associated with race, which include, but are not limited to, hair texture and protective hairstyles such as braids, locks, and twists), color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), reproductive health decisions, family responsibilities, marital status, order of protection status, citizenship status, employment status, arrest or conviction record (unless otherwise authorized by law), credit history, crime victim status, physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, unfavorable discharge from military service, work authorization status, or any other status protected by federal, state, or local laws.

In addition, if you have a disability or are pregnant, are recovering from childbirth, or have a medical or common condition related to pregnancy that affects your ability to perform your job, you have the right to request one or more reasonable accommodations. A **reasonable accommodation** means a modification to access to the work site or an adjustment to the work process or work schedule that would enable you to perform your job despite your disability or condition.

The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

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Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment. An individual's work environment is not limited to the physical location where an individual is assigned to perform work duties.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Harassment is any unwelcome conduct based on an individual's actual or perceived membership in a protected class that has the purpose or effect of substantially interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment. An individual's work environment is not limited to the physical location where an individual is assigned to perform work duties.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above-protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above-protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Resolution Outside Company

The purpose of this policy is to establish prompt, thorough, and effective procedures for responding to every complaint and incident so that problems can be identified and remedied internally. However, you have the right to file a complaint (charge) with the Illinois Department of Human Rights (IDHR) or the federal Equal Employment Opportunity Commission (EEOC). If you choose to file a complaint with one of these agencies, the complaint must be filed within the following timeframes:

- If filed with the EEOC, within 300 calendar days of the alleged discriminatory act.
- If filed with the IDHR, within two years of the alleged discriminatory act.

Administrative Contacts for Complaints

Illinois Department of Human Rights (IDHR)

Chicago Office:

555 West Monroe Street, Suite 700 Chicago, IL 60661
312-814-6200
TTY: 866-740-3953
Fax (Charge Processing): 312-814-6251

Springfield Office:

524 South 2nd Street, Suite 300 Springfield, IL 62701
217-785-5100
TTY: 866-740-3953
Fax: 217-785-5106

Illinois Human Rights Commission (IHRC)

Chicago Office:

Michael A. Bilandic Building
160 North LaSalle Street, Suite N-1000
Chicago, IL 60601
312-814-6269
TDD: 866-832-2298
Fax: 312-814-6517

Springfield Office:

Jefferson Terrace
300 West Jefferson Street, Suite 108
Springfield, IL 62702
217-785-4350
TDD: 866-832-2298
Fax: 312-814-6517

United States Equal Employment Opportunity Commission (EEOC)

Chicago District Office:

John C. Kluczynski Federal Building
230 South Dearborn Street, Suite 1866
Chicago, IL 60604
312-872-9777
TTY: 800-669-6820
ASL Video Phone: 844-234-5122
Fax: 312-588-1260

Wage and Hour Policies

One Day Rest in Seven

In accordance with Illinois law, nonexempt employees are entitled to 24 consecutive hours of rest in every consecutive seven-day period, in addition to the regular period of rest allowed at the close of each working day. This does not apply to part-time employees whose total work hours do not exceed 20 hours during a calendar week.

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

General Policies

Use of Employer-Provided Equipment

Access Healthcare LLC will not:

- Discharge, constructively discharge, harass, discriminate, retaliate, or otherwise take adverse action against you for using employer-issued equipment to record domestic violence, sexual violence, gender violence, or any other crime of violence committed against you or a family or household member.
- Deprive you of employer-issued equipment solely because you used or attempted to use such equipment to record domestic violence, sexual violence, gender violence, or any other crime of violence committed against you or a family or household member.

The Company will grant you access to any photographs, voice or video recordings, sound recordings, or any other digital documents or communications stored on an employer-issued device relating to domestic violence, sexual violence, gender violence, or any other crime of violence committed against you or a family or

household member. In addition, the Company will comply with any law enforcement investigation, court order, or subpoena for a device, information, data, or documents.

Benefits

Military Funeral Honors Detail Leave

Access Healthcare LLC will provide eligible employees with up to eight hours of paid leave per calendar month, up to a total of 40 hours per calendar year, to participate in a military funeral honors detail.

Eligibility

To be eligible for leave, you must:

- Have been employed by the Company for at least 12 months;
- Have worked for the Company for at least 1,250 hours during the 12-month period immediately preceding the leave; and
- Be trained to participate in a funeral honors detail at the funeral of a veteran and be either:
 - A retired or active member of the U.S. Armed Forces or a member of a reserve component of the U.S. Armed Forces, including the Illinois National Guard; or
 - An authorized provider, or a registered member of a nonprofit or other organization that is an authorized provider, including a member of a veterans service organization.

Notice and Certification

You must provide reasonable notice of your need for leave as soon as practical. The Company may request a confirmation from the relevant veterans service organization that dispatched you to the funeral honors detail, or any official notice provided to you in relation to the funeral honors detail, that can be used as proof of your participation in the detail.

Compensation

You will be compensated at your regular rate of pay for leave taken under this policy.

Continuation of Benefits

During leave, you may continue any benefits, if applicable, at your own expense. No loss of seniority status will occur as a result of leave taken under this policy, nor will leave result in the loss of any benefits accrued prior to the leave.

Conditions of Leave

You do not have to exhaust any other leave granted to you before taking leave under this policy.

Reinstatement

Upon return from leave, you will be restored to your prior position or to a position with equivalent seniority status, benefits, pay, and other terms and conditions of employment.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Paid Leave (Accrual Method)

Access Healthcare LLC provides paid leave to eligible employees in accordance with the Illinois Paid Leave for All Workers Act.

Eligibility

All employees who work in Illinois are eligible for paid leave.

Reasons for Leave

Paid leave may be taken for any reason.

Accrual and Usage

Eligible employees accrue one hour of paid leave for every 40 hours worked (up to a maximum of 40 hours per leave year) beginning on January 1, 2024, or their first day of employment, whichever is later. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case earned paid leave accrues based on your normal schedule. For purposes of this policy, the leave year is calendar year.

You may begin using paid leave on March 31, 2024, or 90 calendar days after employment begins, whichever is later. You may use up to 40 hours of earned paid leave in a leave year. You may carry over up to 40 hours of unused accrued leave to the following leave year; however, you may still only use 40 hours of leave in any given leave year.

Compensation

You will be compensated for paid leave at your regular rate of pay.

Notice

If the need for leave is foreseeable, you must provide seven days' notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Payment upon Termination

You will not be paid for any unused paid leave when your employment ends.

Reinstatement of Leave upon Rehire

The Company will reinstate previously accrued, unused leave if you separate and are rehired within 12 months.

Required Notice

The Company is required to provide you with a copy of the Paid Leave for All Workers Act Notice, which is attached as an addendum at the end of this handbook.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Civil Air Patrol Leave

Access Healthcare LLC will provide eligible employees with at least 30 days of unpaid Civil Air Patrol leave per year to perform a Civil Air Patrol mission.

Eligibility

To be eligible for Civil Air Patrol leave, you must:

- Have been employed for at least 12 months and worked for at least 1,250 hours during the 12-month period immediately preceding the commencement of leave; and
- Be a volunteer member of the Illinois Wing of the Civil Air Patrol.

Notice

If leave will be for five or more consecutive days, you must provide the Company with at least 14 days' notice of your intent to take leave. When able, you must consult with the Company to schedule the leave so as not to unduly disrupt the Company's operations.

If leave is for less than five consecutive days, you must provide the Company with notice as soon as practical.

You will not be required to exhaust any paid leave in order to take Civil Air Patrol leave.

Certification

The Company may require certification from the proper Civil Air Patrol authority to verify your eligibility for the requested leave.

Restoration

Upon returning from Civil Air Patrol leave, you will be restored to the position you held when the leave began or to a position with equivalent seniority status, benefits, pay, and other terms and conditions of employment.

Benefits

Taking Civil Air Patrol leave under this policy will not result in the loss of any benefits accrued before the date on which leave began.

Retaliation

The Company will not retaliate or discriminate against employees who request or take leave in accordance with this policy.

Bereavement Leave

Access Healthcare LLC will provide eligible employees with unpaid bereavement leave in accordance with the Illinois Family Bereavement Leave Act.

Eligibility

To be eligible for bereavement leave, you must:

- Have been employed with the Company for at least 12 months;

- Have worked for the Company for at least 1,250 hours (including paid time off) during the 12-month period immediately preceding the leave; and
- Be employed at a worksite that has at least 50 employees within 75 miles.

Reasons for Leave

You may use bereavement leave for the following reasons:

- To attend the funeral (or alternative service) of a family member.
- To make arrangements due to the death of a family member.
- To grieve the death of a family member.
- For absences from work due to a miscarriage, an unsuccessful round of intrauterine insemination or of an assisted reproductive technology procedure, a failed adoption match or an adoption that is not finalized because it is contested by another party, a failed surrogacy agreement, a diagnosis that negatively impacts pregnancy or fertility, or a stillbirth.

For the purposes of this policy:

- **Family member** means your child, stepchild, spouse, domestic partner, sibling, parent, mother-in-law, father-in-law, grandchild, grandparent, or stepparent.
- **Child** means your son or daughter who is a biological, adopted, or foster child; a stepchild; a legal ward; or a child to whom you are standing in loco parentis.
- **Domestic partner** means: (1) a person recognized as your domestic partner under any domestic partnership or civil union law of a state or political subdivision of a state; or (2) an unmarried adult person with whom you are in a committed, personal relationship, who is not a domestic partner as described in sentence (1) or in such a relationship with any other person, and who you have designated as your domestic partner to the Company.

Amount and Use of Leave

Eligible employees will be provided up to two weeks (10 working days) of unpaid bereavement leave in a 12-month period for the death of a family member. In the event of the death of more than one family member, this will increase to a total of six weeks of unpaid leave during the 12-month period.

Bereavement leave must be completed within 60 days after the date on which you receive notice of your family member's death.

Where applicable, you may substitute any available paid leave for leave taken under this policy. This policy does not create any right to take more unpaid leave than is allowed under, or in addition to, the unpaid leave permitted by the federal Family and Medical Leave Act.

This leave may run concurrently with leave under the federal Family and Medical Leave Act and/or any other leave, including paid leave, as permitted by state and federal law.

Notice

You must provide the Company with at least 48 hours' advance notice of your intent to take bereavement leave, unless such notice is not reasonable or practical.

You may be required to provide reasonable documentation supporting your need for leave. Reasonable documentation may include:

- A death certificate, a published obituary, or written verification of death, burial, or memorial services from a mortuary, funeral home, burial society, crematorium, religious institution, or government agency;

- A form filled out by the health care practitioner who treated you, your family member, or surrogate;
- Documentation from the adoption agency showing a failed match or contested adoption; or
- Documentation from the surrogacy agency showing a failed surrogacy agreement.

You will not be required to identify which category of event the leave pertains to as a condition of taking bereavement leave.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Witness Leave

Access Healthcare LLC realizes that, on occasion, employees may be subpoenaed to serve as witnesses in a criminal proceeding. In such cases, you will be provided unpaid leave to attend.

Upon receiving a subpoena, notify your Supervisor as soon as possible to make scheduling arrangements.

The Company reserves the right to require employees to provide proof of the need for leave to the extent authorized by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Blood and Organ Donation Leave

Access Healthcare LLC will provide eligible employees with:

- Up to one hour of paid leave to donate, or attempt to donate, blood every 56 days in accordance with appropriate medical standards established by the American Red Cross, America's Blood Centers, the American Association of Blood Banks, or other nationally recognized standards.
- Up to 10 days of paid leave in any 12-month period to serve as an organ donor.

To be eligible for blood donation leave, you must be employed full time and have been employed by the Company for at least six months.

To be eligible for organ donation leave, you must be employed full time and have been employed by the Company for at least six months, or you must be employed part time.

You will not be required to use accrued or future vacation or sick leave while taking time off to donate blood or an organ.

Provide reasonable notice of your need for leave. If leave is being used to donate blood, you may be required to provide a written statement from the blood bank indicating that you have an appointment.

For blood donation leave, full-time employees will be compensated at their regular rate of pay. For organ donation leave, full-time employees will be compensated at their regular rate of pay, and part-time employees will be compensated based on their daily average pay during the previous two months of employment.

When you return from donating blood, you may be asked to provide a written statement from the blood bank confirming you kept your appointment.

You will retain the hour of paid leave if your attempt to donate blood is unsuccessful. However, you will be required to provide the Company with a written statement from the blood bank confirming you kept your appointment. You may request blood donation leave for an unsuccessful attempt no more than once per 56-day period, unless otherwise approved by the Company.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Leave for Victims of Domestic, Sexual, Gender, or Criminal Violence (VESSA Leave)

In accordance with the Illinois Victims' Economic Security and Safety Act (VESSA), Access Healthcare LLC will provide unpaid leave (VESSA leave) to eligible employees who:

- Are victims of domestic violence, sexual violence, gender violence, or any other crime of violence; or
- Have a family or household member who is a victim of domestic violence, sexual violence, gender violence, or any other crime of violence.

Qualifying Reasons for Leave

VESSA leave may be used to:

1. Seek medical attention for, or recover from, physical or psychological injuries caused by domestic violence, sexual violence, gender violence, or any other crime of violence against you or your family or household member.
2. Obtain victim services for you or your family or household member.
3. Obtain psychological or other counseling for you or your family or household member.
4. Participate in safety planning, including temporary or permanent relocation or other actions, to increase your own or your household or family member's safety from future domestic violence, sexual violence, gender violence, or any other crime of violence.
5. Seek legal assistance to ensure your own health and safety or that of your household or family member, including participating in court proceedings related to the violence.
6. Attend the funeral or alternative to a funeral or wake of a family or household member who was killed in a crime of violence.
7. Make arrangements necessitated by the death of a family or household member who was killed in a crime of violence.
8. Grieve the death of a family or household member who was killed in a crime of violence.

Duration of Leave

Except as otherwise provided below, you may take up to 12 weeks of unpaid VESSA leave within any 12-month period. Leave is based on a rolling 12-month period, looking back from the date the leave would begin. Leave under this policy may be taken intermittently or on a reduced schedule basis.

You may not take more than two workweeks (10 workdays) of leave for the purposes described in bullets 6, 7, and 8. Leave under these circumstances must be completed within 60 days after the date on which you receive notice of the victim's death.

Notice and Certification

To obtain leave under this policy, you must provide the Company with at least 48 hours' notice, except in emergency situations or where such notice is not otherwise practical. In all cases, either before or after you take leave under this policy, the Company will require you to submit a sworn certification that your absence is for one of the qualifying reasons listed above and that you or a family or household member is a victim of domestic or sexual violence. The Company may also require you to submit the following supplemental information:

- Documents from a victim's services organization, member of the clergy, or medical professional from whom you or your family or household member sought assistance.
- A police, court, or military record.

- A death certificate, published obituary, or written verification of death, burial, or memorial services from a mortuary, funeral home, burial society, crematorium, religious institution, or government agency documenting that the victim was killed in a crime of violence.
- Other corroborating evidence.

All information and documentation you provide in connection with your request for leave under this policy, including the fact that you requested and/or obtained leave, will be held in the strictest confidence—except to the extent you request or consent to any disclosure in writing or as otherwise required by law. Further, the Company specifically prohibits any discrimination, harassment, or retaliation against employees who request or take leave under this policy in good faith.

Terms of Leave

VESSA leave is unpaid. However, you may substitute any available vacation for leave taken under this policy. The substitution of paid leave does not extend the leave period, but runs concurrently with it.

VESSA leave may run concurrently with other leaves as permitted by applicable law.

During leave, you must provide periodic reports (at least every 30 days) about your status and any change in your plans to return to work.

Interaction with the Family Bereavement Leave Act

If you are entitled to leave under the Illinois Family Bereavement Leave Act (FBLA), you are not entitled to take additional leave for the purposes described in bullets 6, 7, and 8 that exceeds or is in addition to leave to which you are entitled under the FBLA.

If you are not entitled to leave under the FBLA, leave taken for the purposes described in bullets 6, 7, and 8 will be deducted from, and is not in addition to, the total amount of leave time to which you are entitled.

Leave taken for the purposes described in bullets 6, 7, and 8 or leave taken under the FBLA will not otherwise limit or diminish the total amount of leave time to which an employee is entitled.

Restoration

Upon return from leave, you will be restored to your previous position or to an equivalent position with equivalent employment benefits, pay, and other terms and conditions of employment.

Maintenance of Benefits

During an approved VESSA leave, the Company will maintain your health benefits as if you continue to be actively employed. If you choose not to return to work at the end of the leave period, you must reimburse the Company for the cost of any health benefit premiums paid to maintain your coverage during the leave, unless you cannot return to work because of continuation, reoccurrence, or onset of domestic violence, sexual violence, gender violence, or any other crime of violence or other circumstances beyond your control.

Retaliation

The Access Healthcare LLC will not retaliate against employees who request or take leave in accordance with this policy.

Family Military Leave

Access Healthcare LLC will provide eligible employees who are the spouse, parent, child, or grandparent of a person called to military service with up to 30 days of unpaid military family leave during the time federal or state deployment orders are in effect.

Eligibility

To be eligible for leave, you must:

- Have been employed by the Company for at least 12 months;
- Have worked for the Company for at least 1,250 hours during the 12-month period immediately preceding the leave; and
- Be the spouse, parent, child, or grandparent of a person called to military service lasting longer than 30 days with the state or the United States pursuant to orders of the Governor or the President.

Notice and Certification

If you are taking family military leave for five or more consecutive workdays, you must provide at least 14 days' advance notice of the intended date to take leave. If possible, consult with your Supervisor to schedule leave so as not to unduly disrupt Company operations.

When taking family military leave for less than five consecutive days, provide advance notice as is practicable.

The Company may require verification of your eligibility for leave from the proper military authority.

Continuation of Benefits

During family military leave, you may continue any benefits, if applicable, at your own expense. No loss of seniority status will occur as a result of leave taken under this policy, nor will leave result in the loss of any benefits accrued prior to the leave.

Conditions of Leave

You may not take family military leave until you have exhausted all accrued vacation, personal, compensatory, or any other leave granted to you, with the exception of sick and disability leave. Where applicable, time off under this policy will run concurrently with time off under the federal Family and Medical Leave Act.

Reinstatement

Upon return from leave, you will be restored to your prior position or to a position with equivalent seniority status, benefits, pay, and other terms and conditions of employment.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Cook County Paid Leave

Access Healthcare LLC provides paid leave to eligible employees in accordance with the Cook County Paid Leave Ordinance.

Eligibility

Generally, all employees who work in Cook County are eligible for paid leave.

Reasons for Leave

Paid leave may be taken for any reason.

Accrual and Usage

Eligible employees accrue one hour of paid leave for every 40 hours worked and while using accrued paid leave (up to a maximum of 40 hours per leave year) beginning on December 31, 2023, or their first day of employment, whichever is later. For purposes of this policy, the **leave year** is calendar year. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case earned paid leave accrues based on your normal schedule.

You may begin using paid leave 90 calendar days after your employment begins. You may use up to 40 hours of earned paid leave in a leave year. Unused accrued leave will carry over to the following leave year; however, you may still only use 40 hours of leave in any given leave year.

Compensation

You will be compensated for paid leave at your regular rate of pay.

Notice

If the need for leave is foreseeable, you must provide seven days' notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Payment upon Termination

You will not be paid for any unused paid leave when your employment ends.

Reinstatement of Leave upon Rehire

The Company will reinstate previously accrued, unused leave if you separate and are rehired within 12 months.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy. If you believe you have been retaliated against or improperly denied leave, you may file a complaint with the Cook County Commission on Human Rights using the contact information below.

Cook County Commission on Human Rights

69 W. Washington Street, Suite 1130

Chicago, IL 60602

Phone: (312) 603-1100

Email: human.rights@cookcountyil.gov

Fax: (312) 603-9988

Chicago Paid Leave and Paid Sick and Safe Leave

Access Healthcare LLC provides paid leave and paid sick and safe leave to eligible employees in accordance with the Chicago Paid Leave and Paid Sick and Safe Leave Ordinance.

Eligibility

To be eligible for leave under this policy, you must work for the Company for at least 80 hours in a 120-day period within the geographic boundaries of Chicago.

Reasons for Leave

Paid leave may be used for any reason.

Paid sick and safe leave may be taken for the following reasons:

- If you are ill or injured, or for the purpose of receiving professional care, including preventive care, diagnosis, or treatment of your own medical, mental, or behavioral issue, including substance abuse disorders.
- When your family member is ill, injured, or ordered to quarantine, or to care for your family member receiving professional care, including preventive care, diagnosis, or treatment for a medical, mental, or behavioral issue, including substance abuse disorders.
- If you or your family member are the victim of domestic violence, a sex offense, or trafficking in persons as defined under Illinois law.
- Closure of your place of business or your family member's school, class, or place of care due to a public health emergency.
- An order from the mayor, governor, Department of Public Health, or healthcare provider requiring you to isolate or quarantine to minimize transmission of a communicable disease.

Accrual and Usage

Eligible employees begin accruing paid leave and paid sick and safe leave on July 1, 2024, or their first day of employment, whichever is later. The accrual rate is one hour of paid leave and one hour of paid sick and safe leave for every 35 hours worked within the geographic boundaries of Chicago, up to a maximum of 40 hours per leave year. For purposes of this policy, the leave year is **calendar year**. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case leave accrues based on your normal schedule.

You may begin using paid leave on your 90th day of employment, and you may begin using paid sick and safe leave on your 30th day of employment. The minimum increment of paid leave you may use is four hours. The minimum increment of paid sick and safe leave you may use is two hours. You may carry over up to 16 hours of paid leave and 80 hours of paid sick and safe leave to the next leave year.

Notice

If the need for leave is foreseeable, you must provide seven days' advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Compensation

You will be compensated for leave at your regular rate of pay.

Documentation

If you use paid sick and safe leave for more than three consecutive workdays, you may be required to provide reasonable documentation verifying that the leave is being used for a covered purpose. Reasonable documentation may include:

- Documentation signed by a licensed healthcare provider;
- A police report or court document;

- A signed statement from an attorney, a member of the clergy, or a victims' services advocate; or
- Any other documentation providing evidence that supports your claim, including a written statement by you or any other person with knowledge of the incident.

Interaction with Other Leave

Paid sick and safe leave will run concurrently with other types of leave when permitted under applicable law.

Payment upon Termination or Transfer

If you separate from employment or transfer to another location where you would not be eligible for paid leave or paid sick and safe leave, you will be paid for all unused paid leave.

Upon separation from employment, you will not be paid for any accrued, unused paid sick and safe leave. If you transfer to a separate division, entity, or location (where you would still be eligible for paid leave or paid sick and safe leave), you will be entitled to use all paid sick and safe leave you have accrued.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Indiana Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race, color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;

- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Child Conference Leave

Access Healthcare LLC will not take adverse employment action against you for missing work due to your attending:

- An attendance conference held by your child's school regarding your child's absences; or
- A case conference committee meeting with the committee responsible for preparing an individualized educational program (IEP) for your child with a disability.

Child means your biological, adopted, foster, or step child.

Notice

You must provide at least five days' advance notice of the conference or meeting and make a reasonable effort to schedule it as an electronic conference or meeting.

Compensation

You will not be compensated by the Company for attending or traveling to and from the conference or meeting.

Documentation

You must provide documentation confirming that you attended the conference or meeting, which you must request from the school. Documentation should be submitted to Human Resources as soon as possible after returning from the conference or meeting.

Exceptions

The Company may take an adverse employment action against you due to your missing work to attend a conference or meeting described above if:

- You attend more than one attendance conference or more than one case conference committee meeting in a calendar year (i.e., one of each type is permitted without adverse action);

- The absence is longer than reasonably necessary to attend and travel to and from the conference or meeting; or
- You fail to provide at least five days' notice.

Employment Protections for Mobile Support Unit Members

If you are a member of a mobile support unit, Access Healthcare LLC will not discriminate against, discipline, or discharge you for:

- Your membership in a mobile support unit; or
- Missing work to attend training, participate in an exercise, or respond to a disaster, public health emergency, public safety emergency, or other event that requires emergency action.

If you have been selected to serve in a mobile support unit, notify the Company of your membership as soon as possible.

Employment Protections for Civil Air Patrol Members

If you are a member of the Civil Air Patrol, Access Healthcare LLC will not discipline you for:

- Being absent from work due to responding to an emergency service operation that began before you were scheduled to report to work; or
- Leaving work with permission from your Supervisor to respond to an emergency service operation that began after you reported to work.

To be eligible for these protections, you must notify the Company in writing that you are a member of the Civil Air Patrol. The Company may reject the notification on the grounds that you are an essential employee.

If your notification is rejected, you:

- Must promptly notify the commander or other officer in charge of the Civil Air Patrol of the rejection of your notification; and
- Will not be entitled the protections provided above.

If your notification is accepted, work missed will be considered unpaid leave. The Company may require you to present a written statement from the commander or other officer in charge of the Civil Air Patrol indicating that you were engaged in an emergency service operation at the time of your absence.

Court Attendance and Witness Leave

Access Healthcare LLC realizes that, on occasion, employees may be subpoenaed to testify as a witness in a criminal proceeding. In such cases, you will be provided unpaid leave to attend. Notify your Supervisor as soon as possible to make scheduling arrangements.

The Company reserves the right to require employees to provide proof of the need for leave to the extent authorized by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Military Family Leave

Access Healthcare LLC will provide up to 10 days of unpaid leave per year to employees who are the spouse, parent, grandparent, child, or sibling of a person who is ordered to active duty. Active duty means full-time

service on active duty orders in the U.S. Armed Forces or the National Guard for a period that exceeds 89 consecutive calendar days.

To be eligible for military family leave, you must meet the following conditions:

- Employed by the Company at least 12 months.
- Have worked at least 1,500 hours during the 12-month period immediately preceding the day the leave begins.

Eligible employees may take a leave of absence during one or more of the following periods:

- During the 30 days before active duty orders are in effect;
- During a period in which the person ordered to active duty is on leave while active duty orders are in effect; and/or
- During the 30 days after the active duty orders are terminated.

To take a leave of absence under this policy, provide written notice, including a copy of the active duty orders if available, to your Supervisor of the date the leave will begin. Provide this notice at least 30 days before the date you intend to begin leave, unless the active duty orders are issued less than 30 days before the date the requested leave is to begin. The leave of absence may not exceed the equivalent of 10 working days in each calendar year.

Military family leave under this policy is unpaid; however, you may choose to substitute any paid leave (other than medical or sick leave) for any part of the military family leave.

You will be allowed to continue available group health benefits at your own expense.

Upon returning to work at the end of leave, you will be placed in your original job or an equivalent job with equivalent seniority, pay, benefits, and other terms and conditions of employment.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Iowa Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age, race, color, national origin, ancestry, religion, creed, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;

- Comments regarding sexual behavior or another person's body;
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- A display of symbols, slogans, or items that are associated with hate or intolerance towards any select group.

Reporting Discrimination and Harassment

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- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
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Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

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Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Pregnancy Disability Leave

If you are unable to perform your job duties because you are temporarily disabled due to pregnancy, childbirth, or a related medical condition, and do not have any available leave, Access Healthcare LLC will provide you with unpaid pregnancy disability leave for the duration of the disability or up to eight weeks, whichever is less. The Company may request medical certification supporting your need for leave.

You must provide timely notice of the period of leave requested. The Company must approve any change in the period requested before the change is effective.

The Company will not discriminate or retaliate against employees who request or take leave in accordance with this policy.

Leave of Absence for Elected Officials

Access Healthcare LLC will provide employees who have been elected to a municipal, county, state, or federal office with an unpaid leave of absence to serve in that office, except where prohibited by law.

You must provide written notice of your need to take leave as soon as reasonably practical.

Although leave is unpaid, the leave is granted without loss of net credited service and benefits earned. However, the Company will not pay pension, health, or other benefits during the leave of absence.

Public Health Emergency Leave

Access Healthcare LLC will provide unpaid public health emergency leave to employees needing to isolate or quarantine pursuant to a quarantine or isolation order or voluntary confinement request by the Iowa Department of Health and Human Services, a local board of health, or the Centers for Disease Control and Prevention.

All employees are eligible for public health emergency leave.

Provide notice of your need for leave as soon as practical.

The Company may require you to provide documentation supporting your need for leave as permitted under applicable law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Court Attendance and Witness Leave

Access Healthcare LLC realizes that, on occasion, employees may serve as a witness in a criminal proceeding or as a plaintiff, defendant, or witness in a civil proceeding. In such cases, you will be provided unpaid leave to attend. Notify your Supervisor as soon as possible to make scheduling arrangements.

The Company reserves the right to require employees to provide proof of the need for leave to the extent authorized by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Kansas Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

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The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

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Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;

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- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
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- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
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Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

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We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Emergency Service Workers Protection

Access Healthcare LLC will not discharge you based on the fact that you perform duties as a volunteer firefighter, volunteer certified emergency medical service provider, volunteer reserve law enforcement officer, or volunteer part-time law enforcement officer.

Leave for Victims of Domestic Violence/Sexual Assault

Access Healthcare LLC will provide employees who are victims of domestic violence or sexual assault up to eight days of leave per year to:

- Obtain or attempt to obtain any relief, including, but not limited to, a temporary restraining order, restraining order, or other injunctive relief to help ensure the health, safety, or welfare of the victim or the victim's children.
- Seek medical attention for injuries caused by domestic violence or sexual assault.
- Obtain services from a domestic violence shelter, domestic violence program, or rape crisis center due to domestic violence or sexual assault.
- Settle matters, including, but not limited to, court appearances in the aftermath of domestic violence or sexual assault.

In order to obtain leave under this policy, you must provide reasonable advance notice of your intention to take leave, unless such advance notice is not feasible. Within 48 hours after returning from the requested time off, you must provide documentation to support the necessity for leave. Appropriate forms of documentation include:

- A police report indicating that you were a victim of domestic violence or sexual assault.
- A court order protecting or separating you from the perpetrator of an act of domestic violence or sexual assault, or other evidence from the court or prosecuting attorney that you have appeared in court.
- Documentation from a medical professional, domestic violence advocate, or advocate for victims of sexual assault, health care provider, or counselor that you were undergoing treatment for physical or mental injuries or abuse resulting in victimization from an act of domestic violence or sexual assault.

If an unscheduled absence occurs, Company will not take action against you if, within 48 hours after the beginning of the unscheduled absence, you provide certification to the Company as described above.

Any information provided by you regarding a request for leave will be kept confidential to the extent allowed by law.

Leave under this policy is unpaid; however, exempt employees may receive pay as required by law. You may opt to use paid time off in place of unpaid leave.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Kentucky Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race, color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, AIDS/HIV status, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, status as a smoker or nonsmoker, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

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- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
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Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

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- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
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We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

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Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times, Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, you will be paid overtime at one and one-half times your regular rate of pay:

- For any hours worked in excess of 40 hours in a workweek.
- For work performed on the seventh day in any workweek where you worked seven consecutive days, provided you worked more than 40 hours that workweek.

Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Election Officer Leave

Access Healthcare LLC will provide employees who have been selected to serve as election officers with unpaid leave for an entire day to attend training or serve.

Provide as much notice as possible of your need to take leave.

The Company will not retaliate or discriminate against employees who request or take leave in accordance with this policy.

Adoption Leave

Upon written request, Access Healthcare LLC will grant reasonable personal leave of up to six weeks upon your adoption of a child under the age of 10. This does not apply to an adoption by a fictive kin, stepparent, stepsibling, blood relative, including a relative of halfblood, first cousin, aunt, uncle, nephew, niece, and a person of a preceding generation as denoted by prefixes of grand, great, or great-great, or a foster parent who adopts a foster child who is already in their care.

Leave under this policy is unpaid. Where they overlap, leave taken under this policy will run concurrently with leave taken under the federal Family and Medical Leave Act (FMLA).

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Court Attendance Leave

Access Healthcare LLC will permit employees to take time off work for a required appearance in court or an administrative tribunal or hearing, provided advance notice of the need for leave is given.

For leave under this policy, notify your Supervisor and provide a copy of the court or administrative certificate regarding your required appearance.

Time off under this policy will be without pay; however, exempt employees will not incur any reduction in pay for a partial week's absence for leave to appear as a witness.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Louisiana Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older); race; color; national origin; ancestry; natural, protective, or cultural hairstyles (this includes, but is not limited to, afros, dreadlocks, twists, locs, braids, cornrow braids, Bantu knots, curls, and hair styled to protect hair texture or for cultural significance); religion; sex; sexual orientation (including transgender status, gender identity, or expression); pregnancy (including childbirth, lactation, and related medical conditions); physical or mental disability; genetic information (including testing and characteristics); sickle cell trait; veteran status; uniformed servicemember status; or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion towards an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance towards any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Leave for Genetic Testing and Cancer Screening

When medically necessary, Access Healthcare LLC will provide {{EMPLOYEE-TERMS}} with one day of leave from work to obtain genetic testing or preventive cancer screening.

You must provide at least 15 days' notice of your need to take leave. You may be required to provide documentation confirming the performance of the genetic testing or cancer screening. The Company will never require you to disclose the results of such testing or screening.

Leave under this policy is unpaid; however, you may substitute any accrued vacation or other appropriate paid leave for time taken under this policy.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Maine Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age, race (including traits historically associated with race, which include, but are not limited to, hair texture, Afro hairstyles, and protective hairstyles such as braids, twists, and locks), color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), HIV status, tobacco use during nonworking hours, physical or mental disability, genetic information (including testing and characteristics), familial status, domestic violence victim status, veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Unwelcome sexual harassment is a form of sex discrimination. Sexual harassment is unlawful under federal law and the Maine Human Rights Act. Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) it threatens job security, working conditions, or opportunities for advancement; (2) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (3) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (4) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion towards an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above-protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above-protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance towards any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

If you are dissatisfied with our internal investigation and response, you have the right to file a complaint with the Maine Human Rights Commission, #51 State House Station, Augusta, Maine, 04333-0051. For additional information on how to file a complaint, visit www.maine.gov/mhrc/file.

All employees receive training and written notice about harassment upon hire and will receive written reminders about the policy every year. Supervisors and managers receive more training and information upon hire, with periodic reviews thereafter.

Wage and Hour Policies

Reporting Time Pay

Access Healthcare LLC provides reporting time pay (also referred to as call-in pay) to nonexempt employees in accordance with applicable law. If you report to work at the request of the Company and the Company cancels or reduces the number of hours in your scheduled shift, you will be paid the lesser of:

- Two hours at your regular hourly rate; or
- The total pay for the shift for which you were initially scheduled.

This does not apply if you were not required to work or are unable to work due to:

- Adverse weather conditions;
- A natural disaster or civil emergency;
- Your own illness or medical condition; or
- Your own workplace injury.

The Company is not liable for the above payment if a documented good faith effort is made to notify you not to report to work. If you report to work after an unsuccessful attempt, or if the Company is prevented from notifying you for any reason, you must perform whatever duties are assigned by the Company at the time you report to work, provided you are physically able to perform those duties. If the Company does not have any work to assign you, you will be paid in accordance with the above.

Speak with your Supervisor for more information regarding reporting time pay.

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Extreme Public Health Emergency Leave

Access Healthcare LLC provides extreme public health emergency leave to eligible employees, unless doing so would cause an undue hardship.

Extreme public health emergency means the occurrence or imminent threat of widespread exposure to a highly infectious or toxic agent that poses an imminent threat of substantial harm to the population of Maine.

To be eligible for extreme public health emergency leave, you must be unable to work because:

- You are under public health investigation, supervision, or treatment related to an extreme public health emergency;
- You are acting in accordance with an extreme public health emergency order;
- You are in quarantine or isolation or are subject to a control measure in accordance with extreme public health emergency information or directions issue to the public, a part of the public, or one or more individuals;
- You have been directed by the Company not to work because you may expose others to an extreme public health emergency threat; or
- You need to provide care or assistance to your spouse or domestic partner, parent, or child (including a child for whom you are the legal guardian) for reasons related to an extreme public health emergency.

Provide notice of your need for leave as soon as practical.

Leave under this policy is unpaid.

Upon your return to work, the Company may require you to provide written documentation from a physician or public health official supporting your need for leave.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Domestic/Sexual Violence Leave

If you or one of your family members is the victim of domestic violence, sexual assault, or stalking, Access Healthcare LLC will provide you reasonable and necessary unpaid leave from work to:

- Prepare for and attend court proceedings;
- Receive medical treatment or attend to medical treatment for a victim who is your daughter, son, parent, or spouse; or
- Obtain necessary services to remedy a crisis cause by domestic violence, sexual assault, or stalking.

Family member means your spouse, parent, or child.

This leave may only be used when you or your family member is the victim of violence, assault, sexual assaults, stalking, or any act that would support an order for protection under Maine Title 19-A, chapter 101.

To obtain leave under this policy, you must provide notice within a reasonable time under the circumstances. You may be required to provide reasonable documentation of the family relationship, which may include a statement attesting to the relationship, a birth certificate, a court document, or similar documents.

Leave may not be granted if you do not make the request for leave within a reasonable time under the circumstances, if the leave would cause the Company to sustain an undue hardship, or if the leave is impractical, unreasonable, or unnecessary based on the facts made known to the Company.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Family Military Leave

Access Healthcare LLC will provide eligible employees up to 15 days of unpaid family military leave per deployment of a family member. **Family member** means a child, spouse, or domestic partner who is a resident of Maine and is ordered to active duty by the Governor or President of the United States for a period of 180 days or longer to a duty assignment that is in a combat theater or an area where armed conflict is taking place.

Eligibility

To be eligible for leave you must have been employed by the Company for at least 12 months and have worked for at least 1,250 hours during the 12-month period immediately preceding the leave.

When Leave May Be Taken

You may only take leave:

- In the 15 days immediately prior to deployment;
- During deployment, if the family member is granted leave; or
- During the 15 days immediately following deployment.

Notice

For leave lasting five or more consecutive workdays, you must provide at least 14 days' notice of the intended date upon which the leave will begin. If leave is for fewer than five days, you must provide as much advance notice as is practicable. Work with your Supervisor to schedule leave in a manner that will not unduly disrupt Company operations.

Certification

The Company may require verification (i.e., copy of military orders) that you are eligible for leave under this policy.

Compensation

Leave under this policy is without pay.

Benefits

You are entitled to continue your benefits (i.e., group life insurance, health insurance, disability insurance or pensions) while on leave at your own expense.

Interaction with FMLA

Where applicable, leave under this policy will run concurrently with the FMLA's qualifying exigency leave.

Reinstatement

Upon return from leave, you will be restored to your prior position or to a comparable position with equivalent pay, benefits, seniority and other terms and conditions of employment. Exceptions may apply if you cannot be reinstated for reasons unrelated to the exercise of rights under this policy.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Maryland Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age, race (including traits associated with race, which includes hair texture, Afro hairstyles, and protective hairstyles such as braids, twists, and locks), color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), marital status, credit history, physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Other Harassment

Harassment includes unwelcome and offensive conduct based on an individual's membership in a protected class (listed above) where: (1) submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct is used as a basis for employment decisions affecting the individual; or (3) based on the totality of the circumstances, the conduct creates a working environment that a reasonable person would perceive as abusive or hostile. Such conduct need not be severe or pervasive.

While it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of such conduct:

- The use of disparaging or abusive words, phrases, or slurs; negative stereotyping; or threatening, intimidating, or hostile acts that relate to the above-protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above-protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Sexual Harassment

Sexual harassment includes conduct that consists of unwelcome sexual advances, requests for sexual favors, or other conduct of a sexual nature when: (1) submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as a basis for employment decisions affecting the individual; or (3) based on the totality of the circumstances, the conduct creates a working environment that a reasonable person would perceive as abusive or hostile. Such conduct need not be severe or pervasive.

Again, while it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors;
- Any unwanted physical touching or assaults, or blocking or impeding movements; and
- The spreading or participation in dissemination of gossip or rumors of a sexual nature related to coworkers.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will

follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Public Health Emergency Leave for Essential Workers

Access Healthcare LLC provides paid public health emergency leave to eligible essential employees in accordance with the Maryland Essential Workers' Protection Act.

Eligibility

To be eligible for public health emergency leave, you must:

- Perform a duty or work responsibility during an emergency that cannot be performed remotely or is required to be completed at the work site; and
- Provide services that the Company determines to be essential or critical to its operations.

Reasons for Leave

You may use public health emergency leave:

- To isolate, without an order, because you have been diagnosed with or are experiencing symptoms associated with the communicable disease that is the subject of the emergency and are awaiting results of a test to confirm the diagnosis;
- To seek or obtain a medical diagnosis, preventive care, or treatment because you have been diagnosed with the communicable disease that is the subject of the emergency;
- To care for a family member who is isolating, without an order to do so, because of a diagnosis of the communicable disease that is the subject of the emergency;
- Due to a determination by a public health official or healthcare professional that your presence at your place of employment or in the community would jeopardize the health of other individuals because of your exposure to, or exhibited symptoms associated with, the communicable disease that is the subject of the emergency, regardless of whether you have been diagnosed with the communicable disease;

- To care for a family member due to a determination by a public health official or healthcare professional that the family member's presence at their place of employment or in the community would jeopardize the health of others because of their exposure to, or exhibited symptoms associated with, the communicable disease that is the subject of the emergency or due to symptoms exhibited regardless of whether the family member has been diagnosed with the communicable disease; or
- To care for a child or other family member because the care provider of the family member is unavailable due to the emergency or their school or place of care has been closed by a federal, state, or local public official or at the discretion of the school or place of care due to the emergency, including if the school or place of care is physically closed but providing instruction remotely.

Paid public health emergency leave is in addition to any other leave or benefit, including paid sick leave under the Maryland Healthy Working Families Act.

Notice

Provide notice of your need for leave as soon as practical.

Compensation

Leave under this policy is paid. You will be compensated at the rate provided in the federal program, order, law, or regulation. If not specified, you will be compensated as follows:

- If you are a full-time essential worker who regularly works 40 or more hours per week, you will be compensated for 112 hours;
- If you are a part-time essential worker who regularly works less than 40 hours per week, you will be compensated for an amount of hours equivalent to the average hours worked during a typical four-week working period;
- If your work schedule varies from week to week, you will be compensated for the average number of hours that you were scheduled per week over the six-month period ending on the date on which the emergency is declared or proclaimed; or
- If you did not work during the six-month period ending on the date on which the emergency is declared or proclaimed, you will be compensated an amount equal to your reasonable expectation at the time of hiring or the average number of hours per week that you would normally be scheduled to work, whichever is greater.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Court Attendance and Witness Leave

Access Healthcare LLC realizes that, on occasion, employees may be subpoenaed to testify as a witness in court. In such cases, you will be provided unpaid leave to attend. Notify your Supervisor as soon as possible to make scheduling arrangements. You may opt to use paid time off in place of unpaid leave.

The Company reserves the right to require employees to provide proof of the need for leave to the extent authorized by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Crime Victim Leave

If you are the victim of a crime, or have a special relationship to a victim of a crime, you may take time off from work to attend any proceeding relating to the crime, provided you have the right to appear. You are eligible for leave under this policy if you are:

- The victim of the crime or juvenile delinquent act at issue in the proceeding;
- The victim's next of kin or guardian when the victim is deceased or disabled; or
- The victim's representative.

Representative means a person who is designated by:

- The next of kin or guardian of a victim who is deceased or disabled; or
- The court in a dispute over who will be the representative.

Notify your Supervisor of your need to take leave as soon as possible to make scheduling arrangements.

Time off under this policy will be without pay; however, exempt employees will not incur any reduction in pay for a partial week's absence for leave under this policy. You may opt to use paid time off in place of unpaid leave.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Leave for Family Members on Active Duty

If eligible, Access Healthcare LLC will allow you to take unpaid leave from work on the day an immediate family member is leaving for, or returning from, active duty outside the United States as a member of the U.S. Army, Navy, Air Force, Marine Corps, Space Force, Coast Guard, National Oceanic and Atmospheric Administration, or Public Health Service.

To be eligible for leave, you must:

- Be employed by the Company either full time or part time;
- Have worked for the Company for the last 12 months; and
- Have worked at least 1,250 hours during the last 12 months.

When requesting leave, you may be required to submit proof verifying that the leave is being taken for appropriate purposes.

The Company will not require you to use sick, vacation, or other paid leave when taking leave under this policy.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Flexible Leave

In accordance with the Maryland Flexible Leave Act, you may use earned and available paid leave for the illness or death of an immediate family member.

For purposes of this policy:

- **Immediate family** means a child, spouse, or parent.
- A **child** is an adopted, biological, or foster child, a stepchild, or a legal ward who is either: 1) under the age of 18; or 2) at least 18 and incapable of self care due to a mental or physical disability. A **parent** is an adoptive, biological, or foster parent, a stepparent, a legal guardian, or a person standing in loco parentis.

- ***Paid leave*** means paid time away from work that is earned and available to an employee: 1) based on hours worked; or 2) as an annual grant of a fixed number of hours or days of leave for performance of service. Paid leave includes sick leave, vacation time, paid time off, and compensatory time.

The age requirement for children does not apply in regard to leave taken for the death of an immediate family member.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Unpaid Sick Leave (Accrual Method)

Access Healthcare LLC provides unpaid sick leave to eligible employees in accordance with Maryland's Healthy Working Families Act.

Eligibility

To be eligible for sick leave you must work more than 12 hours per week on a regular basis. For more information regarding your eligibility for sick leave, contact your Supervisor.

Reasons for Leave

Sick leave may be taken for the following reasons:

- To care for your own, or a family member's, mental or physical illness, injury, or condition, including the need to obtain preventive medical care.
- For maternity or paternity leave.
- For absences from work when such absences are necessary because you or your family member have been a victim of domestic violence, sexual assault, or stalking and the leave is used:
 - To obtain medical or health attention;
 - To obtain services from a victim services organization;
 - For legal services or proceedings; or
 - Because you have temporarily relocated as a result of the domestic violence, sexual assault, or stalking.

Family member means:

- Your biological, adopted, foster, or step child;
- A child for whom you have legal or physical custody or guardianship;
- A child for whom you stand in loco parentis, regardless of the child's age;
- You or your spouse's biological, adoptive, foster, or step parent;
- You or your spouse's legal guardian or ward;
- Your spouse;
- An individual who acted as a parent or stood in loco parentis to you or your spouse when you or your spouse was a minor;
- Your biological, adopted, foster, or step grandparent; and
- Your biological, adopted, foster, or step sibling.

Accrual and Usage

Eligible employees accrue one hour of sick leave for every 30 hours of work up to a maximum of 40 hours per year. New employees begin accruing sick leave on their first day of employment. For this calculation, employees exempt from overtime under the Fair Labor Standards Act will be assumed to work 40 hours each workweek.

For purposes of this policy the leave year is calendar year.

You are not entitled to earn sick leave during:

- A two-week pay period in which you worked fewer than 24 hours total;
- A one-week pay period if you worked fewer than a combined total of 24 hours in the current and preceding pay period; or
- A pay period in which you were paid twice per month and you worked fewer than 26 hours in the pay period.

You may carry over up to 40 hours of accrued unused sick leave to the following leave year.

However, you may not:

- Accrue more than 40 hours of sick leave in a year;
- Accrue more than 64 total hours of sick leave at any time; or
- Use more than 64 hours of sick leave in a year.

You may not use sick leave during the first 106 calendar days of employment. To use sick leave between the 107th through the 120th calendar days after beginning employment, you must have agreed at the time of hire to provide verification that the use of leave was appropriate.

Notice

If the need for leave is foreseeable, you must provide notice at least seven days before the first day sick leave is used. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

You may be denied leave if you fail to provide notice and your absence will cause a disruption to the Company.

Documentation

The Company may obtain documentation of the appropriate use of leave if the leave:

- Was used for more than two consecutive scheduled shifts; or
- Was used between the 107th and 120th calendar days of employment and you agreed to provide verification at the time of hire.

Payment Upon Termination

You will not be paid for any unused sick leave when your employment ends.

Reinstatement of Sick Leave Upon Rehire

The Company will reinstate previously accrued, unused sick leave if you separate and are rehired within 37 weeks.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Montgomery County Sick and Safe Leave

Access Healthcare LLC provides paid sick and safe leave to eligible employees in accordance with Montgomery County's Earned Sick and Safe Leave Act.

Eligibility

All employees who regularly work in Montgomery County for more than eight hours each week are eligible for sick and safe leave.

Reasons for Leave

Sick and safe leave may be taken for the following reasons:

- To care for or treat your own or a family member's mental or physical illness, injury, or condition;
- To obtain preventive medical care for you or your family member;
- If the Company's place of business has closed by order of a public official due to a public health emergency;
- If the school or childcare center for your family member is closed by order of a public official due to a public health emergency;
- To care for your family member if a health official or health care provider has determined that the family member's presence in the community would jeopardize the health of others because of the family member's exposure to a communicable disease; or
- If the absence from work is due to domestic violence, sexual assault, or stalking committed against you or your family member and the leave is used:
 - By you to obtain the following for yourself or your family member: medical attention needed to recover from a physical or psychological injury due to domestic violence, sexual assault, or stalking; services from a victim services organization related to the domestic violence, sexual assault, or stalking; or legal services, including preparing for or participating in a civil or criminal proceeding related to the domestic violence, sexual assault, or stalking; or
 - During the time that you have temporarily relocated due to the domestic violence, sexual assault, or stalking.

Family member means:

- Your child (including biological, adopted, or foster child, stepchild, legal or physical ward or guardian, and child for whom you are primary caregiver).
- Your parent or your spouse's parent (including biological, adoptive, foster parent, or stepparent).
- Your legal guardian or primary caregiver when a minor.
- Your spouse.
- Your grandparent or spouse of grandparent.
- Your grandchild.
- Your sibling or spouse of a sibling (including biological, adopted, or foster sibling).

Accrual and Usage

Eligible employees accrue one hour of sick and safe leave for every 30 hours worked in Montgomery County up to a maximum of 56 hours per year. New employees begin accruing sick and safe leave on their first day of employment. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick and safe leave accrues based on your normal schedule. For purposes of this policy, the leave year is calendar year.

You may begin using sick and safe leave after your 90th calendar day of employment and you may use up to 80 hours of sick and safe leave per leave year. You may carry over up to 56 hours of unused earned sick and safe leave to the following leave year.

Compensation

You will be compensated for sick and safe leave at the same rate and with the same benefits as you normally earn. If you are a tipped employee, you will receive at least the applicable Montgomery County minimum wage.

Notice

If the need for leave is foreseeable, you must make a good faith effort to provide advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Documentation

If you use sick and safe leave for more than three consecutive days, you may be required to provide reasonable documentation that leave is being used for a covered purpose.

Interaction with Other Leave

Sick and safe leave will run concurrently with other types of leave where permitted under applicable law.

Payment upon Termination

You will not be paid for any unused sick and safe leave when your employment ends.

Reinstatement of Leave upon Rehire

The Company will reinstate previously accrued, unused sick and safe leave if you separate and are rehired within nine months.

Retaliation and Right to File Complaint

The Company will not retaliate against employees who request or take leave in accordance with this policy. You have the right to file a complaint with the Montgomery County Office of Human Rights for a violation of any rights granted by this policy.

Massachusetts Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and over), race (including traits historically associated with race, which include, but are not limited to, hair texture, type, and length, and natural and protective hairstyles such as braids, locks, twists, Bantu knots, hair coverings, and other formations), color, religion, creed, ancestry, national origin, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information, marital status, arrest and conviction information, status as a registered qualifying medical marijuana patient or registered primary caregiver, military service, veteran status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment means sexual advances, requests for sexual favors, and verbal or physical conduct of a sexual nature when:

- Submission to or rejection of such advances, requests, or conduct is made either explicitly or implicitly a term or condition of employment or as a basis for employment decisions; or
- Such advances, requests, or conduct have the purpose or effect of unreasonably interfering with an individual's work performance by creating an intimidating, hostile, humiliating, or sexually offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion towards an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above-protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above-protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance towards any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

State and Federal Remedies

In addition to the Company reporting process, if you believe you have been subjected to harassment, you may file a formal complaint with either or both of the government agencies listed here. Using the Company complaint process does not prohibit you from filing a complaint with these agencies. Note that claims must be filed with the Equal Employment Opportunity Commission (EEOC) and the Massachusetts Commission Against Discrimination (MCAD) within 300 days.

EEOC Boston Office

Address: John F. Kennedy Federal Building, 15 New Sudbury Street, Room 475, Boston, MA 02203-0506
Phone: 800-669-4000
Fax: 617-565-3196
TTY: 800-669-6820
ASL Video Phone: 844-234-5122
Website: <https://publicportal.eeoc.gov/portal/>

MCAD

Address: 1 Ashburton Place, Suite 601, Boston, MA 02108
Phone: 617-994-6000
TTY: 617-994-6196
Alternative Languages: 617-994-6196
Email: mcad@mass.gov
Fax: 617-994-6024

Pregnant Workers Fairness Act Notice

The Massachusetts Pregnant Workers Fairness Act prohibits discrimination against employees due to pregnancy or conditions related to pregnancy. The law also requires employers to provide reasonable accommodations to employees who are pregnant or have a condition related to pregnancy. Conditions related to pregnancy include, but are not limited to, morning sickness, lactation, or the need to express breast milk.

The procedures for requesting an accommodation are described in the Accommodations for Pregnancy, Childbirth, and Related Medical Conditions policy.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Paid Family and Medical Leave

Access Healthcare LLC provides time off to eligible employees who qualify for paid family and medical leave (PFML) benefits under Massachusetts law. PFML benefits are funded through a state tax.

Eligibility

To be eligible for PFML, you must work in Massachusetts and meet the financial eligibility requirements for unemployment benefits under Massachusetts law at the time of your requested leave.

Leave Entitlement and Usage

You may take up to 12 weeks of paid *family leave* in a benefit year for any of the following reasons:

- The birth of a child and in order to care for that child (leave to be completed within 12 months of the child's birth).
- The placement of a child with you for adoption or foster care and in order to care for the newly placed child (leave to be completed within 12 months of the child's placement).
- To care for a family member with a serious health condition.
- A qualifying exigency of a family member who is a military member on covered active duty or called to covered active-duty status (or has been notified of an impending call or order to covered active duty).

You may take up to 26 weeks of paid *family leave* in a benefit year to care for a family member who is a covered service member and who has a serious injury or illness related to active-duty service.

You may take up to 20 weeks of paid *medical leave* in a benefit year to care for your own serious health condition, which renders you unable to perform any of the essential functions of your position.

For purposes of this policy, the leave year is the consecutive 52-week period beginning on the Sunday immediately before the first day that you take paid family or medical leave.

Family member means your spouse, domestic partner, child, parent, or parent of your spouse or domestic partner; a person who stood in loco parentis to you when you were a minor; or your grandchild, grandparent, or sibling.

Covered service member means:

- A member of the armed forces, including a member of the National Guard or Reserves, who is:
 - Undergoing medical treatment, recuperation, or therapy;
 - Otherwise in outpatient status; or
 - Otherwise on the temporary disability retired list for a serious injury or illness that was incurred by the member in the line of duty on active duty in the armed forces, or a serious injury or illness that existed before the beginning of the member's active duty and was aggravated by service in the line of duty on active duty in the armed forces; **or**
- A former member of the armed forces, including a former member of the National Guard or reserves, who is undergoing medical treatment, recuperation, or therapy for:
 - A serious injury or illness that was incurred by the member in line of duty on active duty in the armed forces; or
 - A serious injury or illness that existed before the beginning of the member's active duty and was aggravated by service in line of duty on active duty in the armed forces and manifested before or after the member was discharged or released from service.

Serious health condition means an illness, injury, impairment, or physical or mental condition that involves either inpatient care in a hospital, hospice, or residential medical facility, or continuing treatment by a healthcare provider. To qualify as "continuing treatment," the patient must either be incapacitated for more than three consecutive full calendar days, incapacitated due to pregnancy or prenatal care, or incapacitated due to a chronic serious health condition that requires periodic treatment and continues over an extended period of time.

Intermittent Leave

If medically necessary, you may take PFML intermittently or on a reduced schedule basis:

- To care for your own, a family member's, or a covered service member's serious health condition.
- Because of a qualifying exigency related to your family member who is on active duty or has been notified of an impending call or order to active duty.

If leave is taken for the birth, adoption, or foster care placement of a child, you may only take leave intermittently or on a reduced schedule basis if you and the Company agree.

Interaction with Other Laws

PFML will run concurrently with any leave for which you may be eligible under the federal Family and Medical Leave Act (FMLA) and the Massachusetts Parental Leave Act (MPLA).

Notice

Where the need for leave is foreseeable at least 30 days in advance, you must provide at least 30 days' written notice. If the need for leave is not foreseeable at least 30 days in advance, you must give notice as soon as practical under the circumstances.

In addition, if you are seeking intermittent or reduced schedule leave that is foreseeable due to a planned medical treatment, you must consult with the Company in advance of your application for benefits and make a reasonable effort to schedule treatment so as to not unduly disrupt the Company's operations, subject to the approval of your healthcare provider.

Failure to provide appropriate notice may result in the delay or denial of leave, where consistent with Massachusetts law.

Claims

To obtain PFML benefits, you must file an application for benefits with the Massachusetts Department of Family and Medical Leave (DFML). You must provide notice to the Company prior to filing your application for benefits with the DFML. The DFML will accept an application up to 60 days prior to the anticipated leave start date. All applications must be supported by a certification showing that the leave is for a qualifying reason. Applications and other forms are available from the DFML website (<https://www.mass.gov/info-details/paid-family-and-medical-leave-pfml-overview-and-benefits#-how-can-i-apply-for-paid-leave-massachusetts-benefits>). You should be notified by the DFML of the approval or denial of your application within 14 calendar days.

Fitness for Duty Requirements

If you take leave because of your own serious health condition (except if you are taking intermittent leave), you are required to provide medical certification that you are fit to resume work. You will not be permitted to resume work until certification is provided.

Continuation of Health Benefits

If the Company provides you with health benefits under a group health plan, the Company will maintain and pay for your health coverage at the same level and under the same conditions as coverage would have been provided if you had not taken PFML. If you use paid time off to cover part or all of PFML, the employee portion of any premiums will continue to be paid through payroll deductions. If you are not using paid time off to cover part or all of PFML, you will be responsible for remitting your portion of health premiums to the Company in order to ensure continuation of benefits.

Reinstatement

Upon return from covered PFML, you will be reinstated to your previous position or to an equivalent position, with the same status, pay, employment benefits, length-of-service credit, and seniority credit as of the date of leave. However, the Company reserves the right to deny reinstatement if other employees of equal length-of-service credit and status in the same or equivalent positions have been laid off due to economic conditions or other changes in operating conditions affecting employment during the period of leave.

Benefit Amount

An employee's weekly PFML benefits are calculated and provided by the Family and Employment Security Trust Fund. No family or medical leave benefits are payable during the first seven calendar days of an approved initial claim for benefits, and this initial waiting period will count against the total available period of leave in a benefit year. Where the approved claim involves leave on an intermittent or reduced leave schedule, the wait period will be seven consecutive calendar days, not the total accumulation of seven days of leave.

Retaliation

The Company will not retaliate against employees who request or take PFML in accordance with this policy.

Crime Victim and Witness Leave

Occasionally, employees may be the victim of a crime or legally compelled to attend a judicial proceeding as a witness. In these circumstances, employees may take unpaid leave to:

- Respond to a subpoena to appear as a witness in any criminal proceeding;
- Attend a court proceeding or participate in a police investigation related to a criminal case in which they are a witness or a crime victim (or a deceased family member was a victim);
- Attend or participate in a court proceeding related to a civil case in which they are a victim of family violence; or
- Obtain a restraining or protective order on their own behalf.

If you need to take leave under this policy, notify your Supervisor as soon as possible. You may be required to provide documentation supporting such leave.

This policy does not apply to employees who have committed or are alleged to have committed a crime.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Domestic Violence Leave

Access Healthcare LLC provides up to 15 days of unpaid leave per rolling 12-month period to victims of abusive behavior, domestic violence, sexual assault, kidnapping, and/or stalking, and certain family members, for purposes directly related to the abusive behavior. These purposes may include seeking legal or medical services, counseling, or victim's services; securing housing; obtaining a protective order; appearing in court or

before a grand jury; or addressing other issues directly related to the abusive behavior against the victim or family member of the victim.

You may take domestic violence leave if you are a victim of abusive behavior, or due to the abuse of a covered family member, including your spouse/partner, parent, child, sibling, grandparent or grandchild, or persons in a guardian relationship. Perpetrators or accused perpetrators of abuse are not entitled to domestic violence leave.

Before taking domestic violence leave, you must exhaust all of your accrued paid time off, including but not limited to sick time, vacation days, and personal time. You must provide advance notice of your need for leave whenever possible; however, this requirement does not apply if you or a covered family member faces imminent danger to you or your family member's health or safety. Should you be unable to provide advance notice based on a risk of imminent danger, you must notify your Supervisor or Human Resources within three business days that the time off was related to domestic violence. Should you be unable to notify the Company, a family member, counselor, clergy, or assisting professional may do so on your behalf.

The Company may require documentation supporting your claim for domestic violence leave. Such documentation can consist of a protective order or other court document, police report, police witness statement, documents reflecting the perpetrator's conviction or admission of guilt, documentation of medical treatment, and/or a victim advocate, counselor, social worker, health care worker, member of the clergy, or other assisting professional's sworn statement. In lieu of these documents, you may also submit your own sworn signed statement. Any documentation supporting the need for domestic violence leave must be submitted within 30 days of your last date of absence.

While the leave may not be paid, you are entitled to return to the same or a substantially equivalent position once your leave has ended. You will not be terminated, retaliated against, or receive a reduction in benefits based on your use of domestic violence leave. All information related to the leave will be kept in the strictest confidence.

Paid Sick Leave (Accrual Method)

Access Healthcare LLC provides paid sick leave to eligible employees in accordance with the Massachusetts Earned Sick Time Law.

Eligibility

All employees whose primary place of employment is in Massachusetts are eligible for sick leave.

Reasons for Leave

Sick leave may be taken for the following reasons:

- To care for your own or a family member's physical or mental illness, injury, or medical condition that requires home care, professional medical diagnosis or care, or preventative medical care.
- To attend your own or a family member's medical appointments.
- To address the physical, legal, or psychological effects of domestic violence inflicted on you or your child.
- To address your own or your spouse's physical and mental health needs after experiencing a pregnancy loss or a failed assisted reproduction, adoption, or surrogacy.

Family member means your child, spouse, or parents or spouse's parents (as defined under applicable law).

Accrual and Usage

Eligible employees accrue one hour of sick leave for every 30 hours worked per leave year, up to a maximum of 40 hours. New employees begin accruing sick leave on their first day of employment. For purposes of this policy, the leave year is calendar year. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick leave accrues based on your normal schedule.

You may use up to 40 hours of sick leave per leave year, and you may begin using sick leave on your 90th calendar day of employment. The smallest amount of sick leave you may take is one hour. You may carry over up to 40 hours of unused sick leave to the following leave year.

Notice

If the need for leave is foreseeable, you must make a good faith effort to provide advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Documentation

The Company may require you to submit documentation to support your use of sick leave if your absence:

- Exceeds 24 consecutively scheduled work hours or three consecutive days on which you are scheduled to work;
- Occurs within two weeks prior to your final scheduled day of work (except in the case of temporary employees); or
- Occurs after four unforeseeable and undocumented absences within a three-month period.

Any reasonable documentation signed by a healthcare provider indicating the need for sick leave for personal illness, the illness of a family member, or a routine medical examination for you or your family member will be acceptable.

Required documentation must be submitted within seven days of the absence. Additional time will be allowed if good cause can be shown.

Payment upon Termination

You will not be paid for any unused sick leave when your employment ends.

Interaction with Other Leave

Sick leave will run concurrently with other types of leave when permitted under applicable law.

You may choose to use, or the Company may require you to use, paid sick leave to receive pay when taking other statutorily authorized leave that would otherwise be unpaid.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Parental Leave

Access Healthcare LLC provides up to eight weeks of unpaid leave in a 12-month period to employees for the birth or adoption of a child. You must work full time and have three consecutive months of employment with the Company to qualify for this leave.

You must provide at least two weeks' notice of the anticipated date of departure and the date you intend to return, or provide notice as soon as practicable if there are reasons beyond your control.

You will be placed in your original job or an equivalent job with equivalent pay and benefits upon return from leave. You will not lose any benefits that accrued before leave was taken.

Federal FMLA leave and Massachusetts parental leave run concurrently and cannot be used consecutively if leave is covered under both laws.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Small Necessities Leave

Pursuant to the Massachusetts Small Necessities Leave Act, Access Healthcare LLC will provide eligible employees with up to 24 hours of unpaid leave during any 12-month period for the following reasons:

- To participate in school, Head Start, and day care activities directly related to the educational advancement of your child, including parent-teacher conferences or interviewing for a new school.
- To accompany your child to routine medical or dental appointments, including check-ups or vaccinations.
- To accompany your elderly relative to routine medical or dental appointments or appointments for other professional services related to the elder's care, including interviewing at nursing or group homes.

Leave may be taken intermittently or on a reduced leave schedule.

You are eligible for small necessities leave if you have worked for Company for 12 months, either consecutively or nonconsecutively, and worked at least 1,250 hours in the previous 12-month period.

If the need for leave is foreseeable, you must provide seven days' notice. Otherwise, provide notice as soon as possible. You may also be required to submit certification verifying the reason for the leave. You may elect to use paid time off in place of unpaid leave.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Michigan Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age, height, weight, marital status, race (including traits historically associated with race, which include, but are not limited to, hair texture and protective hairstyles such as braids, locks, and twists), color, national origin, ancestry, religion, sex (including pregnancy, childbirth, termination of a pregnancy, or a related medical condition), sexual orientation (including transgender status, gender identity or expression), physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;

- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion towards an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance towards any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

General Policies

Social Security Number Privacy

All employees must provide Access Healthcare LLC with their Social Security numbers (SSNs) for the Company to satisfy payroll, state, and federal tax and insurance coverage requirements. Consistent with Michigan law, the Company takes reasonable steps to maintain the confidentiality of SSNs.

All documents and records containing SSNs and personal identification information are kept in a secure environment. Only authorized personnel with a legitimate business need may access records and documents (both internal and external) that contain employee SSNs and identification information.

In addition to the Company's policy protecting against the disclosure of confidential information, employees are prohibited from accessing, viewing, or using other employees' Social Security information maintained by the Company unless authorized and for lawful purposes.

When necessary, documents containing the SSNs of employees will be properly destroyed through shredding or other means before disposal.

Any employees who unlawfully or without authorization access Social Security data will be disciplined up to and including termination of employment and may be referred to authorities for possible prosecution.

Benefits

Earned Sick Leave - Accrual Method

Access Healthcare LLC provides paid earned sick leave to eligible employees in accordance with Michigan's Earned Sick Time Act.

Eligibility

Most Michigan employees are eligible for earned sick leave. If you have questions about your eligibility, contact Human Resources.

Reasons for Leave

Sick leave may be used for the following reasons:

- For your own or a family member's mental or physical illness, injury, or health condition; medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition; or preventative medical care.
- If you or a family member is the victim of domestic violence or sexual assault:
 - To obtain medical care or psychological or other counseling for physical or psychological injury or disability;
 - To obtain services from a victim services organization;
 - To relocate due to domestic violence or sexual assault;
 - To obtain legal services; or
 - To participate in any civil or criminal proceedings related to or resulting from the domestic violence or sexual assault.
- For meetings at your child's school or place of care related to:
 - The child's health or disability; or
 - The effects of domestic violence or sexual assault on the child.
- Absences necessary due to:
 - Closure of your place of business by order of a public official due to a public health emergency;
 - Your need to care for a child whose school or place of care has been closed by order of a public official due to a public health emergency; or
 - Your, or a family member's, exposure to a communicable disease, if it has been determined by the health authorities that your or a family member's presence in the community would jeopardize the health of others because of the exposure to a communicable disease.

Family member means:

- A biological, adopted, or foster child; stepchild or legal ward; child of your domestic partner; or a child to whom you stand in loco parentis.
- Your or your spouse's/domestic partner's biological parent, foster parent, stepparent, adoptive parent, legal guardian, or an individual who stood in loco parentis to you or your spouse/domestic partner as a minor child.
- An individual to whom you are legally married under the laws of any state or your domestic partner.
- A grandparent.
- A grandchild.
- A biological, foster, or adopted sibling.
- Any other individual related to you by blood or whose close association with you is the equivalent of a family relationship.

Accrual and Usage

Eligible employees accrue one hour of sick leave for every 30 hours worked. You will begin accruing sick leave on February 21, 2025, or on your first day of work, whichever is later. If you are classified as exempt, you are presumed to work 40 hours per workweek, unless you are normally scheduled to work fewer than 40 hours, in which case sick leave accrues based on your normal schedule. For purposes of this policy, the leave year is calendar year.

You may begin using sick leave 90 days calendar days after beginning employment. You may only use 72 hours of sick leave per leave year. Unused sick leave carries over to the next leave year; however, you may only use 72 hours of sick leave per leave year.

Compensation

You will be compensated for sick leave at your normal hourly wage or the applicable state minimum wage, whichever is greater.

Notice

If the need for leave is foreseeable, you must provide at least seven days' advance notice and make reasonable efforts to schedule the leave so it does not unduly disrupt Company operations. If unforeseeable, provide notice as soon as practical. You will not be required to search for or secure a replacement worker as a condition for using sick leave.

Documentation

If leave is being used for more than three consecutive days, the Company may require reasonable documentation establishing that the leave is being used for a qualifying reason. You must provide documentation within 15 days of the request. You will be reimbursed for any out-of-pocket expenses you incur in obtaining the documentation.

Documentation signed by a healthcare professional indicating that earned sick leave is necessary will be considered reasonable documentation.

In cases of domestic violence or sexual assault, the following will be considered reasonable documentation:

- A police report indicating that you or your family member was a victim of domestic violence or sexual assault.
- A signed statement from a victim and witness advocate affirming that you or your family member are receiving services from a victim services organization.
- A court document indicating that you or your family member are involved in legal action related to domestic violence or sexual assault.

The Company will not require disclosure of details relating to domestic violence or sexual assault or the details of your or your family member's medical condition as a condition of providing medical leave.

If the Company obtains health information or information pertaining to domestic violence or sexual assault about you or your family member, the Company will treat that information as confidential and will not disclose that information except to you or with your permission.

Payment upon Termination

You will not be paid for any unused, accrued sick leave when your employment ends.

Transfers

If you transfer to another division, entity, or location, you will retain all unused, accrued sick leave and may use it as described in this policy.

Reinstatement of Leave upon Rehire

If you separate from the Company and are rehired within two months, the Company will reinstate previously unused, accrued sick leave.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy. If you believe your rights under the law have been violated, you may file a complaint with the Michigan Department of Labor and Economic Opportunity (www.michigan.gov/leo).

Employment Protections for Civil Air Patrol Members

If you are a member of the Civil Air Patrol, Access Healthcare LLC will not discriminate against, discipline, or discharge you because of your membership or because you are absent from work due to your response to an emergency declared by the governor, or by the President of the United States.

If you are a member of the Civil Air Patrol, you must notify the Company of your membership upon hiring or within 30 days of the date you join, whichever is later.

To be entitled to the protections provided by this policy, you must provide the Company with as much notice as possible of the dates you will be absent from work due to the emergency. You must also provide the Company with verification from the Civil Air Patrol of the emergency need for your service. Time missed from work while responding to the emergency will be treated as unpaid time off.

Crime Victim Leave

Access Healthcare LLC will provide eligible employees time off from work to respond to a subpoena or request by the prosecuting attorney for the purposes of giving testimony.

Eligibility

To be eligible for time off under this policy, you must be a victim of crime or a victim representative.

A **victim** is an individual who has suffered direct or threatened physical, financial, or emotional harm as a result of the commission of a crime.

A **victim representative** is an individual who is:

- A guardian or custodian of a child of a deceased victim if the child is less than 18 years of age.
- A parent, guardian, or custodian of a victim of assault if the victim is less than 18 years old.
- A person who has been designated to act in place of a victim of assault while the victim is physically or emotionally disabled.

Compensation

Time off granted under this policy will be unpaid; however, exempt employees may be compensated as required by applicable law.

Notice

Upon receiving a subpoena, provide your Supervisor with reasonable advance notice of the need for leave. If advance notice is not practicable, provide appropriate documentation within a reasonable time after the absence.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Minnesota Policies

Hiring and Orientation Policies

Minnesota Nursing Mothers, Lactating Employees, and Pregnancy Accommodations - Employee Notice

Minnesota's Nursing Mothers, Lactating Employees, and Pregnancy Accommodations law (Minnesota Statutes § 181.939) gives pregnant and lactating employees certain legal rights.

Pregnant employees have the right to request and receive reasonable accommodations, which may include, but are not limited to, more frequent or longer breaks, seating, limits to heavy lifting, temporary transfer to another position, temporary leave of absence, or modification in work schedule or tasks. An employer cannot require an employee to take a leave or accept an accommodation.

Lactating employees have the right to reasonable paid break times to express milk at work unless they are expressing milk during a break that is not usually paid, such as a meal break. Employers should provide a clean, private, and secure room that is not a bathroom near the work area that includes access to an electrical outlet for employees to express milk.

It is against the law for an employer to retaliate, or to take negative action, against a pregnant or lactating employee for exercising their rights under this law.

Employees who believe their rights have been violated under this law can contact the Minnesota Department of Labor and Industry's Labor Standards Division at dli.laborstandards@state.mn.us or 651-284-5075 for help. Employees also have the right to file a civil lawsuit for relief. For more information about this law, visit dli.mn.gov/newparents.

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age, race (including traits associated with race, which include, but are not limited to, hair texture and hair styles such as braids, locs, and twists), color, creed, religion, national origin, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, or related conditions), marital status, disability, public assistance, familial status, genetic information, local commissions activity, veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits

retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion towards an individual based upon their membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance towards any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Wage Disclosure Protection

Notice to employees — Under the Minnesota Wage Disclosure Protection law, you have the right to tell any person the amount of your own wages. Your employer cannot retaliate against you for disclosing your own wages or discussing another employee's wages which have been disclosed voluntarily. Your remedies under the Wage Disclosure Protection law are to bring a civil action against your employer and/or file a complaint with the Minnesota Department of Labor and Industry at (651) 284-5075 or (800) 342-5354.

Benefits

Minnesota Paid Leave

Minnesota's Paid Family and Medical Leave program (Paid Leave), provides eligible employees with paid leave to care for themselves or their family members under certain circumstances. Paid Leave is an insurance program administered by the Minnesota Department of Employment and Economic Development (DEED). Premiums are funded through employer and employee payroll deductions.

Eligibility

To be eligible for Paid Leave, you must:

- Work at least 50% of your time in Minnesota; and
- Have earned at least 5.3% of the state's average annual wage during the prior base period (generally the last four completed calendar quarters before your claim), as determined by the DEED.

Reasons for Leave

Leave may be taken for the following reasons:

- **Medical leave:** To care for your own serious health condition, including care related to pregnancy, childbirth, and recovery.
- **Family leave**, which includes:
 - **Bonding leave:** To care for and bond with a new child due to birth, adoption, or foster placement.
 - **Family care leave:** To care for a family member with a serious health condition or a member of the military.
 - **Qualifying exigency leave:** Leave for a family member who is a military member on active duty or has been notified of an impending call or order to covered active duty.
 - **Safety leave:** Leave for the following reasons due to you or a family member being the victim of domestic abuse, sexual assault, or stalking:
 - To seek medical attention because of any physical or psychological injury, or disability.
 - To obtain services from a victim services organization.
 - To obtain psychological or other counseling.
 - To seek relocation.
 - To seek legal advice or to take legal action, including the preparation for or participation in any related civil or criminal legal proceeding.

Leave Usage

If eligible, you may take up to 12 weeks of medical leave or 12 weeks of family leave per benefit year. If you need both medical and family leave during any year, the total combined leave is limited to 20 weeks per benefit year. A **benefit year** is a 52-week period that starts on the first day you take leave.

Leave may be taken continuously or intermittently.

Notice

If leave is foreseeable, you must provide at least 30 days' notice. If leave is unforeseeable, you must provide notice as soon as practical.

Applying for Leave

You must apply for Paid Leave with the DEED. Instructions for filing are available on the website (<https://paidleave.mn.gov/>). You will need to provide certain documentation supporting your need for leave.

Compensation

Paid Leave benefits will be paid based on your average weekly wage.

Interaction with Other Laws

Paid Leave will run concurrently with other leave when permissible under applicable law.

Continuation of Health Benefits

If the Company provides you with health benefits under a group health plan, the Company will maintain your health coverage at the same level and under the same conditions as if you had been continuously employed. You will be responsible for paying your share of the cost of health benefits as required prior to beginning leave.

Restoration

If you worked for the Company for at least 90 calendar days prior to taking leave, you will generally be restored to your previous position or an equivalent position with equivalent employment benefits, pay, and other terms and conditions of employment.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Earned Sick and Safe Leave (Accrual Method)

Access Healthcare LLC provides paid sick and safe leave to eligible employees in accordance with Minnesota's Earned Sick and Safe Time law.

Eligibility

To be eligible for sick and safe leave, it must be anticipated that you will perform at least 80 hours of work in a year for the Company in Minnesota.

Reasons for Leave

Sick and safe leave may be taken for the following reasons:

- Your own mental or physical illness, injury, or health condition; your need for medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition; or your need for preventive medical or health care.
- To care for a family member with a mental or physical illness, injury, or health condition; the family member's need for medical diagnosis, care, or treatment of a physical illness, injury, or health condition; or the family member's need for preventive medical or health care.
- To make arrangements for or attend funeral services or a memorial, or address financial or legal matters that arise after the death of a family member.
- Due to you or your family member being the victim of domestic abuse, sexual assault, or stalking, provided the absence is to:
 - Seek medical attention related to physical or psychological injury or disability caused by the domestic abuse, sexual assault, or stalking;

- Obtain services from a victim services organization;
- Obtain psychological or other counseling;
- Seek relocation or take steps to secure an existing home due to domestic abuse, sexual assault, or stalking; or
- Seek legal advice or take legal action, including preparing for or participating in any civil or criminal legal proceeding related to or resulting from domestic abuse, sexual assault, or stalking.
- The closure of your place of business due to weather or other public emergency or your need to care for a family member whose school or place of care has been closed due to weather or other public emergency.
- Your inability to work or telework because you are:
 - Prohibited from working by the Company due to health concerns related to the potential transmission of a communicable illness related to a public emergency; or
 - Seeking or awaiting the results of a diagnostic test for, or a medical diagnosis of, a communicable disease related to a public emergency and you have been exposed to a communicable disease or the Company has requested a test or diagnosis.
- When it has been determined by the health authorities having jurisdiction or by a healthcare professional that you or your family member's presence in the community would jeopardize the health of others because of you or your family member's exposure to a communicable disease, whether or not you or your family member has actually contracted the communicable disease.

Accrual and Usage

Eligible employees accrue one hour of sick and safe leave for every 30 hours worked, up to a maximum of 48 hours per leave year. New employees begin accruing sick and safe leave on their first day of employment. For purposes of this policy, the leave year is calendar year. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case leave accrues based on your normal schedule.

You may use sick and safe leave as it is accrued. If you have questions regarding the minimum increment of leave you may use and how leave will be tracked, see Human Resources. Unused, accrued leave carries over into the next leave year. The maximum amount of leave you can accrue is 80 hours. When the 80-hour cap is reached, accrual stops until usage occurs. Upon usage, accrual will restart until the annual or overall cap is reached.

Compensation

You will be compensated for sick and safe leave at your base rate of pay.

Notice

If the need for leave is foreseeable, you must provide at least seven days' notice. If unforeseeable, provide notice as soon as practical. Notice should include the expected length of the absence, if known. Notice should be provided to Human Resources.

Documentation

If you use sick and safe leave for more than two consecutive scheduled workdays, you may be required to provide reasonable documentation that the leave is being used for a covered purpose. Information obtained related to your request for leave will be treated as confidential and will not be disclosed unless you consent or it is required under applicable law. For additional information regarding required documentation, see Human Resources.

Restoration

Upon return from leave, you will be returned to employment at the same rate of pay you were receiving when leave commenced, plus any automatic adjustments in your pay scale that occurred while you were on leave. You will also retain all accrued pre-leave benefits of employment and seniority as if there had been no interruption in service.

Interaction with Other Leave

Sick and safe leave will run concurrently with other types of leave when permitted under applicable law.

Payment upon Termination

You will not be paid for any unused sick and safe leave when your employment ends.

Reinstatement of Leave upon Rehire/Transfer

The Company will reinstate previously accrued, unused sick and safe leave if you separate and are rehired within 180 days.

If you transfer to another division, entity, or location within Minnesota, but remain employed by the Company, you are entitled to use all available sick and safe leave from the prior division, entity, or location.

Healthcare Benefits

Your health insurance will be maintained while you are on leave. If you contribute to the cost of your health insurance, you must continue to pay your portion of the premium cost during your leave.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy. If you believe you have been retaliated against or improperly denied sick and safe leave, you may file a complaint with the Minnesota Department of Labor and Industry or file a civil action.

Military Injury or Casualty Leave

Access Healthcare LLC will provide up to 10 days of unpaid leave to employees whose immediate family member was injured or killed while on active duty with the U.S. Armed Forces. ***Immediate family member*** means your parent, child, grandparent, sibling, or spouse.

Provide notice of your need for leave as soon as practical.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Military Family Leave

Access Healthcare LLC will provide reasonable unpaid leave (up to two consecutive days or six days in a calendar year) for eligible employees to attend the following kinds of events related to the military service of their spouse, parent, or child:

- Departure or return ceremonies for deploying or returning military personnel or units;
- Family training or readiness events sponsored or conducted by the military; and
- Events held as part of official military reintegration programs.

To be eligible for this leave, you must be invited or called on by proper military authorities to attend one of the above-listed types of events.

You must provide reasonable notice of your need to take leave.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Military Ceremony Leave

Access Healthcare LLC will provide up to one day of unpaid leave for employees to attend a send-off or homecoming ceremony for an immediate family member ordered into or returning from active service unless it would unduly disrupt Company operations. **Immediate family member** means your grandparent, parent, legal guardian, sibling, child, grandchild, spouse, fiancé, or fiancée.

You must provide reasonable notice of your need to take leave.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Isolation and Quarantine Leave

Access Healthcare LLC provides up to 21 days of unpaid leave to eligible employees who need to isolate or quarantine in accordance with Minnesota law.

You are eligible for leave if you are subject to isolation or quarantine, or if you are caring for a minor or disabled vulnerable adult family member who is subject to isolation or quarantine, because of:

- A directive from the commissioner of health;
- An order of a federal quarantine officer;
- A state or federal court order; or
- A written recommendation of the commissioner (or their designee).

Provide notice of your need for leave as soon as practical.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Bone Marrow Donation Leave

Access Healthcare LLC will provide eligible employees with up to 40 hours of paid leave to undergo medical procedures to donate bone marrow.

Eligibility

To be eligible for bone marrow donation leave, you must work at least 20 hours per week.

Notice and Documentation

To obtain leave under this policy you must provide reasonable notice of the need for leave and submit verification from a physician detailing the purpose and length of the leave requested. If there is a medical determination that you do not qualify as a donor, the paid leave of absence provided to you prior to that medical determination will not be forfeited.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Leave for Victims of Harassment or Domestic Violence

Access Healthcare LLC will provide employees who are victims of harassment or domestic abuse, or whose family or household member is the victim of domestic abuse, with reasonable time off for certain qualifying reasons.

Eligibility

All employees are eligible for this leave.

Leave Usage

Leave may be taken for the following reasons:

- In the case of harassment, to obtain a restraining order against the harasser; or
- In the case of domestic abuse, to obtain an order of protection for yourself or your family or household member.

Family or household member means your spouse or former spouse, your parents and children, a person related to you by blood, a person who currently resides with you or has resided with you in the past, a person with whom you have a child in common, regardless of whether you were married or lived together, or any person with whom you are involved in a significant romantic or sexual relationship. In addition, this term refers to a man and woman if the woman is pregnant and the man is alleged to be the father, regardless of whether they have been married or have lived together at any time.

Notice

Except in the case of imminent danger to your health and safety or that of your family or household member, you must provide at least 48 hours' advance notice of your need for leave. You may be required to provide documentation showing evidence of your need for leave.

Compensation

Leave under this policy is unpaid; however, you may substitute any applicable paid leave for all or a portion of your unpaid leave.

Confidentiality

Information about your request for leave will be kept confidential, except as required by federal or state law or as necessary to protect your safety in the workplace.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Pregnancy and Parenting Leave

Access Healthcare LLC provides eligible employees with up to 12 weeks total of unpaid pregnancy or parenting leave in accordance with the Minnesota Pregnancy and Parenting Leave Act (MPPLA).

Eligibility

All employees are eligible for pregnancy and parenting leave.

Use of Leave

MPPLA leave is available to biological or adoptive parents in conjunction with the birth or adoption of a child. A **child** is a person under the age of 18 or under the age of 20 but still attending a secondary school. Leave must start within 12 months of the birth or adoption; however, if the child remains in the hospital longer than the mother, leave must begin within 12 months after the child leaves the hospital (parenting leave).

MPPLA leave is also available to eligible female employees for prenatal care or for incapacity due to pregnancy, childbirth, or related health conditions and will begin at the time of request (pregnancy leave).

Interaction with FMLA

MPPLA leave and federal Family and Medical Leave Act (FMLA) leave run concurrently, which means the leave provided by each individual law will count against your entitlement under both laws. However, if you take FMLA leave for unrelated reasons (such as a back injury not caused by pregnancy), you will still be entitled to 12 weeks of leave for pregnancy-related illness and parental leave.

Return to Work

After leave, you will be returned to your former position or to a position of comparable duties, number of hours, and pay. However, if during such leave the Company experiences a layoff and you would have lost your job had you not been on leave, you will not be reinstated. In this situation, you will retain all rights under the Company layoff and recall system.

Upon agreement with the Company, you may return to work part time during the leave period without forfeiting the right to return to employment at the end of the leave period.

Notice

You must provide reasonable advance notice of the dates leave will begin and the estimated amount of leave that will be taken. If the leave is for more than one month, you must notify your Supervisor at least two weeks prior to returning from such leave.

Substitution of Paid Leave

The amount of MPPLA leave will be reduced by any paid leave provided by the Company, including disability, personal, medical, or sick leave, or accrued vacation time, so the total leave (MPPLA leave plus paid leave) is not more than 12 weeks.

MPPLA will not be reduced for any period of paid or unpaid leave taken for prenatal care medical appointments.

Benefits

The Company will continue to provide insurance coverage under any group insurance policy, group subscriber contract, or healthcare plan to you and your dependents as if you were not on leave. However, during the leave period, you must continue to pay your share of the cost of benefits. In some instances, the Company may recover premiums it paid to maintain health coverage or other benefits for you and your family if you do not return to work at the end of your approved leave period, unless the continuation, recurrence, or onset of a serious health condition or other circumstances beyond your control prevent your return.

Abuse of Leave

If you are found to have provided a false reason for a leave, you will be subject to disciplinary action, up to and including termination.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

School Conference and Activities Leave

Access Healthcare LLC will provide you with up to 16 hours of unpaid leave in a 12-month period to attend school conferences or activities related to your child, if those conferences or activities cannot be scheduled outside your regular work hours. If your child receives childcare services or attends a prekindergarten regular or special education program, you may use this leave time to attend a conference or activity related to your child, or to observe and monitor the services or program, provided the conference, activity, or observation cannot be scheduled outside your regular work hours.

If leave cannot be scheduled outside your regular work hours and the need for the leave is foreseeable, you must provide reasonable prior notice and make a reasonable effort to schedule the leave so as not to unduly disrupt the operations of the Company.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Victim and Witness Leave

Access Healthcare LLC realizes that, on occasion, you may have an obligation to participate in criminal legal proceedings either as a witness or because you or a close family member was victimized by a criminal act. The Company provides unpaid leave to attend those proceedings under circumstances described below.

If you are required to attend a criminal proceeding either as a witness or as a crime victim (or a close family member of a crime victim), you must provide at least 48 hours' advance notice to your Supervisor to make arrangements for a leave of absence. If it is impractical or an emergency prevents you from providing advance notice, provide notification as soon as possible.

The Company reserves the right to require employees to provide proof of the need for leave to the extent authorized by law.

Leave under this policy is unpaid. You may opt to use paid time off in place of unpaid leave.

Any information related to your leave will be kept confidential by the Company.

This policy does not apply to employees seeking leave because they have committed or are alleged to have committed a criminal act.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

St. Paul Earned Sick and Safe Leave

Access Healthcare LLC provides paid sick and safe leave to eligible employees in accordance with St. Paul's Earned Sick and Safe Time Ordinance and Minnesota's Earned Sick and Safe Time (ESST) law.

Eligibility

To be eligible for sick and safe leave, you must perform, or it must be anticipated that you will perform, at least 80 hours of work in a year within the geographic boundaries of St. Paul.

Reasons for Leave

Sick and safe leave may be used for the following reasons:

- Your own mental or physical illness, injury, or health condition; your need for medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition; or your need for preventive medical or health care.
- To provide care for a family member with a mental or physical illness, injury, or health condition; to care for a family member who needs medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition; or to care for a family member who needs preventive medical or health care.
- To make arrangements for or attend funeral services or a memorial, or address financial or legal matters that arise after the death of a family member.
- If you or a family member is the victim of domestic abuse, sexual assault, harassment, or stalking, time used to:
 - Seek medical attention related to physical or psychological injury or disability caused by domestic abuse, sexual assault, harassment, or stalking;
 - Obtain services from a victim services organization;
 - Obtain psychological or other counseling;
 - Seek relocation or take steps to secure an existing home due to domestic abuse, sexual assault, harassment, or stalking; or
 - Seek legal advice or take legal action, including preparing for or participating in any civil or criminal legal proceeding related to or resulting from domestic abuse, sexual assault, harassment, or stalking.
- The closure of your place of business due to weather or other public emergency, or your need to care for a family member whose school or place of care has been closed due to weather or other public emergency.
- Your inability to work or telework because you are:
 - Prohibited from working by the Company due to health concerns related to the potential transmission of a communicable illness related to a public emergency; or
 - Seeking or awaiting the results of a diagnostic test for, or a medical diagnosis of, a communicable disease related to a public emergency that you have been exposed to or the Company has requested a test for or diagnosis of.
- When it has been determined by the health authorities having jurisdiction or by a healthcare professional that you or your family member's presence in the community would jeopardize the health of others because of you or your family member's exposure to a communicable disease, whether or not you or your family member has actually contracted the communicable disease.
- Any reason permitted under Minnesota's ESST law (see Minnesota Earned Sick and Safe Leave Policy).

Accrual and Usage

Eligible employees accrue one hour of sick and safe leave for every 30 hours worked in St. Paul, up to a maximum of 48 hours per leave year. New employees begin accruing sick and safe leave on their first day of employment. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case leave accrues based on your normal schedule. For purposes of this policy, the leave year is calendar year.

You may only use sick and safe leave for time you are scheduled to perform work in the geographic boundaries of St. Paul. You may use sick and safe leave as it is accrued. If you have questions regarding the minimum increment of leave you may use and how leave will be tracked, contact Human Resources. Unused, accrued leave carries over into the next leave year. The maximum amount of sick and safe leave you can accrue is 80 hours. When the 80-hour cap is reached, accrual immediately stops until usage occurs. Upon usage, accrual will restart until the annual or overall cap is reached.

Compensation

You will be compensated for sick and safe leave in accordance with applicable law.

Notice

If the need for leave is foreseeable, you must provide at least seven days' notice. If unforeseeable, provide notice as soon as practical. Notice should include the expected length of the absence, if known. Notice should be provided to Human Resources.

Documentation

If you use sick and safe leave for more than two consecutive scheduled workdays, you may be required to provide reasonable documentation that the leave is being used for a covered purpose. If documentation is not reasonably available within that timeframe, you may provide a written statement or other reasonable documentation once it becomes available. Documentation does not need to include details about the nature of any medical condition or situation and will be accepted in any form consistent with applicable law. Information obtained related to your request for leave will be treated as confidential and will not be disclosed unless you consent or it is required under applicable law. For additional information regarding required documentation, contact [Human Resources](#).

Restoration

Upon return from leave, you will be returned to employment at the same rate of pay you were receiving when leave began, plus any automatic adjustments in your pay scale that occurred while you were on leave. You will also retain all accrued pre-leave benefits of employment and seniority as if there had been no interruption in service.

Interaction with Other Leave

Sick and safe leave will run concurrently with other types of leave when permitted under applicable law. If you use another form of paid leave for a purpose that qualifies under the St. Paul ordinance or Minnesota law, that leave will be treated as ESST leave and subject to the same notice, documentation, and antiretaliation protections described in this policy.

Where St. Paul's Earned Sick and Safe Time Ordinance intersects with Minnesota's ESST law, the Company will apply the provision that provides the greatest benefit to you.

Abuse of Leave

The Company may investigate the suspected abuse of leave. If you are found to have provided a false reason for leave, you will be subject to disciplinary action, up to and including termination.

Payment upon Termination

You will not be paid for any unused sick and safe leave when your employment ends.

Reinstatement of Leave upon Rehire/Transfer

The Company will reinstate previously accrued, unused sick and safe leave if you separate and are rehired within 180 days.

If you transfer to another division, entity, or location outside the city and are transferred back to another division, entity, or location within the city, the Company will reinstate all previously unused sick and safe leave.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy. If you believe you have been retaliated against or improperly denied sick and safe leave, you may file a complaint by contacting the St. Paul Division of Labor Standards Enforcement and Education in the following ways:

- Phone: (651) 266-8966
- Email: LaborStandards@stpaul.gov
- Website: <https://www.stpaul.gov/departments/human-rights-equal-economic-opportunity/labor-standards-enforcement-and-education#how-to-file-a-complaint>
- In person/Mail: St. Paul City Hall, Department of Human Rights and Equal Economic Opportunity (HREEO), 15 W Kellogg Blvd., Office 280, Saint Paul, MN 55102

You also have the right to file a civil action.

Bloomington Earned Sick and Safe Leave

Access Healthcare LLC provides paid sick and safe leave to eligible employees in accordance with Bloomington's Earned Sick and Safe Time Ordinance and Minnesota's Earned Sick and Safe Time (ESST) law.

Eligibility

To be eligible for sick and safe leave, you must perform, or it must be anticipated that you will perform, at least 80 hours of work in a year within the geographic boundaries of Bloomington. This includes temporary and part-time employees.

Reasons for Leave

Sick and safe leave may be taken for the following reasons:

- Your own mental or physical illness, injury, or health condition; need for medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition; or need for preventive medical or health care.
- To care for a family member with a mental or physical illness, injury, or health condition; need for medical diagnosis, care, or treatment of a physical illness, injury, or health condition; or need for preventive medical or health care.
- To make arrangements for or attend funeral services or a memorial, or address financial or legal matters that arise after the death of a family member.
- An absence due to you or your family member being the victim of domestic abuse, sexual assault, or stalking, provided the absence is to:
 - Seek medical attention related to physical or psychological injury or disability caused by domestic abuse, sexual assault, or stalking;
 - Obtain services from a victim services organization;
 - Obtain psychological or other counseling;
 - Seek relocation or take steps to secure an existing home due to domestic abuse, sexual assault, or stalking; or
 - Seek legal advice or take legal action, including preparing for or participating in any civil or criminal legal proceeding related to or resulting from domestic abuse, sexual assault, or stalking.
- The closure of your place of business due to weather or other public emergency, or your need to care for a family member whose school or place of care has been closed due to weather or other public emergency.
- Your inability to work or telework because you are:

- Prohibited from working by the Company due to health concerns related to the potential transmission of a communicable illness related to a public emergency; or
- Seeking or awaiting the results of a diagnostic test for, or a medical diagnosis of, a communicable disease related to a public emergency and you have been exposed to a communicable disease or the Company has requested a test or diagnosis.
- When it has been determined by the health authorities having jurisdiction or by a healthcare professional that you or your family member's presence in the community would jeopardize the health of others because of you or your family member's exposure to a communicable disease, whether or not you or your family member has actually contracted the communicable disease.

Accrual and Usage

Eligible employees accrue one hour of sick and safe leave for every 30 hours worked in Bloomington, up to a maximum of 48 hours per leave year. New employees begin accruing sick and safe leave on their first day of employment. For purposes of this policy, the leave year is calendar year. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case leave accrues based on your normal schedule.

You may only use sick and safe leave for time you are scheduled to perform work in the geographic boundaries of Bloomington. You may use sick and safe leave as it is accrued.

If you have questions regarding the minimum increment of leave you may use and how leave will be tracked, contact Human Resources. Unused, accrued leave carries over into the next leave year. The maximum amount of leave you can accrue is 80 hours. When the 80-hour cap is reached, accrual stops until usage occurs. Upon usage, accrual will restart until the annual or overall cap is reached.

Compensation

You will be compensated for sick and safe leave in accordance with applicable law.

Notice

If the need for leave is foreseeable, you must provide at least seven days' notice. If unforeseeable, provide notice as soon as practical. Notice should include the expected length of the absence, if known. Notice should be provided to Human Resources.

Documentation

If you use sick and safe leave for more than three consecutive days, you may be required to provide reasonable documentation that the leave is being used for a covered purpose. If documentation is not available within that timeframe, you may provide a written statement or other reasonable documentation once it becomes available. Documentation does not need to include details about the nature of any medical condition or situation and will be accepted in any form consistent with applicable law. Information obtained related to your request for leave will be treated as confidential and will not be disclosed unless you consent or it is required under applicable law. For additional information regarding required documentation, contact [Human Resources](#).

Restoration

Upon return from leave, you will be returned to employment at the same rate of pay you were receiving when leave began, plus any automatic adjustments in your pay scale that occurred while you were on leave. You will also retain all accrued pre-leave benefits of employment and seniority as if there had been no interruption in service.

Interaction with Other Leave

Sick and safe leave will run concurrently with other types of leave when permitted under applicable law. If you use another form of paid leave for a purpose that qualifies under the Bloomington ordinance or Minnesota law, that leave will be treated as ESST leave and subject to the same notice, documentation, and antiretaliation protections described in this policy.

Where Bloomington's Earned Sick and Safe Time Ordinance intersects with Minnesota's ESST law, the Company will apply the provision that provides the greatest benefit to you.

Payment upon Termination

You will not be paid for any unused sick and safe leave when your employment ends.

Reinstatement of Leave upon Rehire/Transfer

The Company will reinstate previously accrued, unused sick and safe leave if you separate and are rehired within 180 days.

If you transfer to another division, entity, or location outside the city and are transferred back to another division, entity, or location within the city, the Company will reinstate all previously unused sick and safe leave.

Workplace Poster

The Company is required to provide you with a copy of the *Earned Sick and Safe Leave Notice of Employee Rights* poster. A copy of the poster is attached as an addendum at the end of this handbook.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy. If you believe you have been retaliated against or improperly denied sick and safe leave, you may file a complaint by contacting the Bloomington City Attorney's Compliance Division in the following ways:

- Phone: (952) 563-8753
- Email: ESST@bloomingtonmn.gov
- Website: <https://www.bloomingtonmn.gov/earned-sick-and-safe-time-esst>
- In person/Mail: Legal Department – Compliance Division, 1800 West Old Shakopee Road, Bloomington, MN 55431

Minneapolis Paid Sick and Safe Leave

Access Healthcare LLC provides paid sick and safe leave to eligible employees in accordance with the Minneapolis Sick and Safe Time Ordinance and Minnesota's Earned Sick and Safe Time (ESST) law.

Eligibility

To be eligible for sick and safe leave, you must perform, or it must be anticipated that you will perform, at least 80 hours of work in a year within the geographic boundaries of Minneapolis. This includes full-time, part-time, and temporary employees.

Reasons for Leave

Sick and safe leave may be used for the following reasons:

- To obtain medical diagnosis, treatment, recuperation, or preventive care for your own or a family member's medical or mental health condition, illness, or injury.
- To make arrangements for or to attend funeral services or a memorial, or address financial or legal matters due to the death of a family member.
- Absences due to you or your family member being a victim of domestic abuse, sexual assault, or stalking, provided the absence is to:
 - Seek medical attention related to physical or psychological injury or disability caused by domestic abuse, sexual assault, or stalking;
 - Obtain services from a victim services organization;
 - Obtain psychological or other counseling;
 - Seek relocation or take steps to secure an existing home due to domestic abuse, sexual assault, or stalking; or
 - Take legal action or seek legal advice, including preparing for or participating in any civil or criminal legal proceeding, related to or resulting from domestic abuse, sexual assault, or stalking.
- The closure of your place of business due to weather or other public emergency, or your need to care for a family member whose school or place of care has been closed due to weather or other public emergency.
- Your inability to work or telework because you are:
 - Prohibited from working by the Company due to health concerns related to the potential transmission of a communicable illness related to a public emergency; or
 - Seeking or awaiting the results of a diagnostic test for, or a medical diagnosis of, a communicable disease related to a public emergency that you have been exposed to or the Company has requested a test for or diagnosis of.
- When it has been determined by the health authorities having jurisdiction or by a healthcare professional that you or your family member's presence in the community would jeopardize the health of others because of you or your family member's exposure to a communicable disease, whether or not you or your family member has actually contracted the communicable disease.
- Any reason permitted under Minnesota's ESST law (see Minnesota Earned Sick and Safe Leave Policy).

Accrual and Usage

Eligible employees accrue one hour of sick and safe leave for every 30 hours worked in Minneapolis, up to a maximum of 48 hours per leave year. New employees begin accruing leave on their first day of employment. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick and safe leave accrues based on your normal schedule. For purposes of this policy, the leave year is calendar year.

You may only use sick and safe leave for time you are scheduled to perform work in the geographic boundaries of Minneapolis. You may use sick and safe leave as it is accrued. If you have questions regarding the minimum increment of leave you may use and how leave will be tracked, contact Human Resources. Unused, accrued leave carries over into the next leave year. The maximum amount of leave you can accrue is 80 hours. When the 80-hour cap is reached, accrual immediately stops until usage occurs. Upon usage, accrual will restart until the annual or overall cap is reached.

Compensation

You will be compensated for sick and safe leave in accordance with applicable law.

Notice

If the need for leave is foreseeable, you must make a good faith effort to provide seven days' advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence. Notice should be provided to Human Resources.

Documentation

If you use sick and safe leave for more than two consecutive scheduled workdays, you may be required to provide reasonable documentation that the leave is being used for a covered purpose. If documentation is not reasonably available within that timeframe, you may provide a written statement or other reasonable documentation once it becomes available. Documentation does not need to include details about the nature of any medical condition or situation and will be accepted in any form consistent with applicable law. Information obtained related to your request for leave will be treated as confidential and will not be disclosed unless you consent or it is required under applicable law. For additional information regarding required documentation, contact Human Resources.

Restoration

Upon return from leave, you will be returned to employment at the same rate of pay you were receiving when leave began, plus any automatic adjustments in your pay scale that occurred while you were on leave. You will also retain all accrued pre-leave benefits of employment and seniority as if there had been no interruption in service.

Interaction with Other Leave

Sick and safe leave will run concurrently with other types of leave when permitted under applicable law. If you use another form of paid leave for a purpose that qualifies under the Minneapolis ordinance or Minnesota law, that leave will be treated as ESST leave and subject to the same notice, documentation, and antiretaliation protections described in this policy.

Where Minneapolis's Sick and Safe Time Ordinance intersects with Minnesota's ESST law, the Company will apply the provision that provides the greatest benefit to you.

Payment upon Termination

You will not be paid for any unused sick and safe leave when your employment ends.

Reinstatement of Leave upon Rehire/Transfer

The Company will reinstate previously accrued, unused sick and safe leave if you separate and are rehired within 180 days.

If you transfer to another division, entity, or location outside the city and are transferred back to another division, entity, or location within the city, the Company will reinstate all previously unused sick and safe leave.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy. If you believe you have been retaliated against or improperly denied sick and safe leave, you may file a complaint by contacting the Minneapolis Labor Standards Enforcement Division in the following ways:

1. Phone: 311
2. Website: <https://sicktimeinfo.minneapolismn.gov/report-a-violation.html>
3. In person: 350 S 5th St., Room 239, Minneapolis, MN 55415

Mississippi Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race, color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;

- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Crime Victim Leave

In accordance with the Mississippi Crime Victims' Bill of Rights, you may take time off to respond to a subpoena or participate in the reasonable preparation of a criminal proceeding if:

- You are a victim of the crime at issue in the proceedings; or
- The victim is deceased or incapacitated, and you are an immediate family member or a lawful representative.

Immediate family member means the spouse, parent, child, sibling, grandparent, or guardian of the victim.

Time off under this policy will be without pay; however, exempt employees may receive pay as required by applicable law. You may opt to use paid time off for any unpaid time off.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Missouri Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age, race, color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), sexual stereotyping, pregnancy (including childbirth, lactation, and related medical conditions), marital status, physical or mental disability, genetic information (including testing and characteristics), association with anyone who is a member of a protected class, AIDS/HIV status, veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;

- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion towards an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance towards any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Victim and Witness Leave

Access Healthcare LLC realizes that, on occasion, you may have an obligation to participate in criminal legal proceedings either as a witness or because you, or a close family member, was victimized by a criminal act. The Company provides unpaid leave to attend those proceedings under circumstances described below.

If you are required to attend a criminal proceeding either as a witness or as a crime victim (or a close family member of a crime victim), you must inform your Supervisor as soon as possible to make scheduling arrangements. The Company reserves the right to require employees to provide proof of the need to attend the criminal proceedings to the extent authorized by law.

Leave under this policy is unpaid; however, exempt employees may receive pay as required by applicable law.

You are expected to return to work if you are excused from the criminal proceedings during regular working hours or released from the criminal proceeding earlier than expected.

This policy does not apply to employees seeking leave because they have committed or are alleged to have committed a criminal act.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Montana Policies

Welcome

Nature of Employment Relationship

No policy or provision in this handbook is intended to create a contract binding you or Access Healthcare LLC to an agreement of employment for a specific period of time. Except as prohibited by state law, your employment can be terminated by either you or the Company at any time, for any reason, with or without notice. Only the CEO has the authority to make promises or negotiate with regard to guaranteed or continued employment, and any such promises are only effective if placed in writing and signed by the CEO.

If a written contract between you and the Company is inconsistent with this handbook, the written contract is controlling.

Nothing in this handbook will be interpreted, applied, or enforced to interfere with, restrain, or coerce employees in the exercise of their rights under Section 7 of the National Labor Relations Act.

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age, race, color, national origin, ancestry, creed, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), marital status, physical or mental disability, genetic information (including testing and characteristics), association or relationship with a member of a protected status group, veteran status, uniformed servicemember status, vaccination status, immunity passport holder status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion towards an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance towards any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Employment Protections for Volunteer Emergency Services Providers

Access Healthcare LLC will not terminate your employment because:

- You have chosen to serve as a volunteer emergency services provider or joined a volunteer emergency unit or organization.
- You are late or absent from work because you were performing your duties as a volunteer emergency services provider during an emergency.

For purposes of this policy, **volunteer emergency services provider** means the following who is not paid full time by the entity for which the services are performed in the local service area:

- A volunteer firefighter as defined in Mont. Code Ann. § 7-33-4510;
- A volunteer who is an enrolled member of a volunteer fire department as defined in Mont. Code Ann. § 7-33-4109; or
- A volunteer emergency medical technician as defined in Mont. Code Ann. § 50-6-202.

To be entitled to the protections provided by this policy, you must first complete your probationary period.

If you are a volunteer emergency services provider when hired, you must provide the Company written notice of your status within 30 days of hire. If you are currently a volunteer emergency services provider and have not notified the Company, provide written notice as soon as possible. If you join a volunteer emergency unit or organization while employed at the Company, you must provide written notice within 30 days of joining the unit or organization.

If you are late or absent from work, or may be late or absent from work, due to performing your duties as a volunteer emergency services provider, you must notify the Company as soon as possible.

If you have already reported to work when called to an emergency, the Company will determine if you may leave work to respond to the emergency.

The Company may require you to provide a written statement from a supervisor of the volunteer emergency services organization verifying that you responded to an emergency and provide the date, time, and duration of the emergency.

Time missed from work due to performing your duties as a volunteer emergency services provider is unpaid.

Leave of Absence for Public Officials

Access Healthcare LLC will not prohibit or restrict you from seeking election or appointment to a city, county, or state public office. If you are elected or appointed to a city, county, or state public office, the Company will provide you with an unpaid leave of absence of up to 180 days per year while you are performing public service.

Provide written notice of your need to take leave as soon as practical.

During your leave of absence while performing public service, the Company will not require you to:

- Use leave or benefits without your consent; or
- Perform work.

While on leave, the Company will maintain your healthcare benefits.

You must make arrangements to return to work within 10 days following the completion of the public service for which leave was granted, unless you are unable to do so because of illness or a disabling injury certified by a licensed physician.

Upon return from leave, you will be restored to your previous position with the same seniority, status, compensation, hours, locality, and benefits that existed immediately prior to your leave.

The Company will not retaliate or discriminate against employees who:

- Seek election or appointment to a city, county, or state public office; or
- Request or take leave in accordance with this policy.

Crime Victim Leave

Access Healthcare LLC will permit eligible employees to take time off from work to participate at the prosecuting attorney's request in preparation for or attendance at a criminal justice proceeding.

To be eligible for leave, you must be:

- The victim of the crime at issue in the proceedings; or
- The victim's spouse, child by birth or adoption, stepchild, parent, stepparent, or sibling.

You are not eligible for leave if you are accountable for the crime at issue in the proceedings.

Time off under this policy will be without pay; however, exempt employees will not incur any reduction in pay for a partial week's absence.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Maternity Leave

Access Healthcare LLC will provide female employees a reasonable leave of absence for pregnancy. If you wish to take maternity leave, you may be required to provide a medical certification stating that you are not able to perform your employment duties as a result of the pregnancy.

Upon return from leave, you will be reinstated to your original job or to an equivalent position with equivalent pay and accumulated seniority, retirement, fringe benefits, and other service credits, unless circumstances have changed such that reinstatement is impossible or unreasonable.

Disabilities caused or contributed to by pregnancy and related medical conditions will be treated like other temporary disabilities for all job-related purposes.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Nebraska Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

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While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;

- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
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Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
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We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Election Worker Leave

Access Healthcare LLC will provide employees who have been appointed as election workers with paid leave for hours missed from work while performing their duties. **Election worker** means a judge or clerk of election, a precinct or district inspector, a canvassing board member, or any other election worker in any county.

You must provide reasonable notice of your need to take leave. Reasonable notice will be waived if you are appointed to serve as a judge or clerk of election to fill vacancies on Election Day.

Election worker leave is paid; however, the Company may reduce your pay for each hour of work missed by an amount equal to the hourly compensation you received from the county for your service. If you perform shift work and are required to serve as an election worker for eight or more hours, you will also be entitled to paid leave for any shift work scheduled in the eight hours prior to and the eight hours following the hours you are required to serve.

The Company will not retaliate or discriminate against employees who request or take leave in accordance with this policy.

Family Military Leave

Access Healthcare LLC provides up to 30 days of unpaid family military leave to employees who are the spouse or parent of a person called to military service. The leave must be taken during the time the federal or state deployment orders are in effect.

To be eligible for family military leave, you must:

- Have worked for the Company for at least 12 months;
- Have worked for at least 1,250 hours during the 12-month period immediately preceding the start of family military leave; and
- Be the spouse or parent of a person called to military service, by the State of Nebraska or the United States, lasting 179 days or longer.

If you need to take family military leave, notify your Supervisor as soon as practicable. If the leave is for five or more consecutive workdays, you must provide at least 14 days' notice. Consult with your Supervisor to

schedule the leave so as not to unduly disrupt the operations of the Company. You may be required to provide certification from the proper military authority to verify your eligibility for leave.

You may elect to use any available paid time off for which you are eligible under Company policy for the purpose of taking family military leave, and such paid time off will run concurrently with the leave afforded under this policy.

Upon returning from family military leave, you will be restored to your previous position or to a position with equivalent seniority status, employee benefits, pay, and other conditions of employment.

During family military leave, you will be able to continue your health insurance benefits at your own expense.

The Company will not discriminate or retaliate against employees who request or take leave in accordance with this policy.

Nevada Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

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While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

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If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

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The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, if you make less than one and one-half times the applicable minimum wage rate, you will be paid one and one-half times your regular rate of pay for time worked over 40 hours in a workweek or more than eight hours in a workday, unless otherwise exempted. If you make more than one and one-half times the applicable minimum wage rate, you will be paid one and one-half times your regular rate of pay for time worked over 40 hours in a workweek, unless otherwise exempted. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Search and Rescue Leave

If you are a volunteer member of a search and rescue or reserve unit of a sheriff's department or a volunteer member of the Nevada Wing of the Civil Air Patrol, Access Healthcare LLC will provide you with unpaid leave to participate in search and rescue activities.

Additionally, if you are a volunteer member of the Nevada Wing of the Civil Air Patrol, the Company will provide you with an unpaid leave of absence from employment without loss of position, seniority, accrued leave, or benefits on days during which you are:

- Engaging in training for emergency missions with the Civil Air Patrol (not to exceed 10 workdays during each federal fiscal year); or
- Responding to an emergency mission with the Civil Air Patrol (not to exceed 30 workdays during each federal fiscal year).

You must provide notice of your need for leave as soon as practical. If Civil Air Patrol leave is being requested for the reasons above, you must provide the following:

- Certification that you have been authorized by the U.S. Air Force, the Governor, or a political subdivision of Nevada to respond to or train for an emergency mission; and
- Verification from the Civil Air Patrol of the emergency need of your volunteer service.

Leave under this policy is unpaid. You will not be required to exhaust any other leave to which you are entitled before taking a leave of absence under this policy.

If you intend to join a volunteer search and rescue or reserve unit of a sheriff's department or join a Civil Air Patrol unit as a volunteer member, you must disclose this to the Company.

The Company may prohibit you from participating in search and rescue activities during normal working hours, except for the reasons listed above. The Company will notify you of this decision as soon as practicable after you have made the disclosure.

The Company will not discriminate or retaliate against employees who:

- Serve as volunteer members of a search and rescue or reserve unit of a sheriff's department or a member of the Nevada Wing of the Civil Air Patrol; or
- Request or take leave in accordance with this policy.

Legislative Leave

Access Healthcare LLC will provide employees who serve as state legislators with unpaid leave, provided they are members, to attend the following:

- Meeting of the legislative commission or subcommittee of the legislative commission.
- Meeting of the interim finance committee, other legislative committee, or other subcommittee created by statute.
- Meeting of an interim committee that conducts a study or investigation under Nev. Rev. Stat. § 218E.200 or other legislature-established committee conducting an interim study.
- Meeting of a non-legislative committee, if the employee's membership in the committee is in the employee's official capacity as a legislator.

You must provide written notice of your need to take leave as soon as practical.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Leave to Attend Juvenile Court

Access Healthcare LLC will provide unpaid leave to employees who need to attend court with or on behalf of a child. To be eligible for this leave, you must be the parent or guardian of the child.

You must provide advance verbal notice of your need for leave as soon as practical. In the case of a detention hearing, you must provide the Company with a certificate of attendance immediately upon your return to work. For any hearing after the initial detention hearing, you must provide a copy of the written notice of hearing prior to attending the hearing.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Emergency Services Leave

Access Healthcare LLC will provide employees who perform duties as volunteer emergency services workers with unpaid time off to perform these services. Covered emergency services workers include:

- Volunteer ambulance drivers and attendants; and
- Volunteer firefighters.

If you are a voluntary emergency services worker, you must disclose your potential obligations to the Company. When called to provide services, you must give notice of your need for leave as soon as practical.

The Company will not discriminate or retaliate against employees who serve as volunteer emergency services workers or who take leave in accordance with this policy.

School Conference and Emergency Leave

Access Healthcare LLC will provide unpaid leave to employees who are the parent, guardian, or custodian of a child who is enrolled in a public or private school to:

- Attend a conference requested by an administrator at the child's school; or
- Respond to an emergency regarding their child that occurs during the workday.

You must provide notice of your need for leave as soon as practical.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Court Attendance and Witness Leave

Access Healthcare LLC realizes that, on occasion, employees may be subpoenaed to appear as a witness in a judicial or administrative proceeding. In such cases, you will be provided unpaid leave to attend. Notify your Supervisor as soon as possible to make scheduling arrangements.

The Company reserves the right to require employees to provide proof of the need for leave to the extent authorized by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Leave for Victims of Domestic Violence and Sexual Assault

Access Healthcare LLC provides eligible employees with up to 160 hours of unpaid victim leave in a 12-month period in accordance with Nevada's leave law for victims of domestic violence and sexual assault.

Eligibility

To be eligible for victim leave, you must:

- Be employed by the Company for at least 90 days; and
- Be a victim of domestic violence or sexual assault or have a household or family member who is the victim of domestic violence or sexual assault.

Reasons for Leave

Victim leave may be taken for one or more of the following reasons:

- The diagnosis, care, or treatment of a health condition related to domestic violence or sexual assault committed against you or a member of your family or household;
- To obtain counseling or assistance related to domestic violence or sexual assault committed against you or a member of your family or household;
- To participate in any court proceedings related to an act of domestic violence or sexual assault committed against you or a member of your family or household; or
- To establish a safety plan, including any action to increase your safety or the safety of a member of your family or household, from a future act of domestic violence or sexual assault.

Leave Usage

Victim leave must be used within the 12 months immediately following the date on which the domestic violence or sexual assault occurred. Leave may be used consecutively or intermittently.

Victim leave will run concurrently with other leaves where permissible under applicable law.

Notice

You must provide reasonable advance notice of the need for leave unless you are prevented from doing so because of imminent danger to your health or safety or danger to the health or safety of a family or household member. After taking victim leave, you must provide at least 48 hours' advance notice of the need to use additional hours of leave. Victim leave is unpaid; however, you may elect to use any available paid leave time.

Documentation

You may be required to provide documentation supporting your need for leave. Documentation may include, but is not limited to:

- A police report.
- A copy of an application for an order for protection.
- An affidavit from an organization that provides services to victims of domestic violence.
- Documentation from a physician.

Confidentiality

The Company will take all reasonable steps to keep confidential all information relating to your request for victim leave.

Retaliation

The Company will not discriminate or retaliate against employees who request or take leave in accordance with this policy.

School Visitation Leave

Access Healthcare LLC will provide up to four hours of leave during any school year to employees who are the parent, guardian, or custodian of a child who is enrolled in a public or private school to:

- Attend parent-teacher conferences.
- Attend school-related activities during regular school hours.
- Volunteer or otherwise be involved at the school in which your child is enrolled during regular school hours.
- Attend school-sponsored events.

Leave will be granted for each child who is enrolled in public or private school. The smallest increment of leave you may take is one hour.

You must provide a written request for leave at least five school days before leave is to be taken.

You may be required to provide documentation verifying that during the time of leave, you did attend or were otherwise involved in an eligible school-related activity.

Time off under this policy will be without pay; however, exempt employees may receive pay for partial day absences, as required by applicable law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

New Hampshire Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age, race (including immutable traits associated with race, which include, but are not limited to, hair type, hair texture, hairstyles, and protective hairstyles such as braids, locs, tight coils or curls, cornrows, Bantu knots, Afros, twists, and headwraps), color, marital status, national origin, ancestry, religious creed, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information (including testing and characteristics), crime victim status, veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Meal and Rest Periods

Access Healthcare LLC strives to provide a safe and healthy work environment and complies with all federal and state regulations regarding meal and rest periods. Check with your Supervisor regarding procedures and schedules for rest and meal breaks. The Company requests that employees accurately observe and record meal and rest periods. If you know in advance that you may not be able to take your scheduled break or meal period, let your Supervisor know; in addition, notify your Supervisor as soon as possible if you were unable to or prohibited from taking a meal or rest period.

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Leave to Attend Certain Medical Appointments

Access Healthcare LLC will provide you with up to 25 hours of leave to attend your own medical appointments for childbirth or postpartum care, or your child's pediatric medical appointments. Leave must be taken within the first year of the child's birth or adoption.

If both you and your spouse work for the Company, you may collectively take a total of 25 hours of leave.

Leave under this policy is unpaid; however, you may substitute any portion of this leave with appropriate paid leave.

You must provide reasonable advance notice of your need for leave and make reasonable efforts to schedule leave so that it does not unduly disrupt Company operations. You may be asked to provide documentation confirming that the leave is being used for its intended purpose.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Employment Protections for Volunteer Firefighters and Emergency Medical Technicians

If you are a volunteer member of a fire or ambulance department, Access Healthcare LLC will not discharge you or take any other disciplinary action against you for failing to report to work at your regular start time due to your responding to an emergency you witnessed or came upon while on your way to work. **Volunteer member** means a volunteer, call, reserve, or permanent-intermittent firefighter or emergency medical technician (EMT)

but does not include any person who received compensation for over 975 hours of services rendered in such capacity over the preceding six-month period.

If you are or will be late or absent from work because you are responding to an emergency, you must make a reasonable effort to notify the Company of your expected late arrival or absence.

Time missed from work due to responding to an emergency will be unpaid.

You may be required to submit a statement signed by the chief of your fire or ambulance department certifying the date and time you responded to and returned from the emergency.

Veterans Day Leave

Access Healthcare LLC will allow eligible employees who are veterans to take unpaid leave on Veterans Day (November 11).

To be eligible for this holiday, you must be an honorably discharged veteran.

If you intend to take the Veterans Day holiday, provide reasonable advance notice.

The Company may require you to provide evidence supporting your honorably discharged veteran status.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Crime Victim Leave

Access Healthcare LLC will permit you to take unpaid leave to participate in investigations, or court or other related legal proceedings, under the following circumstances:

1. Where you are the victim of a crime or attempted crime.
2. Where your immediate family member is a victim of a crime or attempted crime and is a minor.
3. Where your immediate family member is a victim of homicide.

Immediate family member means your father, mother, stepparent, child, stepchild, sibling, spouse, grandparent, or legal guardian; or any person involved in an intimate relationship with you and residing in the same household.

If you need to take crime victim leave, notify your Supervisor and make scheduling arrangements. The Company may request documentation supporting your need for leave.

Leave under this policy will be unpaid; however, exempt employees may be paid as required by law. You may choose to use paid time off for any unpaid leave.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Pregnancy Disability Leave

If you are unable to perform the essential functions of your job due to a temporary physical disability resulting from pregnancy, childbirth, or related medical conditions, Access Healthcare LLC will permit you to take a leave of absence for the period of your disability. If you are also eligible for leave under the federal Family and Medical Leave Act (FMLA), such leave will run concurrently.

Upon return to work, you will be reinstated to your original job or to a comparable position unless business necessity makes doing so impossible or unreasonable.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

New Jersey Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

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- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
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Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion towards an individual because of the individual's membership in a protected class.

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- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance towards any select group.

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If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

General Policies

Access to Personnel and Medical Records Files

Access Healthcare LLC maintains separate medical records files and personnel files for all employees. Files containing medical records are stored separate and apart from any business-related records in a safe, locked, inaccessible location. The medical file is the repository for sensitive and confidential information related to an individual's health, health benefits, health-related leave and/or accommodations, and benefits selections and coverage. Medical records are kept confidential in compliance with applicable laws and access is on a "need-to-know" basis only.

Supervisors and others in management may have access to your personnel file for possible employment-related decisions. If you wish to review your personnel or medical records file, you must give the Company reasonable notice. Inspection must occur in the presence of a Company representative.

All requests by an outside party for information contained in your personnel file will be directed to Human Resources, which is the only department authorized to give out such information.

Benefits

Bone Marrow and Organ Donation Leave

Access Healthcare LLC will provide employees with up to 26 weeks of leave for organ or bone marrow donation.

Leave under this policy is generally unpaid; however, you may be eligible for partial wage replacement benefits through New Jersey's Temporary Disability Benefits Law.

The Company may request proof of your need for leave in accordance with applicable law.

Upon return from leave, you will be restored to your previous position or to an equivalent position of like seniority, status, employment benefits, pay, and other terms and conditions of employment.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Family Leave Insurance

New Jersey's Family Leave Insurance (FLI) program provides eligible employees with up to 12 weeks (or up to 56 days for intermittent leave) of partial wage replacement benefits in a 12-month period during periods of unemployment for time taken:

- To care for or bond with a newborn child during the first 12 months after the child's birth. You, your domestic partner, or your civil union partner must be the baby's biological parent, or you must be the parent of the child pursuant to a valid gestational carrier agreement.
- To care for or bond with an adopted child or a child placed into foster care with you during the first 12 months after the child's placement.
- To care for a family member with a serious health condition.
- To care for a victim of domestic violence or a sexually violent offence or for a victim's family member.
- Where a state of emergency is declared by the Governor or is considered necessary by the Commissioner of Health or other public health authority, due to an epidemic of a communicable disease, a known or suspected exposure to the communicable disease, or efforts to prevent spread of a communicable disease, which:
 - Requires in-home care or treatment of your child due to the closure of the school or place of care, by order of a public official due to the epidemic, or other public health emergency;
 - Prompts the issuance by a public health authority of a determination, including by mandatory quarantine, requiring or imposing responsive or prophylactic measures as a result of illness caused by the epidemic or exposure because the presence of a family member for whom you provide care would jeopardize the health of others in the community; or
 - Results in the recommendation of a health care provider or public health authority that a family member for whom you provide care voluntarily undergo self-quarantine as a result of suspected exposure to a communicable disease because the presence in the community would jeopardize the health of others.

As used in this policy:

- **Family member** means your child, parent, parent-in-law, sibling, grandparent, grandchild, spouse, domestic partner, civil union partner, and any other person related by blood to you or with whom you have a close association that is the equivalent of a family relationship.
- **Child** means your biological, adopted, foster, or step child; your legal ward; or a child of your domestic partner or civil union partner. A child gained by way of a valid written contract between the parent and a surrogate (gestational carrier) is included in this definition.

To be eligible for FLI coverage you must have worked for 20 or more calendar weeks in covered New Jersey employment and meet the minimum wage requirements of the state plan.

FLI provides a monetary benefit and is financed by worker payroll deductions. The FLI program does not offer a leave entitlement, and employees taking FLI-covered leave are not guaranteed job restoration under the FLI program.

FLI benefits may run concurrently with leave taken under the federal Family and Medical Leave Act or the New Jersey Family Leave Act where applicable.

To claim FLI benefits for leave taken to bond with a newborn or newly adopted or fostered child on a single continuous, non-intermittent basis, you must provide your Supervisor with at least 30 days' notice prior to beginning the family leave. Failure to provide this notice may result in a 14-day reduction in your maximum FLI benefits entitlement for the 12-month period, unless the need for leave time is unforeseeable or changes for unforeseeable reasons.

To claim FLI benefits for leave taken to bond with a newborn or newly adopted or fostered child on an intermittent basis, provide your Supervisor with at least 15 days' notice prior to beginning the intermittent family leave, unless the need for leave is due to an emergency or other unforeseen circumstance. You must

make reasonable efforts to schedule the leave so as not to unduly disrupt the operations of the Company and, if possible, provide your Supervisor, prior to the commencement of intermittent leave, with a regular schedule of the days or days of the week on which the intermittent leave will be taken.

To claim FLI benefits for leave taken to care for a family member with a serious health condition on a continuous, non-intermittent basis, provide the Company with a reasonable amount of prior notice, unless the need for leave is due to an emergency or other unforeseen circumstance.

To claim FLI benefits for leave taken to care for a family member with a serious health condition on an intermittent basis, provide the Company with at least 15 days' notice prior to beginning the intermittent family leave, unless the need for leave is due to an emergency or other unforeseen circumstance.

The Company will not discriminate or retaliate against employees for requesting or obtaining FLI benefits.

You are responsible for filing your claim for benefits with the New Jersey Department of Labor. Eligibility for benefits and the maximum weekly benefit are determined by the state of New Jersey. For information about FLI benefits, including eligibility requirements or to file a claim, visit the New Jersey Department of Labor and Workforce Development website (<http://www.nj.gov/labor/>).

Family Leave

Access Healthcare LLC provides eligible employees up to 12 weeks of unpaid, job-protected leave under certain circumstances in accordance with the New Jersey Family Leave Act (NJFLA).

Eligibility

To qualify for NJFLA leave, you must have:

- Worked for the Company for at least 12 months; and
- Worked at least 1,000 hours during the immediately preceding 12 months.

Leave Entitlement

Eligible employees may take up to 12 weeks of unpaid NJFLA leave in a 24-month period. The 24-month period is measured rolling backward from the date leave is used, and leave may be used for any of the following reasons:

- The birth of a child and to care for such child (leave must be completed within one year of the child's birth).
- The placement of a child with you for adoption or foster care and to care for the newly placed child (leave must be completed within one year of the child's placement).
- To care for a family member with a serious health condition.
- Where a state of emergency is declared by the governor or is considered necessary by the Commissioner of Health or other public health authority, due to an epidemic of a communicable disease, a known or suspected exposure to the communicable disease, or efforts to prevent the spread of a communicable disease, which:
 - Requires in-home care or treatment of your child due to the closure of the school or place of care, by order of a public official due to the epidemic, or other public health emergency;
 - Prompts the issuance by a public health authority of a determination, including by mandatory quarantine, requiring or imposing responsive or prophylactic measures as a result of illness caused by the epidemic or exposure because the presence of a family member for whom you provide care would jeopardize the health of others in the community; or
 - Results in the recommendation of a healthcare provider or public health authority that a family member for whom you provide care voluntarily undergo self-quarantine as a result of suspected

exposure to a communicable disease because the presence in the community would jeopardize the health of others.

Child means a biological, adopted, foster child, or resource family child, stepchild, legal ward, or child of a parent, including a child who becomes the child of a parent pursuant to a valid written agreement between the parent and a gestational carrier.

Family member means a child, parent, parent-in-law, sibling, grandparent, grandchild, spouse, domestic partner, or one partner in a civil union couple, or any other individual related by blood to you, and any other individual that has a close association with you that is the equivalent of a family relationship.

Parent means a person who is the biological parent, adoptive parent, foster parent, resource family parent, stepparent, parent-in-law, or legal guardian who has a "parent-child relationship" with a child as defined by law, or has sole or joint legal or physical custody, care, guardianship, or visitation with a child, or who became the parent of the child pursuant to a valid written agreement between the parent and a gestational carrier.

Serious health condition means an illness, injury, impairment, or physical or mental condition requiring:

- Inpatient care in a hospital, hospice, or residential medical care facility; or
- Continuing medical treatment or continuing supervision by a healthcare provider.

Leave taken because of the birth or placement for adoption of a child may begin at any time within a year after the date of the birth, or placement for foster care or adoption.

Intermittent or Reduced Schedule Leave

You may take NJFLA leave:

- As a single block of time.
- By reducing your normal weekly but not daily, work schedule for no more than 12 consecutive months for any one period of leave.
- Intermittently in increments lasting at least one week, but less than 12 weeks in a consecutive 12-month period, when medically necessary.

You must make a reasonable effort to schedule leave so as not to unduly disrupt business operations.

Where intermittent leave is taken, you may be required to transfer to an alternative position having the equivalent pay and benefits and that better accommodates recurring periods of leave.

Interaction with Other Laws

If you are eligible for leave under both the federal Family and Medical Leave Act (FMLA) and the NJFLA, your leaves under both will run concurrently when the reason for the leave is covered by both laws. If the reason for leave is covered by only one law, the leave will count against your entitlement under that specific law only.

Layoffs

If you have been laid off due to a state of emergency, you may receive credit (as if you had worked) for up to 90 calendar days toward the 12-month base period for purposes of calculating eligibility for leave.

Outside Employment

During your leave you may not perform services on a full-time basis for any person you did not provide those services to immediately prior to starting your leave.

Notice of Leave

Except where emergency circumstances warrant shorter notice, you must provide notice for NJFLA leave as follows:

- When taking intermittent or reduced leave to:
 - Care for or bond with a child or care for a family member with a serious health condition, at least 15 days' notice.
 - Care for a family member due to an epidemic of a communicable disease, a known or suspected exposure to a communicable disease, or efforts to prevent the spread of a communicable disease, as soon as practical.
- When taking consecutive leave to:
 - Care for or bond with a child, at least 30 days' notice.
 - Care for a family member with a serious health condition or to care for a family member due to an epidemic of a communicable disease, a known or suspected exposure to a communicable disease, or efforts to prevent the spread of a communicable disease, as soon as practical.

Notice must be written except under emergency circumstances. In emergency circumstances, provide notice as soon as possible.

Documentation

When requesting leave, you may be required to sign a form attesting that you are taking family leave for a qualifying reason. Your refusal to sign the form may result in your leave being denied.

In addition to the form, you may also be asked to provide specific information related to your need for leave:

- Where family leave is for the birth or placement of a child: The date of birth or date of placement, whichever is appropriate.
- Where family leave is for a serious health condition of a family member: The approximate date on which the serious health condition commenced, the probable duration of the condition, and the medical facts within the healthcare provider's knowledge showing that the condition meets the criteria of a serious health condition.
- Where family leave is to care for a family member who is isolated or quarantined:
 - When a healthcare provider or public health authority recommends that a family member in need of your care voluntarily undergo self-quarantine: The date of the recommendation, the probable duration of the condition, and medical or other facts within the healthcare provider or public health authority's knowledge regarding the condition.
 - When a public health authority issues a determination requiring or imposing responsive or prophylactic measures as a result of an illness caused by an epidemic of a communicable disease or known or suspected exposure to the communicable disease because the presence in the community of a family member in need of your care would jeopardize the health of others: The date of issuance of the public health authority's determination and the probable duration of the determination.
 - Where family leave is to provide in-home care or treatment due to the closure of your child's school or place of care, where such closure is by order of a public official due to an epidemic or other public health emergency: Certification from the school or place of care showing the date on which the closure started and the reason for such closure.

Key Employees

Key employees may be denied NJFLA leave if the leave would cause "substantial and grievous economic injury" to Company operations. **Key employees** are defined as the highest-paid 5% of salaried employees in an organization, or as one of the seven highest-paid employees, whichever is greater.

This does not apply when the family leave is due to:

- A healthcare provider, the Commissioner of Health, or other authorized public official has ordered, directed, or recommended that the family member for which you provide care be isolated or quarantined; or
- The closure of a family member's place of care because of a state of emergency declared by the governor or by order of the Commissioner of Health or other authorized public official during an epidemic of a communicable disease, or a known or suspected exposure to a communicable disease.

Maintenance of Health Benefits

The Company will maintain your group health plan coverage during NJFLA leave on the same terms as if you had continued to work. If applicable, you must arrange to pay your share of health plan premiums while on leave. In some instances, the Company may recover premiums paid to maintain health coverage or other benefits for you and your dependents. Use of NJFLA leave will not result in the loss of any employment benefit that accrued prior to the start of the leave.

Reinstatement

If you are returning from an authorized NJFLA leave, you will be reinstated to the same or a similar position, unless you are a key employee or unless the Company experiences a layoff during your leave and you would have been laid off if you had not been on leave. Unpaid family leave time is counted toward seniority for layoff purposes.

The Company is not required to permit a return to work prior to the pre-arranged expiration of the NJFLA leave if returns from other leaves are treated the same way, or if such early return will cause undue hardship on the Company.

Substitution of Paid Leave

Consistent with Company policies, you may be required to substitute certain earned paid leave time for unpaid family leave.

Abuse of Leave

If you are found to have provided a false reason for a leave, you will be subject to disciplinary action up to and including termination.

Retaliation

The Company will not discriminate or retaliate against employees who request or take leave under this policy.

New Jersey SAFE Act Leave

In accordance with the New Jersey Security and Financial Empowerment Act (NJ SAFE Act), Access Healthcare LLC provides up to 20 days of unpaid leave to employees who are victims of domestic violence or sexual assault, or whose family member is a victim.

Eligibility

To be eligible, you must have worked at least 1,000 hours during the immediately preceding 12-month period.

Use of Leave

You may use leave under the NJ SAFE Act for the purpose of engaging in any of the following activities as they relate to an incident of domestic violence or a sexually violent offense:

- Seeking medical attention for, or recovering from, physical or psychological injuries caused by domestic or sexual violence to you or your family member.
- Obtaining services from a victim services organization for yourself or your family member.
- Obtaining psychological or other counseling for yourself or your family member.
- Participating in safety planning, temporarily or permanently relocating, or taking other actions to increase the safety from future domestic violence or sexual violence or to ensure the economic security of yourself or your family member.
- Seeking legal assistance or remedies to ensure your own health and safety or that of your family member, including preparing for or participating in any civil or criminal legal proceeding related to or derived from domestic violence or sexual violence.
- Attending, participating in, or preparing for a criminal or civil court proceeding relating to an incident of domestic or sexual violence of which you or your family member was a victim.

Family member means a child, parent, parent-in-law, sibling, grandparent, grandchild, spouse, domestic partner, or one partner in a civil union couple, or any other individual related by blood to you, and any other individual that has a close association with you, which is the equivalent of a family relationship.

Child means a biological, adopted, foster child, or resource family child, stepchild, legal ward, or child of a parent, including a child who becomes the child of a parent pursuant to a valid written agreement between the parent and a gestational carrier.

Parent means a person who is the biological parent, adoptive parent, foster parent, resource family parent, stepparent, parent-in-law, or legal guardian who has a "parent-child relationship" with a child as defined by law, or has sole or joint legal or physical custody, care, guardianship, or visitation with a child, or who became the parent of the child pursuant to a valid written agreement between the parent and a gestational carrier.

Usage

You must use leave under the NJ SAFE Act in the 12-month period immediately following an instance of domestic violence or a sexually violent offense. The unpaid leave may be taken intermittently in intervals of no less than one day.

You may use any accrued paid vacation leave, personal leave, medical or sick leave, or any family temporary disability leave benefits during any part of the 20-day period of unpaid leave. The unpaid leave will run concurrently with any paid vacation leave, personal leave, medical or sick leave, or temporary disability benefits that you elect to use. If you request leave for a reason covered by both the NJ SAFE Act and the Family Leave Act, or the federal Family and Medical Leave Act, the leave will count simultaneously against your entitlement under each respective law.

Notice

Provide reasonable written notice of the need for leave. The Company may require you to provide documentation supporting the need for leave. The Company will treat such documentation as confidential, unless disclosure is voluntarily authorized in writing by you or is authorized by a federal or state law, rule, or regulation.

Retaliation

The Company will not retaliate against employees for requesting or taking leave in accordance with this policy, or refusing to authorize the release of information deemed confidential under the NJ SAFE Act.

Paid Sick Leave (Accrual Method)

Access Healthcare LLC provides paid sick leave to eligible employees in accordance with New Jersey's Earned Sick Leave Law.

Eligibility

All employees who work in New Jersey are eligible for paid sick leave.

Reasons for Leave

Sick leave may be taken for the following reasons:

1. For the diagnosis, care, treatment of, or recovery from a mental or physical illness, injury, or other adverse health condition, or for your own preventative medical care;
2. To aid or care for a member of your family during diagnosis, care, treatment of, or recovery from the family member's mental or physical illness, injury, or other adverse health condition, or during the family member's preventative medical care;
3. For absences necessary due to circumstances resulting from you or a family member having been a victim of domestic or sexual violence, if the leave allows you to obtain — for yourself or the family member — medical attention needed to recover from physical or psychological injury or disability caused by domestic or sexual violence; services from a designated domestic violence agency or other victim services organization; psychological or other counseling; relocation; or legal services, including obtaining a restraining order or preparing for, or participating in, any civil or criminal proceeding related to the domestic or sexual violence;
4. When you are not able to work because of:
 - The closure of your workplace, the closure of your child's school or place of care, by order of a public official or because of a state of emergency declared by the Governor, due to an epidemic or other public health emergency;
 - The declaration of a state emergency by the Governor, or the issuance by a health care provider or the Commissioner of Health or other public health authority of a determination that your or your family member's presence in the community would jeopardize the health of others; or
 - During a state of emergency declared by the Governor or upon the recommendation, direction, or order of a health care provider, the Commissioner of Health, or other authorized public official that you undergo isolation or quarantine, or care for a family member in quarantine, as a result of suspected exposure to a communicable disease and a finding by the provider or authority that you or your family member's presence in the community would jeopardize the health of others.
 - Time needed in connection with your child to attend a school-related conference, meeting, function, or other event requested or required by a school administrator, teacher, or other professional staff member responsible for the child's education, or to attend a meeting regarding care provided to your child in connection with his or her health condition or disability.

Family member means:

- Your child, grandchild, sibling, spouse, domestic partner, civil union partner, parent, or grandparent.
- The spouse, domestic partner, or civil union partner of a parent or grandparent.
- A sibling of your spouse, domestic partner, or civil union partner.
- Any other individual related by blood to you or whose close association with you is the equivalent of a family relationship.

Accrual and Usage

Eligible employees accrue one hour for every 30 hours worked up to a maximum accrual of 40 hours in a leave year. New employees begin accruing sick leave on their first day of employment. For purposes of this policy,

the leave year is calendar year. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick leave accrues based on your normal schedule. You may begin using sick leave after you have worked for the Company for 120 days.

You may carry over up to 40 hours of unused accrued sick leave to the following leave year; however, you may only use 40 hours of sick leave in any given leave year.

Compensation

You will be compensated for sick leave at your regular rate of pay.

Notice

If the need for leave is foreseeable, you must provide seven days' advance notice and make reasonable efforts to schedule the leave so that it does not unduly disrupt Company operations. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Documentation

If you are absent for three or more consecutive days, you may be requested to provide reasonable documentation showing that the leave is being taken for permitted purposes. **Reasonable documentation** includes:

- For leave taken as described in bullets (1) and (2) above, documentation signed by the health care professional treating you or your family member showing the need for leave and, if possible, the number of days of leave needed.
- For leave taken as described in bullet (3), medical documentation; a law enforcement agency record or report; a court order; documentation that the perpetrator of the domestic or sexual violence has been convicted of a domestic or sexual violence offense; certification from a certified Domestic Violence Specialist or a representative of a designated domestic violence agency or other victim services organization; or other documentation or certification provided by a social worker, counselor, member of the clergy, shelter worker, health care professional, attorney, or other professional who has assisted you or your family member in dealing with the domestic or sexual violence.
- For leave taken as described in bullet (4), a copy of the order of the public official or the determination by the health authority.

Sick leave will run concurrently with the federal Family and Medical Leave Act and/or other leaves where permitted under state and federal law.

Payment upon Termination

You will not be paid for any unused sick leave when your employment ends.

Transfers

If you transfer to another division, entity, or location, you are entitled to all previously unused sick leave and may use it as described in this policy.

Reinstatement of Sick Leave upon Rehire

The Company will reinstate previously accrued, unused sick leave if you separate and are rehired in New Jersey within six months.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Temporary Disability Insurance

If you are unable to work for more than seven consecutive days due to a non-work-related illness or injury, or a pregnancy-related disability, you may be eligible for temporary disability insurance (TDI) benefits. TDI provides eligible employees with up to 26 weeks of partial wage replacement benefits in a year, as specified under the law.

The cost of your TDI coverage is shared between you and the Company through payroll deductions.

You must file a claim for benefits within 30 days of becoming disabled. If you file a claim more than 30 days after the start of your disability, all or some benefits may be forfeited.

To file a claim for benefits or for additional information the New Jersey Temporary Disability Insurance law go to the New Jersey Department of Labor and Workforce Development website (<http://www.nj.gov/labor/>).

Voting Leave

If your work schedule prevents you from voting on Election Day, Access Healthcare LLC will allow you a reasonable time off to vote. The time when you can go to vote will be at the discretion of your Supervisor, consistent with applicable legal requirements.

New Mexico Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race (including traits historically associated with race, which include hair texture or length, protective hairstyles or cultural or religious headdresses such as braids, locs, twists, tight coils or curls, cornrows, Bantu knots, afros, weaves, wigs, head wraps, hijabs, and other headdresses used as part of an individual's personal cultural or religious beliefs), color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Isolation and Quarantine Leave

Access Healthcare LLC provides unpaid leave to employees who need to isolate or quarantine in accordance with a court order.

Provide notice of your need for leave as soon as practical.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Paid Sick Leave (Accrual Method)

Access Healthcare LLC provides paid sick leave to eligible employees in accordance with New Mexico's Healthy Workplaces Act (HWA). The benefits and protections provided by this policy may not be waived.

Eligibility

All employees (including part time, exempt, seasonal, and temporary) who work in New Mexico are eligible for sick leave.

Reasons for Leave

Sick leave may be taken for the following reasons:

- For your own or a family member's mental or physical illness, injury, or health condition; need for medical diagnosis, care, or treatment; or need for preventive medical care.
- For meetings at your child's school or place of care related to the child's health or disability.
- For absences related to you or a family member being a victim of domestic abuse, sexual assault, or stalking, provided that leave is used to:
 - Obtain medical or psychological treatment or counseling;
 - Relocate;
 - Prepare for or participate in legal proceedings; or
 - Obtain other services related to the domestic abuse, sexual assault, or stalking.

Family member means your spouse or domestic partner or a person related to you or your spouse or domestic partner as:

- A biological, adopted, or foster child, stepchild, legal ward, or child to whom you stand in loco parentis.
- A biological, adoptive, or foster parent, stepparent, legal guardian, or a person who stood in loco parentis to you when you were a minor child.
- A grandparent.
- A grandchild.
- A biological, adopted, foster, or step sibling.
- A spouse or domestic partner of a family member.
- An individual whose close association with you or your spouse or domestic partner is the equivalent of a family relationship.

Domestic partner means an individual with whom another individual maintains a household and a mutual committed relationship without a legally recognized marriage.

Accrual and Usage

Eligible employees accrue one hour of sick leave for every 30 hours worked up to a maximum of 64 hours per leave year. Existing employees begin accruing sick leave on July 1, 2022, while new employees begin accruing sick leave on their first day of employment. For purposes of this policy, the leave year is calendar year. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick leave accrues based on your normal schedule.

You may use sick leave as it is accrued. You may carry over up to 64 hours of unused sick leave to the following leave year; however, you may still only use 64 hours of sick leave per year.

You will not be required to find a replacement worker as a condition of being permitted to use sick leave and you will not be required to use other paid leave before using sick leave.

Compensation

You will be compensated for sick leave at your regular hourly rate and benefits.

Notice

If the need for leave is foreseeable, you must make a reasonable effort to provide notice before taking leave. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence. Notice may be written or verbal.

You must make a reasonable effort to schedule planned sick leave in a manner that does not unduly disrupt business operations.

Documentation

If you are absent for two or more consecutive days, you may be requested to provide reasonable documentation verifying that the leave is being taken for permitted purposes.

Reasonable documentation means documentation signed by a health care professional (not necessarily a doctor) indicating the sick leave taken is necessary.

For absences related to domestic abuse, sexual assault, or stalking, you may provide one of the following:

- A police report.
- A court-issued document.

- A statement signed by a victim services organization, clergy member, attorney, advocate, you, a family member, or any other person.

The signed statement does not have to be notarized or be in any particular format. It only needs to affirm you took sick leave for a permitted purpose. The statement does not have to be in English; it can be in your native language.

When documentation is required, you must timely provide it to the Company upon request. You must provide the documentation within 14 days of the date you return to work.

The Company will never require that the documentation explain the nature of any medical condition or the details of the domestic abuse, sexual assault, or stalking. Furthermore, the Company will not delay the use of sick leave because it has not yet received documentation.

All information and documentation received regarding your reasons for taking sick leave is confidential. The Company will not disclose this information except with your permission as necessary for validation of disability insurance claims, accommodations consistent with the federal Americans with Disabilities Act (ADA), as required by the Healthy Workplaces Act, or by court order.

Payment upon Termination

You will not be paid for any unused sick leave when your employment ends.

Reinstatement of Sick Leave upon Rehire

The Company will reinstate previously accrued, unused sick leave if you separate and are rehired within 12 months.

Transfers

If you are transferred to a separate division, entity, or location but are still employed by the Company, you are entitled to keep and use all sick leave you earned prior to transfer.

Change in Ownership of the Company

If a different employer succeeds or takes the place of the Company, if you remain employed by the successor employer, you will keep all accrued sick leave and may use it with the successor employer.

Interaction with Other Leave

Sick leave will run concurrently with other types of leave where permitted under applicable law.

Collective Bargaining Agreements

The HWA does not preempt or override the terms of any collective bargaining agreement. The sick leave provided by this policy, in accordance with the HWA, is in addition to any paid time off provided by the Company pursuant to a collective bargaining agreement, unless that paid time off provided may be used for the same purposes and under the same terms and conditions as the HWA.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Domestic Abuse Victim Leave

If you, or one of your family members, are a victim of domestic abuse, Access Healthcare LLC will provide you with up to 14 days of leave per calendar year, with a maximum of eight hours per day, for the purposes of:

- Obtaining a protection order or similar judicial relief.
- Meeting with law enforcement officials.
- Consulting with attorneys or district attorneys' victim advocates.
- Attending court proceedings.

As used in this policy, **family member** includes your minor child or a person for whom you are the legal guardian.

Time off under this policy is without pay; however, exempt employees will be paid in accordance with applicable law. You may choose to use any accrued sick leave or other available paid time off for leave under this policy. Health coverage and eligibility for other benefits will continue during the leave of absence.

If the need for domestic abuse leave is foreseeable, provide reasonable advance notice to your Supervisor. Where domestic abuse leave is taken in an emergency, you or your representative must provide notice within 24 hours of taking leave. You may be required to provide one of the following verifying the need for domestic abuse leave:

- A police report indicating that you or a family member was a victim of domestic abuse.
- A copy of an order of protection or other court evidence produced in connection with an incident of domestic abuse; however, the document does not constitute a waiver of confidentiality or privilege between you and your advocate or attorney.
- A written statement from you indicating that the domestic abuse leave was taken for the purpose of obtaining an order of protection or other judicial relief from domestic abuse, to meet with law enforcement officials, to consult with attorneys or victim advocates, or to attend court proceedings related to the domestic abuse.
- The written statement of an attorney representing you, a district attorney's victim advocate, a law enforcement official, or a prosecuting attorney that you or your family member appeared or are scheduled to appear in court in connection with an incident of domestic abuse.

Information regarding domestic abuse leave will be kept strictly confidential and will only be disclosed with your consent or as required by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Bernalillo County Earned Paid Time Off

Access Healthcare LLC provides earned paid time off (EPTO) to eligible employees in accordance with the Bernalillo County Employee Wellness Act.

Eligibility

All employees who perform work within the unincorporated boundaries of Bernalillo County for at least 56 hours in a year for the Company are eligible for EPTO.

Permitted Use

You may use EPTO for any reason or purpose.

Accrual and Usage

Eligible employees accrue one hour of EPTO for every 32 hours worked, up to a maximum cap of 28 hours per benefit year. New employees begin accruing EPTO on their first day of employment. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case EPTO accrues based on your normal schedule. For purposes of this policy, the benefit year is calendar year.

You may begin using EPTO on your 90 days calendar day of employment and may use up to 28 hours per benefit year. You may carry over up to 28 hours of unused EPTO to the following benefit year; however, the maximum amount available is capped at 28 hours.

Compensation

You will be compensated for EPTO at your regular rate of pay.

Notice

If the need for EPTO is foreseeable, you must make a good faith effort to provide advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence. Notice may be provided in writing electronically. Notice should be provided to Human Resources.

Interaction with Other Leave

EPTO will run concurrently with other types of leave where permitted under applicable law.

Payment upon Termination

You will not be paid for any unused EPTO under this policy when your employment ends.

Reinstatement of EPTO Upon Rehire

The Company will reinstate previously accrued, unused EPTO under this policy if you separate and are rehired within 12 months.

Retaliation

The Company will not retaliate against employees who request or take EPTO in accordance with this policy. You have the right to file a complaint with Bernalillo County if you have been denied EPTO to which you are entitled under this policy or if you have been retaliated against for requesting or taking EPTO. To file a complaint, contact the Bernalillo County Community Services Division Offices at deputycountymgr_communityservices@bernco.gov, or (505) 468-7343.

New York Policies

Hiring and Orientation Policies

Reproductive Health Rights Notice

Pursuant to New York's Reproductive Health Bias Law (N.Y. Labor Law § 203-e), Access Healthcare LLC will not access your personal information regarding your own or your dependent's reproductive health decision-making—including, but not limited to, the decision to use or access a particular drug, device, or medical service—without your prior informed affirmative written consent.

Furthermore, the Company will not:

- Discriminate or retaliate against you with respect to compensation, terms, conditions, or privileges of employment because of, or on the basis of, your own or your dependent's reproductive health decision-making; or
- Require you to sign a waiver or other document that appears to deny you the right to make your own reproductive healthcare decisions.

If you believe your rights have been violated under this law, you may bring a civil action against the Company. In such civil action, the court may:

- Award damages, including, but not limited to, back pay, benefits, and reasonable attorneys' fees and costs;
- Provide injunctive relief;
- Order reinstatement; and/or
- Award liquidated damages.

If you have questions related to this notice, consult your Supervisor.

EEO Statement and Nonharassment Policy

Equal Employment Opportunity Policy

Access Healthcare LLC is committed to complying with all federal, state, and local equal employment laws. To that end, the Company is dedicated to maintaining a work environment that is free from harassment and discrimination based on the following protected classes: age, race (including traits historically associated with race, which include, but are not limited to, hair texture and protective hairstyles such as braids, locks, and twists), ethnicity, color, national origin (including ancestry), religion, creed, gender or sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), pregnancy outcomes, reproductive healthcare and autonomy (including, but not limited to, the decision to use or access a particular drug, device, or medical service), disability, marital status, domestic violence victim status, familial status, military status, citizenship or immigration status, genetic information (including genetic characteristics), or any other protected status under federal, state, or local laws. The Company is dedicated to the fulfillment of this policy with respect to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential

manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

The Company is committed to maintaining a workplace free from sexual harassment, which is unlawful and subjects the Company to liability. The Company prohibits any form of sexual harassment, and all employees are required to work in a manner that prevents sexual harassment.

For additional information on sexual harassment, including how to file a claim, see the Sexual Harassment Policy.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above-protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above-protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of harassment or discrimination.

The Company will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, the Company will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped.

Alternative Reporting and Remedies

The Company encourages employees to report incidents of discrimination and harassment internally. However, employees who believe they have been subjected to discrimination or harassment in the workplace may file a private civil action or seek relief by either:

- Filing a complaint alleging violation of the New York State Human Rights law with the Division of Human Rights, or in the New York State Supreme Court; or
- Filing a charge of discrimination with the Equal Employment Opportunity Commission (EEOC) for violation of federal antidiscrimination laws, including Title VII of the Civil Rights Act of 1964 (Title VII).

To file a complaint, contact the appropriate agency below.

Contact Information

New York Division of Human Rights

One Fordham Plaza, Fourth Floor
Bronx, New York, NY 10458
718-741-8400
1-800-HARASS-3 (1-800-427-2773): Toll-free, confidential hotline for complaints of workplace sexual harassment
www.dhr.ny.gov

Equal Employment Opportunity Commission (EEOC)

33 Whitehall St, 5th Floor
New York, NY 10004
800-669-4000
TTY: 800-669-6820
info@eeoc.gov
www.eeoc.gov

Local jurisdictions may have additional protections against discrimination and harassment. For example, workers in New York City may file complaints of discrimination or harassment with the New York City Commission on Human Rights at:

Law Enforcement Bureau

Commission on Human Rights
40 Rector Street, 10th Floor
New York, NY 10006
212-306-7450
www.nyc.gov/html/cchr/html/home/home.shtml

If the discrimination or harassment involves criminal activity, contact local police.

In any civil action alleging a violation of the laws prohibiting sexual harassment and discrimination, a court may order or award:

- Damages, including, but not limited to, back pay, benefits, and reasonable attorneys' fees and costs;
- Injunctive relief;

- Reinstatement; and/or
- Liquidated damages equal to 100% of the award for damages.

Any act of retaliation against New York employees for exercising any rights granted under this policy may subject the Company to separate civil penalties. For the purposes of this policy, retaliation or retaliatory personnel action means discharging, suspending, demoting, or otherwise penalizing employees for:

- Making or threatening to make a complaint to the Company, a coworker, or to a public body, that rights guaranteed under this policy have been violated;
- Causing to be instituted any proceeding under or related to this policy; or
- Providing information to or testifying before any public body conducting an investigation, hearing, or inquiry into any such violation of a law, rule, or regulation by the Company.

Sexual Harassment Prevention

Purpose and Goals

Access Healthcare LLC is committed to maintaining a workplace free from harassment and discrimination. Sexual harassment is a form of workplace discrimination that subjects an employee to inferior conditions of employment due to their gender, gender identity, gender expression (perceived or actual), and/or sexual orientation. Sexual harassment is often viewed simply as a form of gender-based discrimination, but the Company recognizes that discrimination can be related to or affected by other identities beyond gender (**see NY EEO Statement and Nonharassment Policy**). Our different identities impact our understanding of the world and how others perceive us. For example, an individual's race, ability, or immigration status may impact their experience with gender discrimination in the workplace. While this policy is focused on sexual harassment and gender discrimination, the methods for reporting and investigating discrimination based on other protected identities are the same. The purpose of this policy is to teach employees to recognize discrimination, including discrimination due to an individual's intersecting identities, and provide the tools to take action when it occurs. All employees, managers, and supervisors are required to work in a manner designed to prevent sexual harassment and discrimination in the workplace. This policy is one component of the Company's commitment to a discrimination-free work environment.

Goals of this Policy

Sexual harassment and discrimination are against the law. After reading this policy, employees will understand their right to a workplace free from harassment. Employees will also learn what harassment and discrimination look like, what actions they can take to prevent and report harassment, and how they are protected from retaliation after taking action. The policy will also explain the investigation process into any claims of harassment. Employees are encouraged to report sexual harassment or discrimination by filing a complaint internally with the Company, with a government agency, or in court under federal, state, or local antidiscrimination laws. To file a complaint internally, use the complaint form attached to the end of this handbook and submit it to Human Resources. To file an employment complaint with the New York State Division of Human Rights, visit <https://dhr.ny.gov/complaint>. To file a complaint with the United States Equal Employment Opportunity Commission, visit <https://www.eeoc.gov/filing-charge-discrimination>.

Sexual Harassment and Discrimination Prevention Policy

1. Access Healthcare LLC's policy applies to all employees, applicants for employment, and interns, whether paid or unpaid. The policy also applies to additional covered individuals. It applies to anyone who is (or is employed by) a contractor, subcontractor, vendor, consultant, or anyone providing services in our workplace. These individuals include persons commonly referred to as independent contractors, gig workers, and temporary workers. Also included are persons providing equipment repair, cleaning services, or any other services through a contract with the Company. For the remainder of this policy, we will use the term "covered individual" to refer to these individuals who are not direct employees of the Company.

2. Sexual harassment is unacceptable. Any employee or covered individual who engages in sexual harassment, discrimination, or retaliation will be subject to action, including appropriate discipline for employees. In New York, harassment does not need to be severe or pervasive to be illegal. Employees and covered individuals should not feel discouraged from reporting harassment because they do not believe it is bad enough, or conversely because they do not want to see a colleague fired over less severe behavior. Just as harassment can happen in different degrees, potential discipline for engaging in sexual harassment will depend on the degree of harassment and might include education and counseling. It may lead to suspension or termination when appropriate.
3. Retaliation is prohibited. Any employee or covered individual that reports an incident of sexual harassment or discrimination, provides information, or otherwise assists in any investigation of a sexual harassment or discrimination complaint is protected from retaliation. No one should fear reporting sexual harassment if they believe it has occurred. So long as a person reasonably believes that they have witnessed or experienced such behavior, they are protected from retaliation. Any employee of the Company who retaliates against anyone involved in a sexual harassment or discrimination investigation will face disciplinary action, up to and including termination. All employees and covered individuals working in the workplace who believe they have been subject to such retaliation should inform Human Resources. All employees and covered individuals who believe they have been a target of such retaliation may also seek relief from government agencies, as explained in the **Legal Protections** section below.
4. Discrimination of any kind, including sexual harassment, is a violation of our policies, is unlawful, and may subject the Company to liability for the harm experienced by targets of discrimination. Harassers may also be individually subject to liability, and employers or supervisors who fail to report or act on harassment may be liable for aiding and abetting such behavior. Employees at every level who engage in harassment or discrimination, including managers and supervisors who engage in harassment or discrimination or who allow such behavior to continue, will be penalized for such misconduct.
5. The Company will conduct a prompt and thorough investigation that is fair to all parties. An investigation will happen whenever management receives a complaint about discrimination or sexual harassment, or when management otherwise knows of possible discrimination or sexual harassment occurring. The Company will keep the investigation confidential to the extent possible. If an investigation ends with the finding that discrimination or sexual harassment occurred, the Company will act as required. In addition to any required discipline, the Company will also take steps to ensure a safe work environment for the employee(s) who experienced the discrimination or harassment. All employees, including managers and supervisors, are required to cooperate with any internal investigation of discrimination or sexual harassment.
6. All employees and covered individuals are encouraged to report any harassment or behaviors that violate this policy. All employees will have access to a complaint form to report harassment and file complaints. Use of this form is not required. For anyone who would rather make a complaint verbally, or by email, these complaints will be treated with equal priority. Employees who prefer not to report harassment to their Supervisor or the Company may instead report harassment to the New York State Division of Human Rights and/or the United States Equal Employment Opportunity Commission. Complaints may be made to both the employer and a government agency. Managers and supervisors are **required** to report any complaint that they receive, or any harassment that they observe or become aware of, to Human Resources.
7. This policy applies to all employees and covered individuals, such as contractors, subcontractors, vendors, consultants, or anyone providing services in the workplace, and all must follow and uphold this policy. This policy must be provided to all employees in person or digitally through email upon hiring and will be posted prominently in all work locations. For those offices operating remotely, in addition to sending the policy through email, it will also be available on the Company's shared network.

What Is Sexual Harassment?

Sexual harassment is a form of gender-based discrimination that is unlawful under federal, state, and (where applicable) local law. Sexual harassment includes harassment on the basis of sex, sexual orientation, self-identified or perceived sex, gender expression, gender identity, and the status of being transgender. Sexual harassment is not limited to sexual contact, touching, or expressions of a sexually suggestive nature. Sexual

harassment includes all forms of gender discrimination, including gender role stereotyping and treating employees differently because of their gender.

Understanding gender diversity is essential to recognizing sexual harassment because discrimination based on sex stereotypes, gender expression, and perceived identity are all forms of sexual harassment. The gender spectrum is nuanced, but the three most common ways people identify are cisgender, transgender, and non-binary. A **cisgender person** is someone whose gender aligns with the sex they were assigned at birth. Generally, this gender will align with the binary of male or female. A **transgender person** is someone whose gender is different than the sex they were assigned at birth. A **non-binary person** does not identify exclusively as a man or a woman. They might identify as both, somewhere in between, or completely outside the gender binary. Some may identify as transgender, but not all do. Respecting an individual's gender identity is a necessary first step in establishing a safe workplace.

Sexual harassment is unlawful when it subjects an individual to inferior terms, conditions, or privileges of employment. Harassment does not need to be severe or pervasive to be illegal. It can be any harassing behavior that rises above petty slights or trivial inconveniences. Every instance of harassment is unique to those experiencing it, and there is no single boundary between petty slights and harassing behavior. However, the Human Rights Law specifies that whether harassing conduct is considered petty or trivial is to be viewed from the standpoint of a reasonable victim of discrimination with the same protected characteristics. Generally, any behavior in which an employee or covered individual is treated worse because of their gender (perceived or actual), sexual orientation, or gender expression is considered a violation of the Company's policy. The intent of the behavior, for example, making a joke, does not neutralize a harassment claim. Not intending to harass is not a defense. The impact of the behavior on a person is what counts. Sexual harassment includes any unwelcome conduct that is either directed at an individual because of that individual's gender identity or expression (perceived or actual), or is of a sexual nature when:

- The purpose or effect of this behavior unreasonably interferes with an individual's work performance or creates an intimidating, hostile, or offensive work environment. The impacted person does not need to be the intended target of the sexual harassment;
- Employment depends implicitly or explicitly on accepting such unwelcome behavior; or
- Decisions regarding an individual's employment are based on an individual's acceptance or rejection of such behavior. Such decisions can include what shifts and how many hours an employee might work, project assignments, as well as salary and promotion decisions.

There are two main types of sexual harassment:

- Behaviors that contribute to a **hostile work environment** include, but are not limited to, words, signs, jokes, pranks, intimidation, or physical violence that are of a sexual nature or that are directed at an individual because of that individual's sex, gender identity, or gender expression. Sexual harassment also consists of any unwanted verbal or physical advances, sexually explicit derogatory, or discriminatory statements that an employee finds offensive or objectionable, causes an employee discomfort or humiliation, or interferes with their job performance.
- Sexual harassment also occurs when a person in authority tries to trade job benefits for sexual favors. This can include hiring, promotion, continued employment, or any other terms, conditions, or privileges of employment. This is also called **quid pro quo** harassment.

Any employee or covered individual who feels harassed is encouraged to report the behavior so that any violation of this policy can be corrected promptly. Any harassing conduct, even a single incident, can be discrimination and is covered by this policy.

Examples of Sexual Harassment

The following describes some of the types of acts that may be unlawful sexual harassment and that are strictly prohibited. **This list is just a sample of behaviors and should not be considered exhaustive.** Any employee who believes they have experienced sexual harassment, even if it does not appear on this list, should feel encouraged to report it.

- Physical acts of a sexual nature, such as:
 - Touching, pinching, patting, kissing, hugging, grabbing, or brushing against or poking another employee's body; or
 - Rape, sexual battery, molestation, or attempts to commit these assaults, which may be considered criminal conduct outside the scope of this policy (contact local law enforcement if you wish to pursue criminal charges).
- Unwanted sexual comments, advances, or propositions, such as:
 - Requests for sexual favors accompanied by implied or overt threats concerning the target's job performance evaluation, a promotion, or other job benefits (can include sexual advances/pressure placed on a service industry employee by customers or clients, especially those industries where hospitality and tips are essential to the customer/employee relationship);
 - Subtle or obvious pressure for unwelcome sexual activities; or
 - Repeated requests for dates or romantic gestures, including gift-giving.
- Sexually oriented gestures, noises, remarks, or jokes, or questions and comments about a person's sexuality, sexual experience, or romantic history that create a hostile work environment. This is not limited to interactions in person. Remarks made over virtual platforms and in messaging apps when employees are working remotely can create a similarly hostile work environment.
- Sex stereotyping, which occurs when someone's conduct or personality traits are judged based on other people's ideas or perceptions about how individuals of a particular sex should act or look:
 - Remarks regarding an employee's gender expression, such as wearing a garment typically associated with a different gender identity; or
 - Asking employees to take on traditionally gendered roles, such as asking a woman to serve meeting refreshments when it is not part of, or appropriate to, her job duties.
- Sexual or discriminatory displays or publications anywhere in the workplace, such as displaying pictures, posters, calendars, graffiti, objects, promotional material, reading materials, or other materials that are sexually demeaning or pornographic. This includes such sexual displays on workplace computers or cell phones and sharing such displays while in the workplace. This also extends to the virtual or remote workspace and can include having such materials visible in the background of one's home during a virtual meeting.
- Hostile actions taken against an individual because of that individual's sex, sexual orientation, gender identity, or gender expression, such as:
 - Interfering with, destroying, or damaging a person's workstation, tools, or equipment, or otherwise interfering with the individual's ability to perform the job;
 - Sabotaging an individual's work;
 - Bullying, yelling, or name-calling;
 - Intentional misuse of an individual's preferred pronouns; or
 - Creating different expectations for individuals based on their perceived identities, such as dress codes that place more emphasis on women's attire, or leaving parents/caregivers out of meetings.

Who Can Be a Target of Sexual Harassment?

Sexual harassment can occur between any individuals, regardless of their sex or gender. Harassment does not have to be between members of the opposite sex or gender. New York law protects employees and all covered individuals described earlier in the policy. **Harassers can be anyone in the workplace.** A supervisor, a supervisee, or a coworker can all be harassers. Anyone else in the workplace can also be a harasser, including an independent contractor, contract worker, vendor, client, customer, patient, constituent, or visitor.

Sexual harassment does not happen in a vacuum, and discrimination experienced by an employee can be impacted by biases and identities beyond an individual's gender. For example:

- Placing different demands or expectations on Black female employees than white female employees can be both racial and gender discrimination;

- An individual's immigration status may lead to perceptions of vulnerability and increased concerns around illegal retaliation for reporting sexual harassment; or
- Past experiences as a survivor of domestic or sexual violence may lead an individual to feel retraumatized by someone's behaviors in the workplace.

Individuals bring personal history with them to the workplace that might impact how they interact with certain behavior. It is especially important for all employees to be aware of how words or actions might impact someone with a different experience than their own in the interest of creating a safe and equitable workplace.

Where Can Sexual Harassment Occur?

Unlawful sexual harassment is not limited to the physical workplace itself. It can occur while employees are traveling for business or at employer- or industry-sponsored events or parties. Calls, texts, emails, and social media usage by employees or covered individuals can constitute unlawful workplace harassment, even if they occur away from the workplace premises, on personal devices, or during nonwork hours.

Sexual harassment can occur when employees are working remotely from home as well. Any behaviors outlined above that leave an employee feeling uncomfortable, humiliated, or unable to meet their job requirements constitutes harassment even if the employee is at home when the harassment occurs. Harassment can happen on virtual meeting platforms, in messaging apps, and after working hours between personal cell phones.

Retaliation

Retaliation is unlawful and is any action by an employer or supervisor that punishes an individual upon learning of a harassment claim, that seeks to discourage a worker or covered individual from making a formal complaint or supporting a sexual harassment or discrimination claim, or that punishes those who have come forward. These actions need not be job related or occur in the workplace to constitute unlawful retaliation. For example, threats of physical violence outside of work hours or disparaging someone on social media would be covered as retaliation under this policy.

Examples of retaliation may include, but are not limited to:

- Demoting, terminating, denying accommodations, reduced hours, or the assignment of less desirable shifts;
- Publicly releasing personnel files;
- Refusing to provide a reference or providing an unwarranted negative reference;
- Labeling an employee as "difficult" and excluding them from projects to avoid "drama";
- Undermining an individual's immigration status; or
- Reducing work responsibilities, passing over for a promotion, or moving an individual's desk to a less desirable office location.

Such retaliation is unlawful under federal, state, and (where applicable) local law. The New York State Human Rights Law protects any individual who has engaged in "protected activity." Protected activity occurs when a person has:

- Made a complaint of sexual harassment or discrimination, either internally or with any government agency;
- Testified or assisted in a proceeding involving sexual harassment or discrimination under the Human Rights Law or any other antidiscrimination law;
- Opposed sexual harassment or discrimination by making a verbal or informal complaint to management, or by simply informing a supervisor or manager of suspected harassment;
- Reported that another employee has been sexually harassed or discriminated against; or
- Encouraged another employee to report harassment.

Even if the alleged harassment does not turn out to rise to the level of a violation of law, the individual is protected from retaliation if the person had a good faith belief that the practices were unlawful. However, the retaliation provision is not intended to protect persons making intentionally false charges of harassment.

Reporting Sexual Harassment

Everyone must work toward preventing sexual harassment, but leadership matters. Supervisors and managers have a special responsibility to make sure employees feel safe at work and that workplaces are free from harassment and discrimination. Any employee or covered individual is encouraged to report harassing or discriminatory behavior to Human Resources. Anyone who witnesses or becomes aware of potential instances of sexual harassment should report such behavior to Human Resources.

Reports of sexual harassment may be made verbally or in writing. A written complaint form is attached to this policy for employees to use, but the complaint form is not required. If you are reporting sexual harassment on behalf of someone else, you may use the complaint form and should note that it is on another's behalf. A verbal or otherwise written complaint (such as an email) on behalf of oneself or another is also acceptable.

Employees and covered individuals who believe they have been a target of sexual harassment may at any time seek assistance in additional available forums, as explained in the Legal Protections section below.

Supervisory Responsibilities

Supervisors and managers have a responsibility to prevent sexual harassment and discrimination. All supervisors and managers who receive a complaint or information about suspected sexual harassment, observe what may be sexually harassing or discriminatory behavior, or for any reason suspect that sexual harassment or discrimination is occurring, are required to report such suspected sexual harassment to Human Resources. Managers and supervisors should not be passive and wait for an employee to make a claim of harassment. If they observe such behavior, they must act.

Supervisors and managers can be disciplined if they engage in sexually harassing or discriminatory behavior themselves. Supervisors and managers can also be disciplined for failing to report suspected sexual harassment or allowing sexual harassment to continue after they know about it.

Supervisors and managers will also be subject to discipline for engaging in any retaliation.

While supervisors and managers have a responsibility to report harassment and discrimination, they must be mindful of the impact that harassment and a subsequent investigation has on victims. Being identified as a possible victim of harassment and questioned about harassment and discrimination can be intimidating, uncomfortable, and re-traumatizing for individuals. Supervisors and managers must accommodate the needs of individuals who have experienced harassment to ensure the workplace is safe, supportive, and free from retaliation for them during and after any investigation.

Bystander Intervention

Any employee witnessing harassment as a bystander is encouraged to report it. A supervisor or manager that is a bystander to harassment is **required** to report it. There are five standard methods of bystander intervention that can be used when anyone witnesses harassment or discrimination and wants to help.

1. A bystander can interrupt the harassment by engaging with the individual being harassed and distracting them from the harassing behavior;
2. A bystander who feels unsafe interrupting on their own can ask a third party to help intervene in the harassment;
3. A bystander can record or take notes on the harassment incident to benefit a future investigation;
4. A bystander might check in with the person who has been harassed after the incident, see how they are feeling, and let them know the behavior was not ok; and

5. If a bystander feels safe, they can confront the harassers and name the behavior as inappropriate. When confronting harassment, physically assaulting an individual is never an appropriate response.

Though not exhaustive, and dependent on the circumstances, these guidelines can serve as a brief guide on how to react when witnessing harassment in the workplace. Any employee witnessing harassment as a bystander is encouraged to report it. A supervisor or manager that is a bystander to harassment is required to report it.

Complaints and Investigations of Sexual Harassment

All complaints or information about sexual harassment will be investigated, whether that information was reported in verbal or written form. An investigation of any complaint, information, or knowledge of suspected sexual harassment will be prompt, thorough, and started and completed as soon as possible. The investigation will be kept confidential to the extent possible. All individuals involved, including those making a harassment claim, witnesses, and alleged harassers, deserve a fair and impartial investigation.

Any employee may be required to cooperate as needed in an investigation of suspected sexual harassment. The Company will take disciplinary action against anyone engaging in retaliation against employees who file complaints, support another's complaint, or participate in harassment investigations.

The Company recognizes that participating in a harassment investigation can be uncomfortable and has the potential to retraumatize an individual. Those receiving claims and leading investigations will handle complaints and questions with sensitivity toward those participating.

While the process may vary from case to case, investigations will be done in accordance with the following steps. Upon receipt of a complaint, Human Resources will:

1. Conduct a prompt review of the allegations, assess the appropriate scope of the investigation, and take any interim actions (for example, instructing the individual(s) about whom the complaint was made to refrain from communications with the individual(s) who reported the harassment), as appropriate. If the complaint is verbal, request that the individual completes the complaint form in writing. If the person reporting prefers not to fill out the form, Human Resources will prepare a complaint form or equivalent documentation based on the verbal reporting;
2. Take steps to obtain, review, and preserve documents sufficient to assess the allegations, including documents, emails, or phone records that may be relevant to the investigation. Human Resources will consider and implement appropriate document request, review, and preservation measures, including for electronic communications;
3. Seek to interview all parties involved, including any relevant witnesses;
4. Create a written documentation of the investigation (such as a letter, memo, or email), which contains the following:
 - A list of all documents reviewed, along with a detailed summary of relevant documents;
 - A list of names of those interviewed, along with a detailed summary of their statements;
 - A timeline of events;
 - A summary of any prior relevant incidents disclosed in the investigation, reported or unreported; and
 - The basis for the decision and final resolution of the complaint, together with any corrective action(s).
5. Keep the written documentation and associated documents in a secure and confidential location;
6. Promptly notify the individual(s) who reported the harassment and the individual(s) about whom the complaint was made that the investigation has been completed and implement any corrective actions identified in the written document; and
7. Inform the individual(s) who reported of the right to file a complaint or charge externally as outlined in the next section.

Legal Protections and External Remedies

Sexual harassment is not only prohibited by the Company, but it is also prohibited by state, federal, and, where applicable, local law.

The internal process outlined in this policy is one way for employees to report sexual harassment. Employees and covered individuals may also choose to pursue legal remedies with the following governmental entities. While a private attorney is not required to file a complaint with a governmental agency, you may also seek the legal advice of an attorney.

New York State Division of Human Rights

The New York State Human Rights Law, N.Y. Executive Law, art. 15, § 290 et seq., applies to all employers in New York State and protects employees and covered individuals, regardless of immigration status. A complaint alleging violation of the Human Rights Law may be filed either with the New York State Division of Human Rights (DHR) or in the New York State Supreme Court.

Complaints of sexual harassment filed with DHR may be submitted any time **within three years** of the harassment. If an individual does not file a complaint with DHR, they can bring a lawsuit directly in state court under the Human Rights Law **within three years** of the alleged sexual harassment. An individual may not file with DHR if they have already filed a Human Rights Law complaint in state court.

Complaining internally to the Company does not extend your time to file with DHR or in court. The three years are counted from the date of the most recent incident of harassment.

You do not need an attorney to file a complaint with DHR, and there is no cost to file with DHR.

DHR will investigate your complaint and determine whether there is probable cause to believe that sexual harassment occurred. Probable cause cases receive a public hearing before an administrative law judge. If sexual harassment is found at the hearing, DHR has the power to award relief. Relief varies, but it may include requiring your employer to take action to stop the harassment or repair the damage caused by the harassment, including paying monetary damages, punitive damages, attorney's fees, and civil fines.

DHR's main office contact information is: NYS Division of Human Rights, One Fordham Plaza, Fourth Floor, Bronx, New York 10458. You may call (718) 741-8400 or visit www.dhr.ny.gov.

Go to dhr.ny.gov/complaint for more information about filing a complaint with DHR. The website has a digital complaint process that can be completed on your computer or mobile device from start to finish. The website has a complaint form that can be downloaded, filled out, and mailed to DHR, as well as a form that can be submitted online. The website also contains contact information for DHR's regional offices across New York State.

Call the DHR sexual harassment hotline at **1-(800)-HARASS3** for more information about filing a sexual harassment complaint. This hotline can also provide you with a referral to a volunteer attorney experienced in sexual harassment matters who can provide you with limited free assistance and counsel over the phone.

The United States Equal Employment Opportunity Commission

The United States Equal Employment Opportunity Commission (EEOC) enforces federal antidiscrimination laws, including Title VII of the 1964 federal Civil Rights Act, 42 U.S.C. § 2000e et seq. An individual can file a complaint with the EEOC anytime within 300 days from the most recent incident of harassment. There is no cost to file a complaint with the EEOC. The EEOC will investigate the complaint and determine whether there is reasonable cause to believe that discrimination has occurred. If the EEOC determines that the law may have been violated, the EEOC will try to reach a voluntary settlement with the employer. If the EEOC cannot reach a settlement, the EEOC (or the Department of Justice in certain cases) will decide whether to file a lawsuit. The EEOC will issue a Notice of Right to Sue permitting workers to file a lawsuit in federal court if the EEOC closes the charge, is unable to determine if federal employment discrimination laws may have been violated, or believes that unlawful discrimination occurred but does not file a lawsuit.

Individuals may obtain relief in mediation, settlement, or conciliation. In addition, federal courts may award remedies if discrimination is found to have occurred. In general, private employers must have at least 15 employees to come within the jurisdiction of the EEOC.

An employee alleging discrimination at work can file a "Charge of Discrimination." The EEOC has district, area, and field offices where complaints can be filed. Contact the EEOC by calling 1-800-669-4000 (TTY: 1-800-669-6820), visiting their website at www.eeoc.gov, or via email at info@eeoc.gov.

If an individual filed an administrative complaint with the New York State Division of Human Rights, DHR will automatically file the complaint with the EEOC to preserve the right to proceed in federal court.

Local Protections

Many localities enforce laws protecting individuals from sexual harassment and discrimination. An individual should contact the county, city, or town in which they live to find out if such a law exists. For example, employees who work in New York City may file complaints of sexual harassment or discrimination with the New York City Commission on Human Rights. Contact their main office at Law Enforcement Bureau of the NYC Commission on Human Rights, 22 Reade Street, 1st Floor, New York, New York; call 311 or (212) 306-7450; or visit www.nyc.gov/html/cchr/html/home/home.shtml.

Contact the Local Police Department

If the harassment involves unwanted physical touching, coerced physical confinement, or coerced sex acts, the conduct may constitute a crime. Those wishing to pursue criminal charges are encouraged to contact their local police department.

Conclusion

The policy outlined above is aimed at providing Access Healthcare LLC employees and covered individuals an understanding of their rights to a discrimination- and harassment-free workplace. Everyone should feel safe at work. Though the focus of this policy is on sexual harassment and gender discrimination, the New York State Human Rights law protects against discrimination in several protected classes, including sex, sexual orientation, gender identity or expression, age, race, creed, color, national origin, military status, disability, predisposing genetic characteristics, familial status, marital status, criminal history, or domestic violence survivor status. The prevention policies outlined above should be considered applicable to all protected classes.

Wage and Hour Policies

Accommodations for Nursing Mothers

Access Healthcare LLC provides accommodations for nursing mothers to express milk in the workplace in accordance with federal and New York law.

Reasonable Break Time to Express Milk

The Company will provide nursing mothers with 30 minutes of paid break time (lactation breaks) to accommodate their need to express breast milk for their nursing child whenever they have a reasonable need to express milk. If additional time is needed beyond the 30 minutes, existing paid break or meal time may be used. These lactation breaks will be provided for up to three years following the child's birth.

Advance Notice of Need to Express Milk

To ensure that the Company can provide appropriate accommodations, you are encouraged to notify your Supervisor in writing of your need to express milk at work, preferably before returning to work after childbirth. This notice should include the anticipated number of breaks needed per day and any preferred times for these breaks. Written notice can be provided through email, text message, or any other written communication method regularly used within the Company. We will respond to this request within five business days and work with you to establish a break schedule that accommodates both your needs and our business operations.

Lactation Location

The Company will provide nursing mothers with a private room or other location, other than a restroom, to express milk. The room or location will be well lit, in close proximity to the work area, and be shielded from view and free from intrusion from coworkers and the public. The room or location will have a chair, a working surface, nearby access to clean running water, and an electrical outlet.

If the sole purpose or function of the room or location is not dedicated for use by employees to express breast milk, those who need the room for expressing milk will be given priority use of the room, and their pumping needs will determine the availability of the room for other purposes. The Company will notify employees as soon as practical when the room or location has been designated for use to express breast milk.

If compliance with the room/location requirements would impose an undue hardship on the Company, we will make reasonable efforts to provide a room or other location, other than a restroom or toilet stall, that is in close proximity to the work area where employees can express breast milk in privacy. You may submit a lactation location request through Human Resources. We will respond to your request within five business days.

Retaliation

The Company will not discriminate or retaliate against employees who express breast milk in the workplace in accordance with this policy.

Required Notice

The Company has provided you with a copy of the New York State Department of Labor's *Policy on the Rights of Employees to Express Breast Milk in the Workplace*, which is attached as an addendum at the end of this handbook.

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Paid Prenatal Personal Leave

Access Healthcare LLC will provide employees with 20 hours of paid prenatal personal leave during any 52-week calendar period. Paid prenatal personal leave is in addition to leave provided under New York's Sick Leave Law.

Paid prenatal personal leave may be used for healthcare services during or related to your pregnancy, including physical examinations, medical procedures, monitoring and testing, and discussions with your healthcare provider related to your pregnancy.

Paid prenatal personal leave may be taken in hourly increments and will be compensated at your regular rate of pay or the applicable minimum wage, whichever is greater.

If your need for leave is foreseeable, provide notice as soon as possible. If unforeseeable, provide notice as soon as practical. You are not required to provide documentation supporting your need for leave.

Upon return to work following any paid prenatal personal leave, you will be restored to the position you held prior to taking leave or a position with the same pay and other terms and conditions of employment.

You will not be compensated for unused paid prenatal personal leave when your employment ends.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Accommodations for Victims of Domestic Violence

Access Healthcare LLC will provide reasonable accommodations to employees who are victims of domestic violence who must be absent from work for a reasonable time, unless such accommodation would cause an undue hardship on the Company.

Accommodations include reasonable time off to:

- Seek medical attention for injuries caused by domestic violence, including for a child who is the victim of domestic violence;
- Obtain services from a domestic violence shelter, program, or rape crisis center as a result of domestic violence;
- Obtain psychological counseling related to an incident or incidents of domestic violence, including for a child who is the victim of domestic violence;
- Participate in safety planning or other action taken to increase safety from future incidents of domestic violence (e.g., temporary or permanent relocation); or
- Obtain legal services, assist in the prosecution of an offense, or appear in court related to an incident of domestic violence.

A **victim of domestic violence** is any person who is older than 16, married, or is a parent accompanied by a minor child in a situation where the individual or minor child is the victim of an act committed by a family or household member in violation of New York penal law. The act must have resulted in actual physical or emotional injury or created a substantial risk of physical or emotional harm to the person or their child.

Notice

You must provide reasonable advance notice of your intention to take time off for the above reasons unless advanced notice is not feasible. If an unscheduled absence occurs, you must provide the following documentation within a reasonable amount of time after your absence:

- A police report indicating that you or your child was a victim of domestic violence;
- A court order protecting or separating you or your child from the perpetrator of the domestic violence;
- Other evidence from the court or prosecuting attorney that you appeared in court; or
- Documentation from a medical professional, domestic violence advocate, health care provider, or counselor that you or your child underwent counseling or treatment for physical or mental injuries or abuse resulting from the domestic violence.

Confidentiality

The Company will maintain the confidentiality of any information regarding your status as a victim of domestic violence, except as required by federal or state law or as necessary to protect your safety in the workplace.

Compensation

The time off may be charged against any paid time off to which you are entitled. If you have no available paid time off, the time off may be treated as unpaid time.

Retaliation

The Company will not retaliate against a victim of domestic violence for requesting or obtaining reasonable accommodation in accordance with this policy.

Blood and Bone Marrow Donation Leave

Access Healthcare LLC provides those employees who work an average of 20 or more hours per week:

- Up to three hours of unpaid leave in any calendar year to donate blood. You must give reasonable notice of at least three working days of your intent to take leave to give blood. Provide documentation to your Supervisor immediately after such leave is taken.
- Unpaid time off, as determined by your physician, not to exceed 24 hours without Company approval to undergo a medical procedure to donate bone marrow. If you seek leave to donate bone marrow, you must provide verification from a physician setting forth the purpose and length of each leave required.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Crime Victim and Witness Leave

Access Healthcare LLC will provide eligible employees with time off from work, without pay, for any of the following reasons:

- To comply with a subpoena to testify in a criminal proceeding (including time off to consult with the district attorney);
- To give a victim impact statement at a pre-sentencing proceeding;
- To give a statement at a sentencing proceeding; or
- To give a statement at a parole board hearing.

You are eligible for time off under this policy if you are:

- The victim of the crime at issue in the proceedings;
- The victim's next of kin;
- The victim's representative if the victim is deceased as a result of the offense;
- A "Good Samaritan"; or
- Pursuing an application or the enforcement of an order of protection as provided under relevant law.

For purpose of this policy:

- **Good Samaritan** means someone who acts in good faith to apprehend a person who has committed a crime in his or her presence, to prevent a crime or an attempted crime from occurring, or to aid a law enforcement officer in effecting an arrest.
- **Victim's representative** means a person who represents or stands in the place of another person, including but not limited to, an agent, attorney, guardian, conservator, executor, heir, or parent of a minor.

If you are required to attend a criminal proceeding either as a witness or as a crime victim (or a close family member of a crime victim), you must notify your Supervisor as soon as possible and at least one day before taking leave to make scheduling arrangements. The Company reserves the right to require employees to provide proof of the need to attend the criminal proceedings to the extent authorized by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Disability Benefits

If you are unable to work for more than seven consecutive days due to a non-work-related illness or injury, or pregnancy-related disability, you may be eligible for disability benefits. Disability benefits provide up to 26 weeks of partial wage replacement benefits during any 52-consecutive-week period. Benefits are payable beginning on the eighth consecutive day of disability.

The cost of your disability insurance coverage is shared between you and the Company through payroll deductions.

If you have been disabled for more than seven days, the Company will provide you with a Form DB-271S, *Statement of Rights*, within five days of learning that you are disabled. The *Statement of Rights* provides information on how to file a claim for benefits. You must file a claim within the first 30 days of your disability or all or part of your claim may be rejected. You must be under the care of a physician, chiropractor, podiatrist, psychologist, dentist, or certified nurse midwife to qualify for disability benefits.

Disability benefits are a wage replacement benefit, not a protected leave benefit. If you are temporarily disabled, you may be eligible for job-protected leave under the federal Family and Medical Leave Act or other state or local law.

To learn more about the New York Disability Benefits law, including eligibility requirements and benefits, or to obtain a claim form (Form DB-450), contact the New York State Workers' Compensation Board (www.wcb.ny.gov).

Military Spouse Leave

Access Healthcare LLC provides up to 10 days of unpaid leave to employees who are the spouse of a military member who is home on leave during a period of military deployment.

To be eligible for military spouse leave you must:

- Work an average of 20 or more hours per week; and
- Be the spouse of a member of the U.S. Armed Forces, National Guard, or Reserves who has been deployed during a period of military conflict to a combat theater or combat zone of operations.

A **period of military conflict** means a period of war declared by the U.S. Congress or a period during which a member of the Reserves is ordered to active duty under federal authority.

If you need to take military spouse leave, notify your Supervisor as soon as reasonably possible. The Company reserves the right to ask for documents supporting the need for leave.

You may elect to use any available paid time off for which you are eligible under Company policy for the purpose of taking military spouse leave, and such paid time off will run concurrently with the leave afforded under this policy.

The Company will not discriminate or retaliate against employees who request or take leave in accordance with this policy.

Paid Family Leave

New York's Paid Family Leave (PFL) program provides eligible employees with job-protected, paid time off to:

- Bond with a newly born, adopted, or foster child.
- Care for a family member with a serious health condition.
- Assist in situations when a spouse, domestic partner, child, or parent is deployed abroad on active military service.

Eligibility

Eligible employees may take PFL leave as follows:

- If you work **full time** (a regular schedule of 20 or more hours per week), you are eligible after 26 consecutive weeks of employment.
- If you work **part time** (a regular schedule of less than 20 hours per week), you are eligible after working 175 days, which do not need to be consecutive.

Amount of Benefit

You will be provided up to 12 weeks of leave at 67 percent of your weekly pay (capped at 67 percent of statewide average pay).

You may use accrued paid leave in order to receive full pay while on PFL.

Funding

PFL is funded through employee payroll contributions that are set each year to match the cost of coverage. The rate of employee contributions is reviewed annually and is subject to change by the New York State Department of Financial Services.

If you are not eligible for PFL, you will be provided a waiver to sign, and PFL contributions will not be deducted from your wages.

Qualifying Events

If you are eligible, you may use PFL for the following reasons:

- **New child:** You may take PFL during the first 12 months following the birth, adoption, or fostering of a child. Expectant mothers cannot take PFL for their own pregnancy. PFL for the birth of a child begins after the child's birth and is not available for prenatal conditions.
- **Serious health condition:** You may take PFL to care for a family member with a serious health condition. The relative may live outside of New York State and even outside the country. You cannot take PFL for your own health condition.

- **Military active service deployment:** You may take PFL when your spouse, domestic partner, child, or parent is deployed abroad on active military service or has been notified of an impending military deployment abroad. You cannot use PFL for your own qualifying military event.

As used in this policy:

- **Family member** includes a spouse, domestic partner, child and stepchild, parent and stepparent, parent-in-law, grandparent, grandchild, and sibling (biological, adopted, half, and step).
- **Serious health condition** is an illness, injury, impairment, or physical or mental condition, including transplant preparation and recovery from surgery related to organ or tissue donation, that involves inpatient care in a hospital, hospice, or residential medical facility; or continuing medical treatment or continuing supervision by a health care provider.

Health Insurance

Your health insurance will continue while you are on leave; however, if you contribute to the cost of your health insurance, you must continue to pay your portion of the premium cost while on leave.

Interaction with Other Laws

PFL may be taken by employees who are eligible for time off under the federal Family and Medical Leave Act (FMLA). PFL will run concurrently with designated FMLA leave when the reason for leave qualifies under both PFL and FMLA. Eligible employees must then apply for both PFL and FMLA.

You may not receive short-term disability and PFL benefits at the same time. You may not take more than 26 combined weeks of short-term disability and PFL in a 52-week period.

If you are unable to work and qualify for workers' compensation benefits, you may not use PFL benefits at the same time as you are receiving workers' compensation benefits. If you are receiving reduced earnings, you may be eligible for PFL.

Notice and Required Documentation

Notify Human Resources if you intend to use PFL. If leave is foreseeable, you must give 30 days' advance notice so the Company can plan for your absence. If the event was not foreseeable, notify Human Resources as soon as possible. If you fail to give notice without unusual circumstances justifying the failure, PFL may be delayed or partially denied.

You must provide documentation in support of your PFL request within 30 days after the leave begins. The Company may require additional proof during your leave, but not more often than once a week. Proof must include a statement of disability from the leave recipient's health care provider.

Returning to Work

On return from PFL, you will be reinstated to your original position, or if no longer available, an equivalent position with equivalent terms and conditions of employment, including pay and employment benefits.

Use of PFL will not result in the loss of any employment benefit that accrued before the start of your family leave that was not used during your family leave.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Additional Information

If you have additional questions regarding PFL, contact Human Resources or visit <https://paidfamilyleave.ny.gov/>.

Paid Sick Leave (Accrual Method)

Access Healthcare LLC provides paid sick leave to eligible employees in accordance with New York law.

Eligibility

All employees are eligible for sick leave.

Reasons for Leave

Sick leave may be used for the following purposes:

- For your own or a family member's mental or physical illness, injury, or health condition regardless of whether such illness, injury, or health condition has been diagnosed or requires medical care at the time that you request leave;
- For the diagnosis, care, or treatment of your own or a family member's mental or physical illness, injury, or health condition or need for medical diagnosis or preventive care; or
- For your absence from work when you or your family member has been the victim of domestic violence, a family offense, sexual offense, stalking, or human trafficking, and you need to:
 - Obtain services from a domestic violence shelter, rape crisis center, or other services program;
 - Participate in safety planning, temporarily or permanently relocate, or take other actions to increase your safety or the safety of your family members;
 - Meet with an attorney or other social services provider to obtain information and advice on, and prepare for or participate in, any criminal or civil proceeding;
 - File a complaint or domestic incident report with law enforcement;
 - Meet with a district attorney's office;
 - Enroll children in a new school; or
 - Take any other actions necessary to ensure your or a family member's health or safety or to protect those who associate or work with you.

If you are responsible for the domestic violence, family offense, sexual offense, stalking, or human trafficking, you are not eligible for leave under this policy.

Family member means:

- Your child, spouse, domestic partner, parent, sibling, grandchild, or grandparent; or
- The child or parent of your spouse or domestic partner.

Parent means:

- Your biological, foster, step, or adoptive parent; or
- A person who acted as your legal guardian or a person who stood in loco parentis when you were a minor child.

Child means:

- Your biological, adopted, or foster child;
- A legal ward; or
- A child for which you stand in loco parentis.

Accrual and Usage

Eligible employees accrue one hour of sick leave for every 30 hours worked, beginning on their first day of employment. You may use sick leave as it accrues.

You may use up to a maximum of 56 hours of sick leave in a leave year. For purposes of this policy, the leave year is calendar year. Unused sick leave will carry over to the following leave year; however, you may still only use 56 hours of sick leave in a leave year.

Compensation

You will be paid at your regular rate of pay or the applicable minimum wage, whichever is greater.

Notice

If the need for leave is foreseeable, you must provide reasonable notice of your need for leave. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Documentation

If you use sick leave for three or more consecutive days, you may be required to provide reasonable documentation confirming your eligibility for leave. Reasonable documentation is limited to the following:

- A statement from a licensed medical provider attesting to your need for sick leave, the amount of leave needed, and the date you may return to work; or
- A statement from you attesting to your eligibility for leave.

The statement does not need to explain the nature of the illness or details related to the domestic violence, family offense, sexual offense, stalking, or human trafficking that necessitates the use of leave.

Confidentiality

Details surrounding your request for leave will be kept confidential, except as required by federal or state law or as necessary to protect your safety in the workplace.

Recordkeeping

You may request (verbally or in writing) a summary of the amounts of sick leave you have accrued and used in the current calendar year and/or any previous calendar year. This information will be provided within three business days.

Payment upon Termination

You will not be paid for any unused sick leave when your employment ends.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

New York City Paid Safe and Sick Leave

Access Healthcare LLC provides paid safe and sick leave to eligible employees in accordance with New York City's Earned Safe and Sick Time Act.

Eligibility

All employees who work within the geographic boundaries of New York City are eligible for safe and sick leave.

Reasons for Leave

Safe and sick leave may be taken for the following reasons:

- To obtain diagnosis, care, or treatment of a mental or physical illness, injury, or health condition, including preventive medical care, for yourself or your family member.
- Closure of your place of business by order of a public official due to a public health emergency or a public disaster, or your need to care for a child whose school or childcare provider closed or restricted in-person operations by order of a public official due to a public health emergency or public disaster.
- Direction by a public official to remain indoors or avoid travel during a public disaster that prevents you from reporting to your work location.
- For your absence from work when you or your family member has been the victim of domestic violence, a family offense, sexual offense, stalking, workplace violence, or human trafficking, and you need to:
 - Obtain services from a domestic violence shelter, rape crisis center, or other services program;
 - Participate in safety planning, relocate, or take other actions to protect your own or your family member's safety, including enrolling children in a new school;
 - Meet with a legal or social service provider to obtain information and advice related to custody, visitation, matrimonial issues, orders of protection, immigration, housing, or discrimination;
 - File a domestic incident report with law enforcement or meet with a district attorney's office;
 - Attend civil or criminal court dates related to any act or threat of domestic violence, unwanted sexual contact, stalking, or human trafficking; or
 - Take any other actions necessary to ensure your own or a family member's health or safety or to protect those who associate or work with you.
- To provide care to a minor child or care recipient when you are the caregiver.
- To initiate, attend, or prepare for a legal proceeding or hearing related to subsistence benefits or housing to which you, your family member, or your care recipient is a party, or to take actions necessary to apply for, maintain, or restore subsistence benefits or shelter for yourself, your family member, or your care recipient.

Accrual and Usage

Eligible employees accrue one hour of safe and sick leave for every 30 hours worked per leave year, up to a maximum of 56 hours. New employees begin accruing safe and sick leave on their first day of employment. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case safe and sick leave accrues based on your normal schedule. For purposes of this policy, the **leave year** is calendar year.

You may use safe and sick leave as it accrues, and you may use up to 56 hours of safe and sick leave per leave year. Unused sick leave will carry over to the following leave year; however, you may still only use 56 hours of sick leave in a leave year.

Compensation

You will be compensated for safe and sick leave at the same hourly rate you would have earned had you not taken leave. However, if you use safe and sick leave during hours that would have been designated as overtime, the Company is not required to pay the overtime rate.

Notice

If the need for leave is foreseeable, you must make a good faith effort to provide advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Documentation

If you use safe and sick leave for more than three consecutive days, you may be required to provide reasonable documentation verifying your eligibility for leave. Reasonable documentation is limited to the following:

- A statement from a licensed medical provider attesting to your need for sick leave, the amount of leave needed, and the date you may return to work; or
- A statement from you attesting to your eligibility for leave.

The statement does not need to explain the nature of the illness or details related to the domestic violence, family offense, sexual offense, stalking, workplace violence, or human trafficking that necessitates the use of leave.

Confidentiality and Nondisclosure

The Company will not ask you to provide details about the medical condition that led to your use of sick leave or the personal situation that led to your use of safe leave. Any information received by the Company regarding your use of safe or sick leave will be kept confidential and will not be disclosed to anyone without your written permission or as required by law.

Abuse of Safe and Sick Leave

The Company may take disciplinary action, up to and including termination, against employees who use safe or sick leave for purposes other than those described in this policy.

Indications of safe and sick leave abuse may include, but are not limited to, a pattern of:

- Using unscheduled safe or sick leave on or adjacent to weekends, regularly scheduled days off, holidays, vacations, or paydays;
- Taking scheduled safe or sick leave on days when other leave has been denied; and
- Taking safe or sick leave on days when you are scheduled to work a shift or perform duties perceived as undesirable.

Interaction with Other Leave

Safe and sick leave will run concurrently with other types of leave when permitted under applicable law. Where New York City's Earned Safe and Sick Time Act intersects with the New York State Sick Leave Law, the Company will apply the provision that is the most favorable to employees.

Payment upon Termination

You will not be paid for any accrued, unused safe and sick leave when your employment ends.

Reinstatement of Leave upon Rehire

The Company will reinstate previously accrued, unused safe and sick leave if you separate and are rehired within six months.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Additional Unpaid Safe and Sick Time

In addition to the paid safe and sick leave described above, eligible employees will receive 32 hours of **unpaid** safe and sick leave on their first day of employment and at the beginning of each leave year. This unpaid leave is available for immediate use for any safe and sick leave reason. Unused unpaid safe and sick leave will not carry over to the next leave year.

If you need leave for any of the reasons stated in this policy, the Company will first allow you to use any available unused **paid** safe and sick leave. The Company is not required to allow use of paid leave if none is available or if you ask to use other leave.

Westchester County Safe Leave

Access Healthcare LLC provides paid safe leave to eligible employees in accordance with Westchester County's Safe Leave Law.

Eligibility

All employees who work within the geographic boundaries of Westchester County for more than 90 days in a calendar year are eligible for safe leave.

Reasons for Leave

If you are a victim of domestic violence or human trafficking, you may use safe leave to attend or testify in criminal or civil court proceedings relating to the domestic violence or human trafficking, and/or move to a safe location.

Use of Leave

Eligible employees are entitled to take up to 40 hours of paid safe leave each leave year. For purposes of this policy, the leave year is calendar year.

You may take safe leave 90 days after your first day of employment. The leave may be taken in full or partial day increments.

Compensation

You will be compensated for safe leave at your regular hourly rate.

Notice

If the need for leave is foreseeable, you must make a good faith effort to provide advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Documentation

You may be required to provide reasonable documentation that safe leave has been used for a covered purpose. This may include:

- A court appearance ticket or subpoena;
- A copy of a police report;
- An affidavit from an attorney involved in the proceeding; or
- An affidavit from an authorized person from a reputable organization known to assist victims of domestic violence or human trafficking.

Any information obtained by the Company from you for the purpose of utilizing safe leave will be treated as confidential and will not be disclosed to others except with your written permission, unless such disclosure is otherwise required by law.

Interaction with Other Leave

Safe leave will run concurrently with other types of leave where permitted under applicable law.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy. If you have been denied leave or retaliated against in violation of this policy, you may file a complaint with the Westchester County Department of Consumer Protection. Visit www.consumer.westchestergov.com or call (914) 995-2155 for information. You may also file a complaint in a court of competent jurisdiction within one year of the alleged violation.

North Carolina Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and over), race, religion, color, national origin, gender, sex, sexual orientation (including transgender status, gender identity or expression), physical or mental disability, genetic information, marital status, AIDS/HIV status, possession of sickle cell trait or hemoglobin C trait, military service, veteran status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;

- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors;
- Any unwanted physical touching or assaults, or blocking or impeding movements; and
- The spreading of or participation in dissemination of gossip or rumors of a sexual nature related to coworkers.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion towards an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance towards any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Civil Air Patrol Leave

Access Healthcare LLC will provide eligible employees with up to 14 days of unpaid Civil Air Patrol leave to perform their duties related to a state-approved mission or a U.S. Air Force-authorized mission.

Eligibility

To be eligible for Civil Air Patrol leave, you must be a volunteer member of the North Carolina Wing of the Civil Air Patrol.

Use of Leave

Leave may be for no more than seven consecutive scheduled working days. The total amount of leave you may use in a calendar year is 14 days.

You may substitute any available paid leave for your unpaid Civil Air Patrol leave.

Notice

If your need for leave is foreseeable, provide as much advance notice as possible. If unforeseeable, provide notice as soon as practical.

Documentation

To verify that leave was used for a proper purpose, you may be required to furnish a copy of your mission order.

Retaliation

The Company will not retaliate or discriminate against employees who request or take leave in accordance with this policy.

Election Precinct Official Leave

Access Healthcare LLC will provide employees who are appointed as election precinct officials with unpaid leave on Election Day or canvass day to perform the duties of their position.

You must provide at least 30 days' notice of your intent to take leave to serve as an election precinct official.

The Company will not retaliate or discriminate against employees who request or take leave in accordance with this policy.

Domestic Violence Leave

Access Healthcare LLC will provide employees reasonable unpaid leave to obtain or attempt to obtain relief from domestic violence in accordance with North Carolina law.

You must provide reasonable advance notice of your need for leave unless an emergency prevents you from doing so. You may be required to provide documentation showing evidence of the emergency.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

School Visitation Leave

If you are the parent, guardian, or person standing in loco parentis of a school-aged child, Access Healthcare LLC will provide you up to four hours of time off per year to attend or otherwise be involved at the child's school.

You and your Supervisor must mutually agree to the scheduling of leave.

Submit a written request for leave at least 48 hours in advance of the requested absence. You may be required to provide documentation from the child's school verifying that you were involved at the school during the leave time.

Leave under this policy will be unpaid; however, exempt employees may be paid as required by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

North Dakota Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race, color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, marital status, status as a recipient of public assistance, participation in lawful activity off of Company property during nonworking hours that does not directly conflict with the Company's essential business interests, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above-protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above-protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Emergency Responder Leave

If you are a volunteer emergency responder, Access Healthcare LLC will not discharge, discriminate, or take any other disciplinary action against you for failing to report to work on time or being absent from work because you were responding to an emergency or disaster in your capacity as a volunteer emergency responder.

Volunteer emergency responder means an individual in good standing as:

- A volunteer member of the Army National Guard or Air National Guard of this state or any state; or
- A volunteer civilian member of the Civil Air Patrol.

If you are a volunteer emergency responder, inform your Supervisor.

Work time missed due to responding to an emergency or disaster will be unpaid.

Unless you are an involuntarily activated National Guard member, the above protections do not apply if you are late or absent from work for more than 20 working days in a calendar year.

If you are going to be absent from or late to work due to your service as a volunteer emergency responder during a disaster or emergency, you must make reasonable efforts to notify the Company. The Company may request that you provide written verification of the dates and times you were absent or tardy from work due to serving as a volunteer emergency responder. Verification may include a statement from the department of emergency services, the adjutant general's office, the North Dakota wing of the Civil Air Patrol, or other appropriate entity.

This policy does not apply if the Company determines that you are an essential employee. **Essential employee** means the job you perform is so critical that it cannot be performed by another employee, and your absence will create the potential for irreparable harm to or permanent closure of the Company. In such cases, the Company will:

- Make reasonable efforts to inform you that you are an essential employee and that your absence from the workplace will be unauthorized if you are called to report for duty as a volunteer emergency responder.
- Provide you notification of the determination that your absence is unauthorized before you report for duty as a volunteer emergency responder.

The governor or adjutant general may supersede the Company's decision if the governor or adjutant general determines the nature of the emergency or disaster is so serious that your service as a volunteer emergency responder is key and essential to the emergency response efforts and public safety responsibilities of the adjutant general's office.

Witness Leave

Access Healthcare LLC realizes that, on occasion, employees may be subpoenaed to testify as a witness in court. In such cases, you will be provided unpaid leave to attend. Notify your Supervisor as soon as possible to make scheduling arrangements.

The Company reserves the right to require employees to provide proof of the need for leave to the extent authorized by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Ohio Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race, color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;

- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Election Official Leave

Access Healthcare LLC will provide employees who are precinct election officials with unpaid leave for registration and/or Election Day to perform the duties of their position.

Provide as much notice as possible of your need for leave.

The Company will not retaliate or discriminate against employees who request or take leave in accordance with this policy.

Emergency Services Leave

If you are a volunteer firefighter or a volunteer provider of emergency medical services, Access Healthcare LLC will not discharge, discriminate, or take any other disciplinary action against you for failing to report to work on time or for being absent from work because you were responding to an emergency. Work time missed for responding to an emergency will be unpaid.

You must notify the Company of your status as a current volunteer firefighter or volunteer provider of emergency medical services, including when your status as such is terminated.

If you intend to become a volunteer firefighter or a volunteer provider of medical services, you must provide written notification to the Company of your status as a volunteer no later than 30 days after receiving your certification. This notification must be signed by:

- The chief of the volunteer fire department with which you serve; or
- The medical director or chief administrator of the cooperating physician advisory board of the emergency medical organization with which you serve.

If you are going to be late or absent from work because you have responded to an emergency, you must make every effort to notify the Company. If you are unable to notify the Company due to the extreme circumstances of the emergency or your inability to contact the Company, you must provide a written statement from the applicable director or chief explaining why prior notice was not given.

The Company may also request you provide a written statement from the applicable director or chief verifying the date and time you responded to the emergency.

Crime Victim and Witness Leave

Access Healthcare LLC realizes that, on occasion, you may have an obligation to participate in criminal legal proceedings either as a witness or because you, or a close family member, was victimized by a criminal act. The Company provides unpaid leave to attend those proceedings under circumstances described below.

If you are required to attend a criminal proceeding, including a grand jury or juvenile proceeding, either as a witness or as a crime victim (or a close family member or representative of a crime victim), inform your Supervisor as soon as possible to make arrangements for a leave of absence. This includes instances when you have been requested by the prosecutor to participate in the preparation of the criminal case against the suspect.

The Company may require you to provide proof of your need to attend the proceedings to the extent authorized by law.

Leave under this policy will be unpaid unless otherwise required by applicable law.

Any information related to your leave will be kept confidential by the Company to the extent possible.

This policy does not apply to employees seeking leave because they have committed, or are alleged to have committed, an offense against the Company or an offense involving them during the course of their employment.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Military Family Leave

Access Healthcare LLC will provide eligible employees with up to 10 days or 80 hours (whichever is less) of unpaid military family leave in a calendar year.

To be eligible for leave, you must meet the following criteria:

- Have been employed with the Company for at least 12 consecutive months and for at least 1,250 hours in the 12 months immediately preceding commencement of the leave.
- Must be the parent, spouse, or a person who has or had legal custody of a person who is a member of the uniformed services and is called into active duty in the uniformed services for a period longer than 30 days, or is injured, wounded, or hospitalized while serving on active duty in the uniformed services.
- Have exhausted all other available leave, except sick leave or disability leave.

You must provide at least 14 days' notice prior to taking the leave if the leave is taken due to a call to active duty. At least two days' notice must be provided if the leave is taken due to an injury, wound, or hospitalization. If the covered family member's situation is critical or life threatening, no notice is required.

You may take leave no more than two weeks prior to, or one week after, the covered family member's deployment date.

You may be required to provide certification from the appropriate military authority to verify that the above leave eligibility criteria is satisfied.

The Company will continue to provide benefits while you are on leave under this policy. You will be responsible for the same proportion of the cost of the benefits as you regularly pay when not on leave.

Leave under this policy is unpaid; however, exempt employees may receive pay for partial day absences, as required by applicable law.

Upon return from leave, you will be restored to the position you held prior to taking the leave or a position with equivalent seniority, benefits, pay, and other terms and conditions of employment.

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Oklahoma Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

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- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
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Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

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Wage and Hour Policies

Overtime

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Oregon Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

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The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

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- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults or blocking or impeding movements.

Sexual Assault

Sexual assault is defined as unwanted conduct of a sexual nature that is inflicted upon a person or compelled through the use of physical force, manipulation, threat, or intimidation.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
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Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective

action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

State and Federal Remedies

In addition to the Company reporting process, if you believe you have been subjected to discrimination or harassment, you may file a formal complaint with the government agencies listed below. Using the Company complaint process does not prohibit you from filing a complaint with these agencies.

Claims must be filed within the following time frames:

- Complaints filed with the Oregon Bureau of Labor and Industries (BOLI) must be filed within five years after the occurrence of the alleged discrimination.
- Complaints filed with the federal Equal Employment Opportunity Commission (EEOC) must generally be filed within 180 days of the alleged discrimination. This deadline is extended to 300 days if BOLI or a local agency enforces a law that prohibits employment discrimination on the same basis.

If the basis for filing the complaint is covered by both state and federal law, a complaint filed with BOLI is automatically filed with the EEOC.

EEOC Seattle Field Office

Address: 909 First Avenue, Suite 400, Seattle, WA 98104-1061

Phone: 800-669-4000

Fax: 206-220-6911

TTY: 800-669-6820

ASL Video Phone: 844-234-5122

Website: <https://publicportal.eeoc.gov/portal/>

BOLI, Civil Rights Division Offices

Eugene

1400 Executive Parkway, Suite #200

Eugene, OR 97401

541-686-7623

Salem

3865 Wolverine St. NE, Bldg. E-1

Salem, OR 97305

503-378-3292

Portland

1800 SW 1st Ave., Suite 500

Portland, OR 97201

971-673-0764

Agreements

The Company may not, as a condition of employment, continued employment, promotion, compensation, or the receipt of benefits, require or coerce you to enter into an agreement that contains a nondisclosure provision, a nondisparagement provision, or any other provision that has the purpose or effect of preventing you from disclosing or discussing any conduct:

- That constitutes unlawful discrimination or harassment (including sexual assault); and

- That occurred between employees or between the Company and an employee in the workplace or at a work-related event that is off the employment premises and coordinated by or through the Company; or
- That occurred between the Company and an employee off the employment premises.

If you have claimed to be a victim of unlawful discrimination or harassment (including sexual assault), the Company may only enter into a settlement, separation, or severance agreement with you that includes one or more of the following provisions, if you request to enter into such an agreement:

- A nondisclosure provision, a nondisparagement provision, or any other provision that has the purpose or effect of preventing you from disclosing or discussing any conduct as outlined in the previous paragraph.
- A provision that prevents the disclosure of factual information relating to a claim of discrimination or conduct that constitutes sexual assault; or
- A no-rehire provision that prohibits you from seeking re-employment with the employer as a term or condition of the agreement.

If the Company makes a good faith determination that you have engaged in unlawful discrimination or harassment, the Company may enter into a settlement, separation, or severance agreement that includes one or more of the provisions described above.

Any settlement, separation, or severance agreement reached by you and Company may be revoked within seven days of its execution, and the agreement will not become effective until after the revocation period has expired.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

State Board or Commission Leave

Access Healthcare LLC will provide employees who are appointed members of a state board or commission with unpaid leave to perform the duties of their appointed role.

You must provide at least 21 days' written notice of your intent to take leave. You will not be required to use paid leave for any time spent performing your respective duties.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Legislative Leave

Access Healthcare LLC will provide employees who are members or prospective members of the Legislative Assembly with an unpaid leave of absence to attend sessions of the Legislative Assembly or to perform other official duties.

This leave of absence is available to non-temporary employees who have been employed by the Company for at least 90 days.

You must provide notice of your intent to take leave as follows:

- At least 30 days before a regular session; and
- As soon as possible when it is apparent that a special or emergency session will be called.

At the conclusion of the leave of absence, you must apply to be restored to employment within the following timeframes:

- 15 days after adjournment sine die of the regular legislative session; or
- Five days after the assignment is completed, if the leave is for a lesser period than a regular session.

Upon application, you will be restored to your previous position or, if such position no longer exists, to a similar position without loss of seniority, the right to participate in insurance, or any other employment benefits.

Restoration may be denied if:

- You fail to apply for restoration within the required timelines; or
- The Company's circumstances have changed during your leave of absence so that restoration is impossible or unreasonable.

The Company will not retaliate or discriminate against employees who request or take leave in accordance with this policy.

Paid Family and Medical Leave Insurance

Oregon's Paid Family and Medical Leave Insurance (PFMLI) program, more commonly known as Paid Leave Oregon, allows eligible employees to take up to 12 weeks of paid family, medical, and safe leave per benefit year. The program is administered by the Oregon Employment Department (OED) and funded through payroll taxes.

Eligibility

To be eligible for PFMLI benefits, you must have earned at least \$1,000 in wages in the previous year.

Reasons for Leave

If eligible, you may take leave under the PFMLI program for the following reasons:

- **Family leave:**
 - To care for a family member with a serious health condition;
 - To care for and bond with a new child after birth, adoption, or foster care placement; or
 - To participate in the legal process required for placement of a foster child or the adoption of a child.
- **Medical leave:** For your own serious health condition.
- **Safe leave:** If you or your minor child is a survivor of sexual assault, domestic violence, harassment, or stalking, to obtain legal or law enforcement assistance, seek medical treatment or recover from

injuries, obtain counseling or support services, or relocate or take other steps to secure your (or your child's) health and safety.

Leave Usage

You are entitled to 12 weeks of leave per benefit year in any combination of family, medical, and safe leave. The benefit year begins the Sunday before the period of leave and lasts 52 weeks. You may qualify for up to an additional two weeks of paid leave if you have limitations related to pregnancy, childbirth, or a related medical condition.

Bonding leave must be taken within the first 12 months after the birth, adoption, or placement.

You may take paid leave in increments equal to one workday or one workweek. You can take leave all at once (consecutive) or in separate blocks of time (nonconsecutive). Consecutive leave is taken in one block of time due to a single qualifying event (such as five weeks of leave for knee surgery).

Nonconsecutive leave is taken in separate blocks of time due to a single qualifying reason (such as one day every week for 12 weeks for chemotherapy).

Use of Other Paid Leave Benefits

PFMLI benefits are in addition to any paid leave that you have earned.

In any week you are eligible to receive workers' compensation or wage replacement benefits under a state or federal unemployment benefits program (beginning January 1, 2026), you may not receive PFMLI benefits.

Notice

If leave is foreseeable, you must provide the Company at least 30 days' notice. If leave is unforeseeable, you must provide notice within 24 hours and provide written notice within three days of starting leave.

If you do not provide the required notice, your first weekly benefit may be reduced by 25%.

Applying for Leave

You must apply for PFMLI benefits with Paid Leave Oregon online at <https://paidleave.oregon.gov> or request a paper application from the OED. The application may be submitted as early as 30 days before the start of leave or up to 30 days after the start of leave.

Compensation

Compensation for PFMLI leave is determined by the OED.

Interaction with Other Laws

PFMLI does not run concurrently with leave under the Oregon Family Leave Act (OFLA). PFMLI leave will run concurrently with other leaves where permissible under applicable law.

Fitness for Duty Requirements

If you take PFMLI leave because of your own serious health condition (except if you are taking intermittent leave), you may be required to provide medical certification to the Company that you are fit to resume work. If required, you will not be permitted to resume work until certification is provided.

Continuation of Health Benefits

If the Company provides you with health benefits under a group health plan, the Company will maintain your health coverage at the same level and under the same conditions as if you had been continuously employed.

Restoration

If you have worked for the Company for at least 90 consecutive calendar days before taking PFMLI leave, you will be restored to your previous position when you return from leave if that position still exists.

If the position no longer exists, you will be restored to an equivalent position with equivalent employment benefits, pay, and other terms and conditions of employment. If an equivalent position is not available at your original jobsite, the Company will offer you an equivalent position at another jobsite within 50 miles, if available. If multiple options exist, the nearest jobsite will be offered first.

You will not lose any employment benefits, including seniority or pension rights, that you accrued before the date your leave began. Nothing in this policy entitles you to accrue new benefits during your leave or to any right, benefit, or position other than what you would have been entitled to if you had not taken leave.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Juvenile Court Attendance Leave

Access Healthcare LLC realizes that, on occasion, employees may be summoned to appear at a delinquency proceeding with a youth who is in their physical or legal custody. In such cases, you will be provided unpaid leave to attend. Notify your Supervisor as soon as possible to make scheduling arrangements.

The Company reserves the right to require employees to provide proof of the need for leave to the extent authorized by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Bone Marrow Donation Leave

Access Healthcare LLC will provide eligible employees up to 40 hours of leave to undergo a medical procedure to donate bone marrow.

To be eligible for leave under this policy, you must work an average of 20 or more hours per week.

You may determine the total length of the leave, but leave may not exceed the amount of your accrued paid leave or 40 work hours, whichever is less, unless the Company agrees otherwise. You may choose to substitute accrued paid leave.

You may be required to provide the Company with verification from a physician of the purpose and length of each leave. If there is a medical determination that you do not qualify as a bone marrow donor, the paid leave used prior to the determination is not affected.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Sick Leave (Accrual Method)

Access Healthcare LLC provides unpaid sick leave to eligible employees in accordance with Oregon's sick leave law.

Eligibility

All employees who work in Oregon are eligible for sick leave.

Reasons for Leave

Sick leave may be taken for the following reasons:

- To care for your own or a family member's mental or physical illness, injury, or health condition; need for medical diagnosis, care, or treatment; or need for preventive medical care.
- To care for an infant or newly adopted child under 18 years of age, a newly placed foster child under 18, or an adopted or foster child older than 18 if the child is incapable of self-care because of a mental or physical disability (leave must be used within 12 months after birth or placement of the child).
- To recover from or seek treatment for a health condition that renders you unable to perform at least one of the essential functions of your regular position.
- To deal with the death of a family member within 60 days of receiving notice of the family member's death, including:
 - Attending the funeral or alternative to a funeral of the family member;
 - Making arrangements necessitated by the death of the family member; or
 - Grieving the death of the family member.
- For absences related to domestic violence, harassment, sexual assault, or stalking:
 - To seek legal or law enforcement assistance or remedies to ensure your own or your minor child or dependent's health and safety, including preparing for and participating in protective order proceedings or other civil or criminal legal proceedings related to domestic violence, harassment, sexual assault, or stalking;
 - To seek medical treatment for or to recover from injuries you or your minor child or dependent suffered from domestic violence, sexual assault, harassment, or stalking;
 - To obtain, or to assist a minor child or dependent in obtaining, counseling from a licensed mental health professional related to an experience of domestic violence, harassment, sexual assault, or stalking;
 - To obtain services from a victim services provider for yourself or your minor child or dependent; or
 - To relocate or take steps to secure an existing home to ensure your own or your minor child or dependent's health and safety.
- If during a public health emergency any of the following occur:
 - Your place of business, or the school or place of care of your child, is closed by order of a public official due to a public health emergency;
 - A determination is made by a lawful public health authority or a healthcare provider that your presence or your family member's presence in the community would jeopardize the health of others; or
 - You are excluded from the workplace under any law or rule that requires the Company to exclude you from the workplace for health reasons.
- The following public health emergencies, unless you are employed as a first responder:
 - An emergency evacuation order of level 2 (SET) or level 3 (GO) issued by an authorized public official, if the affected area subject to the order includes either the location of the Company's place of business or your home address; or
 - A determination by an authorized public official that the air quality index or heat index are at a level where continued exposure to such levels would jeopardize your health.
- For any reason permitted under Oregon's Paid Family and Medical Leave Insurance program (Paid Leave Oregon).
- For blood donation made in connection with a voluntary blood donation program that is approved or accredited by the American Association of Blood Banks or the American Red Cross (beginning January 1, 2026).

Accrual and Usage

Eligible employees accrue one hour of sick leave for every 30 hours worked or one and one-third hours for every 40 hours worked, up to a maximum of 40 hours per leave year. New employees begin accruing sick leave on their first day of employment. For purposes of this policy, the leave year is calendar year. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick leave accrues based on your normal schedule.

You may use accrued sick leave on your 91st day of employment. The smallest amount of sick leave you may take is one hour. You may carry over up to 40 hours of unused sick leave to the following leave year. You may accrue a maximum of 80 hours of sick leave per year; however, the maximum you may use per year is 40 hours.

Notice

If the need for leave is foreseeable, including, but not limited to, medical appointments, provide notice at least 10 days prior to beginning leave or as soon as practical. If unforeseeable, provide notice before the start of the scheduled work shift or as soon as practical. If known, notice should include the expected length of the absence.

You must make reasonable efforts to schedule planned sick leave in a manner that does not unduly disrupt business operations and should attempt not to schedule sick leave during peak work hours, when work is time sensitive, or when mandatory meetings are scheduled.

Documentation

The Company may require you to submit documentation to support your use of sick leave under the following circumstances:

- Your leave exceeds three consecutive days on which you are scheduled to work;
- Your need for leave is foreseeable and is projected to last more than three consecutively scheduled workdays;
- You began leave without providing notice required by this sick leave policy; or
- The Company has sufficient evidence to suspect that you are abusing sick leave, including engaging in a pattern of absenteeism, regardless of whether you have used sick leave for more than three consecutive days.

Note: You are not required to explain the nature of any domestic violence, harassment, sexual assault, or stalking. You may provide certification from a victim services provider, attorney, law enforcement officer, or healthcare provider verifying that you were involved in such an incident without disclosing further details.

Payment upon Termination

You will not be paid for any accrued, unused sick leave when your employment ends.

Interaction with Other Leave

Sick leave will run concurrently with other types of leave when permitted under applicable law.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Pennsylvania Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race (including traits associated with race, which include, but are not limited to, hair texture and protective hairstyles such as braids, locks, twists, coils, Bantu knots, afros, and extensions), color, national origin, ancestry, religion, religious creed (including head coverings and hairstyles historically associated with religious creeds), sex (including sex assigned at birth, sexual orientation, transgender identity, gender transition, and gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability (including use of a guide or support animal due to blindness, deafness, or a physical disability), genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to ensure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Organ and Tissue Donation Leave

Access Healthcare LLC will provide eligible employees with up to 12 weeks of unpaid, job-protected leave in a 12-month period for the purpose of serving as an organ or tissue donor in accordance with the Pennsylvania Living Donor Protection Act.

Eligibility

To be eligible for donation leave, you must:

1. Have worked for the Company for at least 12 months;
2. Have worked at least 1,250 hours in the last 12 months; and
3. Be employed at a worksite that has 50 or more employees within 75 miles.

Reasons for Leave

Donation leave may be used for the preparation and recovery necessary for surgery related to organ or tissue donation by or for you or your spouse, child, or parent.

As used in this policy:

- **Organ** means a human kidney, liver, heart, lung, pancreas, esophagus, stomach, small or large intestine or portion of the gastrointestinal tract or another part of the human body designated by the Department of Health by regulation. The term includes blood vessels recovered during the recovery of an organ if the blood vessels are intended for use in organ transplantation.
- **Tissue** means a portion of the human body other than an organ, including, but not limited to, a human eye, skin, bone, bone marrow, heart valve, spermatozoon, ova, artery, vein, tendon, ligament, pituitary gland, or fluid. The term does not include blood or a blood derivative, unless the blood or blood derivative is donated for the purpose of research or education.

Donation leave will run concurrently with leave provided under the federal Family and Medical Leave Act.

Notice

If the need for leave is foreseeable, you must give at least 30 days' notice. If 30 days' notice is not possible, give notice as soon as practicable (within one or two business days of learning of your need for leave). Failure to provide appropriate notice may result in the delay or denial of leave.

If the need for leave is unforeseeable, provide notice as soon as possible. Normal call-in procedures apply to all absences from work, including those for which leave under this policy may be requested. Failure to provide appropriate notice may result in the delay or denial of leave.

You may be required to provide written documentation regarding the preparation and recovery necessary for surgery.

Health Insurance

Your health insurance coverage will be maintained by the Company during leave on the same basis as if you were still working. You must continue to make timely payments of your share of the premiums for such coverage. Failure to pay premiums within 30 days of when they are due may result in a lapse of coverage. If this occurs, you will be notified 15 days before the date coverage will lapse that coverage will terminate unless payments are promptly made.

Alternatively, at our option, the Company may pay your share of the premiums during the leave and recover the costs of this insurance upon your return to work. Coverage that lapses due to nonpayment of premiums will be reinstated immediately upon return to work without a waiting period. Under most circumstances, if you do not return to work at the end of leave, the Company may require reimbursement for the health insurance premiums paid during the leave.

Reinstatement

Upon returning to work at the end of leave, you will generally be placed in your original job or an equivalent job with equivalent pay and benefits. You will not lose any benefits that accrued before leave was taken.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Crime Victim and Witness Leave

Access Healthcare LLC realizes that, on occasion, you may have an obligation to participate in criminal legal proceedings either as a witness or because you, or a close family member, was victimized by a criminal act. The Company provides unpaid leave to attend those proceedings under circumstances described below.

If you are required to attend a criminal proceeding, including a grand jury or juvenile proceeding, either as a witness or as a crime victim (or a close family member or representative of a crime victim), inform your Supervisor as soon as possible to make arrangements for a leave of absence.

The Company reserves the right to require employees to provide proof of the need to attend the criminal proceedings to the extent authorized by law.

Leave under this policy is unpaid. You may opt to use paid time off in place of unpaid leave.

Any information related to your leave will be kept confidential by the Company to the extent possible.

This policy does not apply to employees seeking leave because they have committed or are alleged to have committed a criminal act.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Allegheny County Paid Sick Leave

Access Healthcare LLC provides paid sick leave to eligible employees in accordance with the Allegheny County Paid Sick Leave Ordinance.

Eligibility

All employees who perform work in Allegheny County are eligible for sick leave.

Reasons for Leave

Sick leave may be taken for the following reasons:

- To obtain diagnosis, care, or treatment of a mental or physical illness, injury, or health condition, including preventive medical care, for you or your family member;
- Closure of your place of business because of a public health emergency;
- To care for a child whose school or place of care has been closed because of a public health emergency; or
- To care for a family member when health authorities or a health care provider determine the family member's exposure to a communicable disease creates a risk to others, whether or not the family member has contracted the disease.

Family member means:

- Your child or child of your spouse or domestic partner (including a biological, adopted, or foster child, stepchild, legal ward, or a child to whom you stand in loco parentis).
- Your parent or parent of your spouse or domestic partner (including biological, foster, or adoptive parent, stepparent, legal guardian, or a person who stood in loco parentis to you when you were a minor child).
- Your grandchild.
- Your grandparent or grandparent's spouse or domestic partner.
- Your sibling (including biological, foster, or adopted).
- A person to whom you are legally married under the laws of any state, domestic partner, or an individual for whom you received permission from the Company to care for using sick leave.

Accrual and Usage

Eligible employees accrue one hour of sick leave for every 35 hours worked within the geographic boundaries of Allegheny County per leave year, up to a maximum of 40 hours. New employees begin accruing leave on their first day of employment. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case leave accrues based on your normal schedule. For purposes of this policy, the leave year is calendar year.

You may begin using sick leave on the 90th calendar day following the commencement of your employment and you may use up to 40 hours of sick leave per leave year. Unused, accrued sick leave will carry over to the following leave year up to the 40-hour maximum cap.

Compensation

You will be compensated for sick leave at the same base rate of pay and with the same benefits, including health care benefits, as you would have earned had you not taken leave.

Notice

If the need for leave is foreseeable, you must make a good faith effort to provide advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Documentation

If you use sick leave for three or more full consecutive days, you may be required to provide reasonable documentation that leave is being used for a covered purpose.

Interaction with Other Leave

Sick leave will run concurrently with other types of leave where permitted under applicable law.

Payment upon Termination

You will not be paid for any unused sick leave when your employment ends.

Reinstatement of Sick Leave upon Rehire

The Company will reinstate previously accrued, unused sick leave if you separate and are rehired within six months.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy. You have the right to file a written complaint with the Department of Administrative Services if you have been denied sick leave to which you are entitled under this policy or if you have been retaliated against for requesting or taking sick leave.

Philadelphia Paid Sick Leave

Access Healthcare LLC provides paid sick leave to eligible employees in accordance with Philadelphia's Promoting Healthy Families and Workplaces Ordinance.

Eligibility

All employees who have worked for the Company for at least six months and perform at least 40 hours of work in Philadelphia within a calendar year are eligible for sick leave.

Sick leave is not available for seasonal workers, interns, pool employees, and non-probationary employees covered by a bona fide collective bargaining agreement.

Reasons for Leave

Sick leave may be taken for the following reasons:

- For your own or a family member's mental or physical illness, injury, or health condition; need for medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition; or need for preventive medical care.
- If you or a family member are the victim of domestic abuse, sexual assault, or stalking, time used to:
 - Seek medical attention;
 - Obtain services from a victim services organization;

- Obtain psychological or other counseling;
- Seek relocation; or
- Seek legal services or take legal action, including preparing for or participating in any civil or criminal legal proceeding related to or resulting from the domestic abuse, sexual assault, or stalking.

Family member means:

- Your child (including a biological, adopted, or foster child, stepchild, or child to whom you stand in loco parentis).
- Your own or your spouse's parent (including a biological or foster parent, stepparent, adoptive parent, legal guardian, or person who stood in loco parentis to you when you were a minor child).
- A person to whom you are legally married under the laws of Pennsylvania.
- A grandparent or spouse of a grandparent.
- A grandchild.
- Your own or your spouse's siblings (including biological, foster, or adopted).
- Your life partner as defined by Philadelphia law.

Accrual and Usage

Eligible employees accrue one hour of sick leave for every 40 hours worked within the geographic boundaries of Philadelphia per calendar year (January 1–December 31), up to a maximum of 40 hours. New employees begin accruing sick leave on their first day of employment. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick leave accrues based on your normal schedule.

You may begin using sick leave on the 90th calendar day following commencement of your employment and you may use up to 40 hours of sick leave per calendar year. You may carry over up to 40 hours of unused sick leave to the following calendar year up to a maximum cap of 40 hours.

Compensation

You will be compensated for sick leave at the same base rate of pay and with the same benefits, including health care benefits, as you would have earned had you not taken leave.

Notice

If the need for leave is foreseeable, you must make a good faith effort to provide advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Documentation

If you use sick leave for more than two consecutive days, you may be required to provide reasonable documentation that leave is being used for a covered purpose.

Interaction with Other Leave

Sick leave will run concurrently with other types of leave where permitted under applicable law.

Payment upon Termination

You will not be paid for any unused sick leave when your employment ends.

Reinstatement of Sick Leave upon Rehire

The Company will reinstate previously accrued, unused sick leave if you separate and are rehired within six months.

Retaliation and Right to File Complaint

The Company will not retaliate against employees who request or take leave in accordance with this policy. You have the right to file a written complaint with the Office of Wage and Benefits Compliance within the Mayor's Office of Labor or pursue a civil action if you have been denied sick leave to which you are entitled under this policy or if you have been retaliated against for requesting or taking sick leave.

Pittsburgh Paid Sick Leave

Access Healthcare LLC provides paid sick leave to eligible employees in accordance with Pittsburgh's Paid Sick Days Ordinance.

Eligibility

All employees who perform work in Pittsburgh are eligible for sick leave except seasonal employees and employees who are members of a construction labor union covered by a collective bargaining agreement.

Reasons for Leave

Sick leave may be taken for the following reasons:

- For your own or a family member's mental or physical illness, injury, or health condition; need for medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition; or need for preventive medical care.
- Closure of your place of business by order of a public official due to a public health emergency.
- To care for a child whose school or place of care has been closed by order of a public official due to a public health emergency.
- To care for a family member when it has been determined by the health authorities having jurisdiction or by a healthcare provider that the family member's presence in the community would jeopardize the health of others because of the family member's exposure to a communicable disease, whether or not the family member has actually contracted the communicable disease.

Accrual and Usage

Eligible employees accrue one hour of sick leave for every 30 hours worked within the geographic boundaries of Pittsburgh per leave year, up to a maximum of 72 hours. New employees begin accruing sick leave on their first day of employment. For purposes of this policy, the leave year is calendar year. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick leave accrues based on your normal schedule.

You may begin using sick leave on the 90th calendar day following the commencement of your employment, and you may use up to 72 hours of sick leave per leave year. You may carry over up to 72 hours of accrued, unused sick leave to the following leave year.

Compensation

You will be compensated for sick leave at the same base rate of pay and with the same benefits, including healthcare benefits, as you would have earned had you not taken leave.

Notice

If the need for leave is foreseeable, you must make a good faith effort to provide advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Documentation

If you use sick leave for three or more full consecutive days, you may be required to provide reasonable documentation that leave is being used for a covered purpose. If you are required to provide reasonable documentation, the documentation should not specify the nature of the illness or condition.

Interaction with Other Leave

Sick leave will run concurrently with other types of leave when permitted under applicable law.

Payment upon Termination

You will not be paid for any accrued, unused sick leave when your employment ends.

Reinstatement of Sick Leave upon Rehire

The Company will reinstate previously accrued, unused sick leave if you separate and are rehired within six months.

Retaliation and Right to File Complaint

The Company will not retaliate against employees who request or take leave in accordance with this policy. You have the right to file a written complaint with the Office of the City Controller if you have been denied sick leave to which you are entitled under this policy or if you have been retaliated against for requesting or taking sick leave.

Rhode Island Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race (including traits associated with race, which include, but are not limited to, hair texture and protective hairstyles such as locks, cornrows, twists, braids, Bantu knots, and Afros), color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), menopause and related conditions, physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Resolution Outside Company

The purpose of this policy is to establish prompt, thorough, and effective procedures for responding to every complaint and incident so that problems can be identified and remedied internally. However, you have the right to file a complaint with the Rhode Island Commission for Human Rights (RICHR) or the federal Equal Employment Opportunity Commission (EEOC).

Administrative Contacts for Complaints

Rhode Island Commission for Human Rights (RICHR)

180 Westminster Street, Third Floor, Providence, RI 02903

Phone: 401-222-2661

Fax: 401-222-2616

Voice Relay: 7-1-1

Website: <http://www.richr.ri.gov>

United States Equal Employment Opportunity Commission (EEOC)

Boston Area Office: JFK Federal Building, 15 New Sudbury Street, Room 475, Boston, MA 02203-0506

Phone: 800-669-4000

TTY: 800-669-6820

ASL Video Phone: 844-234-5122

Fax: 617-565-3196

Website: <https://www.eeoc.gov>

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Crime Victim Leave

Access Healthcare LLC will provide employees who are victims of a crime time off from work to attend court proceedings related to the crime.

Time off under this policy will be without pay; however, exempt employees will not incur any reduction in pay for a partial week absence. You may use PTO/vacation time during the unpaid leave.

If you require leave under this policy, you must provide a copy of the notice of the court proceeding to your Supervisor.

The Company reserves the right to limit leave taken under this policy if the time off creates an undue hardship

to its business.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Family Military Leave

In accordance with Rhode Island's Family Military Leave Act, Access Healthcare LLC will provide employees who are the spouse or parent of a person called to serve in the state or federal military for more than 30 days with up to 30 days of unpaid time off while deployment orders are in effect.

To be eligible for family military leave, you must have both:

- Worked for the Company for at least 12 months; and
- Worked for at least 1,250 hours in the 12-month period immediately preceding the commencement of leave.

You may not take family military leave unless you have exhausted all accrued vacation leave, personal leave, compensatory leave or time, and any other leave that may be granted to you, with the exception of sick leave and disability leave.

Leave may only be taken while the servicemember's orders are in effect.

If you take family military leave for five or more consecutive workdays, you must provide notice at least 14 days in advance of the leave. Where able, consult with your Supervisor regarding the scheduling of the leave so as not to unduly disrupt Company operations. If you take family military leave for less than five consecutive days, you must provide as much advance notice as is practicable.

You may be required to provide certification from the proper military authority verifying your eligibility to take the requested leave.

Upon return from leave, you will be restored to your former position or to a position with equivalent seniority, status, benefits, pay, and other terms and conditions of employment.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Parental and Family Medical Leave (RIPFMLA)

In accordance with the Rhode Island Parental and Family Medical Leave Act (RIPFMLA), Access Healthcare LLC will provide eligible employees up to 13 consecutive workweeks of unpaid leave in any two calendar years under certain qualifying conditions.

Eligibility

To be eligible for RIPFMLA, you must:

- Work full-time, averaging at least 30 hours per week; and
- Have worked for the Company for 12 consecutive months.

Leave Entitlement

If eligible, you will be provided with 13 consecutive workweeks of unpaid leave in any two consecutive calendar years for:

- The birth of a child.

- The placement of a child 16 years or younger with you for adoption.
- The serious illness of a family member (parent, civil union partner, spouse, child, mother-in-law or father-in-law).
- Your own serious illness.

Interaction with Other Laws

If both are applicable, Family and Medical Leave Act (FMLA) and RIFFMLA leave run concurrently.

Notice

If you wish to take RIFFMLA leave you must provide at least 30 days' notice of the intended dates when such leave will begin and end, unless a medical emergency prevents you from providing such notice. The Company may require you to provide written certification from a physician specifying the probable duration of your leave.

Benefits

During leave, the Company will maintain your existing health benefits as if you had been continuously employed during the leave.

Reinstatement

Upon return from authorized RIFFMLA leave, you will be reinstated to your original position or a position with equivalent seniority, status, employment, benefits, pay, and other terms and conditions of employment.

Abuse of Leave

If you are found to have provided a false reason for a leave, you will be subject to disciplinary action up to and including termination.

Retaliation

The Company will not discriminate or retaliate against employees for requesting or taking leave under this policy.

School Activities Leave

Access Healthcare LLC will provide you up to 10 hours of leave during any 12-month period to attend school conferences or other school-related activities for your child.

To be eligible for leave under this policy, you must:

- Work full-time, averaging at least 30 hours per week; and
- Have worked for the Company for 12 consecutive months.

You must provide 24 hours' notice of the need for leave and make a reasonable effort to schedule the leave so as not to unduly disrupt Company operations.

Time off under this policy is unpaid; however, exempt employees will receive pay when required under applicable law. You may elect to use any accrued paid vacation time or other appropriate paid leave during the leave.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Temporary Caregiver Insurance

Rhode Island's Temporary Caregiver Insurance (TCI) program provides up to eight weeks of partial wage replacement benefits in a 52-week period to eligible employees who need to take time off from work to:

- Care for a child, spouse, domestic partner, parent, parent-in-law, or grandparent with a serious health condition;
- Bond with a newborn, adopted, or foster child; or
- Serve as a bone marrow transplant donor or living organ donor.

TCI provides a monetary benefit and is financed by employee payroll deductions. To be eligible for benefits, you must have worked in Rhode Island, paid into the Temporary Disability Insurance (TDI) fund, and meet certain earnings requirements.

If you serve as a bone marrow transplant donor or a living organ donor, TCI benefits will cover time needed for any procedures, medical tests, and surgeries related to the donation, including up to five business days of recovery from a bone marrow transplant or up to 30 business days of recovery from a living organ donor transplant.

To receive TCI benefits, you must provide Access Healthcare LLC with at least 30 days' notice of your intent to take leave. The notice must specify the date you will begin leave and the expected date you will return to work. Failure to provide the required notice may affect benefits eligibility as determined by the Rhode Island Department of Labor and Training (DLT).

To obtain TCI benefits, you must file a claim with DLT no later than 30 days after your first day of leave. For caregiver leave, you will be required to provide medical documentation from a qualified healthcare provider indicating the family member's serious health condition. For bonding leave, you will be required to submit proof of the parent-child relationship.

The Company will maintain your health insurance benefits while you are on leave for any reason covered by the TCI program; however, you are responsible for making any contributions you would normally make toward the cost of that insurance.

TCI will run concurrently with leave taken under the federal Family and Medical Leave Act and/or any state leave where applicable and permitted by law.

Upon return from leave, you will be restored to your former position or to a comparable position with equivalent seniority, status, employment benefits, pay, and other terms and conditions of employment, including fringe benefits. You are required to notify the Rhode Island DLT when you return to work.

To learn more about TCI benefits, including eligibility requirements and how to file a claim, visit the Rhode Island DLT website (<http://www.dlt.ri.gov/tci/>).

Temporary Disability Insurance

If you are unable to work for seven or more consecutive days due to a non-work-related illness or injury, or pregnancy-related disability, you may be eligible for benefits under the Rhode Island Temporary Disability Insurance (TDI) program. The TDI program provides up to 30 weeks of partial wage replacement benefits and is funded entirely through employee payroll deductions.

To be eligible for TDI benefits you must have worked in Rhode Island, paid into the TDI fund, and meet certain earnings requirements.

To obtain TDI benefits, you must file a claim with the Rhode Island Department of Labor and Training (DLT) within 90 days of the first week you are out of work due to a non-work-related illness or injury, or pregnancy-related disability.

You cannot receive TDI benefits if you are receiving workers' compensation or unemployment insurance benefits.

To learn more about TDI benefits, including eligibility requirements and how to file a claim, contact the DLT at (401) 462-8420 or visit their website at <http://www.dlt.ri.gov/tidi/>.

Unpaid Sick Leave (Accrual Method)

Access Healthcare LLC provides unpaid sick leave to eligible employees in accordance with Rhode Island's Healthy and Safe Families and Workplaces Act.

Eligibility

Most employees whose primary place of employment is in Rhode Island are eligible for sick leave.

Reasons for Leave

Sick leave may be taken for the following reasons:

- For your own, or a family member's, mental or physical illness, injury, or health condition (medical diagnosis, care, treatment, or preventative medical care).
- When your place of business is closed by order of a public official due to a public health emergency.
- When your child's school or place of care is closed by order of a public official due to a public health emergency.
- To care for yourself or a family member when it has been determined by health authorities or a healthcare provider that you or your family member's presence in the community may jeopardize the health of others because of exposure to a communicable disease.
- To address circumstances surrounding you or a family member being a victim of domestic violence, sexual assault, or stalking.

Family member means a child, parent, spouse, mother-in-law, father-in-law, grandparents, grandchildren, domestic partner, sibling, care recipient, or member of your household.

Accrual and Usage

Eligible employees accrue one hour of sick leave for every 35 hours worked, up to a maximum of 40 hours per leave year. New employees begin accruing sick leave on their first day of employment. Leave accrues for all hours worked and all hours paid by the Company while collecting paid time off benefits, including, but not limited to, holiday pay, personal time, sick time, and vacation time. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick leave accrues based on your normal schedule. For purposes of this policy, the leave year is calendar year

Most employees, except temporary or seasonal employees, may begin using sick leave on their 91st calendar day of employment. Temporary employees may begin using sick leave on their 180th calendar day of employment. Seasonal employees may begin using sick leave on their 150th calendar day of employment.

You may use up to 40 hours of sick leave per leave year.

You are not required to find a replacement worker to cover the hours that you miss due to sick leave. If you are absent from work for any reason listed above, you and the Company may mutually agree that you will work an equivalent number of additional hours or shifts during the same or next pay period in lieu of using sick leave for your absence.

Unused sick leave is carried over to the following leave year; however, leave use is subject to the limits provided above.

Notice

If the need for leave is foreseeable, provide reasonable advance notice and make an effort to schedule the leave in a manner that does not unduly disrupt Company operations. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Documentation

If sick leave is used for more than three consecutive workdays, the Company may require you to provide reasonable documentation showing that the leave was used for the purposes described above. Reasonable documentation includes:

- Documentation signed by a healthcare professional indicating that sick leave was necessary.
- A written statement by you stating that you or your family member was a victim of domestic violence, sexual assault, or stalking, and that leave was taken due to those circumstances.
- A police report indicating that you or your family member was a victim of domestic violence, sexual assault, or stalking.
- A court document indicating that you or your family member is involved in a legal action related to domestic violence, sexual assault, or stalking.
- A signed statement from a victim and witness advocate affirming that you or your family member is receiving services from a victim services organization or is involved in legal action related to domestic violence, sexual assault, or stalking.

Any health information or information pertaining to domestic violence, sexual assault, sexual contact, or stalking obtained by the Company will be treated as confidential and will not be disclosed except to you or with your permission unless otherwise required by law.

Sick leave cannot be used as an excuse to be late for work without an authorized purpose.

Payment upon Termination

You will not be paid for any unused sick leave when your employment ends.

Interaction with Other Leave

Sick leave will run concurrently with other types of leave when permitted under applicable law.

Transfers

If you are transferred to a separate division, entity, or location within Rhode Island, but remain employed by the Company, you are entitled to all sick leave time accrued at the prior division, entity, or location.

Reinstatement of Sick Leave upon Rehire

The Company will reinstate previously accrued, unused sick leave if you separate and are rehired within 135 days.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

South Carolina Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race, color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;

- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors;
- Any unwanted physical touching or assaults, or blocking or impeding movements; and
- The spreading or participation in dissemination of gossip or rumors of a sexual nature related to coworkers.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

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We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Emergency Service Workers Leave

If you are a volunteer firefighter or a volunteer medical services employee, Access Healthcare LLC will not terminate you for responding to a declared state of emergency by the President of the United States or governor of South Carolina. Any work time missed while responding to an emergency will be unpaid.

Isolation and Quarantine Leave

Access Healthcare LLC provides unpaid leave to employees who are ordered to isolate or quarantine by the Department of Health and Environmental Control.

Provide notice of your need for leave as soon as practical.

You may be required to substitute any accrued and unused paid leave for this leave as permitted by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Crime Victim and Witness Leave

If you are subpoenaed as a victim of or a witness to a crime, Access Healthcare LLC will provide you with unpaid time off to attend court proceedings related to the crime.

Victim means any individual who suffers direct or threatened physical, psychological, or financial harm as the result of the commission or attempted commission of a criminal offense. The term includes the spouse, parent, child, or lawful representative of a victim who is deceased, a minor, incompetent, or physically or psychologically incapacitated. The term does not include:

- Any individual who is the subject of an investigation for, who is charged with, or who has been convicted of or pled guilty or *nolo contendere* to the offense in question;
- Any individual (including a spouse, parent, child, or lawful representative) who is acting on behalf of the suspect, juvenile offender, or defendant, unless such actions are required by law; or

- Any individual who was imprisoned or engaged in an illegal act at the time of the offense at issue in the proceedings.

Upon receipt of a valid subpoena, notify your Supervisor as soon as possible to make scheduling arrangements.

The Company will not retaliate against, suspend, or reduce the wages or benefits of employees who request or take leave in accordance with this policy.

South Dakota Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race, color, national origin, ancestry, creed, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

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- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;

- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion towards an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance towards any select group.

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Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Tennessee Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

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The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

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Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

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- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Workplace Bullying

Access Healthcare LLC is firmly committed to a workplace free from abusive conduct. We strive to provide high quality products and services in an atmosphere of respect, collaboration, openness, safety, and equality.

All employees have the right to be treated with dignity and respect. All complaints of negative and inappropriate workplace behaviors will be taken seriously and followed through to resolution. Any individual who files a complaint will not suffer negative consequences for reporting others for inappropriate behavior.

This policy applies to all full-time and part-time employees, including interns. It does not apply to independent contractors; however, other contract employees are included. This policy applies to any sponsored program, event, or activity including, but not limited to, sponsored recreation programs and activities and the performance by officers and employees of their employment-related duties. The policy also applies to electronic communications by employees.

Abusive Conduct

Abusive conduct includes acts or omissions that would cause a reasonable person, based on the severity, nature, and frequency of the conduct, to believe that an individual was subject to an abusive work environment, which can include but is not limited to:

- Repeated verbal abuse in the workplace, including derogatory remarks, insults, and epithets;
- Verbal, nonverbal, or physical conduct of a threatening, intimidating, or humiliating nature in the workplace; or
- The sabotage or undermining of an individual's work performance in the workplace.

A single act generally will not constitute abusive conduct, unless such conduct is determined to be severe and egregious.

Abusive conduct does **not** include:

- Disciplinary procedures in accordance with Company policies.
- Routine coaching and counseling, including feedback about and correction of work performance.
- Reasonable work assignments, including shift, post, and overtime assignments.
- Individual differences in styles of personal expression.
- Passionate, loud expression with no intent to harm others.
- Differences of opinion on work-related concerns.
- The non-abusive exercise of managerial prerogative.

Responsibilities

Those in positions of authority have a particular responsibility to ensure that healthy and appropriate behaviors are exhibited at all times and that complaints to the contrary are addressed in a timely manner. Managers, supervisors, and others in positions of authority will:

- Provide a working environment as safe as possible by having preventative measures in place and by dealing immediately with threatening or potentially violent situations;
- Provide good examples by treating all with courtesy and respect;
- Ensure that all employees have access to and are aware of the abusive conduct prevention policy and explain the procedures to be followed if a complaint of inappropriate behavior at work is made;
- Be vigilant for signs of inappropriate behaviors at work through observation and information seeking, and take action to resolve the behavior before it escalates;
- Respond promptly, sensitively, and confidentially to all situations where abusive behavior is observed or alleged to have occurred.

You are expected to:

- Treat all employees with dignity and respect.
- Refrain from engaging in threatening, violent, intimidating, or other abusive conduct or behaviors.

- Assume personal responsibility to promote fairness and equity in the workplace and report any incidents of abusive conduct in accordance with this policy.
- Co-operate with preventative measures introduced by your Supervisor and recognize that a finding of unacceptable behaviors at work will be dealt with through appropriate disciplinary procedures.

Complaint Process

Reporting

If you feel that you have been subjected to abusive conduct or have witnessed such conduct, report the matter verbally or in writing to your Supervisor or Human Resources. Your complaint should include details of each incident of abusive conduct, such as dates, times, locations, and any witnesses.

Those in positions of authority must timely report known incidents involving workplace abuse, intimidation, or violence to Human Resources. All managers and supervisors are required to take reasonable steps to protect the complainant, including, but not limited to, separation of those involved. The person complained against will be notified that an allegation has been made against him or her and will be informed of the investigative procedure.

Investigation

Investigations of abusive conduct will be conducted as soon as practicable and in accordance with Company policies and practices. The objective of the investigation is to determine whether the behaviors complained of occurred, and therefore will include interviewing the complainant, accused, and any witnesses with direct knowledge of the alleged behaviors. All interviews will be appropriately documented. The investigation will be conducted thoroughly, objectively, with sensitivity, and with due respect for all parties. The investigator will provide a copy of the investigative report to the appointing authority for further action. All affected parties will be informed of the investigation's outcome.

Corrective Action

If abusive conduct is found, the Company will take immediate and appropriate corrective action. Remedies may be determined by weighing the severity and frequency of the incidences of abusive conduct and in accordance with existing disciplinary policies.

Any individual who engages in conduct that violates this policy or who encourages such conduct by others will be subject to corrective action. Such corrective action may include, but is not limited to, participation in counseling, training, and disciplinary action up to and including termination, or changes in job duties or location.

Any Supervisor or other person in a position of authority who allows abusive conduct to continue or fails to take appropriate action upon learning of such conduct will be subject to corrective action. Such corrective action may include, but is not limited to, participation in counseling, training, disciplinary action up to and including termination, or changes in job duties or location.

While the Company encourages all employees to raise any concern(s) under this policy and procedure, the Company recognizes that intentional or malicious false allegations can have a serious effect on innocent people. Individuals falsely accusing others of violations of this policy will be disciplined in accordance with the Company disciplinary policy.

Any individual exhibiting continuing emotional or physical effects from a reported incident will be directed toward established assistance programs or other available resources.

When abusive conduct has been confirmed, the Company will continue to review the situation and may take additional corrective actions if necessary. Preventative measures may also be taken to reduce the reoccurrence of similar behaviors or actions.

Confidentiality

To the extent permitted by law, the Company will maintain the confidentiality of each party involved in an abusive conduct investigation, complaint, or charge, provided it does not interfere with the ability to investigate the allegations or to take corrective action. However, state law may prevent the Company from maintaining confidentiality of public records. Therefore, the Company cannot guarantee confidentiality.

Retaliation

Retaliation is any act of reprisal, interference, restraint, penalty, discrimination, intimidation, or harassment against an individual or individuals exercising rights under this policy. The Company will not retaliate or otherwise discriminate against employees who exercise their rights under this policy.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Texas Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race (including discrimination on the basis of a person's hair texture or protective hairstyle commonly or historically associated with race, such as braids, locks, and twists), religion, color, national origin, gender, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information, military service, veteran status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;

- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion towards an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance towards any select group.

Reporting Discrimination and Harassment

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Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

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Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Political Convention Leave

Access Healthcare LLC will provide employees with unpaid leave to attend:

- A precinct convention for which they are eligible to participate; or
- A county, district, or state convention for which they are a delegate.

Provide as much notice as possible of your need for leave.

The Company will not discriminate or retaliate against employees who request or take leave in accordance with this policy.

Witness Leave

Access Healthcare LLC realizes that, on occasion, employees may be subpoenaed to appear in a civil, criminal, legislative, or administrative proceeding. In such cases, you will be provided unpaid leave to attend. Notify your Supervisor as soon as possible to make scheduling arrangements. You may opt to use paid time off in place of unpaid leave.

The Company reserves the right to require employees to provide proof of the need for leave to the extent authorized by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Utah Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

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The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment means harassment on the basis of sex, sexual orientation, or gender and includes unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above-protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above-protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

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Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

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Benefits

Isolation and Quarantine Leave

Access Healthcare LLC provides unpaid leave to employees who are subject to an order of restriction by the state or local health department, or a district court for examination, treatment, isolation, or quarantine.

Provide notice of your need for leave as soon as practical.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Court Attendance and Witness Leave

Access Healthcare LLC realizes that, on occasion, employees may be subpoenaed to attend a deposition or hearing. In such cases, you will be provided unpaid leave to attend. Notify your Supervisor as soon as possible to make scheduling arrangements. You may opt to use paid time off in place of unpaid leave.

The Company reserves the right to require employees to provide proof of the need for leave to the extent authorized by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Minor Child Court Attendance Leave

If you have a minor child that is required to appear in court, Access Healthcare LLC will provide you unpaid leave to attend. Notify your Supervisor as soon as possible to make scheduling arrangements.

The Company reserves the right to require employees to provide proof of the need for leave to the extent authorized by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Vermont Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

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The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

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Policy Against Workplace Harassment

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Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances; requests for sexual favors; and other verbal, physical, written, auditory, or visual conduct of a sexual nature when: (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of interfering with an individual's work or creating an intimidating, hostile, or offensive work environment.

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- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults or blocking or impeding movements.

Other Harassment

Other workplace harassment is unwelcome conduct that creates an intimidating, hostile, or offensive work environment and is based on an individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
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Alternative Reporting and Remedies

The Company encourages you to report incidents of discrimination and harassment internally. However, if you believe you have been subjected to discrimination or harassment in violation of this policy, you may file a private civil action or file a complaint with either the Vermont Attorney General's Office or the federal Equal Employment Opportunity Commission (EEOC). You are not required to file a complaint with the Company before taking such action.

Contact Information

Vermont Attorney General's Office Civil Rights Unit

Address: 109 State Street, Montpelier, VT 05609-1001

Toll Free VT: 888-745-9195

Voice/TDD: 802-828-3657

Email: ago.civilrights@vermont.gov

Complaints should be filed within 360 days of the adverse action.

Equal Employment Opportunity Commission (EEOC)

Address: John F. Kennedy Federal Building, 475 Government Center, Boston, MA 02203

Phone: 800-669-4000

Fax: 617-565-3196

TTY/TDD: 800-669-6820

ASL Video Phone: 844-234-5122

Website: <https://www.eeoc.gov/employees/charge.cfm>

Complaints must be filed within 300 days of the adverse action.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Vermont Parental, Bereavement, Safe, Qualifying Exigency, and Family Leave

In accordance with the Vermont Parental and Family Leave Act (PFLA), Access Healthcare LLC will provide eligible employees up to a total of 12 weeks of bereavement, family, parental, qualifying exigency, and/or safe leave in a 12-month period.

Eligibility

To be eligible for the leaves under the policy, you must:

- Have been continuously employed with the Company for at least one year; and
- Work at least 30 hours per week on average.

Reasons for Leave

You may take up to 12 weeks of leave in a 12-month period for the following reasons:

- **Family leave.** This is leave for your own or a family member's serious health condition.
- **Parental leave.** This is leave for:
 - Your own pregnancy;
 - Your own recovery from childbirth or miscarriage;
 - The birth of your child, or to care for or bond with the child within one year of the child's birth; or
 - The initial placement of a child 18 years of age or younger with you for the purposes of adoption or foster care, and to care for or bond with the child within one year after the placement for adoption or foster care.
- **Bereavement leave.** This is leave to address the death of a family member within one year of the family member's death. Bereavement leave includes time taken in relation to the administration or settlement of the deceased family member's estate.
- **Safe leave.** This is leave for the following reasons if you or your family member is a victim, or alleged victim, of domestic violence, sexual assault, or stalking:
 - To seek or obtain medical care, counseling, or social or legal services;
 - To recover from injuries;
 - To participate in safety planning;
 - To relocate or secure safe housing;
 - To respond to a fatality or near fatality; or
 - To meet with a state's attorney or law enforcement officer.
- **Qualifying exigency leave.** This is leave for specific reasons when a family member, who is a member of the U.S. Armed Forces, is on covered active duty or has been notified of an impending call or order to covered active duty.

Family member means:

- Your child (including biological, adopted, foster, or step child; legal ward; a child of your spouse or domestic partner; a child to whom you stand in loco parentis, regardless of documentation; an individual to whom you stood in loco parentis when the individual was under 18 years of age; or any individual for whom you provide caregiving responsibilities similar to those in a parent-child relationship);
- Your legal spouse (regardless of state), civil union partner, or domestic partner;
- Your or your spouse's or partner's (as described just above) parents, regardless of whether the relationship is biological, foster, adoptive, or step;
- Your or your spouse's or partner's legal guardian;
- A person who stands in loco parentis to you or who stood in loco parentis when you or your spouse or partner was under 18 years of age; or
- Your or your spouse's or partner's grandparent, grandchild, or sibling, regardless of whether the relationship is biological, foster, adoptive, or step.

Usage

The total amount of leave, for any reason or combination of reasons, under the PFLA is 12 weeks in any 12-month period.

Regarding bereavement leave:

- You may take up to two weeks of leave out of the total 12 weeks available under the PFLA; and
- You may not take more than five consecutive workdays of leave.

You are not entitled to safe leave if you are the perpetrator or alleged perpetrator of the domestic violence, sexual assault, or stalking.

Notice

For parental leave, you must provide 30 days advance written notice of your intention to take leave under this policy. The notice must include the date the leave is expected to begin and the estimated duration of the leave. In the event of an unforeseen event (e.g., premature birth or miscarriage), provide notice as soon as practical.

For bereavement, family, safe, and qualifying exigency leaves, you must provide reasonable advance written notice of your intent to take leave. The notice must include the date the leave is expected to begin and the estimated duration of the leave. If the need for leave is unforeseeable, provide notice as soon as practical.

Reasonable notice must be provided if you need to extend the length of a leave.

Documentation

You may be required to provide reasonable documentation supporting your need for leave.

For family leave due to your own or a family member's serious health condition, reasonable documentation includes certification from a healthcare provider verifying the condition and the amount and necessity for the leave requested.

For bereavement leave, reasonable documentation includes:

- A death certificate;
- A published obituary; or
- A written notice or verification of death, burial, or memorial services from a mortuary, funeral home, burial society, crematorium, religious organization, or governmental agency.

For safe leave, reasonable documentation includes:

- Documentation from:
 - A court or a law enforcement or other government agency;
 - A domestic violence, sexual assault, or stalking assistance program;
 - A legal, clerical, medical, or other professional from whom you or your family member received counseling or other assistance concerning domestic violence, sexual assault, or stalking; or
- A self-attestation by you describing the circumstances supporting your need for safe leave. No further corroboration of the self-attestation is required unless mandated by law.

For qualifying exigency leave, reasonable documentation includes a copy of the family member's active duty orders or other documentation issued by the military, which indicates that the family member is on covered active duty or called to covered active duty status, and the dates of the family member's covered active duty service.

Where leave is for a family member, the Company may also request documentation identifying the qualifying family relationship.

Confidentiality

The Company will not disclose any private medical information or other information relating to your leave unless the disclosure is permitted by law and:

- Consented by you in writing;
- Required pursuant to a court order; or
- Required pursuant to state or federal law.

Compensation

All leaves under this policy are unpaid. However, you may elect to use up to six weeks of sick leave, vacation, or other accrued paid leave.

Return from Leave

Upon return from leave, you will be restored to your prior position or to a comparable position at the same level of compensation, benefits, seniority, and other terms and conditions of employment. Benefits (e.g., health insurance) may be suspended during the leave, subject to the terms of the applicable benefit plans, but will be restored upon return to the same level and under the same conditions that existed on the day the leave began, unless changes unrelated to your leave have occurred (e.g., plan termination affecting all employees).

Reinstatement may be denied if:

- During the leave, your job would have been terminated or you would have been laid off for reasons unrelated to the leave; or
- You performed unique services for the Company and hiring a permanent replacement during the leave was the only viable alternative to prevent substantial and grievous economic injury to operations. In such cases, the Company will provide you reasonable notice of the intent to replace you.

If you do not return to employment at the end of a leave for reasons other than a serious health condition or safe leave when you are the victim of domestic violence, sexual assault, or stalking, you must reimburse the Company for the value of any compensation paid to or on behalf of you during the leave. Payments of accrued sick leave or vacation need not be reimbursed.

Interaction with Other Leave

Leave under this policy will run concurrently with leave under the federal Family and Medical Leave Act (FMLA) when applicable.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Legislative Leave

Access Healthcare LLC will provide an unpaid temporary or partial leave of absence to full-time employees who are elected to the General Assembly in order to perform any official duty in connection with their elected office.

If you intend to seek election to the General Assembly and invoke your right to a leave of absence (if elected), you must provide written notice of those intentions to the Company within 10 days after filing the primary election nominating petition to have your name placed on a primary or general election ballot. Failure to provide proper notice will result in the loss of your entitlement to leave.

While on leave, you will not lose your job status, seniority, or your right to participate in insurance and other employment benefits.

If providing leave would cause an unreasonable hardship for the Company, the Company may make an appeal for relief to the chair of the Vermont Labor Relations Board. After the appeal is filed, a proceeding will be held to determine whether or not leave must be granted. The decision, which is final, will be made within 30 days of receipt of the notice of appeal and is binding on you and the Company.

The Company will not retaliate or discriminate against employees who request or obtain leave in accordance with this policy.

Court Attendance and Witness Leave

Access Healthcare LLC realizes that, on occasion, employees may be summoned to appear as a witness in a civil or criminal proceeding. In such cases, you will be provided unpaid leave to attend. Notify your Supervisor as soon as possible to make scheduling arrangements.

The Company reserves the right to require employees to provide proof of the need for leave to the extent authorized by law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Crime Victim Leave

Access Healthcare LLC will provide eligible employees with unpaid crime victim leave to be used for specific purposes.

Eligibility

To be eligible for crime victim leave you must:

- Have worked for the Company for a period of six consecutive months for an average of at least 20 hours per week; and
- Be an alleged victim as defined below.

Alleged victim means a person who is alleged in an affidavit filed by a law enforcement official with a prosecuting attorney to have sustained physical, emotional, or financial injury or death as a direct result of the commission or attempted commission of a crime or act of delinquency. Alleged victim also includes a family member if the person:

- Is a minor;
- Has been found to be incompetent;
- Is alleged to have suffered physical or emotional injury as a result of the violent crime or act of delinquency; or
- Has died as a result of the alleged crime or act of delinquency.

Family member means an individual who is not identified in the affidavit as the defendant and is the alleged victim's:

- Child, foster child, or stepchild;
- Ward who lives with the alleged victim;
- Spouse, domestic partner, or civil union partner;
- Sibling;
- Grandparent;
- Grandchild;
- Parent, or a parent of the alleged victim's spouse, domestic partner, or civil union partner;
- Legal guardian; or

- An individual for whom the alleged victim stands in loco parentis or who stood in loco parentis to the alleged victim when they were a child.

Reasons for Leave

Crime victim leave may be used to attend a deposition or court proceeding related to:

- A criminal proceeding when you are an alleged victim with a right or obligation to appear.
- A relief from abuse hearing when you are seeking a relief from abuse order.
- A hearing concerning an order against stalking or sexual assault when you are seeking the order.
- A relief from abuse, neglect, or exploitation hearing when you are the person seeking relief.

Notice

Notify your Supervisor of your need for leave as soon as reasonably possible.

Substitution of Accrued Paid Leave

You may substitute available accrued sick leave, vacation time, PTO, or any other accrued paid leave for any part of the leave.

Exempt employees may be provided time off with pay when necessary to comply with state and federal wage and hour laws.

Health Insurance Coverage

While on leave you will continue to receive benefits at the same level and under the same conditions that coverage would be provided if you were continuously employed. You may be required to contribute to the cost of benefits during leave at your existing rate of contribution.

Restoration

At the end of leave you will be returned to your previous position or a comparable position at the same level of compensation, employment benefits, seniority, and any other term or condition of employment that existed on the day leave began.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Paid Sick Leave (Accrual Method)

Access Healthcare LLC provides paid sick leave to eligible employees in accordance with Vermont's Earned Sick Time Law.

Eligibility

Generally, most employees whose primary place of employment is Vermont, who are at least 18 years of age, and who work an average of at least 18 hours per week are eligible for sick leave. Speak with your Supervisor to learn if you are eligible.

Reasons for Leave

Sick leave may be taken for the following reasons:

- Your own illness or injury.
- For professional diagnostic, preventative, routine, or therapeutic health care.
- To care for a sick or injured family member, including helping that individual obtain diagnostic, preventative, routine, or therapeutic health treatment; or to accompany a parent, grandparent, spouse, or parent-in-law to an appointment related to their long-term care.
- To arrange for social or legal services or to obtain medical care or counseling for yourself or a family member who is a victim of domestic violence, sexual assault, or stalking, or who is relocating as a result of domestic violence, sexual assault, or stalking.
- To care for a family member because the school or business where the individual is normally located during your workday is closed for public health or safety reasons.

Family member means your brother, sister, child, foster child, grandchild, grandparent, parent-in-law, or spouse.

Accrual and Usage

Eligible employees will accrue one hour for every 52 hours worked, up to a maximum accrual of 40 hours in a leave year. New employees begin accruing sick leave on their first day of employment. For purposes of this policy, the leave year is calendar year.

You may begin using sick leave on your first day of employment. For purposes of this policy, the leave year is calendar year. You may use up to 40 hours of sick leave per leave year.

You may carry over up to 40 hours of unused sick leave to the following leave year.

Compensation

You will be compensated for sick leave at your regular rate of pay or at the Vermont minimum wage, whichever is greater.

Interaction with Other Leave

Sick leave will run concurrently with other types of leave where permitted under applicable law.

Notice

If the need for sick leave is foreseeable, you must make a good faith effort to provide advance notice and schedule the leave in a manner that does not unduly disrupt business operations. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Payment upon Termination

You will not be paid for any unused sick leave when your employment ends.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Short Term Family Leave

Access Healthcare LLC will provide eligible employees up to four hours of short-term family leave in any 30-day period, not to exceed 24 hours in any 12-month period.

Eligibility

To be eligible for leave, you must have worked for the Company for at least one year and worked an average of at least 30 hours per week.

Reasons for Leave

You may take short-term leave for the following reasons:

- To participate in preschool or school activities, such as parent-teacher conferences, that are directly related to the academic educational advancement of a family member;
- To attend or accompany a family member to routine medical or dental appointments;
- To accompany a family member to other appointments for professional services related to that person's care and well-being; or
- To respond to a medical emergency involving a family member.

Family member means:

- Your child (including biological, adopted, foster, or step child; legal ward; a child of your spouse or domestic partner; a child to whom you stand in loco parentis, regardless of documentation; an individual to whom you stood in loco parentis when the individual was under 18 years of age; or any individual for whom you provide caregiving responsibilities similar to those in a parent-child relationship);
- Your legal spouse (regardless of state), civil union partner, or domestic partner;
- Your or your spouse's or partner's (as described just above) parents, regardless of whether the relationship is biological, foster, adoptive, or step;
- Your or your spouse's or partner's legal guardian;
- A person who stands in loco parentis to you or who stood in loco parentis when you or your spouse or partner was under 18 years of age; or
- Your or your spouse's or partner's grandparent, grandchild, or sibling, regardless of whether the relationship is biological, foster, adoptive, or step.

Notice and Scheduling

Provide notice of the need for leave as early as possible, but in no case later than seven days before leave is to be taken, except in the case of an emergency. Emergency means circumstances in which the required seven-day notice could have a significant adverse impact on the family member. In addition, you must make a reasonable attempt to schedule appointments for which short-term leave may be taken outside of regular work hours.

Compensation

Leave taken under this policy is unpaid; however, you may choose to use any accrued vacation or personal leave during the time off.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Town Meeting Leave

You may take unpaid leave for the purpose of attending a town meeting, so long as the absence does not conflict with the essential operations of Access Healthcare LLC. Notify your Supervisor at least seven days prior to the town meeting.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Virginia Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race (including traits historically associated with race, which includes hair texture, hair type, and protective hairstyles such as braids, locks, and twists), color, ethnic or national origin, ancestry, religion (including any outward expression of religious faith, which includes adherence to religious dressing and grooming practices and carrying or displaying religious items or symbols), sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information (including testing and characteristics), marital status, military status (including status as a uniformed servicemember, a veteran, or dependent of a servicemember), or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors;
- Any unwanted physical touching or assaults or blocking or impeding movements; and
- The spreading or participation in dissemination of gossip or rumors of a sexual nature related to coworkers.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above-protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above-protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain about, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will

follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Election Worker Leave

Access Healthcare LLC will provide employees who are election workers with unpaid leave to:

- Serve at a polling place on Election Day; or
- Serve at a meeting of the electoral board following the election to determine the results of such election.

Election worker means a member of a local electoral board, a deputy general registrar, or an officer of election.

You must provide reasonable notice of your need to take leave.

If you serve four or more hours (including travel time), you will not be required to start any work shift that begins on or after 5 p.m. on the day of your service or begins before 3 a.m. on the day following your service.

The Company will not retaliate or discriminate against employees who request or take leave in accordance with this policy.

Civil Air Patrol Leave

Access Healthcare LLC will provide unpaid leave to employees who are members of the Civil Air Patrol to engage in training for emergency missions with the Civil Air Patrol or to respond to an emergency mission as a Civil Air Patrol volunteer.

Duration of Leave

Leave used for training is limited to 10 workdays per federal fiscal year. Leave used to respond to an emergency mission is limited to 30 workdays per federal fiscal year.

You will not be required to exhaust any other leave to which you are entitled prior to taking Civil Air Patrol leave.

Notice

Provide as much notice as possible of your intent to take leave. You must provide:

- Certification that you have been authorized by the U.S. Air Force, the governor, or a department, division, agency, or political subdivision of the state to respond to or train for an emergency mission; and
- Verification from the Civil Air Patrol of the emergency need of your volunteer service.

Retaliation

The Company will not retaliate or discriminate against employees who request or take leave in accordance with this policy.

Bone Marrow and Organ Donation Leave

Access Healthcare LLC will provide eligible employees with:

- Up to 30 business days of unpaid leave in a 12-month period to serve as a bone marrow donor.
- Up to 60 business days of unpaid leave in a 12-month period to serve as an organ donor.

Eligibility

To be eligible for donation leave, as of the date the requested leave begins, you must have:

- Been employed by the Company for at least 12 months; and
- Worked at least 1,250 hours for the Company during the previous 12 months.

Leave Request

To request donation leave, you must provide the Company with written verification from a physician that you are an eligible bone marrow or organ donor and there is a medical necessity for the donation.

Pay

Donation leave is unpaid.

Interaction with Other Laws

Leave cannot be taken concurrently with leave under the federal Family and Medical Leave Act (FMLA).

Return to Work

Upon returning to work at the end of donation leave, you will be restored to your previous position or to an equivalent position with equivalent benefits, pay, and other terms and conditions of employment.

Maintenance of Health Benefits

If the Company provides you with health benefits under a group health plan, the Company will maintain and pay for your health coverage at the same level and under the same conditions as coverage would have been provided if you had not taken donation leave.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Court Attendance and Witness Leave

Access Healthcare LLC realizes that, on occasion, you may be summoned or subpoenaed to appear as a witness in a civil or criminal proceeding. In such cases, you will be provided unpaid leave to attend. Notify your Supervisor as soon as possible to make scheduling arrangements.

The Company reserves the right to require you to provide proof of the need for leave to the extent authorized by law.

This policy does not apply to employees seeking leave because they are a defendant in a criminal case.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Crime Victim Leave

Access Healthcare LLC will provide employees who are victims of a crime leave from work to attend any criminal proceedings. Criminal proceedings are proceedings at which the victim has the right or opportunity to appear involving a crime against the victim, including all of the following:

- The initial appearance of the person suspected of committing the criminal offense against the victim.
- Any proceeding in which the court considers the post-arrest release of the person accused of committing a criminal offense against the victim or the conditions of that release.
- Any proceeding in which a negotiated plea for the person accused of committing the criminal offense against the victim will be presented to the court.
- Any sentencing proceeding.
- Any proceeding in which post-conviction release from confinement is considered.
- Any probation revocation disposition proceeding or any proceeding in which the court is requested to terminate the probation of a person who is convicted of committing a criminal offense against the victim.
- Any proceeding in which the court is requested to modify the terms of probation or intensive probation of a person if the modification will substantially affect the person's contact with or safety of the victim or if the modification involves restitution or incarceration status.

You are eligible for leave under this policy if:

- You have suffered physical, psychological, or economic harm as a direct result of the commission of a felony or of assault and battery, stalking, sexual battery, attempted sexual battery, maiming or driving while intoxicated;
- You are a spouse or child of the victim;
- The victim is a minor and you are the victim's parent or legal guardian; or
- The victim is physically or mentally incapacitated or was a homicide victim and you are the victim's spouse, parent, sibling, or legal guardian.

You are not eligible for leave if you are the person who committed the crime or the relative or guardian of an individual who committed the crime.

Prior to taking leave, provide your Supervisor with a copy of the form provided to you by the applicable law enforcement agency and, if applicable, provide a copy of the notice of each scheduled criminal proceeding that is provided to you as victim.

The Company may limit the leave provided under this policy if the leave creates an undue hardship.

Leave under this policy is without pay; however, the wages of exempt employees will not be reduced for a partial week's absence. You may elect to use accrued paid vacation, personal leave, or sick leave.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Washington Policies

Hiring and Orientation Policies

Accommodations for Victims of Domestic Violence, Sexual Assault, Stalking, or Hate Crimes

Access Healthcare LLC will provide reasonable safety accommodation to employees who are victims of domestic violence, sexual assault, stalking, or a hate crime, provided the accommodation would not pose an undue hardship on Company business.

Reasonable safety accommodations may include, but are not limited to:

- Transfer or reassignment;
- Modified job schedule;
- Change in work telephone number, email address, or workstation;
- Installed locks;
- Implementing safety procedures; or
- Any other adjustment to a job structure, workplace facility, or work requirement in response to an actual or threatened act of domestic violence, sexual assault, stalking, or a hate crime.

If you require a safety accommodation, notify your Supervisor. You may be required to provide documentation verifying that you are a victim of domestic violence, sexual assault, stalking, or a hate crime. This requirement may be satisfied by providing the Company with documents such as a police report, court order, or written statement.

The Company will maintain the confidentiality of all information you provide under this policy, including the fact that you are a victim of domestic violence, sexual assault, stalking, or a hate crime; any requests for accommodations; and any written or oral statements, documentation, records, or corroborating evidence. Such information will be disclosed only if requested or consented to by you, ordered by a court or administrative agency, or otherwise required by applicable federal or state law.

After receiving your request for a safety accommodation, the Company will work with you to explore potential solutions. You are encouraged to suggest specific accommodations that you believe would be effective. However, the Company is not required to grant specific requests and may provide an alternative accommodation that can be made without imposing an undue hardship on the Company.

The Company will not discriminate or retaliate against employees who are victims of domestic violence, sexual assault, stalking, or hate crimes or who request accommodations in accordance with this policy.

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

{Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older); race (including traits historically associated or perceived to be associated with race, which include, but are not limited to, hair texture and

protective hairstyles such as afros, braids, locks, and twists); creed; color; national origin; citizenship; ancestry; religion; sex; sexual orientation (including transgender status, gender identity or expression); pregnancy (including childbirth, lactation, and related medical conditions); sensory, physical, or mental disability (including obesity); use of a service animal; genetic information (including testing and characteristics); veteran status; uniformed servicemember status; or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, applicants, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;
- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against applicants or employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Paid Family and Medical Leave Insurance

Washington's Paid Family and Medical Leave (PFML) program is a mandatory statewide insurance program that provides most employees in Washington with paid time off to give or receive care. Eligible employees are entitled to partial wage replacement benefits of up to 90% of their weekly pay, depending on their income. The program is administered by the Washington Employment Security Department (ESD) and is funded by premiums paid by both employees (through payroll deductions) and employers.

Eligibility

To be eligible for PFML, you must:

- Have worked at least 820 hours (or about 16 hours a week) in Washington during the qualifying period. The 820 hours are cumulative, regardless of the number of employers or jobs you have had during the year. All paid work in Washington over the course of the year counts toward the 820 hours, including part-time, seasonal, and temporary work.
- Experience a qualifying event.

If you are not eligible for PFML, you may still qualify for leave under the federal Family and Medical Leave Act (FMLA).

Qualifying Events

You may take PFML for the following reasons:

- **Family leave** to:
 - Bond with your newborn child, newly adopted child, or newly placed foster child (bonding leave);
 - Care for a family member with a serious health condition;
 - Prepare for a family member's pre- and post-deployment activities, as well as time for childcare issues related to the family member's deployment; or
 - Deal with the death of a newborn or newly adopted/fostered child (bereavement leave).
- **Medical leave** to care for your own serious health condition.

Usage

Eligible employees may generally take up to 12 weeks of PFML per year. If you have more than one qualifying event in the same year, you may be eligible to take up to 16 weeks of PFML. Combined leave cannot exceed 16 total weeks unless there is a serious, incapacitating health issue related to pregnancy, which adds two more weeks (18 weeks total).

Bonding leave must be taken during the first 12 months after the child's birth or placement.

Bereavement leave must be used within seven calendar days of the child's death.

During the first six weeks after the birth of a child, any PFML used based on incapacity due to pregnancy or for prenatal care will count as paid medical leave by default, unless you choose to use paid family leave during that period.

PFML may be used intermittently rather than all at once.

You will not be required to use other leave before using PFML.

PFML benefits include a seven-day unpaid waiting period, which begins on the first day of leave. No waiting period applies for leave related to childbirth, bonding with a new child, or military exigency. The waiting period does not delay your right to take leave; it only affects when state benefit payments begin.

Requesting Leave

If the need for leave is foreseeable, provide 30 days' written notice of your intent to take leave. Notice must contain at least the anticipated timing and duration of leave. If unforeseeable, provide written notice as soon as practical.

Failure to provide proper notice may result in the denial of leave for a period of time equal to the number of days that notice was insufficient.

Questions and Applying for Benefits

If you have questions regarding this policy, contact Human Resources. If you are eligible for PFML benefits, you may obtain detailed information about the program and apply for benefits through the Washington ESD website at <https://paidleave.wa.gov/>.

Health Insurance

Your health insurance will continue while you are on leave. If you contribute to the cost of your health insurance, you must continue to pay your portion of the premium cost during your leave.

Interaction with Other Laws

PFML is in addition to any leave for sickness or temporary disability because of pregnancy or childbirth.

The use of FMLA does not reduce your allowed PFML benefit, so it is possible to use both types of leave. PFML and FMLA will run concurrently unless otherwise required by law.

Job Restoration

With limited exception, if you have worked for the Company for at least 180 calendar days prior to taking leave, you will be restored to your previous position or a position with equivalent employment benefits, pay, and other terms and conditions of employment.

The Company may deny restoration only to certain highly compensated employees when necessary to prevent substantial economic injury, consistent with state law.

Retaliation

The Company will not retaliate against employees who request or take leave under the Washington PFML program.

Family Care Leave

Consistent with the Washington Family Care Act, you may use any paid leave offered by Access Healthcare LLC, consistent with Company policies, to care for:

- Your child with a health condition that requires supervision or treatment.
- Your spouse, domestic partner, parent, parent-in-law, or grandparent who has a serious or emergency health condition.

For purposes of this policy, **child** means your biological, adopted, foster, or step child, legal ward, or a person to whom you stand in loco parentis who is:

- Under 18 years of age; or
- 18 years of age or older and incapable of self-care because of a mental or physical disability.

Refer to the applicable leave policy for information on how leave will be administered.

The Company will not retaliate or discriminate against employees who request or take leave in accordance with this policy.

Pregnancy Disability Leave

Access Healthcare LLC will provide employees who are sick or temporarily disabled due to pregnancy or childbirth with a leave of absence for the time they are sick or temporarily disabled. The Company will treat employees on pregnancy-related leave the same as other employees on leave for sickness or other temporary disabilities.

Upon return from pregnancy disability leave, employees will be returned to their previous position or an equivalent position.

The Company will not retaliate against employees who request or take pregnancy disability leave in accordance with this policy.

Leave for Victims of Domestic Violence, Sexual Assault, Stalking, or Hate Crimes

If you are a victim, or a family member of a victim, of domestic violence, sexual assault, stalking, or a hate crime, Access Healthcare LLC will provide you with reasonable unpaid leave from work to take care of legal or law enforcement needs or to get medical treatment, social services assistance, or mental health counseling.

Family member means a child, spouse, parent, parent-in-law, grandparent, or person you are dating. The Company may request verification of your family relationship.

When possible, you must provide reasonable advance notice of the need for leave. If advance notice cannot be given because of an emergency or unforeseen circumstances due to domestic violence, sexual assault, stalking, or a hate crime, you or someone on your behalf must provide notice no later than the end of the first day you take leave.

You may be required to provide verification that you or your family member is a victim of domestic violence, sexual assault, stalking, or a hate crime and that the leave is being taken for purposes described above. Verification must be provided in a timely manner and will only be used to establish that the leave is legally protected. You may satisfy the verification requirements by providing the Company with documents such as a police report, court order, or written statement.

With exception, information you provide will be kept confidential. This includes:

- The fact that you or your family member is a victim of domestic violence, sexual assault, stalking, or a hate crime.
- That you have requested or obtained leave.
- Any written or oral statement, documentation, record, or corroborating evidence you provide.

Information you provide will only be disclosed under the following circumstances:

- When requested or consented to by you.

- When ordered by a court or administrative agency.
- When otherwise required by applicable federal or state law.

Leave under this policy is unpaid; however, you may choose to use any accrued paid leave. Leave may be taken intermittently, on a reduced work schedule, or in a single block of time, as the circumstances warrant. During the leave, the Company will maintain any health insurance coverage being provided in the same manner as if you had not taken leave.

The leave must be reasonable in duration, which will be determined by management and you based upon the circumstances.

Upon return from leave, you will be reinstated to the position held prior to taking leave or to an equivalent position with equivalent benefits, pay, and other terms and conditions of employment, subject to certain exceptions as provided under Washington law.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Military Family Leave

In accordance with the Washington Military Family Leave Act (MFLA), Access Healthcare LLC will provide employees who are the spouse of a military member up to 15 days of leave from work for each deployment when the military spouse is deployed or called up to active duty. The leave may be used prior to the deployment, or during the period when the military spouse is on leave during the deployment.

As used in this policy:

- **Spouse** includes same-sex spouses and state-registered domestic partners.
- **Military member** means a member of the U.S. Armed Forces, National Guard, or reserves.

To be eligible for such leave, you must work 20 or more hours per week.

To take military family leave, you must provide notice of intention to take leave within five business days of receiving official notice of an impending call or order to active duty or of a leave from deployment.

The leave provided under this policy is unpaid; however, you may substitute any available paid leave. You may split the 15-day leave between different periods of time (pre-deployment or while the military member is on leave during deployment). The total number of days of leave, however, cannot exceed 15 days per deployment.

The Company may count FMLA-qualified leave related to a deployment as state MFLA leave if the leave is taken before the deployment, or during any period when the military spouse is on leave from deployment.

You will be allowed to continue available group health benefits at your own expense.

Upon return from leave, you will be restored to your prior position.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Paid Sick Leave (Accrual Method)

Access Healthcare LLC provides paid sick leave to eligible employees in accordance with Washington's Paid Sick Leave Law.

Eligibility

All nonexempt employees are eligible for sick leave.

Reasons for Leave

Sick leave may be taken for the following reasons:

- To care for your own or a family member's mental or physical illness, injury, or health condition, including the need for medical diagnosis, care, or treatment, and preventive medical care.
- When your place of business or your child's school or place of care has been closed by order of a public official for any health-related reason or after the declaration of an emergency by a local or state government or agency, or by the federal government.
- For absences that qualify for leave under the state's Domestic Violence Leave Act (DVLA).
- To prepare for, or participate in, any judicial or administrative immigration proceeding that involves you or your family member.

Family member means:

- Your child, grandchild, grandparent, parent, sibling, or spouse (as defined under applicable law); and
- Any individual who regularly resides in your home where the relationship creates an expectation that you care for the person and that individual depends upon you for care.

Accrual and Usage

Eligible employees accrue one hour of sick leave for every 40 hours worked. New employees begin accruing sick leave on their first day of employment. For purposes of this policy, the leave year is calendar year. You will not accrue sick leave during vacation, paid time off (PTO), or while using sick leave.

You may begin using sick leave on your 90th day of employment, and you may carry over up to 40 hours of accrued, unused sick leave to the following leave year.

Compensation

Sick leave will be paid at your normal hourly compensation or the applicable minimum wage, whichever is greater. The Company will provide you regular notification of your available sick leave balance.

Notice

If the need for leave is foreseeable, you must provide notice at least 10 days, or as early as practical, before the first day sick leave is used. If unforeseeable, provide notice as soon as practical before the required start of your shift. If known, notice should include the expected length of the absence.

Documentation

For absences exceeding three days, you may be required to provide verification that your use of sick leave is for an authorized purpose. Verification must be provided within 10 days after the first day of absence. Verification may not be required if it results in an unreasonable burden or expense to you and may not exceed privacy or verification requirements otherwise established by law.

For purposes of leave taken to prepare for or participate in an immigration proceeding, verification may include:

- Documentation from any person that you or a family member received assistance from to address a qualifying immigration proceeding, such as an advocate for immigrants or refugees, an attorney, a member of the clergy, or other professional; or

- A written statement by you affirming that you or your family member is involved in a qualifying immigration proceeding and that the leave taken was for an authorized purpose.

The documentation or written statement must not disclose any personally identifiable information about a person's immigration status or underlying immigration protection.

Interaction with Other Leave

You may be required to use available sick leave during family and medical leave, disability leave, or other statutorily authorized leave that would otherwise be unpaid.

Payment upon Termination

You will not be paid for any unused sick leave when your employment ends.

Reinstatement of Sick Leave upon Rehire

The Company will reinstate previously accrued, unused sick leave if you separate and are rehired within 12 months.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Tacoma Paid Sick Leave

Access Healthcare LLC provides paid sick leave to eligible employees in accordance with the Tacoma Paid Sick Leave Ordinance.

Eligibility

All employees who work at least 80 hours per year within the geographic boundaries of Tacoma are eligible for paid sick leave.

Reasons for Leave

Sick leave may be used for the following reasons:

- An absence resulting from your own mental or physical illness, injury, or health condition; to accommodate medical diagnosis, care, or treatment of your own mental or physical illness, injury, or health condition; or for your own preventive medical care.
- To care for a family member with a mental or physical illness, injury, or health condition; to care for a family member who needs medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition; or to care for a family member who needs preventive medical care.
- Closure of your place of business by order of a public official for any health-related reason (as defined under applicable law).
- To care for a child whose school or place of care has been closed by order of a public official.
- To seek legal or law enforcement assistance or remedies to ensure your own or your family member's health and safety, including, but not limited to, preparing for or participating in any civil or criminal legal proceeding related to or derived from domestic violence, sexual assault, or stalking.
- To obtain, or assist a family member in obtaining, services from a domestic violence shelter, rape crisis center, or other social services program for relief from domestic violence, sexual assault, or stalking.

- To participate in safety planning, temporarily or permanently relocate, or take other actions to increase your safety, or the safety of your family member, from future domestic violence, sexual assault, or stalking.
- Bereavement leave for the death of a family member.
- Any reason permitted under Washington's Paid Sick Leave Law (see the Washington Paid Sick Leave policy).

Family member means:

- Your child, grandchild, grandparent, parent, sibling, or spouse (as defined under applicable law); and
- Any person who would be considered a family member under Washington's Paid Sick Leave Law (see the Washington Paid Sick Leave policy).

Accrual and Usage

Eligible employees accrue one hour of sick leave for every 40 hours worked in Tacoma. New employees begin accruing leave on their first day of employment. If you are classified as exempt, you are presumed to work 40 hours per week, unless you are normally scheduled to work fewer than 40 hours, in which case sick leave accrues based on your normal schedule. For purposes of this policy, the leave year is calendar year.

You may begin using paid sick leave on the 90th calendar day after you begin employment. You may carry over up to 40 hours of unused sick leave to the following leave year.

Compensation

You will be compensated for sick leave at your regular hourly rate of pay.

Notice

If the need for leave is foreseeable, you must make a good faith effort to provide advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Documentation

For absences exceeding three consecutive days, you may be required to provide verification that your use of sick leave is for an authorized purpose. Verification must be provided within 10 days after the first day of absence. Verification may not be required if it results in an unreasonable burden or expense to you and may not exceed privacy or verification requirements otherwise established by law.

Interaction with Other Leave

Sick leave will run concurrently with other types of leave when permitted under applicable law.

Payment upon Termination

You will not be paid for any accrued, unused sick leave when your employment ends.

Reinstatement of Leave upon Rehire

The Company will reinstate previously granted unused sick leave if you separate and are rehired within 12 months. If the period of time you have been separated extends into the next leave year, the Company will not restore more than 40 hours of unused sick leave.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Seattle Paid Sick and Safe Leave

Access Healthcare LLC provides paid sick and safe leave to eligible employees in accordance with the Seattle Paid Sick and Safe Time (PSST) Ordinance.

Eligibility

All employees who work within the geographic boundaries of Seattle are eligible for sick and safe leave.

Reasons for Leave

Sick leave may be taken for your own or a family member's mental or physical illness, injury, or health condition; need for medical diagnosis, care, or treatment; or need for preventive medical care.

Safe leave may be used for the following reasons:

- Your need to care for a family member whose school or place of care has been closed.
- Closure of your place of business by order of a public official to limit exposure to an infectious agent, biological toxin, or hazardous material.
- For any of the following reasons related to domestic violence, sexual assault, or stalking:
 - To seek legal or law enforcement assistance or remedies to ensure your health and safety or the health and safety of your family or household members, including, but not limited to, preparing for, or participating in, any civil or criminal legal proceeding related to or derived from domestic violence, sexual assault, or stalking;
 - To seek treatment by a healthcare provider for physical or mental injuries caused by domestic violence, sexual assault, or stalking, or to attend to healthcare treatment for a victim who is a family or household member;
 - To obtain, or assist a family or household member in obtaining, services from a domestic violence shelter, rape crisis center, or other social services program for relief from domestic violence, sexual assault, or stalking;
 - To obtain, or assist a family or household member in obtaining, mental health counseling related to an incident of domestic violence, sexual assault, or stalking, in which you or a family or household member was a victim of domestic violence, sexual assault, or stalking; or
 - To participate in safety planning, temporarily or permanently relocate, or take other actions to increase your safety or the safety of your family or household members from future domestic violence, sexual assault, or stalking.

Sick and/or safe leave may also be used for any reason permitted under Washington's Paid Sick Leave Law (see the Washington Paid Sick Leave policy).

The terms **family member** and **household member** have the same meanings as defined under the Seattle PSST Ordinance and the Washington Paid Sick Leave Law (see the Washington Paid Sick Leave policy).

Accrual and Usage

The Company is a Tier Two employer, as defined by the PSST Ordinance. Eligible employees accrue one hour of sick and safe leave for every 40 hours worked in Seattle. New employees begin accruing leave on their first day of employment. If you are classified as exempt, you will accrue leave based on your normal work week up to 40 hours. For purposes of this policy, the leave year is calendar year.

You may begin using sick and safe leave on your 90th calendar day of employment. You may carry over up to 56 hours of unused, accrued leave to the following leave year.

Compensation

If you are eligible for overtime, you will be paid the greater of the applicable minimum wage or your normal hourly rate. If you are exempt, you will be paid your normal hourly compensation.

Notice

If the need for leave is foreseeable, you must make a good faith effort to provide 10 days' advance notice. If unforeseeable, provide notice as soon as practical. If known, notice should include the expected length of the absence.

Documentation

If you use sick and safe leave for more than three consecutive days, you may be required to provide reasonable documentation to verify that leave is being used for a covered purpose.

Reasonable documentation includes:

- For verification of the closure of a school or place of care, you may provide notice of the closure in whatever format you received it.
- For verification of leave taken for domestic violence, sexual assault, or stalking, you may provide your own written statement; a police report; applicable evidence from the court or the prosecuting attorney; or documentation from an advocate, attorney, member of the clergy, or medical or other professional.

If you anticipate that providing reasonable documentation will result in an unreasonable burden or expense to you, you may provide an oral or written explanation addressing both:

- How your use of paid sick and safe leave was for an authorized purpose; and
- How the verification requirement creates an unreasonable burden or expense on you.

Within 10 calendar days of providing your explanation, the Company will make a reasonable effort to identify alternative ways for you to meet the verification requirement in a manner that does not result in an unreasonable burden or expense on you. A reasonable effort to identify and provide alternatives could include, but is not limited to:

- Accepting your oral or written explanation;
- Accepting documentation from individuals other than your doctor, such as service providers, social workers, case managers, or legal advocates, stating that (to their knowledge) your use of paid sick leave is for a covered purpose; or
- Paying some of your out-of-pocket expenses associated with obtaining medical verification.

Interaction with Other Leave

Sick and safe leave will run concurrently with other types of leave when permitted under applicable law.

Payment upon Termination

You will not be paid for any unused sick and safe leave when your employment ends.

Reinstatement of Leave upon Rehire

The Company will reinstate previously accrued, unused sick and safe leave if you separate and are rehired within 12 months.

Retaliation

The Company will not retaliate against employees who request or take sick and safe leave in accordance with this policy.

West Virginia Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race, color, national origin, ancestry, religion, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;

- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors;
- Any unwanted physical touching or assaults or blocking or impeding movements; and
- The spreading or participation in dissemination of gossip or rumors of a sexual nature related to coworkers.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion toward an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility toward an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance toward any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Leave of Absence for Elected Officials

Access Healthcare LLC will provide an unpaid leave of absence to employees who have been elected or appointed to a part-time public office. If eligible, you will be granted leave for the days, or portion of any day, during which you are performing the duties of your public office.

Provide as much notice as possible of your need to take a leave of absence.

The Company will not retaliate or discriminate against employees who request or take a leave of absence in accordance with this policy.

Civil Air Patrol Leave

Access Healthcare LLC will provide eligible employees with unpaid Civil Air Patrol leave to:

- Attend training for an emergency mission of the West Virginia Wing of the Civil Air Patrol; and
- Respond to an emergency mission of the West Virginia Wing of the Civil Air Patrol.

Eligibility

To be eligible for Civil Air Patrol leave, you must be:

- Employed by the Company for at least 90 days before beginning leave; and
- A volunteer member of the West Virginia Wing of the Civil Air Patrol.

Use of Leave

Leave used for training is limited to 10 days per calendar year. Leave used for responding to an emergency mission is limited to 30 days per calendar year.

You will not be required to exhaust all available leave before using Civil Air Patrol leave. Leave under this policy does not run concurrently with any other leave provided by state or federal law.

Notice

You must provide:

- At least 14 days' notice of the intended beginning and end leave dates together with an estimated time needed to complete training; and
- As much notice as possible of the intended beginning and end leave dates together with an estimated time needed to complete an emergency mission.

You must report to the Company necessary changes in the time required to complete the training or mission.

Verification

The Company may require verification of your eligibility for the Civil Air Patrol leave requested or taken. Failure to provide verification may result in the denial of leave.

Restoration

Upon return from leave, you will be restored to your previous position or a position with equivalent seniority status, benefits, pay, and other terms and conditions of employment.

Retaliation

The Company will not retaliate or discriminate against employees who request or take leave in accordance with this policy.

Emergency Services Leave

If you are a volunteer firefighter or an emergency medical service attendant, Access Healthcare LLC will not discharge, discriminate, or take any other disciplinary action against you for being absent from work because you responded to an emergency call prior to the time you were due to report to work. Work time missed for responding to an emergency will be unpaid.

The Company may require you to provide a statement from the chief of the volunteer fire department or the supervisor or other appropriate person in charge of the emergency medical service entity stating that you responded to an emergency call, providing the date and times of the call.

Voting Leave

If your work schedule prevents you from voting on Election Day, Access Healthcare LLC will allow you a reasonable time off to vote. The time when you can go to vote will be at the discretion of your Supervisor, consistent with applicable legal requirements.

Wisconsin Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race, color, creed, ancestry, national origin, sex, sexual orientation (including transgender status, gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), AIDS/HIV status, handicap or disability, arrest/conviction record, marital status, military service, use/nonuse of lawful products, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;

- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion towards an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance towards any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Election Official Leave

Access Healthcare LLC will provide employees who have been appointed as election officials with unpaid leave to fulfill their duties on Election Day. Leave is for the entire 24 hours of each Election Day.

You must provide at least seven days' notice of your need to take leave. The Company may request verification of your appointment as an election official from the municipal clerk.

The Company will not retaliate or discriminate against employees who request or take leave in accordance with this policy.

Civil Air Patrol Leave

Access Healthcare LLC will provide eligible employees with unpaid Civil Air Patrol leave to participate in an "emergency service operation" of the Civil Air Patrol, as defined under applicable law.

Eligibility

To be eligible for Civil Air Patrol leave, you must:

- Be a member of the Civil Air Patrol; and
- Prior to the emergency service operation, notify the Company in writing that you are a member of the Civil Air Patrol.

Use of Leave

You may take no more than five consecutive workdays of leave and no more than 15 total workdays of leave in any year.

Leave must not unduly disrupt the Company's operations.

Notice

If the emergency service operation begins before you are required to report to work, the Company may require you to provide a written statement from your commander, or the designated representative of your commander, certifying that you were participating in an emergency service operation at the time of your absence from work.

If the emergency service operation begins after you have reported to work, you must also secure permission from the Company to leave work before responding to the emergency service operation.

Restoration

Upon return from leave, you will be restored to your previous position or a position with equivalent seniority status, benefits, pay, and other terms and conditions of employment.

Retaliation

The Company will not retaliate or discriminate against employees who request or take leave in accordance with this policy.

Witness Leave

Access Healthcare LLC will provide leave to employees who are subpoenaed to testify in court.

You must provide notice of your need for leave under this policy on the first business day after receiving the subpoena.

The Company reserves the right to require employees to provide proof of the need for leave to the extent authorized by law.

Leave under this policy is generally unpaid; however, leave will be paid if you are subpoenaed to testify in an action or proceeding resulting from:

- A crime against the Company; or
- Your involvement in a work-related incident.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Bone Marrow and Organ Donation Leave

Access Healthcare LLC will provide eligible employees up to six weeks of unpaid, job-protected leave in a 12-month period for the purpose of serving as an organ or bone marrow donor. Leave may only be taken for the period necessary to undergo the donation procedure and to recover from the procedure.

You are eligible for this leave if you have worked for the Company for 52 consecutive weeks and have worked at least 1,000 hours during those weeks.

If you intend to take leave under this policy, you must:

- Make a reasonable effort to schedule the bone marrow or organ donation so as to not unduly disrupt Company operations, subject to the approval of your health care provider.
- Provide the Company advance notice of the need for leave in a reasonable and practicable manner.

Notice should be provided to your Supervisor.

As a condition of approving leave, the Company may require medical certification stating all of the following:

- That the donee has a serious health condition that necessitates a bone marrow or organ transplant.
- That you are eligible and have agreed to be a bone marrow or organ donor for the donee.
- The expected amount of time necessary for you to recover from the donation procedure.

The Company will maintain your group health insurance during the approved leave if you had coverage under the plan immediately prior to leave.

Upon return from leave, you will be returned to your former position, or if that position is not vacant, you will be returned to a position with equivalent pay, benefits, working shift, hours, and other terms and conditions of employment. If you wish to return to work prior to the end of the scheduled leave, you will be returned to work within a reasonable time.

When taking donor leave, you are not entitled to any right, employment benefit, or position to which you would not otherwise have been entitled had leave not been taken. You are also not entitled to the accrual of any seniority or employment benefit during a donor leave.

Upon mutual agreement, you may be allowed to work in an alternative employment position while recovering from your procedure. Any period of time that you work in alternative employment does not reduce your leave entitlement.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Wisconsin Family and Medical Leave (WFMLA)

Access Healthcare LLC will provide eligible employees with leave in accordance with the Wisconsin Family and Medical Leave Act (WFMLA).

Eligibility

To be eligible for WFMLA leave, you must:

- Have been employed with the Company for more than 52 consecutive weeks; and
- Have worked for the Company at least 1,000 hours (including paid time off) during the preceding 52 weeks.

Reasons for Leave

WFMLA leave may be taken for the following reasons:

- The birth or adoption of a child.
- To care for a covered family member with a serious health condition.
- To take care of your own serious health condition.

Covered family member includes your spouse, domestic partner, parents (including parents of a spouse or domestic partner), or child.

Child means a biological, adopted, or foster child, stepchild, or a legal ward who:

- Is under 18 years of age; or
- Is 18 years of age or older and incapable of self-care because of a serious health condition.

A **serious health condition** is a disabling physical or mental illness, injury, impairment, or condition involving inpatient care or outpatient care that requires continuing treatment or supervision by a health care provider.

Leave Usage

In a 12-month period, you may take up to:

- Two weeks of leave for your own serious health condition.
- Two weeks of leave to care for a covered family member with a serious health condition.
- Six weeks of leave for the birth or adoption of a child.

Eligible employees may take no more than a total of eight weeks of family leave for any combination of reasons stated above during a 12-month period. The 12-month period begins on January 1.

WFMLA leave will run concurrently with the federal Family and Medical Leave Act and any other federal, state, or local leave where permitted under the applicable law.

WFMLA leave may be taken intermittently for the birth or adoption of a child as long as the leave begins within 16 weeks of the qualifying event.

During WFMLA leave, you may elect to substitute accrued paid or unpaid leave of any other type provided by the Company.

Notice Requirement

You must provide reasonable advance notice of the need for leave. Leave should be scheduled so that it does not unduly disrupt Company operations.

Medical Certification

The Company may require a written statement from your health care provider or the health care provider of your child, parent, or spouse with a serious health condition stating the reason for the leave and the probable duration of the leave.

Return to Work

If you take leave for your own serious health condition, you will be required to obtain a release from your health care provider stating that you are able to return to work.

Reinstatement

Upon returning to work at the end of leave, you will be reinstated to your former position or a position with equivalent pay, benefits, and terms and conditions of employment. You will not lose any benefits that accrued before leave was taken.

Benefits

If the Company provides you with health benefits under a group health plan, the Company will maintain and pay for your health coverage at the same level and under the same conditions as coverage would have been provided if you had not taken WFMLA leave.

Failure to Return to Work

If you fail to return to work or fail to make a request for an extension of leave prior to the expiration of the leave, you may be considered to have voluntarily terminated your employment.

Alternative Employment

While on leave, you may not work or be gainfully employed either for yourself or others unless express, written permission to perform such outside work has been granted by the Company. If you are on a leave of absence and are found to be working elsewhere without consent, you will be subject to discipline up to and including termination.

Abuse of Leave

If you are found to have provided a false reason for a leave, you will be subject to disciplinary action up to and including termination.

Retaliation

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Wyoming Policies

Hiring and Orientation Policies

EEO Statement and Nonharassment Policy

Equal Opportunity Statement

Access Healthcare LLC is committed to the principles of equal employment. We are committed to complying with all federal, state, and local laws providing equal employment opportunities, and all other employment laws and regulations. It is our intent to maintain a work environment that is free of harassment, discrimination, or retaliation based on the following protected classes: age (40 and older), race, color, creed, national origin, ancestry, religion, sex, sexual orientation (including transgender status and gender identity or expression), pregnancy (including childbirth, lactation, and related medical conditions), physical or mental disability, genetic information (including testing and characteristics), veteran status, uniformed servicemember status, or any other status protected by federal, state, or local laws. The Company is dedicated to the fulfillment of this policy in regard to all aspects of employment, including, but not limited to, recruiting, hiring, placement, transfer, training, promotion, rates of pay, and other compensation, termination, and all other terms, conditions, and privileges of employment.

The Company will conduct a prompt and thorough investigation of all allegations of discrimination, harassment, or retaliation, or any violation of the Equal Employment Opportunity Policy in a confidential manner. The Company will take appropriate corrective action, if and where warranted. The Company prohibits retaliation against employees who provide information about, complain about, or assist in the investigation of any complaint of discrimination or violation of the Equal Employment Opportunity Policy.

We are all responsible for upholding this policy. You may discuss questions regarding equal employment opportunity with your Supervisor or any other designated member of management.

Policy Against Workplace Harassment

Access Healthcare LLC has a strict policy against all types of workplace harassment, including sexual harassment and other forms of workplace harassment, based upon an individual's membership in a protected class. All forms of harassment of, or by, employees, vendors, visitors, customers, and clients are strictly prohibited and will not be tolerated.

Sexual Harassment

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment; (2) submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

While it is not possible to identify every act that constitutes or may constitute sexual harassment, the following are some examples of sexual harassment:

- Unwelcome requests for sexual favors;
- Lewd or derogatory comments or jokes;

- Comments regarding sexual behavior or another person's body;
- Sexual innuendo and other vocal activity such as catcalls or whistles;
- Obscene letters, notes, emails, invitations, photographs, cartoons, articles, or other written or pictorial materials of a sexual nature;
- Repeated requests for dates after being informed that interest is unwelcome;
- Retaliating against another for refusing a sexual advance or reporting an incident of possible sexual harassment to the Company or any government agency;
- Offering or providing favors or employment benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, etc., in exchange for sexual favors; and
- Any unwanted physical touching or assaults, or blocking or impeding movements.

Other Harassment

Other workplace harassment is verbal or physical conduct that insults or shows hostility or aversion towards an individual because of the individual's membership in a protected class.

Again, while it is not possible to list all the circumstances that may constitute other forms of workplace harassment, the following are some examples of conduct that may constitute workplace harassment:

- The use of disparaging or abusive words or phrases, slurs, negative stereotyping, or threatening, intimidating, or hostile acts that relate to the above protected categories;
- Written or graphic material that insults, stereotypes, or shows aversion or hostility towards an individual or group because of one of the above protected categories and that is placed on walls, bulletin boards, or elsewhere on our premises, in emails or voicemails, or otherwise circulated in the workplace; and
- A display of symbols, slogans, or items that are associated with hate or intolerance towards any select group.

Reporting Discrimination and Harassment

If you feel that you have witnessed or have been subjected to any form of discrimination or harassment, immediately notify

- Human Resources, hr@accesshealthcarestaffing.com;
- Danielle Doyle, CEO, info@accesshealthcarestaffing.com; or
- Diego Davis, CFO, dadavis@accesshealthcarestaffing.com.

The Company prohibits retaliation against employees who, based on a reasonable belief, provide information about, complain, or assist in the investigation of any complaint of harassment or discrimination.

We will promptly and thoroughly investigate any claim and take appropriate action where we find a claim has merit. To the extent possible, we will retain the confidentiality of those who report suspected or alleged violations of the harassment policy.

Discipline for violation of this policy may include, but is not limited to, reprimand, suspension, demotion, transfer, and discharge. If the Company determines that harassment or discrimination occurred, corrective action will be taken to effectively end the harassment. As necessary, the Company may monitor any incident of harassment or discrimination to assure the inappropriate behavior has stopped. In all cases, the Company will follow up as necessary to ensure that no individual is retaliated against for making a complaint or cooperating with an investigation.

Wage and Hour Policies

Overtime

If you are nonexempt, you may qualify for overtime pay. All overtime must be approved in advance, in writing, by your Supervisor.

At certain times Access Healthcare LLC may require you to work overtime. We will attempt to give as much notice as possible in this instance. However, advance notice may not always be possible. Failure to work overtime when requested or working unauthorized overtime may result in discipline, up to and including discharge.

Unless otherwise required or exempted by law, overtime pay of one and one-half times your regular rate of pay is paid for any hours worked in excess of 40 hours in a workweek. Holidays, vacation days, and sick leave days do not count as time worked for computing overtime.

Benefits

Crime Victim and Witness Leave

Access Healthcare LLC realizes that, on occasion, you may have an obligation to participate in criminal legal proceedings either as a witness or because you were the victim of a criminal act. The Company provides unpaid leave to attend those proceedings under circumstances described below.

If you are required to attend a criminal proceeding, notify your Supervisor as soon as possible to make scheduling arrangements.

The Company reserves the right to require employees to provide proof of the need to attend the criminal proceedings to the extent authorized by law.

Leave under this policy is unpaid.

The Company will not retaliate against employees who request or take leave in accordance with this policy.

Closing Statement

Thank you for reading our handbook. We hope it has provided you with an understanding of our mission, history, and structure as well as our current policies and guidelines. We look forward to working with you to create a successful Company and a safe, productive, and pleasant workplace.

Danielle Doyle, CEO

Access Healthcare LLC

Acknowledgment of Receipt and Review

By signing below, I acknowledge that I have received a copy of the Access Healthcare LLC Employee Handbook (handbook) and that I have read it, understand it, and agree to comply with it. I understand that the Company has the maximum discretion permitted by law to interpret, administer, change, modify, or delete the rules, regulations, procedures, and benefits contained in the handbook at any time with or without notice. No statement or representation by a supervisor, manager, or any other employee, whether oral or written, can supplement or modify this handbook. Changes can only be made if approved in writing by the CEO of the Company. I also understand that any delay or failure by the Company to enforce any rule, regulation, or procedure contained in the handbook does not constitute a waiver on behalf of the Company or affect the right of the Company to enforce such rule, regulation, or procedure in the future.

I understand that neither this handbook nor any other communication by a management representative or other, whether oral or written, is intended in any way to create a contract of employment. I further understand that, unless I have a written employment agreement signed by an authorized Company representative, I am employed "at-will" (to the extent permitted by law) and this handbook does not modify my "at-will" employment status.

If I am covered by a written employment agreement (signed by an authorized Company representative) or a collective bargaining agreement that conflicts with the terms of this handbook, I understand that the terms of the employment agreement or collective bargaining agreement will control.

This handbook is not intended to preclude or dissuade employees from engaging in legally protected activities under the National Labor Relations Act (NLRA). This handbook is not intended to violate any local, state, or federal law. No provision or policy applies or will be enforced if it conflicts with or is superseded by any requirement or prohibition contained in federal, state, or local law, or regulation. Furthermore, nothing in this handbook prohibits an employee from reporting concerns to, filing a charge or complaint with, making lawful disclosures to, providing documents or other information to, or participating in an investigation or hearing conducted by the Equal Employment Opportunity Commission (EEOC), National Labor Relations Board (NLRB), Securities and Exchange Commission (SEC), or any other federal, state, or local agency charged with the enforcement of any laws.

This handbook supersedes any previous handbook or policy statements, whether written or oral, issued by Access Healthcare LLC.

If I have any questions about the content or interpretation of this handbook, I will contact Human Resources.

Additionally, by signing, I acknowledge that I have received a copy of the current Colorado Overtime and Minimum Pay Standards Order (COMPS Order) or COMPS Order poster published by the Colorado Department of Labor and Employment.

Signature

Date

Print Name

APPENDIX

Your Employee Rights Under the Family and Medical Leave Act

What is FMLA leave?

The Family and Medical Leave Act (FMLA) is a federal law that provides eligible employees with **job-protected leave** for qualifying family and medical reasons. The U.S. Department of Labor's Wage and Hour Division (WHD) enforces the FMLA for most employees.

Eligible employees can take **up to 12 workweeks** of FMLA leave in a 12-month period for:

- The birth, adoption or foster placement of a child with you,
- Your serious mental or physical health condition that makes you unable to work,
- To care for your spouse, child or parent with a serious mental or physical health condition, and
- Certain qualifying reasons related to the foreign deployment of your spouse, child or parent who is a military servicemember.

An eligible employee who is the spouse, child, parent or next of kin of a covered servicemember with a serious injury or illness **may take up to 26 workweeks** of FMLA leave in a single 12-month period to care for the servicemember.

You have the right to use FMLA leave in **one block of time**. When it is medically necessary or otherwise permitted, you may take FMLA leave **intermittently in separate blocks of time, or on a reduced schedule** by working less hours each day or week. Read Fact Sheet #28M(c) for more information.

FMLA leave is **not paid leave**, but you may choose, or be required by your employer, to use any employer-provided paid leave if your employer's paid leave policy covers the reason for which you need FMLA leave.

Am I eligible to take FMLA leave?

You are an **eligible employee** if **all** of the following apply:

- You work for a covered employer,
- You have worked for your employer at least 12 months,
- You have at least 1,250 hours of service for your employer during the 12 months before your leave, and
- Your employer has at least 50 employees within 75 miles of your work location.

Airline flight crew employees have different "hours of service" requirements.

You work for a **covered employer** if **one** of the following applies:

- You work for a private employer that had at least 50 employees during at least 20 workweeks in the current or previous calendar year,
- You work for an elementary or public or private secondary school, or
- You work for a public agency, such as a local, state or federal government agency. Most federal employees are covered by Title II of the FMLA, administered by the Office of Personnel Management.

How do I request FMLA leave?

Generally, to request FMLA leave you **must**:

- Follow your employer's normal policies for requesting leave,
- Give notice at least 30 days before your need for FMLA leave, or
- If advance notice is not possible, give notice as soon as possible.

You **do not have to share a medical diagnosis** but must provide enough information to your employer so they can determine whether the leave qualifies for FMLA protection. You **must also inform your employer if FMLA leave was previously taken** or approved for the same reason when requesting additional leave.

Your **employer may request certification** from a health care provider to verify medical leave and may request certification of a qualifying exigency.

The FMLA does not affect any federal or state law prohibiting discrimination or supersede any state or local law or collective bargaining agreement that provides greater family or medical leave rights.

State employees may be subject to certain limitations in pursuit of direct lawsuits regarding leave for their own serious health conditions. Most federal and certain congressional employees are also covered by the law but are subject to the jurisdiction of the U.S. Office of Personnel Management or Congress.

What does my employer need to do?

If you are eligible for FMLA leave, your **employer must**:

- Allow you to take job-protected time off work for a qualifying reason,
- Continue your group health plan coverage while you are on leave on the same basis as if you had not taken leave, and
- Allow you to return to the same job, or a virtually identical job with the same pay, benefits and other working conditions, including shift and location, at the end of your leave.

Your **employer cannot interfere with your FMLA rights** or threaten or punish you for exercising your rights under the law. For example, your employer cannot retaliate against you for requesting FMLA leave or cooperating with a WHD investigation.

After becoming aware that your need for leave is for a reason that may qualify under the FMLA, your **employer must confirm whether you are eligible** or not eligible for FMLA leave. If your employer determines that you are eligible, your **employer must notify you in writing**:

- About your FMLA rights and responsibilities, and
- How much of your requested leave, if any, will be FMLA-protected leave.

Where can I find more information?

Call **1-866-487-9243** or visit **dol.gov/fmla** to learn more.

If you believe your rights under the FMLA have been violated, you may file a complaint with WHD or file a private lawsuit against your employer in court. **Scan the QR code to learn about our WHD complaint process.**



WAGE AND HOUR DIVISION
UNITED STATES DEPARTMENT OF LABOR

SCAN ME



SURVIVORS OF VIOLENCE AND FAMILY MEMBERS OF VICTIMS RIGHT TO LEAVE AND ACCOMMODATIONS

NOTICE



Civil Rights
Department
STATE OF CALIFORNIA

YOUR RIGHT TO REASONABLE ACCOMMODATION FOR YOUR SAFETY

- If you or your family member is a victim of violence, you have the right to ask for a reasonable accommodation to make sure you are safe at work. Your employer must work with you to see what changes can be made.
- Your employer can ask you for a statement certifying that your request is related to being a victim or the family member of a victim.

YOUR RIGHT TO BE FREE FROM RETALIATION AND DISCRIMINATION

Your employer cannot discipline you, treat you differently, or fire you because:

- You are a survivor or the family member of a victim or survivor of domestic violence, sexual assault, stalking, violent threats, or violence causing injury.
- You asked for time off work to recover from or get help related to the violence.
- You asked for accommodations to make sure you are safe at work.

YOU MAY ALSO HAVE PROTECTIONS UNDER OTHER LAWS:

- **Wage Replacement:** You may be eligible for wage replacement if you are unable to work because of your health or because you need to care for a family member with a serious health condition. **State Disability Insurance (SDI)** provides short-term wage replacement when you are temporarily disabled from working. **Paid Family Leave (PFL)** provides short-term wage replacement so you can care for a seriously ill family member, among other reasons. Learn more or file a claim for wage replacement by contacting the Employment Development Department (EDD) online (<https://edd.ca.gov/>) or by phone at 800-480-3287 (for SDI) or 877-238-4373 (for PFL).

- **Family and medical leave:** Under the California Family Rights Act, you may have the right to take time off work for your own or a family member's serious health condition or because of the birth, adoption, or foster care placement of a child. Learn more about family and medical leave by visiting bit.ly/CRD-leave. You can file a complaint with CRD if you believe your rights have been violated.
- **Bereavement leave:** Bereavement leave allows eligible employees to take up to five days off work within three months of the family member's death. Leave does not need to be taken all at once. Learn more about bereavement leave protections by visiting bit.ly/CRD-Bereavement. You can file a complaint with CRD if you believe your rights have been violated.
- **Leave to attend court for certain crimes:** If you are a victim of certain crimes or the family member of a victim of certain crimes, you have the right to take time off work to attend related court proceedings under Labor Code sections 230.2 and 230.5. You can learn more information or file a complaint with the Labor Commissioner's Office within the Department of Industrial Relations by visiting bit.ly/DIR-Retaliation.

TO FILE A COMPLAINT

Contact the Civil Rights Department if you have questions about your rights or to file a complaint:

Civil Rights Department

Online at <http://ccrs.cacivilrights.ca.gov/s/>

By mail at 651 Bannon Street, Suite 200,
Sacramento, CA 95811

By calling 800-884-1684 (voice), 800-700-2320 (TTY), or California's Relay Service at 711

For more information about your right to leave and accommodations as a victim or the family member of a victim, visit bit.ly/CRD-Survivors-of-Violence-FAQ



COLORADO
Department of
Labor and Employment

COLORADO WAGE & HOUR RIGHTS & RESPONSIBILITIES: The COMPS Order (Colorado Overtime & Minimum Pay Standards) Poster & Notice

Effective 1/1/2026
Use new version released by each December

Colorado Minimum Wage: \$15.16 per hour in 2026, updated yearly (COMPS Rule 3)

- Must pay at least minimum wage for all time worked, whether by hour, salary, commission, piece rate, etc.
- Use the highest minimum wage applicable: [Colorado.abol.law.gov](https://colorado.abol.law.gov) lists all local minimum wages
- 15% lower is allowed for unemancipated minors — but not for some local minimum wages

Overtime: 1½ regular rate after 40 weekly hours, or 12 daily or consecutive (Rule 4)

- Can't give time off instead of overtime pay; can't average overtime and non-overtime weeks (or days)
- Agriculture: Overtime after 48 hours (56 at some highly seasonal sites); extra breaks and pay on long days
- Some (not all) jobs in health, ski, and heavy vehicles are partly or fully exempt (Rules 2.3-2.4)

Meal Periods: 30 minutes uninterrupted & duty-free, in shifts over 5 hours (Rule 5.1)

- Can be unpaid only for employees completely relieved of duty, and allowed do personal activities
- If work doesn't allow uninterrupted meal periods: must allow eating on duty, on paid time
- As much as practical, meal periods must be at least 1 hour after starting shifts, and 1 hour before ending

Rest Periods: 10 minutes, paid, every 4 hours (Rule 5.2)

# Work Hours:	Up to 2	>2, up to 6	>6, up to 10	>10, up to 14	>14, up to 18	>18, up to 22	>22
# Rest Periods:	0	1	2	3	4	5	6

- Need not be off-site, but must not include work, and should be in the middle of the 4 hours if practical
- Rest periods count as time worked, including for minimum wage and overtime
- Extra pay is owed for rest period time not authorized or permitted, including for employees not paid hourly
- Break rules differ for some agricultural work (Rule 2.3, & the Agricultural Labor Conditions Rules)

Deductions, Credits, Charges, & Withheld Pay (Rule 6, & Colorado Wage Act)

- Final pay: Owed promptly (if a termination by employer) or at next pay date (if employee resigned)
- Unused Vacation: Must pay to departing employees, even if fired for cause or resigned without notice
- Tip credit: Can lower hourly pay up to \$3.02 if tips (not service charges) aren't diverted to untipped staff
- Meals: Can charge cost or value (without profit) of voluntarily accepted meals
- Lodging: Can charge \$25-\$100 weekly (by housing type) if voluntary and primarily for employee benefit
- Uniforms: Can't charge or require deposits for special uniforms, special cleaning, or ordinary wear and tear
- Other deductions: Only for items in CRS 8-4-105; not for poor work, breakage, quitting without notice, etc.

Time Worked: All on-duty or on-premises time that must be paid (Rule 1.9)

- Cleanup or setup (examples: put on or remove clothes, or gear, worn only at work)
- Checking in or out (timeclock, security or safety screening, etc.), or waiting to do so
- Receiving or sharing work information, or wait for tasks — but not just off-duty time on premises
- Travel for employer benefit — but not normal commuting (Rule 1.9.2)
- Sleep time required to be on-site — but not if lengthy and uninterrupted (Rule 1.9.3)

Exemptions from COMPS (Rule 2.2 lists all; highlights below)

- Executive/supervisor, administrator, or professional: \$57,784 (updated yearly) in salary (not hourly pay)
- Other high-level work: non-manual jobs paid 2¼ times the above salary, % owners who actively manage
- Some (not all) salespeople, computer professionals, drivers, camp/outdoor ed staff, or property managers
- Duties to pay wages, including most limits on deductions, still apply if exempt from COMPS

Employer Responsibilities (Rule 7)

- Give employees pay statements (total pay, rate, tips, credits, and time worked), and keep for 3 years
- Display this poster/notice where easily seen (or give to employees); also include in any handbook/manual
- Use translations (available from this Division) of this poster/notice for employees with limited English
- Not giving (or undercutting) posters or notices may disallow employer credits, deductions, or exemptions
- Individuals with control over work may be liable for wages and violations, even at incorporated employers

Complaint & Anti-Retaliation Rights (Rule 8)

- File complaints in the Division or Court, or send the Division confidential tips
- Retaliation, or actions interfering with rights, may yield fines or other consequences
- Immigration status is irrelevant to these rights, and can't be used to interfere with rights

Contact Us:

DIVISION OF LABOR STANDARDS & STATISTICS
303-318-8441 / 888-390-7936 / cdle_labor_standards@state.co.us (*English or Spanish*)

For all laws,
guidance, &
complaints:



[Colorado.abol.law.gov](https://colorado.abol.law.gov)

Spanish
guidance &
complaints:



[Leyes.laboralesDeColorado.gov](https://leyes.laboralesDeColorado.gov)

This notice
in other
languages:



cdle.colorado.gov/LaborStandardsPosters



COLORADO
Department of
Labor and Employment

Colorado Workplace Public Health Rights Poster: PAID LEAVE, WHISTLEBLOWING, & PROTECTIVE EQUIPMENT

Updated July 14, 2023
may be updated periodically

THE HEALTHY FAMILIES & WORKPLACES ACT (“HFWA”): Paid Leave Rights

Coverage: All Colorado employers, of any size, must provide paid leave

- All employees earn 1 hour of paid leave per 30 hours worked (“accrued leave”), up to 48 hours a year.
- Employees are required to be paid their regular pay rate during leave, and the employer must continue their benefits.
- Up to 48 hours of unused accrued leave carries over for use during the next year.
- For details on specific situations (irregular hours, non-hourly pay, etc.), see Wage Protection Rule 3.5, 7 CCR 1103-7.
- Up to 80 hours of supplemental leave applies in a public health emergency (PHE), until 4 weeks after the PHE ends.*

Employees can use accrued leave for the following safety or health needs:

- (1) a mental or physical illness, injury, or health condition that prevents work, including diagnosis or preventive care;
- (2) domestic abuse, sexual assault, or criminal harassment leading to health, relocation, legal, or other services needs;
- (3) caring for a family member experiencing a condition described in category (1) or (2);
- (4) grieving, funeral/memorial attendance, or financial/legal needs after a death of a family member;
- (5) due to inclement weather, power/heat/water loss, or other unexpected occurrence, the employees needs to either
(a) evacuate their residence, or (b) care for a family member whose school or place of care was closed; *or*
(6) in a PHE, a public official closed the workplace, or the school or place of care of the employee’s child.

Employer Policies (Notice: Documentation: Incremental Use: Privacy: and Paid Leave Records)

- **Written notice and posters.** Employers must (1) provide notice to new employees no later than other onboarding documents/policies; and (2) display updated posters, and provide updated notices to current employees, by end of year.
- **Notice for “foreseeable” leave.** Employers may adopt “reasonable procedures” in writing as to how employees should provide notice if they require “foreseeable” leave, but **cannot deny paid leave** for noncompliance with such a policy.
- **An employer can require documentation to show that accrued leave was for a qualifying reason only if leave was for four or more consecutive work days** (*i.e.* days when an employee would have worked, not calendar days).
- **Documentation is not required to *take* accrued leave**, but can be required as soon as an employee returns to work or separates from work (whichever is sooner). **No documentation can be required for PHE leave.**
- **To document leave for an employee’s (or an employee’s family member’s) health-related need**, an employee may provide: (1) a document from a health or social services provider *if* services were received and a document can be obtained in reasonable time and without added expense; **otherwise (2)** the employee’s own writing.
- **Documentation as to domestic abuse, sexual assault, or criminal harassment** can be a document or writing under (1) above (*e.g.* legal or shelter services provider) or (2) above, or legal document (restraining order, police report, etc.).
- **If an employer reasonably deems an employee’s documentation deficient**, the employer must: (A) notify the employee within seven days of either receiving the documentation or the employee’s return to work or separation (whichever is sooner); and (B) give the employee at least seven days to cure the deficiency.
- **Incremental Use.** Depending on employer policy, employees can use leave in either hourly or six-minute increments.

This Poster summarizes two Colorado workplace public health laws: C.R.S. § 8-13.3-401 et seq. (paid leave) and C.R.S. § 8-14.4-101 et seq. (healthy and safety whistleblowing) including amendments current as of the date of this poster. It does not cover other health or safety laws, rules, and orders, including under the federal Occupational Safety and Health Act (OSHA), from the Colorado Department of Public Health and Environment (CDPHE), or from local public health agencies. Contact those agencies for such health and safety information.

*In a PHE, employees gain additional hours of leave for inability to work, testing, quarantining, caring for family in such situations, and related needs. No PHE is now in effect; this poster will be updated if one is declared.

This poster must be displayed where easily accessible to workers, shared with remote workers, provided in other languages as needed, and replaced with any annually updated versions.

This Poster is a summary and cannot be relied on as complete labor law information. For all rules, fact sheets, translations, questions, or complaints, contact:

DIVISION OF LABOR STANDARDS & STATISTICS, ColoradoLaborLaw.gov, cdle_labor_standards@state.co.us, 303-318-8441 / 888-390-7936.

- **Employee Privacy.** Employers cannot require employees to disclose “details” about an employee’s (or their family’s) HFWA-related health or safety information; such information must be treated as a confidential medical record.

- **Records must be retained and provided upon request.** Employers must provide documentation of the current amount of paid leave employees have (1) available for use, and (2) already used during the current benefit year, including any supplemental PHE leave. Information may be requested once per month or when the need for HFWA leave arises.

Retaliation or Interference with HFWA Rights

- **Paid leave cannot be counted as an “absence”** that may result in firing or another kind of adverse action.
- **An employee can’t be required to find a “replacement worker” or job coverage when taking paid leave.**
- **An employer cannot fire, threaten, or otherwise retaliate against, or interfere with use of leave by,** an employee who: (1) requests or takes HFWA leave; (2) informs or assists another person in exercising HFWA rights; (3) files a HFWA complaint; or (4) cooperates/assists in investigation of a HFWA violation.
- **If an employee’s reasonable, good-faith HFWA complaint, request, or other activity is *incorrect*,** an employer need not agree or grant it, but cannot *act against* the employee for it. Employees *can* face consequences for misusing leave.

PROTECTED HEALTH/SAFETY EXPRESSION & WHISTLEBLOWING (“PHEW”): Worker Rights to Express Workplace Health/Safety Concerns & Use Protective Equipment

Coverage: All Employers and Employees, Plus Certain Independent Contractors

- PHEW covers not just “employers” and “employees,” but all “**principals**” (an employer or a business with at least 5 independent contractors) and “**workers**” (employees or independent contractors working for a “principal”).

Worker Rights to Oppose Workplace Health/Safety Violations:

- It is unlawful to **retaliate against, or interfere with**, the following acts:
 - (1) **raising reasonable concerns**, including informally, to the principal, other workers, the government, or the public, about workplace violations of government health or safety rules, or a significant workplace health or safety threat;
 - (2) **opposing or testifying, assisting, or participating** in an investigation or proceeding about retaliation for, or interference with, the above-listed conduct.
- A principal need not address a worker’s PHEW-related concern, but it still cannot fire or take other *action against* the worker for raising such a concern, as long as the concern was reasonable and in good-faith.

Workers’ Rights to Use Their Own Personal Protective Equipment (“PPE”):

- A worker must be allowed to **voluntarily wear their own PPE** (mask, faceguard, gloves, etc.) if the PPE (1) provides **more protection** than equipment provided at the workplace, (2) is **recommended** by a government health agency (federal, state, or local), and (3) does not make the worker **unable to do the job**.

COMPLAINT RIGHTS (under both HFWA & PHEW)

- Report violations to the Division as complaints or anonymous tips, or file in court after exhausting pre-lawsuit remedies.

Your Employee Rights under the Healthy Delaware Families Act

What is paid leave under the Healthy Delaware Families Act?

The Healthy Delaware Families Act (Act) is a state law that provides covered individuals with wage replacement and job-protection during leave for qualifying family and medical reasons. The Act works in conjunction with the federal Family Medical Leave Act (FMLA), which allows employees to take *unpaid*, job-protected leave with continued medical benefits. Beginning January 1, 2026, Delaware workers can take *paid* job-protected leave. The Delaware Department of Labor, Division of Paid Leave enforces the provision of the Act.

Under the Act, Covered Individuals may take:

- up to 12 workweeks of paid leave in a 12-month period for the birth, adoption, or foster placement of a child with the Covered Individual.
- up to 6 workweeks of paid leave in a 24-month period:
 - for the Covered Individual's own serious mental or physical health condition that prevents them from working;
 - to care for the Covered Individual's spouse, child, or parent with a serious mental or physical health condition; and
 - for qualifying reasons relating to the overseas deployment of the Covered Individual's spouse, child, or parent who is a military servicemember.

A Covered Individual cannot take more than 12 weeks of leave in a 12-month period. Covered Individuals have the right to use this leave in one block of time. When medically necessary or otherwise permitted, a Covered Individual may take leave intermittently in separate blocks of time or on a reduced schedule by working less hours each day or week.

Leave under the Act is paid. Covered individuals are entitled to receive 80% of their average weekly wage while on approved leave, up to \$900 per week. Average weekly wage consists of all income received from an employer including base salary, commissions, tips, and bonuses.

Am I eligible to take paid leave?

You are a covered individual eligible for paid leave if all of the following apply:

- You work for a covered employer;
- You have worked for your employer for at least 12 months;
- You have at least 1,250 hours of service with your employer during the 12 months before your leave ("hours of service" are hours actually worked and does not include time off for vacation, illness, or any other leave);
- You worked in Delaware for at least 60% of those 1,250 hours; and

- Your employer has at least 10 Delaware-based employees (for parental leave) or 25 Delaware-based employees (for family caregiving, medical or qualified exigency leave).

You work for a covered employer if:

- You work in Delaware for an employer (except the federal government) that has at least 10 employees; and
- Your employer's business does not close for more than 30 consecutive days in a 12-month period.

A small number of workers are not considered employees for purposes of the Act. Those individuals not covered by the Act are casual/seasonal employees working for the State of Delaware, the Department of Education, or for an entity covered by State employee benefits.

What type(s) of leave is my employer required to provide?

The type(s) of leave your employer is required to provide depends upon the number of Delaware employees your employer has.

- Employers with **1-9** covered employees are not required to provide paid family and medical leave benefits.
- Employers with **10-24** covered employees are required to provide their employees with Parental Leave.
- Employer with **25 or more** covered employees are required to provide Parental, Medical, & Family Caregiver/Qualified Exigency Leave.

Employers may choose to opt-in to the Delaware Paid Leave (DPL) insurance program to provide more benefits than required. Please visit de.gov/paidleave for more information.

How do I request paid leave?

Generally, to request leave you must:

- Follow your employer's normal policies for requesting leave;
- Give notice to your employer at least 30 days before your need for leave; or
- If providing advanced notice is not possible, notify your employer as soon as possible.

How do I know what type of paid leave insurance coverage my employer provides?

Your employer will notify you whether your paid leave insurance coverage is through the DPL insurance program or an approved private insurance plan. Private insurance plans include an employer's self-insured plan and an insurance carrier's approved plan. Depending on the type of coverage provided by your employer, benefit payments will be made through the DPL insurance program or your employer's approved private insurance plan.

If paid leave coverage is provided through the DPL insurance program, you file a claim for benefits using the Division's online administrative system, LaborFirst, a link to which can be found at de.gov/paidleave. If your claim is for paid medical leave or family caregiving leave, LaborFirst will notify your health care provider of your request for a certification of serious health condition in support of your claim. Although you do not have to share a medical diagnosis with your employer, you must provide enough information in your claim so that your employer can determine whether your requested leave qualifies under the Act. You may also be required to provide documentation verifying a qualifying exigency or your familial relationship for family caregiving, qualifying exigency, or parental leave.

If your employer provides paid leave coverage through an approved private plan, you must follow the plan's policies and procedures to file a claim.

The DPL insurance program is funded by less than 1% of an employee's weekly wages. Employers can require employees to contribute up to half of the cost, through payroll deductions beginning **January 1, 2025**. If an employer provides coverage through a private plan, it cannot cost an employee any more than what they would have paid under the DPL insurance program.

The Act does not affect any federal or state law prohibiting discrimination or supersede any state or local law or collective bargaining agreement that provides greater family or medical leave rights.

What does my employer need to do?

Upon receipt of a completed application, your employer will decide whether you are eligible for the requested paid leave and, if eligible, the amount of your weekly benefit. If you are eligible for paid leave, your employer must:

- Maintain confidentiality of your or your family members' private medical information;
- Allow you to take job-protected time off work for a qualifying reason;
- Continue your group health insurance plan coverage while you are on leave on the same basis as if you had not taken leave. If you pay a portion of the cost of your group health insurance, you are still required to pay your portion while on paid leave; and
- Allow you to return to the same job, or a virtually identical job with the same pay, benefits, and other working conditions, including shift and location, at the time of your leave.

Your employer cannot interfere with your rights under the Act or threaten or punish you for exercising your rights under this law. For example, your employer cannot retaliate against you for requesting paid leave or cooperating with a Division of Paid Leave investigation.

Where can I find more information?

Call 302-761-8375 or visit de.gov/paidleave. If you believe your rights under the Health Delaware Families Act have been violated, you may file a complaint with the Delaware Department of Labor, Division of Paid Leave or file a private lawsuit against your employer in court.



DELAWARE Paid Leave

Family and Medical Leave Insurance Program

What is Delaware Paid Leave?

This program offers paid leave to workers who have been employed at their current company for:

- At least one year, and
- Have worked at least 1,250 hours in the past year.

It's an insurance policy that provides paid leave, based on the federal Family Medical Leave Act (FMLA). Under this new program, employees will get up to 80% of their wages (up to \$900 per week) for the following events:



Parental Leave

Care for a new child.
(Up to 12 weeks per year)

Medical Leave

Address your own serious
illness or injury.
(Up to six weeks every 24 months)



Family Caregiver Leave

Care for a close family member with a
serious health condition.
(Up to six weeks every 24 months)



Qualified Exigency

Assist while a loved one is on an
overseas military deployment. (Up
to six weeks every 24 months)



**Employees are
limited to a
maximum of
12 total weeks
per year for any
type of leave.**

Call 302-761-8375 or visit de.gov/paidleave for more information.





<https://de.gov/paidleave>



PAID LEAVE FOR ALL WORKERS ACT NOTICE

Employers must provide employees with up to 40 hours of paid leave for any reason.

Paid Leave

- **Workers:** Earn up to 40 hours of paid leave from work per year.
- **Use:** Workers can use paid leave for any reason of their choosing. Employers may not require workers to provide a reason for their paid leave request or require a worker to find a replacement worker.
- **Accrual:** Workers earn 1 hour of paid leave for every 40 hours they work. Employers may also provide workers with all paid leave hours at the start of the 12-month period (frontloading).
- **Carryover:** Workers rollover all unused accrued paid leave at the end of the year. Any unused frontloaded leave does not have to be carried over.

- **Retaliation is prohibited:** Penalties may apply to employers that take adverse action against workers who exercise their rights under this law.



Penalties

Workers may recover the amount they should have been paid for the leave, penalties, and other equitable relief.

Filing a Complaint

A worker may file a complaint with the Illinois Department of Labor alleging a violation of this Act by filling out a complaint form at labor.illinois.gov/paidleave.

Existing Policy and Exclusions

Certain exceptions may apply for employers who already provide their workers with paid leave. There are also certain categories of workers that are not covered by the law.

See QR code for more information on how to file a complaint and applicable exceptions to the law.



For a complete text of the laws, visit our website at:
www.labor.illinois.gov

For more information or to file a Complaint, contact us at:
DOL.PaidLeave@illinois.gov
312-793-2600

THIS NOTICE MUST BE DISPLAYED IN A CONSPICUOUS PLACE ON THE PREMISES OF THE EMPLOYER WHERE OTHER NOTICES ARE POSTED.

EARNED SICK AND SAFE TIME

NOTICE OF EMPLOYEE RIGHTS

EFFECTIVE JULY 1, 2023



The Earned Sick and Safe Time (ESST) Ordinance requires employers to provide PAID sick and safe time to employees working in Bloomington.

YOU HAVE A RIGHT TO SICK AND SAFE TIME THAT YOU CAN USE FOR THE CARE, TREATMENT OR SAFETY OF YOU OR A FAMILY MEMBER.

WHO QUALIFIES?

Employees working in Bloomington for 80+ hours in a year. Employees can be full-time, part-time, temporary, or seasonal.

HOW IS IT PAID?

ESST must be paid on the same schedule and at the same rate as regular wages.

HOW DO I EARN LEAVE TIME?

ONE hour of ESST for every 30 hours worked.
Employees can earn up to 48 hours/year.
Unused ESST carries over to the next year.

CHECK YOUR PAY STUB

Employers must list the amount of earned sick and safe time on your pay check stub.

WHEN AND HOW CAN TIME BE USED?

Employees can use leave time (a) for medical, physical, mental or health needs, (b) for school or workplace closures, and (c) when they or a family member is a victim of domestic violence, sexual assault, or stalking.

Retaliation against an employee trying to use ESST is prohibited. An employee can file a complaint against an employer who retaliates against the employee or fails to provide ESST.

If you believe your right to ESST has been violated, you can file a complaint at:

Email: ESST@bloomingtonmn.gov • Website: blm.mn/ESST • Call: 952-563-8753

Mail/In-person: City of Bloomington, Legal Department, Compliance Division,
1800 W. Old Shakopee Road, Bloomington, MN 55431

For more information scan the QR below.





WE ARE YOUR DOL



Department
of Labor

POLICY ON THE RIGHTS OF EMPLOYEES TO EXPRESS BREAST MILK

in the Workplace

INTRODUCTION AND PURPOSE

New York State Labor Law Section 206-c gives all employees in New York the right to express breast milk in the workplace. This law applies to all public and private employers in New York State, regardless of size or the nature of their business.

The New York State Department of Labor has developed the official policy on breast milk expression in the workplace as required by the law, ensuring that all employees know their rights and all employers understand their responsibilities. This policy is the minimum required standard, but employers are encouraged to include additional accommodations tailored to their workplace.

With the information provided below, employees will learn how much time they are allowed for breast milk expression, the kind of space employers are required to provide for breast milk expression, how to notify employers about the need to express breast milk in the workplace, and how to notify the Department of Labor if these rights are not honored.

Employers are required to provide this policy in writing to all employees when they are hired and again every year after. Employers are also required to provide the policy to employees as soon as they return to work following the birth of a child.

USING BREAK TIME FOR BREAST MILK EXPRESSION

Employers must provide thirty (30) minutes of paid break time for their employees to express breast milk when the employee has a reasonable need to express breast milk. Employees must be permitted to use existing paid break or meal time if they need additional time for breast milk expression beyond the paid 30 minutes. This time must be provided for up to three years following childbirth. Employers must provide paid break time as often as an employee reasonably needs to express breast milk. The number of paid breaks an employee will need to express breast milk is unique to each employee and employers must provide reasonable break times based on the individual. Employers are prohibited from discriminating in any way against an employee who chooses to express breast milk in the workplace.

An employer is prohibited from requiring an employee to work before or after their normal shift to make up for any time used as paid break time to express breast milk.

All employers must continue to follow existing federal and state laws, regulations, and guidance regarding mealtimes and paid break time regardless of whether the employee uses such time to express breast milk. For additional information regarding what constitutes a meal period or a break period under state and federal law, please see the following resources:

- NY Department of Labor Website on Day of Rest, Break Time, and Meal Periods:
dol.ny.gov/day-rest-and-meal-periods
- NY Department of Labor FAQs on Meal and Rest Periods:
dol.ny.gov/system/files/documents/2021/03/meal-and-rest-periods-frequently-asked-questions.pdf
- U.S. Department of Labor FLSA FAQ on Meal and Rest Periods:
dol.gov/agencies/whd/fact-sheets/22-flsa-hours-worked
- U.S. Department of Labor FLSA Fact Sheet on Compensation for Break Time to Pump Breast Milk:
dol.gov/agencies/whd/fact-sheets/73-flsa-break-time-nursing-mothers

While an employer cannot require that an employee works while expressing breast milk, Labor Law 206-c does not otherwise prevent an employee from voluntarily choosing to do so if they want to.

Paid breaks provided for the expression of breast milk must be 30 minutes. An employee must be allowed to use regular break or meal time to take a longer paid break if needed. Employees may also opt to take shorter paid breaks.

Employees who work remotely have the same rights to paid time off for the purpose of expressing breast milk, as all other employees who perform their work in-person.

MAKING A REQUEST TO EXPRESS BREAST MILK AT WORK

If an employee wants to express breast milk at work, they must give the employer reasonable advance notice, generally before returning to the workplace if the employee is on leave. This advance notice is to allow the employer time to find an appropriate location and adjust schedules if needed.

Employees wishing to request a room or other location to express breast milk in the workplace should do so by submitting a written request to their direct supervisor or individual designated by their employer for processing requests. Employers must respond to this request for a room or other location to express breast milk in writing within five days.

Employers must notify all employees in writing through email or printed memo when a room or other location has been designated for breast milk expression.

LACTATION ROOM REQUIREMENTS

In addition to providing the necessary time during the workday, employers must provide a private room or alternative location for the purpose of breast milk expression. **The space provided for breast milk expression cannot be a restroom or toilet stall.**

The room or other location must:

- Be close to an employee's work area
- Provide good natural or artificial light
- Be private – both shielded from view and free from intrusion
- Have accessible, clean running water nearby
- Have an electrical outlet (if the workplace is supplied with electricity)
- Include a chair
- Provide a desk, small table, desk, counter or other flat surface

There does not need to be a separate space for every nursing employee. An employer may dedicate a single room or other location for breast milk expression. Should there be more than one employee at a time needing access to a lactation room, an employer may dedicate a centralized location to be used by all employees.

Any space provided for breast milk expression must be close to the work area of the employee(s) using the space. The space must be in walking distance, and the distance to the location should not significantly extend an employee's needed break time.

Employers located in shared work areas, such as office buildings, malls and similar spaces may work together to establish and maintain a dedicated lactation room, as long as such space(s) are a reasonable distance from the employees using the room. Each employer utilizing this common space is individually responsible for making sure the room meets the needs of their employees.

If there is not a separate room or space available for lactation, an employer may use a vacant office or other available room on a temporary basis. This room must not be accessible to the public or other employees while an employee is using it for breast milk expression.

As a last resort, an available cubicle may be used for breast milk expression. A cubicle can only be used if it is fully enclosed with a partition and is not otherwise accessible to the public or other employees while being used for breast milk expression. The cubicle walls must be at least seven feet tall to insure the employee's privacy.

To ensure privacy, if the lactation room has a window, it must be covered with a curtain, blind or other covering.

In addition, the lactation space should have a door equipped with a functional lock. If this is not possible (such as in the case of a fully enclosed cubicle), as a last resort, an employer must utilize a sign advising the space is in use and not accessible to other employees or the public.

If the workplace has a refrigerator, employers must allow employees to use it to store breast milk. However, employers are not responsible for ensuring the safekeeping of expressed milk stored in any refrigerator in the workplace.

Employees are required to store all expressed milk in closed containers and bring milk home each evening.

The space designated for expressing breast milk must be maintained and clean at all times.

If an employer can demonstrate undue hardship in providing a space with the above requirements, the employer must still provide a room or other location - other than a restroom or toilet stall - that is in close proximity to the work area where an employee can express breast milk in privacy, that meets as many of the requirements as possible.

Undue hardship is defined in the statute as "causing significant difficulty or expense when considered in relation to the size, financial resources, nature, or structure of the employer's business." **However, an employer may not deny an employee the right to express breast milk in the workplace due to difficulty in finding a location.**

NEW YORK STATE DEPARTMENT OF LABOR RESOURCES

If an employee believes that they are experiencing retaliation for expressing breast milk in the workplace, or that their employer is in violation of this policy, they should contact the New York State Department of Labor's Division of Labor Standards. Call us at **1-888-52-LABOR**, email us at LSAsk@labor.ny.gov, or visit our website at dol.ny.gov/breast-milk-expression-workplace to file a complaint.

A list of our offices is available at dol.ny.gov/location/contact-division-labor-standards.

Complaints are confidential.

FEDERAL RESOURCES

The federal PUMP Act went into effect in 2023, expanding protections for almost all employees expressing breast milk at work. Under the PUMP Act, any covered workers not provided with breaks and adequate space for up to a year after the birth of a child are able to file a complaint with the U.S. Department of Labor or file a lawsuit against their employers. For more information, please visit dol.gov/agencies/whd/pump-at-work.

Complaint Form for Reporting Sexual Harassment



Combating Sexual Harassment

New York State Labor Law requires all employers to adopt a sexual harassment prevention policy that includes a complaint form to report alleged incidents of sexual harassment.

If you believe that you have been subjected to sexual harassment or gender discrimination, you are encouraged, but not required, to complete this form and submit it to the appropriate person or department indicated in the New York Sexual Harassment Prevention policy in this handbook. No employee will be retaliated against for filing a complaint.

If you are more comfortable reporting verbally or in another manner, your employer should complete this form, provide you with a copy, and follow its sexual harassment prevention policy by investigating the claims.

For additional resources, visit: ny.gov/programs/combating-sexual-harassment-workplace

COMPLAINANT INFORMATION

Name:

Work Address:

Work Phone:

Job Title:

Email:

Select Preferred Communication Method: ☐ Email ☐ Phone ☐ In person

SUPERVISORY INFORMATION

Immediate Supervisor's Name:

Title:

Work Phone:

Work Address:

COMPLAINT INFORMATION

1. Your complaint of sexual harassment is made about:

Name:

Title:

Work Address:

Work Phone:

Relationship to you: ☐ Supervisor ☐ Supervisee ☐ Co-Worker ☐ Other (please specify)

2. Please describe what happened and include as many details as possible. You may use additional sheets of paper if necessary. If you have any relevant documents, please include them. .

3. Date(s) sexual harassment occurred:

Is the sexual harassment continuing? ☐ Yes ☐ No

4. If possible, please list the name and contact information of any witnesses or individuals who may have information related to your complaint:

The last question is optional, but may help the investigation.

5. Have you previously provided information (verbal or written) about related incidents? If yes, when and to whom did you provide information?

This is not required, but if you have retained legal counsel and would like us to work with them, please provide their contact information.

Signature: _____

Date: _____