



State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

Solicitation

NUMBER
BHS14022

PAGE
1

ADDRESS CORRESPONDENCE TO ATTENTION OF:
ROBERTA WAGNER
304-558-0067

RECEIVED

*C06142426 800-685-2272

~~STAFF CARE INC~~
~~5001 STATESMAN DR~~

~~IRVING TX 75063~~

Parent Company
↓

AMN Healthcare, Inc
12400 High Bluff Dr.
San Diego CA 92130

800.282.0300

HEALTH AND HUMAN 2013 AUG 14 AM 9:34
VARIOUS LOCALES ?
INDICATED BY ORDER

WV PURCHASING
DIVISION

Staff care only provides
Physicians. Nurse Staffing
is under the parent company
AMN
Healthcare

DATE PRINTED
07/10/2013

BID OPENING DATE: 08/13/2013

BID OPENING TIME 1:30PM

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
0001	20,000	HR		964-65	60.00	\$1,200,000.00
	1A. REGISTERED NURSE (RN) LOCUM-TENENS, REGULAR HRS.					
0002	3,000	HR		964-65	90.00	\$270,000.00
	1B. REGISTERED NURSE (RN) LOCUM-TENENS, OVERTIME HRS.					
0003	104	HR		964-65	90.00	\$270,000.00
	1C. REGISTERED NURSE (RN) LOCUM-TENENS, HOLIDAY HRS.					
0004	20,000	HR		964-65	45.00	\$900,000.00
	2A. LICENSED PRACTICAL NURSE (LPN) LOCUM-TENENS, REGULAR HOURS.					
0005	3,000	HR		964-65	7.50	\$202,500.00
	2B. LICENSED PRACTICAL NURSE (LPN) LOCUM-TENENS, OVERTIME HOURS.					

BID RECEIVED LATE

BUYER Roberta Wagner

WITNESS Tara

DISQUALIFIED

SIGNATURE	<u>Ki Howard</u>	TELEPHONE	<u>817.881.1142</u>	DATE	<u>8/13/13</u>
TITLE	<u>VPCient Serv</u>	FEIN	<u>88.0208006</u>	ADDRESS CHANGES TO BE NOTED ABOVE	

WHEN RESPONDING TO SOLICITATION, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



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*C06142426 800-685-2272

STAFF CARE INC-
5001 STATESMAN DR

IRVING TX 75063

AMN Healthcare, Inc
12400 High Bluff Drive
San Diego CA 92130
(800) 282.0300

HEALTH AND HUMAN RESOURCES
VARIOUS LOCALES AS
INDICATED BY ORDER

DATE PRINTED
07/10/2013

BID OPENING DATE: 08/13/2013

BID OPENING TIME 1:30PM

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
0006	104	HR		964-65	67.50	\$202,500.00
	2C. LICENSED PRACTICAL NURSE (LPN) LOCUM-TENENS,					
	HOLIDAY HOURS.					
0007	20,000	HR		948-55		
	3A. CERTIFIED NURSING ASSISTANT (CNA) LOCUM-TENENS,					
	REGULAR HOURS.					
0008	3,000	HR		948-55		
	3B. CERTIFIED NURSING ASSISTANT (CNA) LOCUM-TENENS,					
	OVERTIME HOURS.					
0009	104	HR		948-55		
	3C. CERTIFIED NURSING ASSISTANT (CNA) LOCUM-TENENS,					
	HOLIDAY HOURS.					

SIGNATURE	Kim Howard	TELEPHONE	817.881.1142	DATE	8/13/13
TITLE	VP Client Servs	FEIN	88.0208006	ADDRESS CHANGES TO BE NOTED ABOVE	
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ADDRESS CORRESPONDENCE TO ATTENTION OF
ROBERTA WAGNER
804-558-0067

*C06142426 ~~800-685-2272~~

~~STAFF CARE INC~~

~~5001 STATESMAN DR~~

~~IRVING TX 75063~~

*AMN
Healthcare
Inc*

*12400 High Bluff Drive
San Diego CA*

800.282.0300 92130

HEALTH AND HUMAN RESOURCES
VARIOUS LOCALES AS
INDICATED BY ORDER

DATE PRINTED
07/10/2013

BID OPENING DATE: 08/13/2013

BID OPENING TIME 1:30PM

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
0010	20,000	HR		948-55	—	
	4A. HEALTH SERVICES WORKER (HSW) LOCUM-TENENS, REGULAR HOURS.					
0011	3,000	HR		948-55	—	
	4B. HEALTH SERVICES WORKER (HSW) LOCUM-TENENS, OVERTIME HOURS.					
0012	104	HR		948-55	—	
	4C. HEALTH SERVICES WORKER (HSW) LOCUM-TENENS, HOLIDAY HOURS.					
0013	1	EA		964-65	—	
	5. REGISTERED NURSE - PERMANENT PLACEMENT FEE					

\$124,800.00

20%

\$24,960

Annual Salary Review

SIGNATURE <i>K. Howard</i>	TELEPHONE <i>817-881-1142</i>	DATE <i>8.13.13</i>
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TITLE *VP Client Serv.* FEIN *88.0208006*

ADDRESS CHANGES TO BE NOTED ABOVE

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HEALTH AND HUMAN RESOURCES
VARIOUS LOCALES AS
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BID OPENING DATE:

08/13/2013

BID OPENING TIME

1:30PM

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
014	1	EA		964-65	<i>\$93,600</i> <i>20% of Annual Salary Review</i>	<i>\$18,720.00</i>
5. LICENSED PRACTICAL NURSE - PERMANENT PLACEMENT FEE. (THIS IS A ONE TIME PLACEMENT FEE FOR EACH PERMANENTLY PLACED RN OR LPN PLACED BY THE VENDOR.)						
THIS WILL BE A PROGRESSIVE AWARD CONTRACT. AWARD WILL BE MADE FROM THE LOWEST TO THE HIGHEST GRAND TOTAL FOR RN'S, LPN'S, CNA'S, AND HSW'S MEETING SPECIFICATION.						
***** THIS IS THE END OF RFQ BHS14022 ***** TOTAL:						

SIGNATURE <i>K. Howell</i>	TELEPHONE <i>817 881.1192</i>	DATE <i>8.13.13</i>
TITLE <i>VP Client Serv</i>	FEIN <i>88.0208006</i>	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO SOLICITATION INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'

INSTRUCTIONS TO VENDORS SUBMITTING BIDS

1. **REVIEW DOCUMENTS THOROUGHLY:** The attached documents contain a solicitation for bids. Please read these instructions and all documents attached in their entirety. These instructions provide critical information about requirements that if overlooked could lead to disqualification of a Vendor's bid. All bids must be submitted in accordance with the provisions contained in these instructions and the Solicitation. Failure to do so may result in disqualification of Vendor's bid.
2. **MANDATORY TERMS:** The Solicitation may contain mandatory provisions identified by the use of the words "must," "will," and "shall." Failure to comply with a mandatory term in the Solicitation will result in bid disqualification.
3. **PREBID MEETING:** The item identified below shall apply to this Solicitation.

☒ A pre-bid meeting will not be held prior to bid opening.

☐ A **NON-MANDATORY PRE-BID** meeting will be held at the following place and time:

☐ A **MANDATORY PRE-BID** meeting will be held at the following place and time:

All Vendors submitting a bid must attend the mandatory pre-bid meeting. Failure to attend the mandatory pre-bid meeting shall result in disqualification of the Vendor's bid. No one person attending the pre-bid meeting may represent more than one Vendor.

An attendance sheet provided at the pre-bid meeting shall serve as the official document verifying attendance. The State will not accept any other form of proof or documentation to verify attendance. Any person attending the pre-bid meeting on behalf of a Vendor must list on the attendance sheet his or her name and the name of the Vendor he or she is representing. Additionally, the person attending the pre-bid meeting should include the Vendor's E-Mail address, phone number, and Fax number on the attendance sheet. It is the Vendor's responsibility to locate the attendance sheet and provide the required

information. Failure to complete the attendance sheet as required may result in disqualification of Vendor's bid.

All Vendors should arrive prior to the starting time for the pre-bid. Vendors who arrive after the starting time but prior to the end of the pre-bid will be permitted to sign in, but are charged with knowing all matters discussed at the pre-bid.

Questions submitted at least five business days prior to a scheduled pre-bid will be discussed at the pre-bid meeting if possible. Any discussions or answers to questions at the pre-bid meeting are preliminary in nature and are non-binding. Official and binding answers to questions will be published in a written addendum to the Solicitation prior to bid opening.

4. **VENDOR QUESTION DEADLINE:** Vendors may submit questions relating to this Solicitation to the Purchasing Division. Questions must be submitted in writing. All questions must be submitted on or before the date listed below and to the address listed below in order to be considered. A written response will be published in a Solicitation addendum if a response is possible and appropriate. Non-written discussions, conversations, or questions and answers regarding this Solicitation are preliminary in nature and are non-binding.

Question Submission Deadline: 7/24/2013 - end of business

Submit Questions to:

Roberta A. Wagner

2019 Washington Street, East

P.O. Box 50130

Charleston, WV 25305

Fax: 304-558-4115

Email: roberta.a.wagner@wv.gov

5. **VERBAL COMMUNICATION:** Any verbal communication between the Vendor and any State personnel is not binding, including that made at the mandatory pre-bid conference. Only information issued in writing and added to the Solicitation by an official written addendum by the Purchasing Division is binding.
6. **BID SUBMISSION:** All bids must be signed and delivered by the Vendor to the Purchasing Division at the address listed below on or before the date and time of the bid opening. Any bid received by the Purchasing Division staff is considered to be in the possession of the Purchasing Division and will not be returned for any reason. The bid delivery address is:

Department of Administration, Purchasing Division
2019 Washington Street East
P.O. Box 50130,
Charleston, WV 25305-0130

The bid should contain the information listed below on the face of the envelope or the bid may not be considered:

SEALED BID

BUYER: _____

SOLICITATION NO.: _____

BID OPENING DATE: _____

BID OPENING TIME: _____

FAX NUMBER: _____

In the event that Vendor is responding to a request for proposal, the Vendor shall submit one original technical and one original cost proposal plus 2 convenience copies of each to the Purchasing Division at the address shown above. Additionally, the Vendor should identify the bid type as either a technical or cost proposal on the face of each bid envelope submitted in response to a request for proposal as follows:

BID TYPE: ☐ Technical
 ☒ Cost

7. **BID OPENING:** Bids submitted in response to this Solicitation will be opened at the location identified below on the date and time listed below. Delivery of a bid after the bid opening date and time will result in bid disqualification. For purposes of this Solicitation, a bid is considered delivered when time stamped by the official Purchasing Division time clock.

Bid Opening Date and Time:

08/13/2013 @ 1:30 P.M.

Bid Opening Location:

Department of Administration, Purchasing Division
 2019 Washington Street East
 P.O. Box 50130,
 Charleston, WV 25305-0130

8. **ADDENDUM ACKNOWLEDGEMENT:** Changes or revisions to this Solicitation will be made by an official written addendum issued by the Purchasing Division. Vendor should acknowledge receipt of all addenda issued with this Solicitation by completing an Addendum Acknowledgment Form, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.
9. **BID FORMATTING:** Vendor should type or electronically enter the information onto its bid to prevent errors in the evaluation. Failure to type or electronically enter the information may result in bid disqualification.

GENERAL TERMS AND CONDITIONS:

1. **CONTRACTUAL AGREEMENT:** Issuance of a Purchase Order signed by the Purchasing Division Director, or his designee, and approved as to form by the Attorney General's office constitutes acceptance of this Contract made by and between the State of West Virginia and the Vendor. Vendor's signature on its bid signifies Vendor's agreement to be bound by and accept the terms and conditions contained in this Contract.

2. **DEFINITIONS:** As used in this Solicitation / Contract, the following terms shall have the meanings attributed to them below. Additional definitions may be found in the specifications included with this Solicitation / Contract.
 - 2.1 "Agency" or "Agencies" means the agency, board, commission, or other entity of the State of West Virginia that is identified on the first page of the Solicitation or any other public entity seeking to procure goods or services under this Contract.

 - 2.2 "Contract" means the binding agreement that is entered into between the State and the Vendor to provide the goods and services requested in the Solicitation.

 - 2.3 "Director" means the Director of the West Virginia Department of Administration, Purchasing Division.

 - 2.4 "Purchasing Division" means the West Virginia Department of Administration, Purchasing Division.

 - 2.5 "Purchase Order" means the document signed by the Agency and the Purchasing Division, and approved as to form by the Attorney General, that identifies the Vendor as the successful bidder and Contract holder.

 - 2.6 "Solicitation" means the official solicitation published by the Purchasing Division and identified by number on the first page thereof.

 - 2.7 "State" means the State of West Virginia and/or any of its agencies, commissions, boards, etc as context requires.

 - 2.8 "Vendor" or "Vendors" means any entity submitting a bid in response to the Solicitation, the entity that has been selected as the lowest responsible bidder, or the entity that has been awarded the Contract as context requires.

3. **CONTRACT TERM; RENEWAL; EXTENSION:** The term of this Contract shall be determined in accordance with the category that has been identified as applicable to this Contract below:

☒ **Term Contract**

Initial Contract Term: This Contract becomes effective on date of award

 and extends for a period of one (1) year(s).

Renewal Term: This Contract may be renewed upon the mutual written consent of the Agency, and the Vendor, with approval of the Purchasing Division and the Attorney General's office (Attorney General approval is as to form only). Any request for renewal must be submitted to the Purchasing Division Director thirty (30) days prior to the expiration date of the initial contract term or appropriate renewal term. A Contract renewal shall be in accordance with the terms and conditions of the original contract. Renewal of this Contract is limited to two (2) successive one (1) year periods. Automatic renewal of this Contract is prohibited. Notwithstanding the foregoing, Purchasing Division approval is not required on agency delegated or exempt purchases. Attorney General approval may be required for vendor terms and conditions.

Reasonable Time Extension: At the sole discretion of the Purchasing Division Director, and with approval from the Attorney General's office (Attorney General approval is as to form only), this Contract may be extended for a reasonable time after the initial Contract term or after any renewal term as may be necessary to obtain a new contract or renew this Contract. Any reasonable time extension shall not exceed twelve (12) months. Vendor may avoid a reasonable time extension by providing the Purchasing Division Director with written notice of Vendor's desire to terminate this Contract 30 days prior to the expiration of the then current term. During any reasonable time extension period, the Vendor may terminate this Contract for any reason upon giving the Purchasing Division Director 30 days written notice. Automatic extension of this Contract is prohibited. Notwithstanding the foregoing, Purchasing Division approval is not required on agency delegated or exempt purchases, but Attorney General approval may be required.

- ☐ **Fixed Period Contract:** This Contract becomes effective upon Vendor's receipt of the notice to proceed and must be completed within days.
- ☐ **One Time Purchase:** The term of this Contract shall run from the issuance of the Purchase Order until all of the goods contracted for have been delivered, but in no event shall this Contract extend for more than one fiscal year.
- ☐ **Other:** See attached.

4. **NOTICE TO PROCEED:** Vendor shall begin performance of this Contract immediately upon receiving notice to proceed unless otherwise instructed by the Agency. Unless otherwise specified, the fully executed Purchase Order will be considered notice to proceed
5. **QUANTITIES:** The quantities required under this Contract shall be determined in accordance with the category that has been identified as applicable to this Contract below.
 - ☒ **Open End Contract:** Quantities listed in this Solicitation are approximations only, based on estimates supplied by the Agency. It is understood and agreed that the Contract shall cover the quantities actually ordered for delivery during the term of the Contract, whether more or less than the quantities shown.
 - ☒ **Service:** The scope of the service to be provided will be more clearly defined in the specifications included herewith.
 - ☐ **Combined Service and Goods:** The scope of the service and deliverable goods to be provided will be more clearly defined in the specifications included herewith.
 - ☐ **One Time Purchase:** This Contract is for the purchase of a set quantity of goods that are identified in the specifications included herewith. Once those items have been delivered, no additional goods may be procured under this Contract without an appropriate change order approved by the Vendor, Agency, Purchasing Division, and Attorney General's office.
6. **PRICING:** The pricing set forth herein is firm for the life of the Contract, unless specified elsewhere within this Solicitation/Contract by the State. A Vendor's inclusion of price adjustment provisions in its bid, without an express authorization from the State in the Solicitation to do so, may result in bid disqualification.
7. **EMERGENCY PURCHASES:** The Purchasing Division Director may authorize the Agency to purchase goods or services in the open market that Vendor would otherwise provide under this Contract if those goods or services are for immediate or expedited delivery in an emergency. Emergencies shall include, but are not limited to, delays in transportation or an unanticipated increase in the volume of work. An emergency purchase in the open market, approved by the Purchasing Division Director, shall not constitute a breach of this Contract and shall not entitle the Vendor to any form of compensation or damages. This provision does not excuse the State from fulfilling its obligations under a One Time Purchase contract.
8. **REQUIRED DOCUMENTS:** All of the items checked below must be provided to the Purchasing Division by the Vendor as specified below.
 - ☐ **BID BOND:** All Vendors shall furnish a bid bond in the amount of five percent (5%) of the total amount of the bid protecting the State of West Virginia. The bid bond must be submitted with the bid.

- ☐ **PERFORMANCE BOND:** The apparent successful Vendor shall provide a performance bond in the amount of . The performance bond must be issued and received by the Purchasing Division prior to Contract award. On construction contracts, the performance bond must be 100% of the Contract value.
- ☐ **LABOR/MATERIAL PAYMENT BOND:** The apparent successful Vendor shall provide a labor/material payment bond in the amount of 100% of the Contract value. The labor/material payment bond must be issued and delivered to the Purchasing Division prior to Contract award.

In lieu of the Bid Bond, Performance Bond, and Labor/Material Payment Bond, the Vendor may provide certified checks, cashier's checks, or irrevocable letters of credit. Any certified check, cashier's check, or irrevocable letter of credit provided in lieu of a bond must be of the same amount and delivered on the same schedule as the bond it replaces. A letter of credit submitted in lieu of a performance and labor/material payment bond will only be allowed for projects under \$100,000. Personal or business checks are not acceptable.

- ☐ **MAINTENANCE BOND:** The apparent successful Vendor shall provide a two (2) year maintenance bond covering the roofing system. The maintenance bond must be issued and delivered to the Purchasing Division prior to Contract award.
- ☒ **WORKERS' COMPENSATION INSURANCE:** The apparent successful Vendor shall have appropriate workers' compensation insurance and shall provide proof thereof upon request.
- ☒ **INSURANCE:** The apparent successful Vendor shall furnish proof of the following insurance prior to Contract award:

☒ **Commercial General Liability Insurance:**
 1,000,000.00 or more.

☐ **Builders Risk Insurance:** builders risk – all risk insurance in an amount equal to 100% of the amount of the Contract.

☒ Bodily injury (including death) \$500,000.00 per person with a minimum of \$1,000,000.00 per occurrence.

☒ Property damage with a minimum of \$1,000,000.00 per occurrence.

☒ Professional liability with a minimum of \$1,000,000.00 per occurrence.

☐

☐

The apparent successful Vendor shall also furnish proof of any additional insurance requirements contained in the specifications prior to Contract award regardless of whether or not that insurance requirement is listed above.

- [✓] LICENSE(S) / CERTIFICATIONS / PERMITS:** In addition to anything required under the Section entitled Licensing, of the General Terms and Conditions, the apparent successful Vendor shall furnish proof of the following licenses, certifications, and/or permits prior to Contract award, in a form acceptable to the Purchasing Division.

[✓]	RN's - valid WV Registered Nurse License
[✓]	LPN's - valid WV Licensed Practical Nurse License
[✓]	CNA's - valid WV Certificate as Certified Nurse Assistant
[✓]	Must show proof of at least one (1) year of acute psychiatric inpatient practice.

The apparent successful Vendor shall also furnish proof of any additional licenses or certifications contained in the specifications prior to Contract award regardless of whether or not that requirement is listed above.

- 9. LITIGATION BOND:** The Director reserves the right to require any Vendor that files a protest of an award to submit a litigation bond in the amount equal to one percent of the lowest bid submitted or \$5,000, whichever is greater. The entire amount of the bond shall be forfeited if the hearing officer determines that the protest was filed for frivolous or improper purpose, including but not limited to, the purpose of harassing, causing unnecessary delay, or needless expense for the Agency. All litigation bonds shall be made payable to the Purchasing Division. In lieu of a bond, the protester may submit a cashier's check or certified check payable to the Purchasing Division. Cashier's or certified checks will be deposited with and held by the State Treasurer's office. If it is determined that the protest has not been filed for frivolous or improper purpose, the bond or deposit shall be returned in its entirety.
- 10. ALTERNATES:** Any model, brand, or specification listed herein establishes the acceptable level of quality only and is not intended to reflect a preference for, or in any way favor, a particular brand or vendor. Vendors may bid alternates to a listed model or brand provided that the alternate is at least equal to the model or brand and complies with the required specifications. The equality of any alternate being bid shall be determined by the State at its sole discretion. Any Vendor bidding an alternate model or brand should clearly identify the alternate items in its bid and should include manufacturer's specifications, industry literature, and/or any other relevant documentation demonstrating the equality of the alternate items. Failure to provide information for alternate items may be grounds for rejection of a Vendor's bid.
- 11. EXCEPTIONS AND CLARIFICATIONS:** The Solicitation contains the specifications that shall form the basis of a contractual agreement. Vendor shall clearly mark any exceptions, clarifications, or

other proposed modifications in its bid. Exceptions to, clarifications of, or modifications of a requirement or term and condition of the Solicitation may result in bid disqualification.

12. LIQUIDATED DAMAGES: Vendor shall pay liquidated damages in the amount

	for	

This clause shall in no way be considered exclusive and shall not limit the State or Agency's right to pursue any other available remedy.

- 13. ACCEPTANCE/REJECTION:** The State may accept or reject any bid in whole, or in part. Vendor's signature on its bid signifies acceptance of the terms and conditions contained in the Solicitation and Vendor agrees to be bound by the terms of the Contract, as reflected in the Purchase Order, upon receipt.
- 14. REGISTRATION:** Prior to Contract award, the apparent successful Vendor must be properly registered with the West Virginia Purchasing Division and must have paid the \$125 fee if applicable.
- 15. COMMUNICATION LIMITATIONS:** In accordance with West Virginia Code of State Rules §148-1-6.6, communication with the State of West Virginia or any of its employees regarding this Solicitation during the solicitation, bid, evaluation or award periods, except through the Purchasing Division, is strictly prohibited without prior Purchasing Division approval. Purchasing Division approval for such communication is implied for all agency delegated and exempt purchases.
- 16. FUNDING:** This Contract shall continue for the term stated herein, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise made available, this Contract becomes void and of no effect beginning on July 1 of the fiscal year for which funding has not been appropriated or otherwise made available.
- 17. PAYMENT:** Payment in advance is prohibited under this Contract. Payment may only be made after the delivery and acceptance of goods or services. The Vendor shall submit invoices, in arrears, to the Agency at the address on the face of the purchase order labeled "Invoice To."
- 18. UNIT PRICE:** Unit prices shall prevail in cases of a discrepancy in the Vendor's bid.
- 19. DELIVERY:** All quotations are considered freight on board destination ("F.O.B. destination") unless alternate shipping terms are clearly identified in the bid. Vendor's listing of shipping terms that contradict the shipping terms expressly required by this Solicitation may result in bid disqualification.
- 20. INTEREST:** Interest attributable to late payment will only be permitted if authorized by the West Virginia Code. Presently, there is no provision in the law for interest on late payments.
- 21. PREFERENCE:** Vendor Preference may only be granted upon written request and only in accordance with the West Virginia Code § 5A-3-37 and the West Virginia Code of State Rules. A Resident Vendor Certification form has been attached hereto to allow Vendor to apply for the preference. Vendor's

failure to submit the Resident Vendor Certification form with its bid will result in denial of Vendor Preference. Vendor Preference does not apply to construction projects.

22. **SMALL, WOMEN-OWNED, OR MINORITY-OWNED BUSINESSES:** For any solicitations publicly advertised for bid on or after July 1, 2012, in accordance with West Virginia Code §5A-3-37(a)(7) and W. Va. CSR § 148-22-9, any non-resident vendor certified as a small, women-owned, or minority-owned business under W. Va. CSR § 148-22-9 shall be provided the same preference made available to any resident vendor. Any non-resident small, women-owned, or minority-owned business must identify itself as such in writing, must submit that writing to the Purchasing Division with its bid, and must be properly certified under W. Va. CSR § 148-22-9 prior to submission of its bid to receive the preferences made available to resident vendors. Preference for a non-resident small, women-owned, or minority owned business shall be applied in accordance with W. Va. CSR § 148-22-9.
23. **TAXES:** The Vendor shall pay any applicable sales, use, personal property or any other taxes arising out of this Contract and the transactions contemplated thereby. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.
24. **CANCELLATION:** The Purchasing Division Director reserves the right to cancel this Contract immediately upon written notice to the vendor if the materials or workmanship supplied do not conform to the specifications contained in the Contract. The Purchasing Division Director may cancel any purchase or Contract upon 30 days written notice to the Vendor in accordance with West Virginia Code of State Rules § 148-1-7.16.2.
25. **WAIVER OF MINOR IRREGULARITIES:** The Director reserves the right to waive minor irregularities in bids or specifications in accordance with West Virginia Code of State Rules § 148-1-4.6.
26. **TIME:** Time is of the essence with regard to all matters of time and performance in this Contract.
27. **APPLICABLE LAW:** This Contract is governed by and interpreted under West Virginia law without giving effect to its choice of law principles. Any information provided in specification manuals, or any other source, verbal or written, which contradicts or violates the West Virginia Constitution, West Virginia Code or West Virginia Code of State Rules is void and of no effect.
28. **COMPLIANCE:** Vendor shall comply with all applicable federal, state, and local laws, regulations and ordinances. By submitting a bid, Vendors acknowledge that they have reviewed, understand, and will comply with all applicable law.
29. **PREVAILING WAGE:** On any contract for the construction of a public improvement, Vendor and any subcontractors utilized by Vendor shall pay a rate or rates of wages which shall not be less than the fair minimum rate or rates of wages (prevailing wage), as established by the West Virginia Division of Labor under West Virginia Code §§ 21-5A-1 et seq. and available at <http://www.sos.wv.gov/administrative-law/wagerates/Pages/default.aspx>. Vendor shall be responsible for ensuring compliance with prevailing wage requirements and determining when prevailing wage

requirements are applicable. The required contract provisions contained in West Virginia Code of State Rules § 42-7-3 are specifically incorporated herein by reference.

30. **ARBITRATION:** Any references made to arbitration contained in this Contract, Vendor's bid, or in any American Institute of Architects documents pertaining to this Contract are hereby deleted, void, and of no effect.
31. **MODIFICATIONS:** This writing is the parties' final expression of intent. Notwithstanding anything contained in this Contract to the contrary, no modification of this Contract shall be binding without mutual written consent of the Agency, and the Vendor, with approval of the Purchasing Division and the Attorney General's office (Attorney General approval is as to form only). **No Change shall be implemented by the Vendor until such time as the Vendor receives an approved written change order from the Purchasing Division.**
32. **WAIVER:** The failure of either party to insist upon a strict performance of any of the terms or provision of this Contract, or to exercise any option, right, or remedy herein contained, shall not be construed as a waiver or a relinquishment for the future of such term, provision, option, right, or remedy, but the same shall continue in full force and effect. Any waiver must be expressly stated in writing and signed by the waiving party.
33. **SUBSEQUENT FORMS:** The terms and conditions contained in this Contract shall supersede any and all subsequent terms and conditions which may appear on any form documents submitted by Vendor to the Agency or Purchasing Division such as price lists, order forms, invoices, sales agreements, or maintenance agreements, and includes internet websites or other electronic documents. Acceptance or use of Vendor's forms does not constitute acceptance of the terms and conditions contained thereon.
34. **ASSIGNMENT:** Neither this Contract nor any monies due, or to become due hereunder, may be assigned by the Vendor without the express written consent of the Agency, the Purchasing Division, the Attorney General's office (as to form only), and any other government agency or office that may be required to approve such assignments. Notwithstanding the foregoing, Purchasing Division approval may or may not be required on certain agency delegated or exempt purchases.
35. **WARRANTY:** The Vendor expressly warrants that the goods and/or services covered by this Contract will: (a) conform to the specifications, drawings, samples, or other description furnished or specified by the Agency; (b) be merchantable and fit for the purpose intended; and (c) be free from defect in material and workmanship.
36. **STATE EMPLOYEES:** State employees are not permitted to utilize this Contract for personal use and the Vendor is prohibited from permitting or facilitating the same.
37. **BANKRUPTCY:** In the event the Vendor files for bankruptcy protection, the State of West Virginia may deem this Contract null and void, and terminate this Contract without notice.

38. [RESERVED]

39. CONFIDENTIALITY: The Vendor agrees that it will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the Agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure is made pursuant to the Agency's policies, procedures, and rules. Vendor further agrees to comply with the Confidentiality Policies and Information Security Accountability Requirements, set forth in <http://www.state.wv.us/admin/purchase/privacy/default.html>.

40. DISCLOSURE: Vendor's response to the Solicitation and the resulting Contract are considered public documents and will be disclosed to the public in accordance with the laws, rules, and policies governing the West Virginia Purchasing Division. Those laws include, but are not limited to, the Freedom of Information Act found in West Virginia Code § 29B-1-1 et seq.

If a Vendor considers any part of its bid to be exempt from public disclosure, Vendor must so indicate by specifically identifying the exempt information, identifying the exemption that applies, providing a detailed justification for the exemption, segregating the exempt information from the general bid information, and submitting the exempt information as part of its bid but in a segregated and clearly identifiable format. Failure to comply with the foregoing requirements will result in public disclosure of the Vendor's bid without further notice. A Vendor's act of marking all or nearly all of its bid as exempt is not sufficient to avoid disclosure and **WILL NOT BE HONORED**. Vendor's act of marking a bid or any part thereof as "confidential" or "proprietary" is not sufficient to avoid disclosure and **WILL NOT BE HONORED**. In addition, a legend or other statement indicating that all or substantially all of the bid is exempt from disclosure is not sufficient to avoid disclosure and **WILL NOT BE HONORED**. Vendor will be required to defend any claimed exemption for nondisclosure in the event of an administrative or judicial challenge to the State's nondisclosure. Vendor must indemnify the State for any costs incurred related to any exemptions claimed by Vendor. Any questions regarding the applicability of the various public records laws should be addressed to your own legal counsel prior to bid submission.

41. LICENSING: In accordance with West Virginia Code of State Rules §148-1-6.1.7, Vendor must be licensed and in good standing in accordance with any and all state and local laws and requirements by any state or local agency of West Virginia, including, but not limited to, the West Virginia Secretary of State's Office, the West Virginia Tax Department, West Virginia Insurance Commission, or any other state agency or political subdivision. Upon request, the Vendor must provide all necessary releases to obtain information to enable the Purchasing Division Director or the Agency to verify that the Vendor is licensed and in good standing with the above entities.

42. ANTITRUST: In submitting a bid to, signing a contract with, or accepting a Purchase Order from any agency of the State of West Virginia, the Vendor agrees to convey, sell, assign, or transfer to the State of West Virginia all rights, title, and interest in and to all causes of action it may now or hereafter acquire under the antitrust laws of the United States and the State of West Virginia for price fixing and/or unreasonable restraints of trade relating to the particular commodities or services purchased or acquired by the State of West Virginia. Such assignment shall be made and become effective at the time the

purchasing agency tenders the initial payment to Vendor.

- 43. VENDOR CERTIFICATIONS:** By signing its bid or entering into this Contract, Vendor certifies (1) that its bid was made without prior understanding, agreement, or connection with any corporation, firm, limited liability company, partnership, person or entity submitting a bid for the same material, supplies, equipment or services; (2) that its bid is in all respects fair and without collusion or fraud; (3) that this Contract is accepted or entered into without any prior understanding, agreement, or connection to any other entity that could be considered a violation of law; and (4) that it has reviewed this RFQ in its entirety; understands the requirements, terms and conditions, and other information contained herein. Vendor's signature on its bid also affirms that neither it nor its representatives have any interest, nor shall acquire any interest, direct or indirect, which would compromise the performance of its services hereunder. Any such interests shall be promptly presented in detail to the Agency.

The individual signing this bid on behalf of Vendor certifies that he or she is authorized by the Vendor to execute this bid or any documents related thereto on Vendor's behalf; that he or she is authorized to bind the Vendor in a contractual relationship; and that, to the best of his or her knowledge, the Vendor has properly registered with any State agency that may require registration.

- 44. PURCHASING CARD ACCEPTANCE:** The State of West Virginia currently utilizes a Purchasing Card program, administered under contract by a banking institution, to process payment for goods and services. The Vendor must accept the State of West Virginia's Purchasing Card for payment of all orders under this Contract unless the box below is checked.

☐ Vendor is not required to accept the State of West Virginia's Purchasing Card as payment for all goods and services.

- 45. VENDOR RELATIONSHIP:** The relationship of the Vendor to the State shall be that of an independent contractor and no principal-agent relationship or employer-employee relationship is contemplated or created by this Contract. The Vendor as an independent contractor is solely liable for the acts and omissions of its employees and agents. Vendor shall be responsible for selecting,

supervising, and compensating any and all individuals employed pursuant to the terms of this Solicitation and resulting contract. Neither the Vendor, nor any employees or subcontractors of the Vendor, shall be deemed to be employees of the State for any purpose whatsoever. Vendor shall be exclusively responsible for payment of employees and contractors for all wages and salaries, taxes, withholding payments, penalties, fees, fringe benefits, professional liability insurance premiums, contributions to insurance and pension, or other deferred compensation plans, including but not limited to, Workers' Compensation and Social Security obligations, licensing fees, *etc.* and the filing of all necessary documents, forms and returns pertinent to all of the foregoing. Vendor shall hold harmless the State, and shall provide the State and Agency with a defense against any and all claims including, but not limited to, the foregoing payments, withholdings, contributions, taxes, Social Security taxes, and employer income tax returns.

- 46. INDEMNIFICATION:** The Vendor agrees to indemnify, defend, and hold harmless the State and the Agency, their officers, and employees from and against: (1) Any claims or losses for services rendered

by any subcontractor, person, or firm performing or supplying services, materials, or supplies in connection with the performance of the Contract; (2) Any claims or losses resulting to any person or entity injured or damaged by the Vendor, its officers, employees, or subcontractors by the publication, translation, reproduction, delivery, performance, use, or disposition of any data used under the Contract in a manner not authorized by the Contract, or by Federal or State statutes or regulations; and (3) Any failure of the Vendor, its officers, employees, or subcontractors to observe State and Federal laws including, but not limited to, labor and wage and hour laws.

- 47. PURCHASING AFFIDAVIT:** In accordance with West Virginia Code § 5A-3-10a, all Vendors are required to sign, notarize, and submit the Purchasing Affidavit stating that neither the Vendor nor a related party owe a debt to the State in excess of \$1,000. The affidavit must be submitted prior to award, but should be submitted with the Vendor's bid. A copy of the Purchasing Affidavit is included herewith.
- 48. ADDITIONAL AGENCY AND LOCAL GOVERNMENT USE:** This Contract may be utilized by and extends to other agencies, spending units, and political subdivisions of the State of West Virginia; county, municipal, and other local government bodies; and school districts ("Other Government Entities"). This Contract shall be extended to the aforementioned Other Government Entities on the same prices, terms, and conditions as those offered and agreed to in this Contract. If the Vendor does not wish to extend the prices, terms, and conditions of its bid and subsequent contract to the Other Government Entities, the Vendor must clearly indicate such refusal in its bid. A refusal to extend this Contract to the Other Government Entities shall not impact or influence the award of this Contract in any manner.
- 49. CONFLICT OF INTEREST:** Vendor, its officers or members or employees, shall not presently have or acquire any interest, direct or indirect, which would conflict with or compromise the performance of its obligations hereunder. Vendor shall periodically inquire of its officers, members and employees to ensure that a conflict of interest does not arise. Any conflict of interest discovered shall be promptly presented in detail to the Agency.
- 50. REPORTS:** Vendor shall provide the Agency and/or the Purchasing Division with the following reports identified by a checked box below:
- ☒ Such reports as the Agency and/or the Purchasing Division may request. Requested reports may include, but are not limited to, quantities purchased, agencies utilizing the contract, total contract expenditures by agency, etc.
 - ☐ Quarterly reports detailing the total quantity of purchases in units and dollars, along with a listing of purchases by agency. Quarterly reports should be delivered to the Purchasing Division via email at purchasing.requisitions@wv.gov.
- 51. BACKGROUND CHECK:** In accordance with W. Va. Code § 15-2D-3, the Director of the Division of Protective Services shall require any service provider whose employees are regularly employed on the grounds or in the buildings of the Capitol complex or who have access to sensitive or critical information to submit to a fingerprint-based state and federal background inquiry through the state

repository. The service provider is responsible for any costs associated with the fingerprint-based state and federal background inquiry.

After the contract for such services has been approved, but before any such employees are permitted to be on the grounds or in the buildings of the Capitol complex or have access to sensitive or critical information, the service provider shall submit a list of all persons who will be physically present and working at the Capitol complex to the Director of the Division of Protective Services for purposes of verifying compliance with this provision.

The State reserves the right to prohibit a service provider's employees from accessing sensitive or critical information or to be present at the Capitol complex based upon results addressed from a criminal background check.

Service providers should contact the West Virginia Division of Protective Services by phone at (304) 558-9911 for more information.

52. PREFERENCE FOR USE OF DOMESTIC STEEL PRODUCTS: Except when authorized by the Director of the Purchasing Division pursuant to W. Va. Code § 5A-3-56, no contractor may use or supply steel products for a State Contract Project other than those steel products made in the United States. A contractor who uses steel products in violation of this section may be subject to civil penalties pursuant to W. Va. Code § 5A-3-56. As used in this section:

- a. "State Contract Project" means any erection or construction of, or any addition to, alteration of or other improvement to any building or structure, including, but not limited to, roads or highways, or the installation of any heating or cooling or ventilating plants or other equipment or the supply of and materials for such projects, pursuant to a contract with the State of West Virginia for which bids were solicited on or after June 6, 2001.
- b. "Steel Products" means products rolled, formed, shaped, drawn, extruded, forged, cast fabricated or otherwise similarly processed, or processed by a combination of two or more or such operations, from steel made by the open hearth, basic oxygen, electric furnace, Bessemer or other steel making process.

The Purchasing Division Director may, in writing, authorize the use of foreign steel products if:

- a. The cost for each contract item used does not exceed one tenth of one percent (.1%) of the total contract cost or two thousand five hundred dollars (\$2,500.00), whichever is greater. For the purposes of this section, the cost is the value of the steel product as delivered to the project; or
- b. The Director of the Purchasing Division determines that specified steel materials are not produced in the United States in sufficient quantity or otherwise are not reasonably available to meet contract requirements.

53. PREFERENCE FOR USE OF DOMESTIC ALUMINUM, GLASS, AND STEEL: In Accordance

with W. Va. Code § 5-19-1 et seq., and W. Va. CSR § 148-10-1 et seq., for every contract or subcontract, subject to the limitations contained herein, for the construction, reconstruction, alteration, repair, improvement or maintenance of public works or for the purchase of any item of machinery or equipment to be used at sites of public works, only domestic aluminum, glass or steel products shall be supplied unless the spending officer determines, in writing, after the receipt of offers or bids, (1) that the cost of domestic aluminum, glass or steel products is unreasonable or inconsistent with the public interest of the State of West Virginia, (2) that domestic aluminum, glass or steel products are not produced in sufficient quantities to meet the contract requirements, or (3) the available domestic aluminum, glass, or steel do not meet the contract specifications. This provision only applies to public works contracts awarded in an amount more than fifty thousand dollars (\$50,000) or public works contracts that require more than ten thousand pounds of steel products.

The cost of domestic aluminum, glass, or steel products may be unreasonable if the cost is more than twenty percent (20%) of the bid or offered price for foreign made aluminum, glass, or steel products. If the domestic aluminum, glass or steel products to be supplied or produced in a "substantial labor surplus area", as defined by the United States Department of Labor, the cost of domestic aluminum, glass, or steel products may be unreasonable if the cost is more than thirty percent (30%) of the bid or offered price for foreign made aluminum, glass, or steel products.

This preference shall be applied to an item of machinery or equipment, as indicated above, when the item is a single unit of equipment or machinery manufactured primarily of aluminum, glass or steel, is part of a public works contract and has the sole purpose or of being a permanent part of a single public works project. This provision does not apply to equipment or machinery purchased by a spending unit for use by that spending unit and not as part of a single public works project.

All bids and offers including domestic aluminum, glass or steel products that exceed bid or offer price including foreign aluminum, glass or steel products after application of the preferences provided in this provision may be reduced to a price equal to or lower than the lowest bid or offer price for foreign aluminum, glass or steel products plus the applicable preference. If the reduced bid or offer prices are made in writing and supersede the prior bid or offer prices, all bids or offers, including the reduced bid or offer prices, will be reevaluated in accordance with this rule.

SPECIFICATIONS

1. **PURPOSE AND SCOPE:** The West Virginia Purchasing Division is soliciting bids on behalf of the Bureau for Behavioral Health & Health Facilities (BHBF) to establish an open-end "locum-tenens" Registered Nurse(s), Licensed Practical Nurse(s), Certified Nursing Assistant(s), Health Services Worker(s) to comply with staffing needs of the seven (7) State owned and operated facilities listed below and the West Virginia Children's Home, which is located in Elkins, WV.

Lakin Hospital (long term care facility) (LTC)
11522 Ohio River Road
West Columbia, WV 25287

Jackie Withrow Hospital (LTC)
105 S. Eisenhower Drive
Beckley, WV 25801

John Manchin Sr. Health Care Center (LTC)
401 Guffey Street
Fairmont, WV 26554

Welch Community Hospital (acute care/long term care facility)
454 McDowell Street
Welch, WV 24801

William R. Sharpe Hospital (acute psychiatric care facility)
936 Sharpe Hospital Road
Weston, WV 26452

Hopemont Hospital (LTC)
150 Hopemont Drive
Terra Alta, WV 26764

Mildred Mitchell-Bateman Hospital (acute care psychiatric care facility)
1530 Norway Avenue
Huntington, WV 25705

WV Children's Home
230 Heavner Avenue
Elkins, WV 26241

2. **DEFINITIONS:** The terms listed below shall have the meanings assigned to them below. Additional definitions can be found in section 2 of the General Terms and Conditions.

2.1 "Contract Services" means the list of services identified in Section IV, Subsection 1 below.

2.2 "Pricing Page" means the pages upon which Vendor should list its proposed price for the Contract Services. The Pricing Page is either included on the last page of this RFQ or attached hereto as Exhibit A.

2.3 "RFQ" means the official request for quotation published by the Purchasing Division and identified as BHS14022.

2.4 "RN" means Registered Nurse.

2.5 "LPN" means Licensed Practical Nurse.

2.6 "CNA" means Certified Nursing Assistant.

2.7 "HSW" means Health Services Worker.

2.8 "Agency" means Bureau for Behavioral Health & Health Facilities (BHBF) and all State owned and operated Facilities.

3. QUALIFICATIONS: Vendor(s) must have the following minimum qualifications.

- 3.1
 - a. RN's must hold a valid WV Registered Nurse License.
 - b. LPN's must hold a valid WV Licensed Practical Nurse License.
 - c. CNA's must possess a valid Certification as a WV Certified Nurse Assistant.
- 3.2 Must have at least one (1) year working experience in the area to be assigned.
- 3.3 Must have knowledge of Federal & State Long Term Care (LTC) regulations.
- 3.4 Must have a current Cardiopulmonary Resuscitation (CPR) Card.
- 3.5 Current Non-Violent Crisis Prevention Intervention (NVCPD) Card, not a requirement for Long Term Care facilities.

4. GENERAL REQUIREMENTS:

4.1 Mandatory Contract Services Requirements: Vendor shall provide Contract Services with the desired services listed below on an open-end contract. Desired services must meet or exceed the mandatory requirements listed below.

4.1.1 Registered Nurse(s) Services

Vendor shall provide documentation to the facility Bureau for Behavioral health and Health Facilities (BHBF) or Bureau for Children and Families (BCF) a competency assessment which include age-specific and cultural competencies for services provided for patients. RN(s) must have at least one (1) year of working experience in the area assigned.

4.1.1.1 RN(s) must be Licensed by the West Virginia Board of Nurses

4.1.1.2 RN(s) must have a minimum of one (1) year experience in Psychiatric Nursing, if assignment is for an acute psychiatric care facility.

4.1.1.3 RN(s) must have a minimum of one (1) year experience as a Long Term Care facility RN, if assignment is for a Long Term Care facility.

- 4.1.1.4 RN(s) must oversee the work of inexperienced (RN) Registered Nurse(s), (LPN) Licensed Practical Nurse(s), (CNA) Certified Nursing Assistant, (HSW) Health Service Worker.
- 4.1.1.5 RN(s) must participate in Treatment Team Meetings to develop Individualized Treatment Plans, direct consultations, receive and give recommendations to and from other disciplines to maximize positive behavioral results.
- 4.1.1.6 RN(s) must administer medications as prescribed by treating Physician(s).
- 4.1.1.7 RN(s) must ensure timely documentation into patient's electronic medical records, per the policies and procedures and common practice of the particular facility utilizing the staff, this will be discussed in great detail during the hospital/facility orientation.
- 4.1.1.8 RN(s) must oversee all medical related emergencies.
- 4.1.1.9 RN(s) may testify in court and commitment hearing when found appropriate and deemed necessary. The psychiatric physician must be present however nurse(s) must be available if needed to testify.
- 4.1.1.10 RN(s) must respond to inquiries of family members, advocates, and other interested parties, ensuring adherence to the Confidentiality laws, and the HIPPA Regulations.

4.1.2 Licensed Practical Nurse(s) Services

- 4.1.2.1 LPN(s) must be licensed by the West Virginia Board of Nurses.
- 4.1.2.2 LPN(s) must assist professional nursing & medical staff in providing direct nursing care to patients, including medical treatments, administering medications, giving injections, and assisting in care planning and recording.
- 4.1.2.3 LPN(s) must take and record temperatures, blood pressure, pulse and respirations; collect specimens for testing; administer medications according to the Physician Order.
- 4.1.2.4 LPN(s) must ensure timely documentation into patients' electronic medical records, per the policies, procedures and common practices of the assigned facility that will be discussed in great detail during the hospital/facility orientation.
- 4.1.2.5 LPN(s) must screen patients and record medical information; assist physician and registered nurse in examinations and treatments; set up and clean examination area; give injections and immunizations; instruct patients/clients in the use of medications and possible side effects.

- 4.1.2.6 LPN(s) will provide for the emotional and physical comfort and safety of the patients/clients.
- 4.1.2.7 LPN(s) must assist in response to medical and psychiatric emergencies.
- 4.1.2.8 LPN(s) must assist patients with activities of daily living such as grooming and personal hygiene.
- 4.1.2.9 LPN(s) may testify in court and commitment hearing when found appropriate and deemed necessary. The psychiatric physician must be present however nurse(s) must be available if needed to testify.
- 4.1.2.10 LPN(s) must respond to inquiries of family members, advocates, and other interested parties, ensuring adherence to the Confidentiality laws, and the HIPPA Regulations.
- 4.1.2.11 LPN(s) must have successfully completed a course in Intravenous therapy and training in venipuncture which permits the LPN(s) to start Intravenous fluids.

4.1.3 Certified Nursing Assistant Services

- 4.1.3.1 CNA(s) must be certified and in good standing with the WV Nurse Aide Registry.
- 4.1.3.2 CNA(s) must have a minimum of one (1) year experience in Long Term Care.
- 4.1.3.3 CNA(s) must have a minimum of one (1) year experience and working knowledge of the concepts of mental health, health disorders and related physical conditions and related treatment approach.
- 4.1.3.4 CNA(s) will be responsible for direct care services to residents in a Nursing Home Setting, Psychiatric Care Setting and Acute Care Setting or facility setting.
- 4.1.3.5 CNA(s) must provide both physical and psychological support and assistance with daily activities and maintain a therapeutic interaction with the residents.
- 4.1.3.6 CNA(s) must have a High School Diploma or GED

4.1.4 Health Services Worker services

- 4.1.4.1 HSW(s) must have a minimum of one (1) year experience and working knowledge of the concepts of mental health, health disorders and related physical conditions and related treatment approach.

4.1.4.2 HSW(s) must have a minimum of one (1) year experience in Long Term Care.

4.1.4.3 HSW(s) must have a High School Diploma or GED.

4.2.1 VENDOR RESPONSIBILITIES:

4.2.1.1. Successful vendor must be a qualified healthcare professional to accommodate the Facility's needs.

4.2.1.2 Successful vendor must provide healthcare staffing as requested by the Facility to be compatible with week-to-week needs. Assignments also may be for specified period of time as agreed upon in writing.

4.2.1.3 Successful vendor must provide hourly rates that are inclusive of all federal, state, and local withholding taxes, social security & Medicare taxes, as well as all unemployment compensation, workers compensation, general and professional liability premiums.

4.2.1.4 Successful vendor shall provide the Facility with information on each healthcare staff member according to the state and federal standards, including applications. These must be sent to the facility along with the listing of possible candidates to interview:
Non-Violent Crisis Prevention Intervention (NVCPI) Certification; Cardiopulmonary Resuscitation (CPR) Certification; references; confidentiality agreement and other requested documents such as current physical examination, immunization records, negative 9-panel drug screening and licensure confirmation. No nurse providing services to any Facility under this agreement will have been investigated and substantiated by a Board of Nursing or currently subject to discharge resulting from an investigation by a Board of Nursing.

Successful vendor and healthcare staff must comply with all Agency policies and procedures.

4.2.1.5 Successful vendor shall ensure the following regarding the staff to be provided:

- A. Has completed the required training and education,
- B. Possess a current valid certification and professional license and with the State of West Virginia, and
- C. Have proof of recent acute psychiatric experience in a psychiatric setting, and
- D. Meet current Agency immunization requirements for purified protein derivative (PPD) and Hepatitis B Series.

4.2.1.6 Successful Vendor must incorporate into the bid, all inclusive fees, any anticipated costs, traveling expenses, administrative and overhead cost.

- 4.2.1.7 The hospital will not allow any previous employee who was dismissed for disciplinary or performance reasons by any DHHR Facility or Office to return and work through the staffing vendor.
- 4.2.1.8 Successful vendor will have 48 hours (2 days) to respond to our initial contact requesting staffing, vendor must provide the Facility a list of potential candidates for staffing needed at the Facility within 72 hours (3 days) of the initial notification of need.
- After the 3-day period, we would conduct interviews, review their certifications, and at that time we will determine which applicants we would offer a staffing position.

4.3.1 DUTIES AND RESPONSIBILITIES OF THE FACILITIES

- 4.3.1.1 Facility will notify the successful vendor of the number and specialty of the nursing staff needed for an assignment and the estimated length of the assignment.
- 4.3.1.2 Successful vendor staff shall work under the Facility Supervision. The Facility shall be solely responsible to provide each staff with day-to-day guidance in the execution of staff's professional responsibilities at the Facility.
- 4.3.1.3 Agency reserves the right to terminate a nurse providing services to the facility whether it is that the need for staffing ends or it is determined that their performance is not in the best interest and well-being of the patient care.
- 4.3.1.4 If the Facility requests an LPN but the successful vendor provides a RN to cover the request, the agency will pay the LPN rate.

5. CONTRACT AWARD:

- 5.1 **Contract Award:** The Contract is intended to provide the Agencies with a purchase price for the Contracted Services. The Contract will be a progressive award with multiple vendors. Award will be made from low bid to high and usage will be in the same manner. If the low bid cannot provide the needs of the Facility at the requested time, the second low bid will be contacted and then the next low bid, etc. We will allow 48 hours for vendor to determine if they will be able to meet our needs.
- 5.2 **Pricing Pages:** Vendor should complete the Pricing Page by providing the unit cost; total cost; and pricing for permanent placement fee" for all of the following positions: RN(s), LPN(s), CNA(s) and HSW(s). Vendor should complete the Pricing Page in its entirety as failure to complete the Pricing Page in its entirety may result in the Vendor's bid being disqualified.

The Pricing Pages contain a list of Desired Services and estimated purchase volume. The estimated purchase volume for each service represents the approximate volume of anticipated services.

Notwithstanding the foregoing, the Purchasing Division may correct errors as its discretion. Vendor should type the information into the Pricing Page to prevent errors in the evaluation.

6. **PERFORMANCE:** Vendor and Agency's shall agree upon a schedule for performance of Contract Services and Contract Services Deliverables, unless such a schedule is already included herein by Facility. In the event that this contract is designated as an open-end contract, Vendor shall perform in accordance with the release orders that may be issued against this Contract.
7. **PAYMENT:** Facility shall pay an hourly rate for all Contract Services performed under this Contract. Vendor shall accept payment in accordance with the payment procedures of the State of West Virginia.
8. **TRAVEL:** Vendor shall be responsible for all mileage and travel costs, including travel time, associated with the performance of this Contract. Such costs will not be paid by the Facility.
9. **HOLIDAYS:** Generally, the following official holidays are observed:

New Year's Day	January 1
Martin Luther King Day	January 21
President's Day	February 18
Memorial Day	May 27
West Virginia Day	June 20
Independence Day	July 4
Labor Day	September 2
Columbus Day	October 14
Veteran's Day	November 11
Thanksgiving	November 28 – 29
Christmas Eve (1/2 Day)	December 24
Christmas Day	December 25
New Year's Eve (1/2 Day)	December 31

10. **FACILITIES ACCESS:** Performance of Contract Services may require access cards and/or keys to gain entrance to Agency's facilities. In the event that access cards and/or keys are required:

- 10.1. Vendor must identify principal service personnel which will be issued access cards and/or keys to perform service.
- 10.2. Vendor will be responsible for controlling cards and keys and will pay replacement fee, if the cards or keys become lost or stolen.
- 10.3. Vendor shall notify the Agency immediately of any lost, stolen, or missing card or key.
- 10.4. Anyone performing under this Contract will be subject to Agency security protocol and procedures.
- 10.5. Vendor shall inform all staff of the Facility security protocol and procedures.

11. VENDOR DEFAULT:

11.1. The following shall be considered a vendor default under this Contract.

11.1.1. Failure to perform Contract Services in accordance with the requirements contained herein.

11.1.2. Failure to comply with other specifications and requirements contained herein.

11.1.3. Failure to comply with any laws, rules, and ordinances applicable to the Contract Services provided under this Contract.

11.1.4. Failure to remedy deficient performance upon request

11.2. The following remedies shall be available to the Agency upon default.

11.2.1. Cancellation of the Contract.

11.2.2. Cancellation of one or more release orders issued under this Contract.

11.2.3. Any other remedies available in law or equity.

12. MISCELLANEOUS:

12.1. **Contract Manager:** During the performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address any customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager:

Gina S Dao

Telephone Number:

866. 949. 5778

Fax Number:

877. 816. 0299

Email Address:

gina.sdao@amnhhealthcare.com

BHS14022 Pricing Page

Item #	Level of Psychiatric Nursing	Estimated # of Hours	Unit Price	Extended Price
#1	Registered Nurse (RN)			
	A. Regular Hours	20,000	\$ 60.00	\$ 1,200,000.00
	B. Overtime Hours $\times 1.5$	3,000	\$ 90.00	\$ 270,000.00
	C. Holiday Hours $\times 1.5$	104	\$ 90.00	\$ 270,000.00
#2	Licensed Practical Nurse (LPN)			
	A. Regular Hours	20,000	\$ 45.00	\$ 900,000.00
	B. Overtime Hours $\times 1.5$	3,000	\$ 67.50	\$ 202,500.00
	C. Holiday Hours $\times 1.5$	104	\$ 67.50	\$ 202,500.00
#3	Certified Nursing Assistant (CNA)			
	A. Regular Hours	20,000	\$	\$
	B. Overtime Hours	3,000	\$	\$
	C. Holiday Hours	104	\$	\$
#4	Health Services Worker (HSW)			
	A. Regular hours	20,000	\$	\$
	B. Overtime Hours	3,000	\$	\$
	C. Holiday Hours	104	\$	\$
GRAND TOTAL				\$ 3,045,000.00
#5	Permanent Placement Fee:*			
	Registered Nurse 20%		\$ 124,800.00	\$ 24,960.00
	Licensed Practical Nurse 20%		\$ 93,600.00	\$ 18,720.00

*One time placement fee for each permanently placed employee by the vendor.

NOTE: This one time placement fee is not included in the evaluation for award.

Rates are all inclusive

This is a progressive award contract and the award will be made to the Vendors with the lowest GRAND TOTAL to the highest GRAND TOTAL (respectively) meeting the required mandatory specifications. EXAMPLE: Lowest will be Vendor "A", second lowest will be Vendor "B"... and so on.

Use of this contract will work the same. Agency must contact the lowest bid first and if they cannot provide the agency needs within the time frame allowed in the attached specifications, Agency will then contact the next lowest bidder and so on, until one of the vendors awarded the contract, can cover the immediate needs.

The number of hours is only an estimation to be used for bid, we may require more or less hours than stated above.

Please Print Information Below.

Company Name:

AMN Healthcare, Inc

Sales Representative:

Gina Sdao, Regional Director

Vendor Address:

12400 High Bluff Drive San Diego CA 92130

Vendor Phone:

866.949.5778 / 800.282.0300

Email Address:

gina.sdao@amnhealthcare.com

Remit to Address:

12400 High Bluff Drive, San Diego CA 92130

Kevin Stewart
SIGNATURE

8/13/13
DATE

Does Not Apply

Rev. 07/12

State of West Virginia

VENDOR PREFERENCE CERTIFICATE

Certification and application* is hereby made for Preference in accordance with *West Virginia Code*, §5A-3-37. (Does not apply to construction contracts). *West Virginia Code*, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the *West Virginia Code*. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Resident Vendor Preference, if applicable.

1. Application is made for 2.5% resident vendor preference for the reason checked:

- ____ Bidder is an individual resident vendor and has resided continuously in West Virginia for four (4) years immediately preceding the date of this certification; or,
____ Bidder is a partnership, association or corporation resident vendor and has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or 80% of the ownership interest of Bidder is held by another individual, partnership, association or corporation resident vendor who has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or,
____ Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4) years immediately preceding the date of this certification; or,

2. Application is made for 2.5% resident vendor preference for the reason checked:

- ____ Bidder is a resident vendor who certifies that, during the life of the contract, on average at least 75% of the employees working on the project being bid are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,

3. Application is made for 2.5% resident vendor preference for the reason checked:

- ____ Bidder is a nonresident vendor employing a minimum of one hundred state residents or is a nonresident vendor with an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia employing a minimum of one hundred state residents who certifies that, during the life of the contract, on average at least 75% of the employees or Bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,

4. Application is made for 5% resident vendor preference for the reason checked:

- ____ Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; or,

5. Application is made for 3.5% resident vendor preference who is a veteran for the reason checked:

- ____ Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is submitted; or,

6. Application is made for 3.5% resident vendor preference who is a veteran for the reason checked:

- ____ Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years.

7. Application is made for preference as a non-resident small, women- and minority-owned business, in accordance with *West Virginia Code* §5A-3-59 and *West Virginia Code of State Rules*.

- ____ Bidder has been or expects to be approved prior to contract award by the Purchasing Division as a certified small, women- and minority-owned business.

Bidder understands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the requirements for such preference, the Secretary may order the Director of Purchasing to: (a) reject the bid; or (b) assess a penalty against such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agency or deducted from any unpaid balance on the contract or purchase order.

By submission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and authorizes the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid the required business taxes, provided that such information does not contain the amounts of taxes paid nor any other information deemed by the Tax Commissioner to be confidential.

Under penalty of law for false swearing (*West Virginia Code*, §61-5-3), Bidder hereby certifies that this certificate is true and accurate in all respects; and that if a contract is issued to Bidder and if anything contained within this certificate changes during the term of the contract, Bidder will notify the Purchasing Division in writing immediately.

Bidder: _____

Signed: _____

Date: _____

Title: _____

RFQ No. BHS14022STATE OF WEST VIRGINIA
Purchasing Division**PURCHASING AFFIDAVIT**

MANDATE: Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceeds five percent of the total contract amount.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Va. Code §61-5-3) that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

WITNESS THE FOLLOWING SIGNATURE:

Vendor's Name: AMP HealthCare, Inc
Authorized Signature: [Signature] Date: 8-12-13

State of _____

County of _____, to-wit:

Taken, subscribed, and sworn to before me this _____ day of _____, 20____.

My Commission expires _____, 20____.

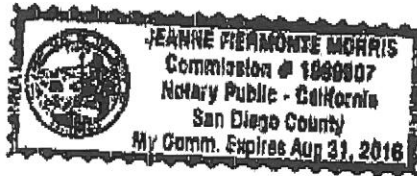
AFFIX SEAL HERE**NOTARY PUBLIC** _____*See Separate Notary Sheet*
Purchasing Affidavit (Revised 07/01/2012)

ACKNOWLEDGMENT BY INDIVIDUAL

STATE OF: California
COUNTY OF:)ss: San Diego

On this 12th day of August, 2012, before me personally came Kim Howard to me known, and known to me to be the person described in and who executed the foregoing instrument and he/she acknowledged to me that he/she executed the same.

Jeanne Piermonte Morris
Notary Public



ACKNOWLEDGMENT BY UNINCORPORATED ASSOCIATION

STATE OF:
COUNTY OF:)ss:

On this _____ day of _____, 20____, before me personally came _____ to me known and known to me to be the person who executed the above instrument, who, being duly sworn by me, did for himself/herself depose and say that he/she is a member of the firm of _____ and that he/she executed the foregoing instrument in the firm name of _____ and that he/she had authority to sign same, and he/she did duly acknowledge to me that he/she executed the same as the act and deed of said firm of _____ for the uses and purposes mentioned therein.

Notary Public

ACKNOWLEDGMENT BY CORPORATION

STATE OF:
COUNTY OF:)ss:

On this _____ day of _____, 20____, before me personally came _____ to me known, who being duly sworn, did depose and say that he/she resides in _____ the corporation described in and which that he/she is the _____ executed the foregoing instrument; that he/she knows the seal of said corporation; that the seal affixed to said instrument is such corporate seal, that it was so affixed by the order of the Board of Directors of said corporation, and that he/she signed his/her name thereto by like order.

Notary Public

CERTIFICATION AND SIGNATURE PAGE

By signing below, I certify that I have reviewed this Solicitation in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this bid or proposal for review and consideration; that I am authorized by the bidder to execute this bid or any documents related thereto on bidder's behalf; that I am authorized to bind the bidder in a contractual relationship; and that to the best of my knowledge, the bidder has properly registered with any State agency that may require registration.

AMN Healthcare, Inc
(Company)

Kim Howard
(Authorized Signature)

Kim Howard, VP Client Services
(Representative Name, Title)

817.881.1142 866.374.7311
(Phone Number) (Fax Number)

8.12.13
(Date)

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: BHS14022

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

The following addenda were not included in the RFO AMN Healthcare. The received Addendum Numbers Received: unless the documents were not numbered to reflect the addenda.

- | | |
|---|--|
| <input type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

AMN Healthcare, Inc
 Company
Kir Danner
 Authorized Signature
8.12.13
 Date

NOTE: This addendum acknowledgment should be submitted with the bid to expedite document processing.

**ADDENDUM TO
HEALTH AND HUMAN RESOURCES LOCUM TENENS NURSING AGREEMENT
BETWEEN
THE STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION - PURCHASING DIVISION
AND
AMN HEALTHCARE, INC.**

AMN Healthcare, Inc. ("Agency") and The State Of West Virginia Department Of Administration - Purchasing Division ("Client") entered into a Healthcare Staffing Agreement for the purpose of using Healthcare Providers ("Providers") to provide temporary professional services at Client's facility(ies), on or about _____, 2013 (the "Agreement"). The parties hereby enter into this Addendum to that Agreement ("Addendum") for the purpose of adding the additional terms below to the terms of the Agreement. Effective _____, 2013 ("Addendum Effective Date"), the terms and conditions of the Agreement, as amended and modified below, shall apply:

1. **DESCRIPTION OF SERVICES.** Agency will use its best efforts to recruit qualified Providers to staff Client's facility(ies) from Agency and/or Agency's direct and indirect subsidiaries in accordance with Client's specifications. It is Agency's policy not to use subcontractors.
2. **HEALTHCARE PROVIDER QUALIFICATIONS.** Agency will provide Client with qualifications of the Providers presented as candidates for assignments, including completed application, skills checklist and references. Client will verify the identity and credentials of each Provider by a visual check of the Provider's photo identification and professional license or certification. Client agrees to interview candidates within 48 hours of file submission.
3. **MINIMUM WORK WEEK.** For Providers confirmed for eight (8), ten (10) or any combination of eight (8), ten (10) and twelve (12) hour shifts, Client will provide Providers a minimum of forty (40) scheduled hours per week. For Providers confirmed for twelve (12) hour shifts, Client will provide Providers a minimum of thirty-six (36) scheduled hours per week. The calculation of the guaranteed minimum work week includes regular and overtime hours worked but does not include any "on-call" time. Should Client not provide Providers the minimum hours, Client will be invoiced and agrees to pay the regular rate for all hours below the minimum.
4. **FIRST REFERRING AGENCY.** It is understood that Agency is the first referring Agency unless Client notifies Agency within 48 hours of such written or verbal introduction of Client's prior knowledge of said Provider's availability. If Agency is the first staffing agency to submit a Provider's profile (either written or verbal) to Client for consideration, Client will not use the services or otherwise engage that Provider for employment except through Agency during the term of this Agreement.
5. **RIGHT TO HIRE.** Following confirmation of assignment of a Provider, Client may subsequently directly hire that Provider only after the completion of at least 1,080 consecutive hours on assignment (equivalent to two 13 Week Assignments) through Agency and the current or confirmed assignment, at no fee. Client shall provide Agency 30 days prior written notice of its intent to directly hire Provider, including the date of anticipated hire. The obligations of this Right to Hire provision survive the expiration or termination for any reason of this Agreement.
6. **INDEMNIFICATION.** Each party agrees to indemnify and hold harmless the other from and against any and all claims, losses, damages, costs and expenses (including reasonable attorney's fees) that arise out of or result from the negligent, reckless or intentional acts or omissions of the indemnifying party (the "Indemnitor") only if and to the extent adjudicated to be caused by the Indemnitor. Indemnification is subject to: (a) the indemnified party promptly providing the Indemnitor written notice of the claim; (b) the Indemnitor's right to control the defense and settlement of the claim (provided that the Indemnitor may not settle or defend any claim without the indemnified party's consent, unless it unconditionally releases the indemnified party from all liability); and (c) the indemnified party providing reasonable assistance to the Indemnitor. This obligation shall expressly survive the expiration or termination, for whatever reason, of this Agreement.
7. **CONFIDENTIAL INFORMATION.** Each Party shall keep confidential all Confidential Information of the other party ("owning party"), and shall not use or disclose such Confidential Information either during or at any time after the term of this Agreement, without owning party's express written consent, unless required to do so by law, court order or subpoena in which case a party shall not disclose such information until it has provided advance notice to owning party such that owning party may timely act to protect such disclosure. For purposes of this provision, "Confidential Information" means non-public information about either party or its employees that is disclosed or becomes known to the other party as a consequence of or through its activities under this Agreement, including,

but not limited to, matters of a business nature, such as Provider and prospective Provider names and information, bill rates and the terms of this Agreement, compensation and benefits packages and structure, hiring decision-making process, hiring needs and/or requests for placement, costs, profits, margins, markets, sales, business processes, information systems, and any other information of a similar nature. Client agrees to use appropriate security measures to protect AMN employee, client and/or healthcare provider personal information from unauthorized access, destruction, use, modification or disclosure in accordance with all federal and state privacy laws.

8. **CONSENT TO FAX.** In order to ensure that Agency is in compliance with state and federal law, Client hereby expressly grants permission to Agency to send all facsimile communications to any Client location.
9. **BILLING.** The parties acknowledge that a reimbursement arrangement exists between the parties with respect to housing and meals. The reimbursement amount is included in the fee paid for services by Client, and for which Agency will provide substantiation of the reimbursement amount. Amounts reimbursed by Client may be subject to tax deduction limitations. Invoices will be rendered weekly in an electronic format and delivered via email or a web based application (or at the sole discretion of Agency delivered in hardcopy format), to the following:

X _____
Client Designated Client Name

X _____
Client Designated Address

X _____
Client Designated City, State, Zip

X _____
Client Designated Email Address for Invoices

Information appearing on the invoice shall be deemed accurate and affirmed by Client unless Client notifies Agency in writing, specifying the particular error(s), omission(s) or objection(s) within forty-five (45) days of invoice date. Failure to notify Agency within that time shall constitute a waiver of any objection thereto.

If Client is past due on any invoice by 45 days or more, it shall upon request of Agency promptly provide its financial statements (including its balance sheet, income statement and statement of cash flows) for its most recent completed fiscal year and for all interim periods since such fiscal year (collectively "Financial Statements") to Agency. In lieu thereof, Client may immediately bring its account current. Additionally, if at any time Client has an account receivable balance of \$500,000 or greater, at Agency's request (but no more frequent than quarterly), Client shall promptly provide Agency Client's Financial Statements and such other financial information as may be reasonably requested.

In the event that any action is brought to enforce or interpret this Agreement or any part thereof, the prevailing party shall recover its costs and reasonable attorneys' fees in bringing such action. In the event of non-payment by Client, Client shall pay all costs incurred by Agency in collecting delinquent amounts, including collection agency fees.

10. **GOVERNMENT MANDATED COST INCREASES.** If at any time during the term of this Agreement, Agency is required to increase its employee's compensation (due to increase in minimum wage rates or mandatory benefits requirement), or incurs an increase in its compensation costs as a direct result of any law, determination, order or action by a governmental authority or government insurance benefit program, Client agrees that Agency may increase the bill rates proportionately so as to place Agency in the same position it was in prior to such law, determination, order or action. Client shall pay such increased bill rates upon Agency's provision of thirty (30) days notice of such increase.
11. **SAFETY LAWS.** Client accepts responsibility for compliance with all relevant safety and health laws and regulations during the period of a Provider's assignment under Client's supervision, including but not limited to Joint Commission regulations relating to orientation and evaluation and HIPAA regulations. While Agency will give each Provider a safety and standards manual relating to safety, universal precautions, occupational exposure to bloodborne pathogens, other safety issues and HIPAA regulations, Client will also provide each Provider with all necessary site-specific training, orientation, equipment and evaluations required by federal, state or local occupational safety laws or rules, including Joint Commission and HIPAA, for members of Client's workforce. Further, Client will only assign Providers to work in the clinical specialty areas in which they are professionally qualified and oriented to work. In the event of any sentinel event or actual or threatened claim

arising out of or relating to the acts or omissions of Provider, Client shall provide Agency written notice of such claim immediately and, in no event, 30 days after Client knew, or reasonably should have known of such claim.

12. **PERFORMANCE EVALUATIONS.** Client agrees to complete a written evaluation regarding the performance of each Provider upon completion of their assignment, and to forward this evaluation to Agency within fifteen (15) days. Client may complete the performance evaluation on either the form provided by Agency or a comparable form of its choosing.
13. **TERMINATION OF ASSIGNMENT.** The assignment of a Clinician will be terminated by Agency if the Client provides in writing that the Clinician is incapable of performing the duties of the position, commits acts of professional negligence, is absent from the position without Client's permission during scheduled times, is insubordinate, engages in substance abuse, violates Client's express rules or regulations, or engages in other unprofessional conduct or breach or neglect of duty. For any reasons other than those listed above, Client agrees to give Agency fourteen (14) days written notice of cancellation of any Clinicians once a confirmation has been sent by Agency. Should Client be unable to provide such fourteen (14) days cancellation notice, Agency reserves the right to bill Client for four (4) weeks at the Clinician's regular hourly billing rate. In the event of a cancellation without cause, including cancellations with proper notice, Client shall be responsible for any housing and travel costs actually incurred by Agency as a result of such cancellation.

Client shall indemnify Agency for all costs, liabilities or losses associated with defending any charge, complaint, claim, cause of action or suit (hereinafter collectively referred to as "claim(s)") by (1) any governmental or administrative agency and/or (2) any Clinician or anyone acting on his/her behalf, in which Client's action/inaction has given rise to, in whole or in part, the underlying claim. This may include, but is not limited to, claims for breach of contract, defamation, invasion of privacy, intentional or negligent infliction of emotional distress, wrongful discharge, discrimination, harassment, retaliation, or violation of any federal, state or other governmental statute or regulation.

14. **FLOATING AND PRECEPTORS.** Client agrees to float a Clinician only in accordance with Client's floating policies for all staff, and the clinical experience of the Clinician. Client confirms that Client's policies on floating comply with current Joint Commission standards, including the provision of an appropriate orientation to the new unit. Client agrees that it will not request, require or permit Clinicians to act as preceptors.


In the event of a conflict between the terms of the Agreement and this Addendum, the terms of this Addendum shall prevail.

AGREED AND ACCEPTED BY

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
PURCHASING DIVISION

AMN HEALTHCARE, INC.

By: _____
Signature

By: 
Signature

Printed Name

Kim Howard
Vice President of Client Services

Title

Date

August 13, 2013



RFQ Submittal to the State of West Virginia
Health and Human Resources
BHS14022
Roberta Wagner, Buyer
Due 8.13.13



Submitted by:
Gina Sdao
Regional Director
AMN Healthcare, Inc.
12400 High Bluff Drive
San Diego, California 92130
866.949.5778
Gina.Sdao@amnhealthcare.com

CONFIDENTIAL

*Information contained is for client's internal review only.
Proprietary and Confidential*



August 13, 2013

Roberta Wagner, Buyer
West Virginia Purchasing Division - RFQ BHS 14022
2019 Washington Street E
Charleston, WV 25305

LETTER OF TRANSMITTAL

AMN Healthcare, Inc. hereby submits its proposal to provide Locum Tenens Nursing Services. Thank you for this opportunity.

Any questions or comments regarding this proposal should be directed to the following AMN Healthcare contact:

Official AMN Contact for this RFQ:

Gina Sdao, Regional Director for AMN Healthcare, Inc.
12400 High Bluff Drive, San Diego, CA 92130
Office: 866.949.5778 Mobile: 858.243.8398 Email: Gina.Sdao@amnhealthcare.com

AMN Healthcare, Inc. (AMN) is the nation's largest provider of high quality healthcare staffing in temporary, contract and permanent positions; AMN has the combined nursing, physician and allied health staffing resources to become your partner across a continuum of specialties and assignment lengths. AMN serves clients in all 50 states plus the District of Columbia, US Virgin Islands and Puerto Rico, as well as the Canadian Provinces.

AMN is a big company that still thinks and acts like a start up. We want your business and it is part of our corporate culture to earn your business daily. AMN cannot exist without our clients. We consider ourselves to be in partnership with you and address your needs with the thought that we are working toward the maintenance of a long term relationship.

Along with our 28 years of experience, and TJC (The Joint Commission) Corporate Certification for Healthcare Staffing, we believe that AMN's Core Values of Respect, Trust, Passion, Customer Focus, and Continuous Improvement are the solid foundation for partnership with the State of West Virginia. AMN understands that our ultimate goal is to support the facility's ability to provide consistent quality patient care to those they serve.

We want you to know that as your staffing partner, we are here for you and just a phone call away, 24 hours a day, 365 days a year - including holidays. A member of our management team is on call and available to answer questions and resolve issues that come up in the middle of the night at 800.282.0300.

All information is provided in good faith and is deemed an accurate overview of AMN's ability to serve your staffing needs. The signer below has the authorization to commit AMN Healthcare, Inc. to the terms of the proposal.

Sincerely,
FOR AMN HEALTHCARE, INC.

A handwritten signature in cursive script that reads "Kim Howard".

Kim Howard
Vice President of Client Services





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AMN Healthcare's Partnership with the State of West Virginia

At AMN Healthcare - We have a passion for healthcare and the people who deliver it. For more than 28 years, we have built client partnerships that make exceptional patient care possible by following **three guiding principles**:



Unmatched Commitment

We are committed to helping you solve your staffing challenges, whether you need one clinician or a complete workforce management solution. We deliver.

Innovation

Building on our core competencies of healthcare recruiting and staffing, AMN is constantly creating new and better ways to serve your changing needs.

Accountability

We promise and deliver measurable results as your preferred staffing partner – from our fill rates to adherence to the highest clinical standards.

The Leader in Clinical Healthcare Staffing

AMN's 28 years of success matching and delivering qualified clinicians in all specialties and exceptional service to the nation's top-rated healthcare facilities is based on our proven reputation as the trusted industry leader. That is why AMN has become recognized as the preferred partner for healthcare organizations and professionals.

AMN Healthcare provides innovative workforce management solutions and the largest, offering of high-quality clinical Clinicians that consistently enhance quality of care and operational efficiency while reducing overall labor costs. We set standards of excellence that are achieved through our extensive knowledge, experience, resources and integrity.

AMN Healthcare is a big company that still thinks and acts like a start up. We want your business and it is part of our corporate culture to earn your business daily.

AMN cannot exist without our Clients. We consider ourselves to be in partnership with you and address your needs with the thought that we are working toward the maintenance of a long term relationship. **We want to be your first staffing call.**





We Are AMN Healthcare

- **Nation's largest** healthcare staffing company providing physician, nurse and allied staffing, physician search, managed services, home healthcare and recruitment process outsourcing
- A **founding company** in the industry: a strong tenured management team with proven track record of driving innovation, navigating through economic cycles and setting highest standards for quality and efficiency
- A **healthcare company** providing solutions to the **healthcare labor shortage** driven by aging population, retiring clinicians, increasing life expectancy, and medical innovation
- An **agile, fiscally conservative** organization with an operating model streamlined for **scalability** to achieve operating leverage and improved EBITDA margins over the long term



Key Differentiators

AMN Healthcare has evolved into the nation's leading healthcare staffing and managed services company. From temporary staffing, permanent placement, and managed services, we connect our clients to the largest, most diverse network of qualified physicians, nurses and allied Clinicians.

What sets AMN Healthcare apart includes:

- **Leadership** –Leader in healthcare staffing and management services with 28 years of experience.
- **Consultative partnership** – We work with clients to find customized and scalable solutions.
- **Service** – We provide a high quality, reliable and personalized service.
- **Workforce Solutions** – We provide efficiencies and cost savings to organizations helping them to manage all or part of their workforce.

AMN Healthcare's strong relationships with its client facilities and dedication to providing the best Clinicians have combined to create a successful, high-quality operation staffed by top-notch employees committed to meeting the needs of patients and facilities for decades to come.





All of AMN's actions are governed by a mission statement and business creed which demands scrupulous honesty and fair dealing with both its client facilities and Clinicians.

Each client's need to comply with TJC, OSHA, CDC, and ANA standards, as well as provide the most professional service possible to its patients, is of paramount concern in every phase of the service provided by AMN.

In this roller-coaster economic climate, AMN Healthcare is here as your partner to provide the supplemental Clinicians you need right now. We will still be here for you as things improve. As a fiscally conservative organization, AMN is prepared for financial fluctuations. We are not going anywhere. We are all in this together – now and in the future.

AMN Has A Wider Scope of Services

Healthcare Providers

- Physician
- Nurse
- Allied Professional
- Home Care Professionals
- Dentist
- Pharmacist



Workforce Solutions

- Managed Services
- Per Diem Staffing
- Local Staffing
- Travel Staffing
- Retained Search
- Home Care
- Contingent search
- Continuing Education
- Healthcare Employment Websites
- Recruitment Process Outsourcing

Clients

- Acute care hospitals
- Physician offices
- Government facilities
- Home health providers
- Medical clinics
- Rehabilitation facilities
- Surgery centers
- Schools
- Long-term care facilities
- Pharmacies
- Sub-acute facilities
- Families



Benefits of Working with AMN

Since inception, AMN Healthcare has placed over 3.5 million healthcare workers in more than 10 million shifts on behalf of thousands of healthcare facilities across the U.S. Unlike most staffing agencies, employment services, and "headhunters", we are a healthcare firm first, possessing knowledge of the medical staffing environment that is unsurpassed in the industry. Experienced management teams, health professional-centric recruiting methodologies, scalable technology architecture, a large geographic footprint and a customer service focus make AMN the partner of choice for healthcare organizations nationwide. In addition to our strong local presence, AMN has developed healthcare-specific workforce solutions programs that enable us to deploy and manage a



large number of employees within workforce environments that are experiencing severe staff shortages.

AMN has a depth and breadth of service offerings that no other healthcare company can offer. With the largest supply of quality, pre-screened physicians, registered nurses and allied health professionals, (including PTs, OTs, SLPs, technologists, dentists and pharmacists) combined with a wide variety of flexible staffing and service options across multiple specialties and assignment lengths, AMN can meet any healthcare staffing need.

AMN's Distinguishing Qualities

GLOBAL PRESENCE	CORPORATE STABILITY	QUALITY FIRST	THOUGHT LEADERSHIP
			

- Largest clinical recruitment company in the U.S.
- 6000+ satisfied hospital and healthcare clients
- Placement of tens of thousands of clinical professionals each year
- Database of more than 400,000 active clinical candidates in critical specialties
- Industry's largest clinical & quality management team
- Publicly-traded, stable industry leader with verifiable financial statements
- The leading provider of Clinical Staffing Services, Managed Services Programs, and RPO solutions for Healthcare



Clinicians Serving Our Clients

During the fourth quarter of 2012, AMN Healthcare had an average each day of about 5,518 nurse, allied and other clinical Clinicians contracted to work for us, and days filled by our physician and CRNA independent contractors totaled 48,502. Days filled is calculated by dividing the physician and CRNA independent contractor hours filled during the period by eight hours.

The table below demonstrates the headcount for 2012 that AMN fulfilled directly through our own Health Professionals or through our prescreened and qualified subcontracting partners:

AMN Headcount (2012)	
	2012 Total
AMN Health Professional Employees	15,865
Subcontracted Employees	8,534
Total	24,399

We are also the first U.S. temporary staffing company to receive multi-site Joint Commission Corporate Certification for Nursing, Allied (Med Travelers) and Physician locum tenens (Staff Care). And, with #1 ranked nurses, in clinical excellence, patient satisfaction, dependability, experience and compatibility with hospital culture —as well as Clinicians that meet or exceed the highest competency standards— it's no wonder our Clinicians are rebooked, time and time again!

Access to the Largest Supply of Clinicians

AMN clients have access to the largest network of qualified Clinicians in the country - with tens of thousands active professionals in our database. AMN's broad and progressive continuum of disciplines, specialties and assignment lengths provide clients with more options to fill unique staffing needs. AMN is able to maintain this network of Clinicians, including registered nurses, physicians, pharmacists, technicians, therapists, and more, because of unique recruitment strategies.

AMN's multi-brand approach to targeted online, social networking, and print advertising, attendance at conferences and career fairs, along with AMN's widely-known standing as a premier career option for nurses, physicians, pharmacists, and allied health professionals, allows AMN to attract top medical professionals to fill almost any assignment need quickly and easily.



Innovations in Recruitment

As the largest provider of Clinicians in the country, AMN has earned the trust of more than 80% of the American Hospital Association acute-care hospitals and healthcare clients nationwide because of our extensive supply of quality professionals, dedicated service staff and client-specific programs. We have a large database of experienced Clinicians as a result of AMN's targeted, far-reaching recruitment efforts, unlike any other company in the industry today.

What that means for our valued clients is that AMN's recruitment strategy, coupled with a seasoned, professional, caring recruitment team, gives you the comfort and confidence of knowing that we understand how to recruit and retain the best-matched Clinicians to fill your specific staffing needs.

Innovative Recruiting Tools



GOOGLE STRATEGY:

SEO management strategy & key word search, Jobs 2 Web



PODCASTING:

Focuses on career advice, benefits of changing roles, making the transition



WIDGETS & RSS FEEDS:

Provides news, job info and more



SOCIAL NETWORKING PROGRAMS:

Connects healthcare professionals & directs targeted applicants to the right positions, Delphi forums, Nurse Connect



TECHNOLOGY:

CRM, healthcare professional database, Email campaigns, Job Board Aggregators



NEWSLETTERS:

Publications with over 100,000 newsletter subscribers



INTERNET ADVERTISING:

Pay-per-click ads through major search engines



GEO-TARGETING:

Maps healthcare professionals by specific areas and specialties



FINANCIAL INCENTIVES:

Signing bonuses, relocation, tuition loan forgiveness, professional association dues, certification reimbursement

The Right Professionals for the Right Assignment Length

To provide you with value-based, strategic staffing solutions, AMN offers **variable assignment types and lengths** tailored to your unique needs, enabling you to maintain your standards of providing continuity of care to your patients. Whether you are looking for **nurses, physicians,**



or allied Clinicians to fill daily, short-term or long-term assignments, temporary-to-permanent positions or full-time jobs, we have or can find the right candidate.

Nurse Staffing

Registered Nurses and Licensed Practical / Licensed Vocational Nurses are ready for assignments - whether for short or long-term assignments or even Temp to Perm – AMN Healthcare has the right assignment length to meet your needs. Traditional Travel assignments at 13 weeks or Short Term NurseChoice – at 4 to 8 weeks are ready to start. Local / Per Diem Nurses for a day or a week are also available.

Nursing Specialties Include:

- Antepartum, Labor and Delivery, Post Partum
- BMT, Cath Lab, CVICU, CVOR
- Dialysis, Endoscopy, ER, First Assistants
- Generalist, Home Health, Hospice, House Supervisors
- ICU, Level I and II Nursery, Med Surg, Neuro ICU
- NICU, Oncology, OR, PACU, PCU (Stepdown)
- Pedi, Pedi Stepdown, PICU, Psych, Physical Rehab
- SICU, Subacute, Skilled Nursing and Telemetry

AMN also places:

- Surgical Technologists,
- CVOR Surgical Technologists
- Sterile Processors

Allied Health

Allied Health Professionals are available for Per Diem, Short Term and Long Term positions.

- Cardiac Interventional Technologist
- Cath Lab Technologist
- Certified Occupational Therapist
- Certified Occupational Therapist Assistant
- Certified Radiology Technologist
- CT Technologist
- Dosimetrist
- EEG Technologist
- Mammography Technologist
- Medical Laboratory Technician
- MRI Technologist
- Nuclear Medicine Technologist
- Pharmacist
- Pharmacy Technicians
- Phlebotomist
- Physical Therapist
- Physical Therapy Assistant
- Polysomnographic Technologist
- Pulmonary Function Technologist



- Radiation Therapist
- Respiratory Therapist
- Sonographer: Diagnostic, Echo, GYN, Vascular
- Speech / Language Pathologist
- Speech / Language Therapist

Physicians and Specialty Clinicians

Perm Placement and Locum Tenens for all specialties.

- Physicians
- Nurse Practitioners
- Certified Registered Nurse Anesthetists
- Dentists
- Physician Assistants – Certified

AMN's Successful Multi-brand Recruitment and Sourcing Companies

Physicians	Nurses	Allied
<p>STAFF CARE an AMN Healthcare company</p> <p>MERRITT HAWKINS an AMN Healthcare company</p> <p>LINDE HEALTHCARE an AMN Healthcare company</p> <p>Kendall & Davis</p>	<p>AMERICAN MOBILE HEALTHCARE an AMN Healthcare company</p> <p>NurseChoice an AMN Healthcare company</p> <p>O'GRADY PEYTON INTERNATIONAL an AMN Healthcare company</p> <p>NursesRx an AMN Healthcare company</p> <p>medical express an AMN Healthcare company</p> <p>Nursefinders. an AMN Healthcare company</p>	<p>Med Mavens an AMN Healthcare company</p> <p>Resources On Call an AMN Healthcare company</p> <p>ClubStaffing an AMN Healthcare company</p> <p>Platinum Select STAFFING</p> <p>Pharmacy</p> <p>RX PRO HEALTH an AMN Healthcare company</p>



Organizational Structure

Leadership

With decades of experience in healthcare, financial, human resource, contracting, marketing, and information technology management, the AMN executive team brings a breadth and depth of expertise unparalleled by any other healthcare company in the staffing industry. AMN's management team has a clear vision and strategy to continue evolving the organization and position the company for long-term growth. Our executive leadership encourages a values-driven, highly energized culture where team members deliver results through an innovative and collaborative approach to quality account management and talent-pool development.

The benefit to our clients is they can have confidence knowing that they have partnered with the thought leader in healthcare workforce management that has the resources and experience to effectively execute service and adapt to changing conditions.

AMN Healthcare's Principal Officers:

Susan R. Salka (Formerly Nowakowski)

President, Chief Executive Officer and Director, AMN Healthcare

Susan joined AMN Healthcare in 1990 and has been a director since September 2003. She serves as a member of the Company's Executive Committee and has been AMN's President since May 2003 and the Chief Executive Officer since May 2005. Susan has been employed at AMN in a variety of leadership roles, including Chief Financial Officer and Chief Operating Officer.

Prior to joining AMN Healthcare, Susan worked at BioVest Partners, a venture capital firm, and at Hybritech, a subsidiary of Eli Lilly & Co. which was later acquired by Beckman Coulter.

Susan is a highly respected business leader with experience in healthcare services, life sciences and venture capital, and serves on the board of directors of Beckman Coulter (NYSE: BEC), the University of California San Diego Sulpizio Family Cardiovascular Center, Biocom and San Diego State University College of Business Administration. She served on the board of Playtex Products, Inc. (NYSE:PYX) from 2001 until they were sold to Energizer Holdings (NYSE: ENR) in October 2007 and was chair of the audit committee.

Marcia Faller, RN, MSN, PhD

Chief Clinical Officer and Executive Vice President, Operations

California RN License #: 367725 Expires: 12/31/13

Marcia joined AMN Healthcare in 1989 and served as one of AMN Healthcare's Vice Presidents, with various responsibilities in recruiting and operations. Marcia was appointed Senior Vice President of Nursing and Traveler Services in July 1997. Marcia has held the Chief Clinical Officer position since 2004 in order to further align AMN's commitment to its hospital clients and nursing organizations. In May 2006, Marcia was appointed Executive Vice President, Operations with the addition of executive leadership for Corporate Human Resources to her responsibilities of quality management and professional education, Clinician housing, customer service, information technologies, facilities and other office support.

Prior to joining AMN Healthcare, Marcia worked for Sharp Memorial Hospital, where she was responsible for nurse recruitment operations. Previously, Marcia was a staff nurse and manager in



intensive and coronary care. She earned a Bachelor of Science in Nursing from the University of Arizona and a Master's Degree in Nursing from the University of California - San Diego. Marcia was conferred a PhD in Nursing in May 2010. Marcia's dissertation was on "Predictions of Job Satisfaction and Burn Out in Travel Nurses".

Ralph S. Henderson

President, Nurse & Allied Staffing and Recruitment Process Outsourcing

Ralph joined AMN Healthcare in September 2007. Ralph is responsible for leading the sales and operations of AMN's nurse and pharmacy staffing divisions, as well as their RPO business. Ralph brings to AMN a highly successful background in recruitment, operations management, marketing and business development. Prior to AMN Ralph ran North American operations for Spherion one of the largest staffing and recruiting providers. Prior to that, Ralph was with American Express for nine years where in his last role he was vice president of sales and account management in the Travel Management Services Division. Ralph holds a Bachelor of Science degree in Business Administration from Northern Arizona University.

AMN Operating Divisions

As one of the nation's largest and most comprehensive healthcare staffing companies, AMN has a rich history of expansive capabilities. With AMN's corporate headquarters in San Diego, California, we own and operate several divisions across the U.S. and abroad, each with dedicated executive leadership. AMN currently has offices in over 80 locations around the country, providing national, regional, and local client support and recruitment coverage across all time zones. AMN's division structure is as follows:

Nurse & Allied Division:

Ralph Henderson, President Travel Nursing & Allied & RPO

Beth Machado, Division President - Travel Nursing

Becky Kahn, Division President - Per Diem

Landry Seedig, Senior Vice President - Allied Health

This division of AMN offers the full spectrum of per diem, local contract, and travel temporary healthcare staffing solutions for our nurse and allied healthcare clients. In the past few years, we have expanded our service offerings to provide all types of shift coverage and assignment lengths. With over 80 branch and regional office locations around the country, AMN can connect you to the largest and most diverse and educated pool of nursing candidates in the country. On an average day, AMN has more than 5,000 Clinicians on assignment.

Nursing:

AMN provides high quality, licenced registered nurses, licensed practical or vocational nurses, advanced practice nurses, surgical technologists and dialysis technicians in a wide range of specialties for per diem, local contract and travel assignments throughout the United States. We place our qualified nurse professionals with premier, nationally recognized hospitals and hospital systems, including teaching institutions, trauma centers, faith-based and community hospitals.

- All Nursing Specialties including Pediatric
- Local Per Diem and Contract Nurse Staffing
- Travel Nurse Staffing
- International Nurse Staffing (12-24 month assignment)
- Local Per Diem, Contract, and Travel Research Clinicians and Scientists



- All AMN -2 employees

Allied:

AMN provides allied and pharmacy health professionals to acute-care hospitals and other healthcare facilities such as skilled nursing facilities, rehabilitation clinics, and retail and mail-order pharmacies. Allied health professionals include such disciplines as physical therapists, respiratory therapists, occupational therapists, medical and radiology technologists, speech pathologists, rehabilitation assistants, pharmacists and pharmacy technicians.

- Local Per Diem and Contract Allied Health Professionals
- Travel Allied Health Professionals
- Local Per Diem and Contract Medical Clerical, Central Supply, and Healthcare IT professionals
- All AMN W-2 Employees

Physician & Mid-Level Practitioners - Locum Tenens Division

Sean Ebner, President of Locum Tenens

Under our Staff Care and Linde Healthcare brands, this division places physicians of all specialties, certified nurse anesthetists (CRNA), nurse practitioners, and dentists on a temporary basis (locum tenens) as independent contractors with all types of healthcare organizations throughout the United States including hospitals, medical groups, occupational medical clinics, individual practitioners, networks, psychiatric facilities, government institutions, and managed care entities. These professionals are recruited nationwide and are typically placed on multi-week contracts with assignment length ranging from a few days up to one year.

Physician – Permanent Search Division

Mark Smith, President of Physician Permanent Placement

AMN Healthcare provides permanent placement services under our Merritt Hawkins and Associates (retained search) and Kendall and Davis (contingent search) brands to hospitals, healthcare facilities, and physician groups throughout the United States. Our broad specialty offerings include over 70 specialist and sub-specialist opportunities such as internal medicine, family practice, and surgery.

Integrated Workforce Solutions Division

Bob Livonius, President of Integrated Workforce Solutions

This division harnesses the resources from all of the AMN recruiting divisions and is instrumental in helping clients create their approach to clinical and non-clinical workforce solutions in a more comprehensive and coordinated manner. Clients utilizing this portfolio of services benefit from operational efficiencies, improved quality care, and better cost alignment for their overall workforce utilization. The Integrated Workforce division provides expertise and resources to complete workforce design studies, solution implementation, and dedicated operational management of permanent and contingent processes. Designed to provide efficiencies and cost savings to your organization, our clients can manage all or part of your workforce through a variety of AMN's flexible and scalable options:

- Managed Staffing Programs – MSP (Clinical & Non-Clinical Healthcare)
- Recruitment Process Outsourcing – RPO



- Electronic Medical Records Workforce Management - EMR
- Float Pool Management
- Staffing Office Management
- Disaster Incident/Surge Capacity Planning/Staffing
- Payrolling Services
- On-boarding, off-boarding and credential management of 1099 and SOW contractors



AMN Healthcare's Professionals – Quality and Competency

AMN - Unparalleled Quality Expertise

Quality staffing and unparalleled internal quality programs have become the AMN standard that others strive to match. Through our quality management solution of people, process and technology, we give you access to the most stringent quality management program of any staffing company in the industry.

Our clinical leaders have decades of hospital experience in clinical evaluation of references, work history and skill-set, competency and education, licensure, on-boarding and more.

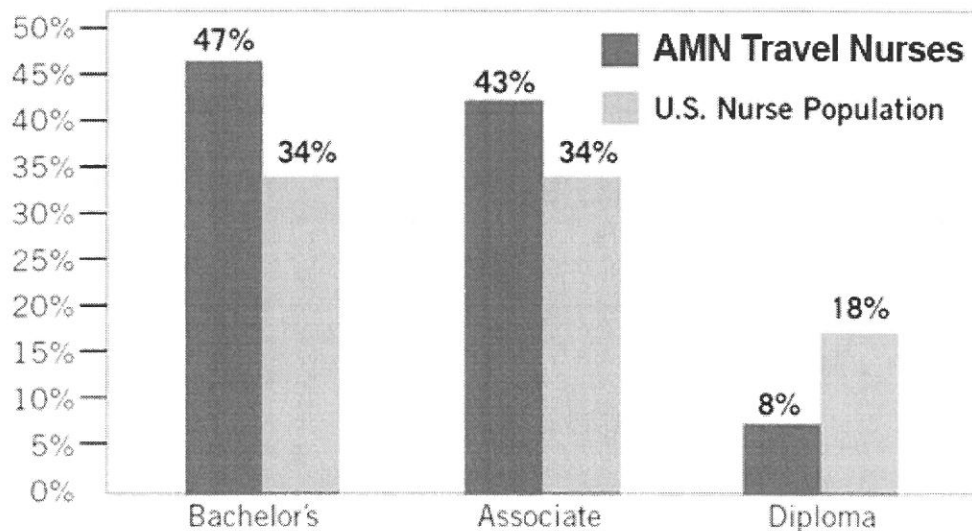
Our experienced, doctorate of nursing-prepared quality leadership, have a staff of qualified registered nurses on staff to make sure we have the most qualified Clinicians matched to your facility requirements.

Innovation: Leading the Way in Delivering Quality Professionals

AMN's number one priority is to ensure that your staffing needs are matched and fulfilled with the most qualified Professionals. In an effort to fulfill these needs, we have gone one step further by creating a Clinical Services and Quality Management department lead by AMN Chief Nursing Officer.

AMN has contact with all appropriate licensing bodies, for all disciplines, in all states. We check every license held by a professional with the appropriate board, for every state in which they are licensed, prior to their departure for an assignment.

- **AMN is Certified by The Joint Commission**
- **AMN professionals rank higher than competitors in hospital satisfaction and reliability**
- **Nearly 70% of AMN Professionals are re-booked due to high levels of client satisfaction**
- **The majority of AMN RNs have 6 + years experience**



AMN's RN's Compared to the United States Nurse Population

Competency and Requirements Model for AMN Clinicians

AMN's competency model incorporates the position description, the performance appraisal tool, and the competency evaluation. Because Clinicians come to AMN with a wide variety of job experience and education, AMN's job specifications focus on the key competencies related to a position as well as the general competencies for the position regardless of the hospital location (i.e. age population, pain management, etc.). *The job expectation for the Clinicians, as it pertains to the specific unit, is defined by each Client Facility in which the Clinician works.*

AMN has selected the following working definitions:

- **Competency:** a person's ability to perform the job.
- **Competency assessment:** a process that utilizes various tools in order to evaluate and potential verify a person's ability to perform the job.
- **Competencies:** categories that may hold specific job related functions that when demonstrated may help in evaluating and verifying a person's ability to perform the job. For our purposes competency categories are: general, specialty, and unit.



The Key General Competencies AMN monitors are:

- Patient Care Standards
- Medication Administration and Safety
- Safe Use of Medical Devices
- Workplace Safety
- Personal Safety
- Abuse and Neglect
- Blood borne Pathogens and Infectious Diseases
- Disaster Preparedness
- Handling Hazardous Materials
- Cultural Issues



AMN is committed to providing quality customer service to achieve the best delivery of services in the industry.



Method of Assessing Competency

Continuing competency will be assessed through review of hospital assignment evaluations returned to AMN, review of the AMN Professional Audit records, review of continuing education and when appropriate interviews with Nurse Managers, Supervisors or other person of authority from whom the Clinician has worked on assignments with AMN. The Clinical Manager contacts the facility Nurse Managers about 2 weeks after the start of each assignment in order to assess (together with the Nurse Manager) the competency and fit of the professional post-orientation.

An assignment evaluation tool is sent directly to the assignment facility for every Clinician. Since the facility provides the direct supervision of the Clinician, the expectation is that the facility will complete the assignment evaluation tool in a timely manner and return to AMN. The Clinical Manager places a call to the facility to facilitate the completion and return of the assignment evaluation.

The Joint Commission accepts several different methods of assessing continuing competence of contract staff. Among the options are:

- *The contract hospital's assessing the contracted employees;
Requiring contract employees to provide proof of general and special patient population competence, as applicable, as part of their contractual responsibilities;*
- *Reviewing the contract organization's competence process to determine whether it meets the contracting hospital's specifications – if it does, appropriate documentation is provided to the hospital; and*
- *Arranging with the outside agency's qualified individual to conduct the competence assessment of the contract staff" [Joint Commission on Accreditation of Healthcare Organizations Joint Commission Resources, Inc. (2002). Assessing Hospital Staff Competence.]*

Additionally, for each Clinician that is on assignment with the same brand (under AMN) for a year consecutively, with no more than 45 days off, the Clinical Manager will provide the Clinician with an Annual Evaluation. Feedback for this evaluation will come from the evaluations provided to us by the Facilities, or a phone reference, as well as information in the audits that is relevant to performance, and/or behavioral issues.

Stages of Competency Evaluation

Stage 1:

Initial competency evaluation is comprised of several key factors that together will determine the potential Clinician's competency (as a Clinician and not for a specific unit or job):

- A. **Educational requirements** of the professional discipline are met
- B. **License/certification** requirements of the position and/or state are met
- C. **Work experience** is determined by AMN's current guidelines for each discipline
References of job-related work experience or internships that, at a minimum, meet standards
- D. **Specialty certifications**
- E. **Assess any indicators** of license investigation, criminal convictions, malpractice actions
- F. **Able to prove legal U.S. work status** or eligibility for TN Visa



- G. **Skills self evaluation** pertinent to the specialty
- H. **Evaluation of skills evaluation**, work references and work experience to show integration and meaning of the information presented in all 3 items
- I. **A specialty test** may be administered to assist in knowledge assessment
- J. **In-service and continuing education** records may be considered
- K. **Previous competence** assessment or evaluations

Stage 2:

Orientation evaluation is comprised of a Clinician review of materials provided by AMN and or Client Facility. The Clinician either completes a post-test or signs an attestation that they have reviewed and understand the material.

- A. **Professional Issues** – Accountability, Compliance, HIPAA, Documentation, Reporting Abuse, Patient Rights.
- B. **Providing a Safe Environment** – Supporting Quality & Safety, Safe Work Practices, Fire, Electrical, Medical Device, & Radiation Safety, Disaster Preparedness.
- C. **Personal Safety** – Avoiding Injury, Ergonomics, Back Injury Prevention, Latex Sensitivity, Personal Security, Workplace Violence, Harassment & Discrimination.
- D. **Providing Quality Care**– National Patient Safety Goals, Sentinel Events, Facility Quality Measures, CMS Preventable Hospital Acquired Conditions, Patient Assessment and Planning, Pain Management, Point of Care Testing, Care of Diverse Populations, Age Specific Care, Restraint use, Patient/Family Education, Nutrition, Advance Directives, Resuscitation, End of Life Care, Organ Donation
- E. **Infection Control** – Fundamentals, Types of Isolation Precautions, Hand Hygiene, TB and Respiratory Fit Testing, Occupational Health and Blood borne Pathogens, Immunizations.
- F. **Medication Safety and Sedation Administration** – (as appropriate per specialty) General Medication Safety, General Medication Administration Guidelines, Sedation, AMN corporate values (5 R's).

Stage 3:

Continuous competency assessment and improvement consist of the evaluation of the Clinician's performance as it relates to the AMN Job Specification and the Unit Specific Job Specification provided by the Client Facility. The AMN Job Specification comprises the following areas:

- A. **Communication, Confidentiality, Customer Service**
- B. **Adaptability, Flexibility**
- C. **Teamwork, Cooperation**
- D. **Reliability, Attendance**
- E. **Initiative, Enthusiasm**
- F. **Quality of Work, Competency**
- G. **Professionalism, Licensure maintenance, Continuing education, Professional/healthcare certifications**
- H. **Accurate Documentation**
- I. **Follows Safety/Emergency Protocols**



Criteria to Be Placed on Assignment

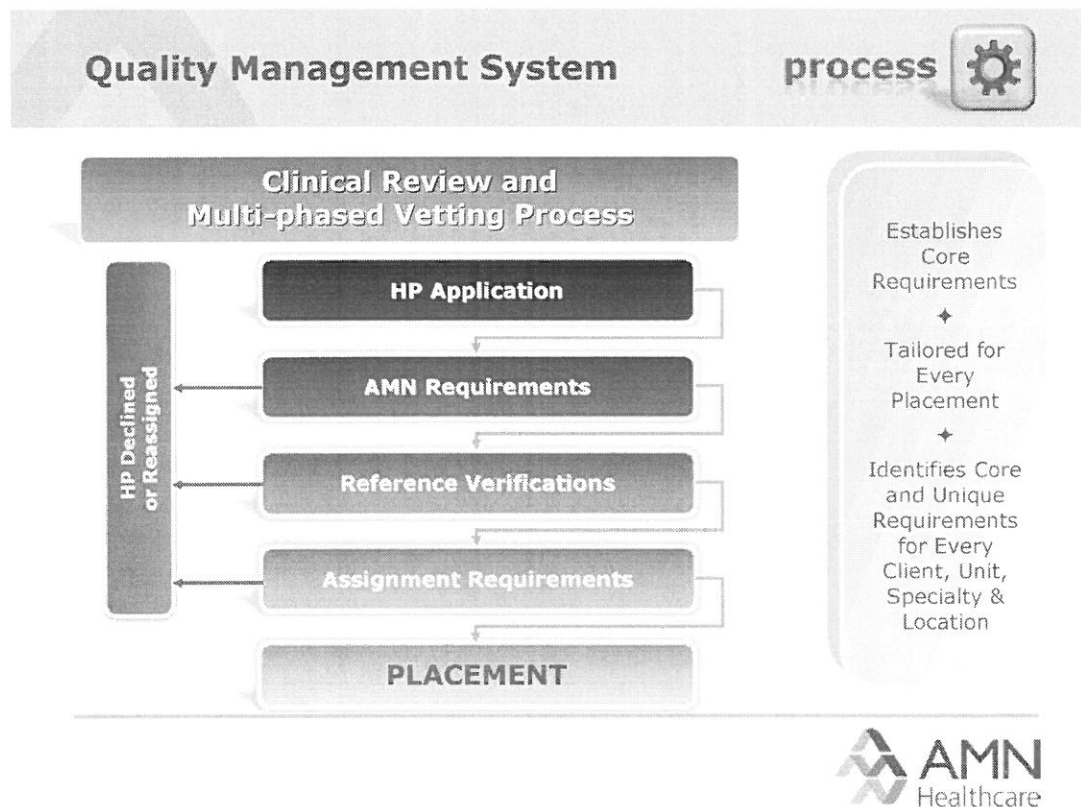
As each application is received, the Clinician's education and employment history are carefully reviewed by a Registered Nurse. Selected candidates must meet the minimum criteria to be on assignment and representing AMN.

These criteria include, but are not limited to:

- **Recent experience appropriate to the setting.**
- **Documentation of the legal right to work in the United States.**
- **Graduate of an approved and accredited college or appropriate program.**
- **Evidence of active/unrestricted license (if required).**
- **Signed application with complete job history.**
- **Current and valid CPR certification and/or ACLS, if required.**
- **Completed Clinical Proficiency Profile.**

Competency is initially determined by comparing the professional's skills checklist, which is their statement of their ability, with a supervisor's evaluation and unit description, which details the scope and nature of the work performed by the professional. The Clinician completes a 4 to 6 page skills checklist.

There are 16 separate checklists - each written specifically to assess each discipline and specialty. On the checklist, the applicant states their years of experience in areas that includes Assessment, Equipment and Procedures, Patient Care, Wound Care, Pain Management, Therapy and Medication Delivery Systems, and Medications - each area specific to their own specialty. The Clinician also states experience with specific age groups and in what type of setting / facility.



AMN's methodical vetting of the qualifications and references of each Professional ensures that all pre-employment requirements are met.

In Depth Review: Multi-phased Vetting Process

Each Clinician is assigned to a Recruiter who contacts the applicant directly to conduct a review of his or her employment history, experience and interest in travel. Upon completion of the interview, the professional's file is submitted to the Quality Management Department for a complete, detailed evaluation.

The Quality Management Specialist reviews each file for completeness and independent verification of past job performance. AMN directly requests written evaluations and unit descriptions, detailing the scope and nature of specialty work performed, from every past acute care employer. AMN does not accept letters of reference or references from agencies or co-workers.

Upon documentation of the professional's complete job history, including satisfactory clinical performance, the application is submitted for final review and approval by the Director of Quality Management.

For an available specialty area position at a client hospital, AMN will only submit the files of professionals who have actively worked in the specialty within the prior year and who have at least twelve months of experience in that specialty. The professional's specialty classification is based on unit descriptions solicited directly from past clinical supervisors, the professional's performance



within that setting and a specialty skills assessment tool completed by the professional. The professional's assessment must match the information obtained independently.

It is AMN's policy to complete criminal background checks for all AMN Clinicians, and additional information may be required as a state, facility or unit requirement. All professionals will have completed background check on file along with authorization to conduct criminal background check. AMN secures through the services of an outside vendor, appropriate criminal background documentation on all professionals prior to their commencing a work assignment.

To be considered complete and current, an initial criminal background check must have been completed for a 7 year criminal history check and then updated every 3 years thereafter. If there is a gap in employment or the professional leaves the AMN for more than 6 months, a criminal background check will need to be updated prior to start of next assignment.

AMN's policy is to check the GSA list of parties excluded from Federal Programs prior to starting any assignment. AMN does not place Clinicians who have a recorded hit/occurrence on this database.

AMN has a multiple check procedure in place. Each Clinician applicant is checked against the OIG database upon application. AMN downloads the new listings from the OIG report monthly and runs a comparison against our entire database of Clinicians. AMN does not place Clinicians that have a recorded hit / occurrence on this database.

In order to maintain compliance with the Fair Credit Reporting Act (FCRA), the Company ensures that prior to initiating a background investigation (which is a consumer report regulated by the FCRA), the Company has within the professional's employment file the professional's signed "Notification and Authorization to Conduct Employment Background Investigation" form.

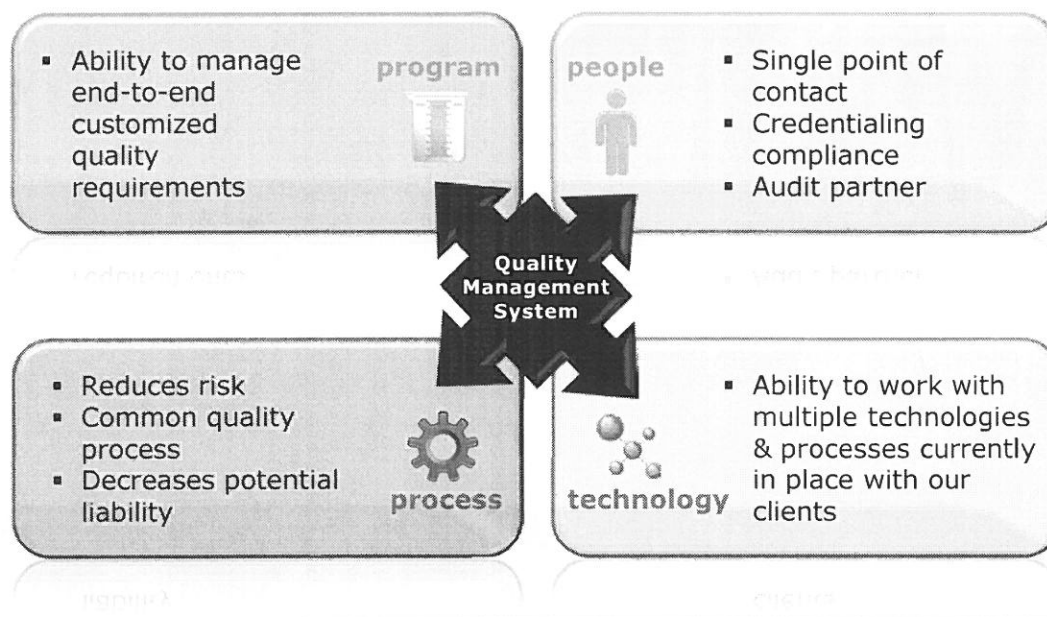
The Clinician's information is then submitted to the outside vendor. The Criminal Background Investigation results are then reported back to AMN:

- a) If negative results are received, then the Quality Management Supervisor (QMS) enters the results in the Quality Management Compliance screen. If "negative", the professional has no reported criminal information to report to the client facility. The QMS prints the notification of negative criminal background check letter and includes it in the document package that will be faxed to the facility.
- b) If "positive" results or a hit of prior criminal conviction is reported, then the QMS follows the AMN Policy and Procedure to exclude those persons with certain types of convictions from eligibility to be placed on assignment.

AMN does not knowingly place any Clinicians with a felony conviction, regardless of the crime; nor do we knowingly place any Clinicians with misdemeanor convictions related to assault, abuse, weapons, or drugs.



AMN Healthcare Quality Management System Benefits



Competency Testing

Before forwarding a Clinician's file to a client hospital, the professional is notified of such examinations, which are a condition of employment. For those clients who request that competency testing be performed by AMN prior to the start of their assignment, AMN has compiled a number of validated examinations and evaluations in conjunction with our National Nursing Advisory Board. These exams are emailed to the Clinician and once they are completed, the answer sheets are returned to AMN for grading and review. Because AMN Clinicians live and work in varied settings throughout the United States, AMN uses tools which are broad based and professionally valid.

Each facility client is unique and has individual needs that only the appropriate professional can address. As your partner, it is our job to match a professional's skills and experience to your specific facility need. Our goal is to help you plan ahead for your staffing needs, ensuring that beds are open and patients are satisfied. With 28 years of experience, we have demonstrated, client after client, the highest degree of professionalism, integrity, and knowledge of the industry, helping us pinpoint the exact nature of the qualifications you require in a Clinician.

When a Clinician has been confirmed for an assignment with a client facility, AMN's Quality Management Department is responsible for obtaining from the professional, copies of all State, Facility, Unit and AMN required documents.



Credentialing:

AMN is aware of the expectations of The Joint Commission, HIPAA and OSHA for its client facilities. In order to meet the requirements of these organizations AMN has the following programs for Clinician education:

Workplace Safety and Patient Care Standards Manual – this is a self-study manual for Clinicians that educates them in the following areas:

- a. **Workplace safety – fire, electrical safety, body mechanics, sexual harassment, and workplace violence**
- b. **Medication Safety**
- c. **National Patient Safety Goals**
- d. **Handling of hazardous materials**
- e. **Standards in patient care**
- f. **Patient's bill of rights**
- g. **Infectious diseases including blood borne pathogens and standards for hand washing**
- h. **Advance directives**
- i. **HIPAA**
- j. **Organ donation**
- k. **Age specific competency**
- l. **Restraints**
- m. **Pain management**

The Clinicians are required to take a post-test at the completion of the self-study manual.

Clinician Handbook – this manual for Clinicians is similar to an Employee Handbook, giving them protocols by which they can expect their benefits to be administered, as well, as important information about:

- a. **Harassment**
- b. **Discrimination**
- c. **Worker's Compensation benefits**
- d. **Health benefits administration**
- e. **Payroll procedures**
- f. **Credentialing Requirements**
- g. **Dispute Resolution**

Naturally, we also confirm that all of our Clinicians have the following credentials prior to starting their assignments:

1. **BLS** – current certificate from the American Heart Association, Red Cross, ASHI, Canadian Heart & Stroke Foundation, Military or hospital issued cards as long as they are the standard requirements for Clinicians.
2. **Active and unrestricted license** for those Clinicians requiring licensure/certification.
3. **Clear check on the Sanctions Report** of the OIG upon application and prior to starting each new assignment.
4. **Clear check on the GSA list of parties excluded** from Federal Programs prior to starting any assignment.



Key General Competencies	Description	Facility Responsible For
Workplace Safety	Basic fire and electrical safety , use of fire extinguishers, the RACEE principle. Also includes principles in Accident Prevention, prevention/treatment of electrical shock and microshock. Additionally, this section covers violence in the workplace – recognition of and reporting responsibilities and sexual harassment.	Facility specific policies, e.g. fire exit locations, location of fire extinguishers, etc.
Personal Safety	This section covers rules for proper body mechanics with special focus on the “back”, musculoskeletal disorders , latex allergy .	Facility specific policies, how to be treated for a workplace injury (AMN provides Worker’s Compensation coverage).
Safe Use of Medical Devices	Section defines a Medical Device , discusses Radiation safety , and prevention of needlestick injuries .	Facility specific policies, e.g. Medical devices reportable incident policy and sharps disposal policy.
Abuse and Neglect	Review of abuse in children and elders , recognition of abuse issues and reporting responsibilities.	Facility and or state specific reporting mandates.
Blood borne pathogens and infectious diseases	This section reviews the chain of infection, various types of bloodborne pathogens , OSHA mandates and methods of compliance such as universal precautions and body substance isolation and standard precautions, exposure risk, post-exposure evaluation and follow up, and waste segregation standards. Specifics related to proper hand washing and the uses of alcohol-based rubs are covered.	Facility specific policies, e.g. exposure control plan.
Disaster Preparedness	Basic information covering most disaster preparedness policies.	Facility specific disaster plan.
Medication administration and safety	Briefly covers basic principles of safe medication administration, common causes for error and key medications requiring special attention.	Facility specific policies, e.g. reporting of a medication error (incident reporting).
Handling Hazardous Materials	Provides information on hazardous materials, Hazard Communication Programs (Material Safety Data Sheets), personal protective equipment, exposure monitoring, and spill containment.	Facility specific policies. Location for chemical spill kit, which departments to notify of large spills.
Patient Care Standards	This section covers specifics on the National Patient Safety Goals, Patient Bill of Rights, HIPAA responsibilities, The Joint Commission Sentinel Events , Pain Management and patient rights including The Joint Commission pain management standard, self-determination and advance directives , Restraints protocols including The Joint Commission and HCFA standards, organ donation and age specific care .	Facility specific policies and procedures.
Cultural issues	Review of the “seven domains of cultural competence”.	Facility specific policies and procedures.



Meeting Health and Credentialing Requirements

AMN Healthcare has adopted a comprehensive method of managing the health assessments of our Clinicians that meets the needs of the vast majority of our client facilities.

It is a business imperative that our Clinicians are prepared for their assignments and ready to start by the pre-arranged start date. We have found over the years that the best way to insure that we meet our goals is to partner with our facilities in obtaining all of the needed information. Therefore, AMN has elected to adhere closely to the recommendations of the CDC in setting schedules for screening and immunizations related to communicable diseases.

The following are the health requirements and the guidelines that AMN has adopted in order to meet these requirements:

- **Rubeola** – if born during or after 1957, two doses of live measles vaccine on or after the first birthday, a physician diagnosed history of measles, or serologic evidence of immunity (positive titer).
- **Mumps** (preferred not required) – one dose of vaccine (usually MMR) or serologic evidence of immunity (positive titer).
- **Rubella** – if born during or after 1957 one dose live vaccine (usually MMR) on or after the first birthday, physician diagnosed history of rubella, or serologic evidence of immunity (positive titer).
- **TB Screening:**
- **Annual PPD Screening** (Mantoux test) – if no evidence of negative PPD within previous year, then 2-step PPD screening is preferred and not mandatory, done whereby, a Mantoux test is administered, read and documented and a second test is given within 1-3 weeks read and documented.
- **For PPD Converters:** evidence of the positive PPD, a Chest x-ray following the initial positive PPD reading AND annual completion of a TB/Respiratory questionnaire to detect any signs and symptoms of active TB.
- **For BCG vaccinated Clinicians:** documentation of the BCG vaccine, positive Mantoux, and an annual TB/Respiratory questionnaire to detect any signs and symptoms of active TB.
- **Hepatitis B** - Documentation of 3 doses Hepatitis B vaccination (at appropriate intervals), serologic proof of immunity or declination of the series of vaccines signed by the healthcare worker.

In order to ensure that our Clinicians are physically capable of performing their responsibilities, they must provide annual documentation from a practitioner (a MD, DO, PA, or NP) stating that they are fit for duty:

- **Physician's Statement** –the examining practitioner certifies that the Clinician is free of communicable diseases and is able to do their job without accommodation (or discusses accommodations).
- **Latex allergy assessment** – we elicit any latex allergy accommodation needs on the annual basis as well.
- **Other Work Related Allergies**



AMN's Standard Requirement Guidelines For Clinicians

Certifications and other credentials	
Hepatitis B	Follows CDC recommendations
Measles	Follows CDC recommendations. Allied professionals have a single immunization***
Rubella	Follows CDC recommendations***
Tuberculosis screening	Annually unless converted or positive history
Physical	Annual
Drug Screening	Annual 10 panel drug screen*
Criminal Background Check	Seven year county-resided. AMN does not place any Clinicians with a felony conviction, or any with misdemeanor convictions related to assault, abuse, weapons, or drugs.**
OIG and EPLS	AMN does not place Clinicians identified in these databases
State license, registration or certification	Per state board of nursing or other licensing agency. AMN will not knowingly place a Clinician that has an action against their license.
BLS	Current Card from AHA, Red Cross, ASHI, or Canadian Heart & Stroke or Military Card. For all positions having direct patient care. Current CPR card for allied professionals having direct patient care.
Joint Commission & regulatory standards	Annually

For our International Clinician through O'Grady Peyton (OGP), because the Department of Homeland Security (DHS) requires thorough background checks for all immigrant Visas issued, OGP does not attempt criminal background checking beyond what the DHS has done. The DHS criminal check is accomplished through a review of the Police Clearance Report from their country of residence from the age of 16. This report shows all charges and convictions handled through the Police.

Adapted from:

The Centers for Disease Control – www.cdc.gov/mmwr/preview/mmwrhtml/00038873.htm and www.cdc.gov/mmwr/preview/mmwrhtml/mm5020a8.htm and www.cdc.gov/niosh/99-143.html, and

The American Lung Association – www.lungusa.org/diseases/tbskinfac.html

***AMN requires a 10 panel Drug Screen. Should our Client require a more extensive or frequent Drug Screen – we will follow their requirements.**

**** Should our Clients require a more extensive Background Check – we will follow their requirements.**

*****Should our Clients require other vaccinations or titers – we will follow their requirements.**



The Drugs Screened are:

Cocaine (COC), Amphetamine (AMP), Methamphetamine (M-AMP), Tetrahydrocannabinol (THC), Methadone (MTD), Opiates (OPI), Phencyclidine (PCP), Barbiturates (BAR), Benzodiazepines (BZD) and Tricyclic Antidepressant (TCA) in human urine.

Drug Screen Service Provider:

Since our Professionals live across the United States, we use eScreen (<http://www.escreen.com>) as a Third Party Administrator. Collection is administered at one of the 1,500 contracted occupational health clinics. The specimens are then tested at CRL Laboratory which is NIDA certified and results are then forwarded to a Medical Review Officer to review. Final results are made available to AMN Healthcare through a secure website.

Third Party Administrator.

Collection is administered at one of the 1,500 contracted occupational health clinics. The specimens are then tested at CRL Laboratory which is NIDA certified and results are then forwarded to a Medical Review Officer to review. Final results are made available to AMN Healthcare through a secure website.

Reference Checks.

AMN's Quality Management Department verifies employment and reference checks on all potential candidates. It is a requirement, prior to hiring a Professional, that we are able to secure independent verification of clinical performance by someone in a supervisory position. Our Quality Management Department is separated from the Recruiting Department, a key differentiator with AMN. This is quite different from the full-desk model, which is the standard operation of most of our competitors.

For Cause and Pre-Employment Testing:

AMN does not allow "random" or "impromptu" testing because such testing may be illegal in some states and raises concerns over testing being done fairly and not on a discriminatory basis.

The only two types of tests AMN allows are pre-employment and "for cause" (at least "reasonable suspicion" based upon objective, observable criteria (smell of alcohol on breath, slurred speech, etc.). In this case, AMN (and our clients) can be confident that we can prove the test was administered fairly, and we do not risk violating state law on random testing (which law is not always clear and is changeable).

Background Check Provider:

ChoicePoint: A service of NexisLexis Choice Trust

1000 Alderman Drive
Alpharetta, GA 30005
Phone: 770.752.6000
Website: www.choicepointinc.com



Quality Management System: Industry Leading Quality

- **Executive Management Leadership**
 - Marcia Faller, RN, MSN, PhD, Chief Clinical Officer and EVP, Operations
 - Kim Windsor RN, MBA, DHA, VP, Clinical Services
- **Recognized by The Joint Commission**
 - Joint Commission Gold Seal of Approval
 - First multi-site, temporary staffing company certified under corporate review
- **Commitment to Continuing Education**
 - Available through RN.com
 - Content developed by clinical consultants and reviewed bi-annually
 - Accredited by the ANCC (American Nurses Credentialing Center)



Clinical Services and Quality Management

Partnering for Success

AMN Healthcare, a leader in staffing solutions for health care facilities, is committed to superior customer service and overall excellence. Our number one priority is to ensure that your staffing needs are matched and fulfilled with the most qualified candidates. In an effort to fulfill these needs, we have gone one step further than most other healthcare staffing companies by creating a Clinical Services and Quality Management department, the first of its kind in the healthcare staffing industry.

How We Help You

Each facility client is unique and has individual needs that only the appropriate nurse can address. As your partner, it's our job to match professionals' skills and experience to your specific facility need. Our goal is to help you plan ahead for your staffing needs, ensuring that beds are open and patients are satisfied. With over 28 years of experience, we have demonstrated, client after client, the highest degree of professionalism, integrity and knowledge of the industry, helping us pinpoint the exact nature of the qualifications you require in a Clinician.



Quality Improvement



AMN Healthcare: First multi-site healthcare staffing agency to earn The Joint Commission's Gold Seal of Approval™

Thorough Screening of Clinical Candidates

- Review work history/experience and professional references
- Clinical skills assessment, evaluations, interviewing
- Test knowledge utilizing interview tools by specialty

Performance Improvement Measures

- Track and trend reported clinical practice issues per facility/unit.
- Provide facilities with staff satisfaction survey information regarding assignments.

Quality Clinicians

Because our Clinical Services staff is comprised of tenured nurses with many years of experience in a variety of practice settings, we know first-hand the challenges that nurse managers face each day. Each member of our team has management experience, enabling them to truly understand your staffing needs, what's most important to you when looking for talented nurses and/or other professionals and the importance of patient satisfaction ratings.

Continuous Competency Evaluation

One of the cornerstones of our premium reputation in the health care staffing industry is our commitment to ensuring that our Clinicians are of the highest quality. Prior to the beginning of any assignment, our Clinical Managers, all licensed nurses, conduct a vigorous review of all candidates' experience and skills, including their education, work history, credentialing, specialty and practice setting experience and work performance evaluations. This competency evaluation ensures each professional meets those skills specific to your position. Additionally, it provides our facility clients the reassurance of professional competency and provides support and guidance to professionals in order to achieve the best individual and organizational performance outcomes.

We alleviate the concerns that some nurse managers may have by carefully screening applicants and making hiring recommendations that are right for your facility's needs. And, because our staff is experienced in conflict resolution, negotiation, counseling, risk management and remediation, we are able to troubleshoot problems early on and typically resolve issues before they become time consuming for the nurse manager.



All Clinical Services Managers are tenured nurses with solid management experience.

An Extension of the Nurse Manager within Your Facility

We are available during peak hours to help you with any questions or concerns and to assist you with managing, mentoring and monitoring the professionals through their assignment. We are also available for emergency situations after hours. Our team members are strategically placed throughout the country to provide you with maximum coverage throughout the business day, canvassing the time zones across the continental U.S. 24/7 Clinical Manager coverage is part of our commitment to providing quality services to our clients and our professionals.

How We Help Professionals

Nurses need to find satisfying, career-enhancing jobs. Since 1995, AMN Healthcare's Clinical Services department has streamlined the two to meet the special needs of nurses / professionals and hospitals. Our success at connecting the right professionals with the right facility jobs has made us the most trusted health care staffing company in the country.

We attract the most experienced, quality Clinicians.

Continuous Support

We are dedicated to fostering clinical excellence by providing professionals the support they need, when they need it, 24 hours a day, 365 days a year. Because the Clinical Services department is comprised of nurses, they understand the different situations, challenges and special needs of each professional. To ensure that our professionals are successful at your facility and adapt easily to a new environment, we support them throughout their assignment and provide them with career counseling, mentoring and coaching. The Clinical Manager is a constant support person for our professionals and in turn, a support person for the Unit Manager.

Continuing Education

Our Clinical Services department has the support of a fully dedicated education department devoted to providing our nurses with the essential continuing education opportunities they need to perform effectively on an assignment. Courses are available through our education-based Web site, RN.com, a leading provider of continuing education for nurses, including courses designed specifically for AMN professionals. We offer professionals the highest quality, fully accredited continuing education through RN.com

We give professionals and unit managers the support they need, when they need it, 24 hours a day, 365 days a year.

We Offer You:

- Remediation assistance for serious clinical issues
- Adjunct, collaborative management staff
- Placement of unique specialties
- Thorough applicant screening
- Continuous competency assessment of each professional
- Support and guidance to professionals
- 24/7 clinical support during peak hours and after-hours for emergency situations



We Offer Professionals:

- Counseling, mentoring, and coaching
- Access to educational resources via RN.com
- 24/7 counseling, mentoring and coaching support

AMN has built the industry's most professional, progressive and responsive Clinical Services Department on one simple principle: no one knows nursing the way other nurses do.

Quality Management Department

AMN Healthcare has built the industry's most professional Quality Management department to deliver complete, accurate, quality service to our clients and our professionals. The Quality Management department offers a unique service that adds considerable value to our business partnership with your company.

- **We take a proactive approach to clarifying health care requirements.**

Our Quality Management Compliance Analysts clarify all details through direct communication with the client to assure a clear and accurate understanding of all health care, state and facility requirements.

- **We possess a strong knowledge of state licensing requirements, CDC recommendations, regulatory requirements and industry standards.**

Keeping abreast of the changes in industry licensing, requirements and standards ensures that we provide our clients with the most qualified professionals and that we provide our professionals with the most up-to-date information when preparing them for their assignment. Our professionals are also well-prepared through exposure to additional AMN products, which include RN.com courses, professional safety workplace information and specialty exams for professionals.

- **We have a systematic approach to delivering Clinician packets through on-time delivery and clear communication of expectations.**

Our clients can trust that we hold fast to our promises and commitments. Communication is key in managing each client's needs.

- **We pay strong attention to detail when preparing, communicating and managing information regarding professional requirements, contract requirements and status of Clinician documents.**

Maintaining continuous communication and strong working relationships with our clients and our professionals is paramount to our success.

- **We provide personal attention and value added services.**

Quality occurs when we provide first-rate customer service that meets or exceeds the expectations of our clients and our professionals. Quality is also an outcome that is achieved, in part, when we provide personal attention beyond what is sufficient, when we follow through on commitments, and when we set a standard for excellence. We work as a team for our clients, working with you on audits and surveys to assure compliance and managing your unique requests—providing personal attention every step of the way.



Grievance Process

If you are unhappy with our performance, we want to know about it and will do our best to mend the situation as quickly as possible. We want you happy with our performance, our contract and our Clinicians.

First call would be to the Account Manager assigned to the facility or to Regional Director Jonathan Murphy. If the issue occurs after hours – a Clinical Manager is on duty 24 hours a day / 365 days of the year.

If there are concerns with the Account Manager or Regional Director, Vice President of Client Services Kim Howard would be contacted.

For any emerging or controversial issues – Division President of Travel Nursing Beth Machado would be your first contact and she would escalate if necessary, to President of Nurse Staffing Ralph Henderson.

Specific Issues with the Clinician

We are dedicated to fostering clinical excellence by providing Clinicians the support they need, when they need it, 24 hours a day, 365 days a year. Because the Clinical Services department is comprised of nurses, they understand the different situations, challenges and special needs of each Clinician. To ensure that our professionals are successful at your facility and adapt easily to a new environment, we support them throughout their assignment and provide them with career counseling, mentoring and coaching. The AMN Clinical Manager is a constant support person for our Clinicians and in turn, a support person for the Nurse Manager.

Any AMN Employee may be reached by calling 800.282.0300

Continuing Education Component

AMN offers Continuing Education (CE)/Contact Hours to all of our Clinicians through our website RN.com. Our Professional Development Center (PDC), which is a fully accredited provider of continuing education by the American Nurses Credentialing Center (ANCC), a subsidiary of the American Nurses Association (ANA), is continually developing new CE programs that are pertinent to all Clinicians in today's workplace. Some of the programs are geared particularly to the challenges and situations that are faced by contingent staffing professionals.

RN.com is AMN's online service for Continuing Education / Contract Hours for Nurses. RN.com offers over 170 courses in all clinical areas and over 400 contact hours. We pride ourselves on the quality and quantity of the courses offered. RN.com is accredited by the American Nurses' Credentialing Center (ANCC), by California and by Florida.

About 15,000 courses are taken each month on RN.com. All courses at RN.com are written by a professional in the course content. Each course is edited, reviewed by an advisory board, and updated at least every 2 years. As part of AMN's corporate certification by The Joint Commission – RN.com courses are TJC certified.

In addition to the large number of courses offered, RN.com is committed to meeting state required courses that exist. We have state required courses for Florida, West Virginia, Texas, Iowa, Washington, Kentucky and New York. This helps assure that a Nurse with a license in any state can meet Continuing Education / Contact Hours requirements through RN.com.



Job Specification and Evaluation for Registered Nurses

Purpose of the Position:

Responsible for the delivery of direct patient care using the nursing process and as defined by the Assigned Hospital in their unit specific job description.

Requirements:

- graduate of an RN program
- previous work experience as a RN
- current unrestricted RN license in the Assignment state or applicable Compact state

Workplace conditions:

- Frequent lifting, bending and reaching.
- May require lifting of up to 80 pounds (using proper techniques)
- May require standing and walking 2-5 hours at a time
- May have exposure to chemicals, radiation, infectious diseases/waste and/or blood and blood borne pathogens

Competencies	Description	Rating			
		Superior	Exceeds Standards	Meets Standards	Does Not Meet Standards
Communication, Accurate Documentation, Confidentiality, Customer Service	Thorough and complete verbal and written communication, including charting and patient record related documentation, maintains patient confidentiality in all cases, shows strong customer service skills, always introducing self to patients prior to performing any procedures or assessments, strong listening skills and conflict resolution abilities.				
Adaptability, Flexibility	Shows consistent abilities in flexibility regarding patient assignments, floating, and related staffing issues, is able to adapt quickly and adequately in new situations, learns and adopts hospital policy and procedure quickly and easily, displays positive attitude in situations where adaptability and flexibility are necessary and possibly not desirable.				
Teamwork, Cooperation	Recognizes the benefits of teamwork, assists others when requested or need is identified, is proactive in determining need for teamwork and work re-distribution, uses critical thinking strategies to problem solve in situations in which working with others it imperative.				
Reliability, Attendance	Consistently arrives on shift prior to shift begin time ready and able to work, respects hospital policy on attendance and follows it appropriately when necessary, shows respect for other staff on the unit by consistently working when scheduled.				
Initiative, Enthusiasm	Promotes a positive work environment by consistently demonstrating a positive attitude, enthusiastically tackling the patient care assignment, acting as a role model in behavior and enthusiasm for patient care assignments. Shows positive and congenial behaviors towards patients, other staff member, medical staff and family members, contributes to a positive attitude about nursing and patient care in general.				



Quality, Quantity, Competency, Effort	Carries a full patient load as defined by the hospital and unit policy, attends to patient care in accordance with hospital policy and procedure consistently and does not provide care out of the scope of practice. Demonstrates efficiency in assignments so as to produce quality and quantity patient care with the most efficient effort, while not cutting corners. Able to prioritize effectively. When patient care demands are in excess of staff's capabilities – due to skill levels or numbers the Professional requests additional support or staff appropriately in order to continue to provide safe patient care. Takes unit charge (if able) when requested.				
Professionalism, Licensure maintenance, Continuing Education	Maintains license or certifications according to state (or certifying body) regulations, seeks out continuing education opportunities, shows professional conduct at all times in behavior and appearance, keeps current all employee health information as required by AMN.				
Follows Safety/ Emergency Protocols	Understands key elements of providing a safe environment for patients and healthcare workers can identify essential components of patient safety, and adheres to the facility's specific policies and procedures on safety and patient care standards.				

I have reviewed and received a copy of this job description.

Printed name: _____

Signature: _____

Date signed: _____



Job Specification for Licensed Practical (Vocational) Nurse [LP(V)N]

Purpose of the Position:

Responsible for the delivery of direct patient care under the supervision of a Registered Nurse and according to the nursing and medical plans of care as well as the responsibilities indicated by the Hospital in their unit specific job description.

Requirements:

- Graduate of an LPN or LVN program
- Previous work experience as a LPN or LVN
- Current unrestricted LPN or LVN license in the Assignment state or applicable Compact state

Workplace conditions:

- Frequent lifting, bending and reaching
- May require lifting of up to 80 pounds (using proper techniques)
- May require standing and walking 2-5 hours at a time
- May have exposure to chemicals, radiation, infectious diseases/waste and/or blood and blood borne pathogens

Competencies	Description
Communication, Confidentiality, Customer Service	Thorough and complete verbal and written communication, including charting and patient record related documentation, maintains patient confidentiality in all cases, shows strong customer service skills, always introducing self to patients prior to performing any procedures or tasks, strong listening skills and conflict resolution abilities.
Adaptability, Flexibility	Shows consistent abilities in flexibility regarding patient assignments, floating, and related staffing issues, is able to adapt quickly and adequately in new situations, learns and adopts hospital policy and procedure quickly and easily, displays positive attitude in situations where adaptability and flexibility are necessary and desirable.
Teamwork, Cooperation	Recognizes the benefits of teamwork, assists others when requested or need is identified, is proactive in determining need for teamwork and work re-distribution, uses critical thinking strategies to problem solve in situations in which working with others is imperative.
Reliability, Attendance	Consistently arrives on shift prior to shift begin time ready and able to work, respects hospital policy on attendance and follows it appropriately when necessary, shows respect for other staff on the unit by consistently working when scheduled.
Initiative, Enthusiasm	Promotes a positive work environment by consistently demonstrating a positive attitude, enthusiastically tackling the patient care assignment, acting as a role model in behavior and enthusiasm for patient care assignments. Shows positive and congenial behaviors towards patients, other staff members, medical staff and family members, contributes to a positive attitude about nursing and patient care in general.
Quality, Quantity, Effort	Carries a full patient load as defined by the hospital and unit policy, attends to patient care in accordance with hospital policy and procedure consistently and does not provide care out of the scope of practice. Demonstrates efficiency in assignments so as to produce quality and quantity patient care with the most efficient effort, while not cutting corners. Able to prioritize effectively. Demonstrates clinical competency as it relates to the hospital and unit specific competencies.
Professionalism, Licensure maintenance, Continuing Education	Maintains license or certifications according to state (or certifying body) regulations, seeks out continuing education opportunities, shows professional conduct at all times in behavior and appearance, keeps current all employee health information as required by Company.

I have reviewed and received a copy of this job specification.

Printed name: _____

Signature: _____

Date signed: _____

*AMN*services*

Ph: 877-777-8066
www.amnservices.com

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AMN Healthcare, Inc.

Information contained is for client's internal review only and is proprietary and confidential



Job Specification for Occupational Therapist (OT)

Purpose of the Position:

Responsible for the delivery of occupational therapy services to patients as defined in this job specification and by the assigned hospital in their unit and department specific description.

Requirements:

- Graduate of an OT program
- Previous work experience as an OT
- Current active and unrestricted OT license in the Assignment state, if applicable

Workplace conditions:

- Frequent lifting, bending and reaching
- May require lifting of up to 60 pounds (using proper techniques)
- May require standing and walking 2-5 hours at a time
- May have exposure to chemicals, radiation, infectious diseases/waste and/or blood and blood borne pathogens

Competencies	Description
Communication, Confidentiality, Customer Service	Thorough and complete verbal and written communication, including charting and patient record related documentation, maintains patient confidentiality in all cases, shows strong customer service skills, strong listening skills and conflict resolution abilities.
Adaptability, Flexibility	Shows consistent abilities in flexibility regarding work assignments, and related staffing issues, is able to adapt quickly and adequately in new situations, learns and adopts hospital policy and procedure quickly and easily, displays positive attitude in situations where adaptability and flexibility are necessary and desirable.
Teamwork, Cooperation	Recognizes the benefits of teamwork, assists others when requested or need is identified, is proactive in determining need for teamwork and work re-distribution, uses critical thinking strategies to problem solve in situations in which working with others is imperative.
Reliability, Attendance	Consistently arrives on shift prior to shift begin time ready and able to work, respects hospital policy on attendance and follows it appropriately when necessary, shows respect for other staff on the unit by consistently working when scheduled.
Initiative, Enthusiasm	Promotes a positive work environment by consistently demonstrating a positive attitude, enthusiastically tackling the work assignment, acting as a role model in behavior and enthusiasm for work assignments. Shows positive and congenial behaviors towards patients, other staff members, medical staff and family members, contributes to a positive attitude about patient care in general.
Quality, Quantity, Effort	Carries a full work load as defined by the hospital and unit policy, attends to assignments in accordance with hospital policy and procedure consistently and does not provide care out of the scope of practice. Demonstrates efficiency in assignments so as to produce quality and quantity patient care with the most efficient effort, while not cutting corners. Able to prioritize effectively. Demonstrates clinical competency as it relates to the hospital and unit specific competencies.
Professionalism, Licensure Maintenance, Continuing Education	Maintains license or certifications according to state (or certifying body) regulations, seeks out continuing education opportunities, shows professional conduct at all times in behavior and appearance, keeps current all employee health information as required by Company.

I have reviewed and received a copy of this job specification.

Printed name: _____

Signature: _____

Date signed: _____



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Job Specification for Radiological Technologist

Purpose of the Position:

Responsible for the delivery of Radiology services to patients as defined in this job specification and by the assigned hospital in their unit and department specific description.

Requirements:

- Graduate of a Radiology program
- Previous work experience as a Rad Tech
- Current active and unrestricted Rad Tech license in the Assignment state, if applicable

Workplace conditions:

- Frequent lifting, bending and reaching
- May require lifting of up to 80 pounds (using proper techniques)
- May require standing and walking 2-5 hours at a time
- May have exposure to chemicals, radiation, infectious diseases/waste and/or blood and blood borne pathogens

Competencies	Description
Communication, Confidentiality, Customer Service	Thorough and complete verbal and written communication, including charting and patient record related documentation, maintains patient confidentiality in all cases, shows strong customer service skills, strong listening skills and conflict resolution abilities.
Adaptability, Flexibility	Shows consistent abilities in flexibility regarding work assignments, and related staffing issues, is able to adapt quickly and adequately in new situations, learns and adopts hospital policy and procedure quickly and easily, displays positive attitude in situations where adaptability and flexibility are necessary and desirable.
Teamwork, Cooperation	Recognizes the benefits of teamwork, assists others when requested or need is identified, is proactive in determining need for teamwork and work re-distribution, uses critical thinking strategies to problem solve in situations in which working with others is imperative.
Reliability, Attendance	Consistently arrives on shift prior to shift begin time ready and able to work, respects hospital policy on attendance and follows it appropriately when necessary, shows respect for other staff on the unit by consistently working when scheduled.
Initiative, Enthusiasm	Promotes a positive work environment by consistently demonstrating a positive attitude, enthusiastically tackling the work assignment, acting as a role model in behavior and enthusiasm for work assignments. Shows positive and congenial behaviors towards patients, other staff members, medical staff and family members, contributes to a positive attitude about patient care in general.
Quality, Quantity, Effort	Carries a full work load as defined by the hospital and unit policy, attends to assignments in accordance with hospital policy and procedure consistently and does not provide care out of the scope of practice. Demonstrates efficiency in assignments so as to produce quality and quantity patient care with the most efficient effort, while not cutting corners. Able to prioritize effectively. Demonstrates clinical competency as it relates to the hospital and unit specific competencies.
Professionalism, Licensure Maintenance, Continuing Education	Maintains license or certifications according to state (or certifying body) regulations, seeks out continuing education opportunities, shows professional conduct at all times in behavior and appearance, keeps current all employee health information as required by Company.

I have reviewed and received a copy of this job specification.

Printed name: _____

Signature: _____

Date signed: _____



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This profile is for use by healthcare professionals in this discipline and specialty. It will not be a determining factor for the program. Return this checklist to us by toll free fax at (877) 282-0425.

Critical Care/ICU Skills Checklist

* Denotes required field

This profile is for use by healthcare professionals in this discipline and specialty. It will not be a determining factor for the program.

Please enter your full legal name as it appears on your Social Security Card.

First Name* Middle Name Last Name*

Last 4 of Social Security Number* Date

☐ Please select checkbox in the event you do not currently hold a valid social security card

E-Mail Address* Phone Number*

Please mark your level of experience

1. No theory and/or experience
2. Limited experience/need supervision and/or support
3. Experienced/minimal support needed to perform
4. Proficient/can perform independently

CARDIOVASCULAR

1 2 3 4

Assessment

- Abnormal Heart Sounds/Murmurs ○ ○ ○ ○
- Auscultation Rate/Rhythm ○ ○ ○ ○
- Pulses/Circulation Checks ○ ○ ○ ○

Interpretation of Lab Results

- Cardiac Enzymes & Troponin ○ ○ ○ ○

Equipment & Procedures

12400 High Bluff Drive San Diego, CA 92130
Toll Free (800) 282-0300 Toll Free Fax (877) 282-0425

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AMN Healthcare, Inc.

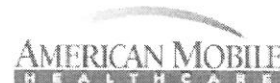
Information contained is for client's internal review only and is proprietary and confidential



• Arrhythmia Interpretation	○ ○ ○ ○
• 12-Lead Placement	○ ○ ○ ○
• 12-Lead Interpretation	○ ○ ○ ○
• Hemodynamic Monitoring (PAP, PCW, CVP, SVR, PVR, CO, CI)	○ ○ ○ ○
• SVO ₂ Monitoring	○ ○ ○ ○
• Femoral Artery Sheath Removal/Devices	○ ○ ○ ○
• Intra-Aortic Balloon Pump	○ ○ ○ ○
• Pacemaker-Permanent & Temporary	○ ○ ○ ○
• Pacemaker-Transcutaneous	○ ○ ○ ○
• Pacemaker-Transthoracic (Epicardial)	○ ○ ○ ○
• Ventricular Assist Device	○ ○ ○ ○
Assist with	
• A-Line Insertion/Removal	○ ○ ○ ○
• PA Catheter/SG Insertion/Removal	○ ○ ○ ○
• Open Chest Emergency	○ ○ ○ ○
• Pericardiocentesis	○ ○ ○ ○
• Transesophageal Echocardiogram	○ ○ ○ ○
• Cardioversion	○ ○ ○ ○
Care of the Patient with	
• AAA Repair	○ ○ ○ ○
• Acute Coronary Syndrome	○ ○ ○ ○
• AICD Insertion	○ ○ ○ ○
• Cardiac Arrest	○ ○ ○ ○
• Cardiac Tamponade	○ ○ ○ ○
• Cardiogenic Shock	○ ○ ○ ○
• CVA	○ ○ ○ ○
• CHF	○ ○ ○ ○
• EP Study & Ablation	○ ○ ○ ○
• Heart Transplant	○ ○ ○ ○
• Immediate Post-Op Open Heart (Directly from OR)	○ ○ ○ ○



• Immediate Post-Op Open Heart (NOT Directly from OR)	○ ○ ○ ○
• Post Interventional Cath/Cath Lab Procedure	○ ○ ○ ○
Medications	
• Antiarrhythmics (Amiodarone, Lidocaine, Procainamide)	○ ○ ○ ○
• Argatroban	○ ○ ○ ○
• Atropine	○ ○ ○ ○
• Beta Blockers (Metoprolol, Atenolol, Labetolol)	○ ○ ○ ○
• Bicarbonate	○ ○ ○ ○
• Calcium Channel Blockers (Cardizem, Procardia)	○ ○ ○ ○
• Digoxin	○ ○ ○ ○
• Dobutamine	○ ○ ○ ○
• Dopamine	○ ○ ○ ○
• Heparin/Coumadin	○ ○ ○ ○
• Integrilin, Aggrastat	○ ○ ○ ○
• Magnesium	○ ○ ○ ○
• Nitroprusside (Nipride)	○ ○ ○ ○
• Nitroglycerine (Tridil)	○ ○ ○ ○
• Thrombolytics (TPA)	○ ○ ○ ○
• Vasopressin	○ ○ ○ ○
PULMONARY	1 2 3 4
Assessment	
• Breath Sounds, Rate & Work of Breathing	○ ○ ○ ○
• Interpretations of ABGs	○ ○ ○ ○
Airway Management	
• Ambu Bag & Mask	○ ○ ○ ○
• Endotracheal Tube Suctioning	○ ○ ○ ○
• Face Mask/Nasal Cannula	○ ○ ○ ○
• Intubation/Extubation	○ ○ ○ ○
• Nitric Oxide	○ ○ ○ ○
Ventilator Management	



• Modes of Ventilation: AC, PC, SIMV, CPAP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Weaning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Equipment				
• Chest Tube Placement & Management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Assist with Bronchoscopy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Assist with Emergency Trach	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Assist with Thoracentesis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Identification & Intervention of Respiratory Complications				
• Aspiration	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Laryngospasm	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Pneumothorax	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Tension Pneumothorax	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Care of the Patient with				
• Acute Pneumonia	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• ARDS	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Chest/Pulmonary Trauma	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• COPD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Fresh Tracheostomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Lung Transplant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Pulmonary Edema	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Pulmonary Embolism	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Status Asthmaticus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Thoracotomy/Lobectomy/Pneumonectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medications				
• Atrovent	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Corticosteroids	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Ventolin (Albuterol)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NEUROLOGICAL	1	2	3	4
Assessment				
• Glasgow Coma Scale	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



• Neuro Assessment	○ ○ ○ ○
• Pathologic Reflexes	○ ○ ○ ○
Equipment & Procedures	
• Assist with Lumbar Puncture	○ ○ ○ ○
• Hypo/Hyperthermia Blanket	○ ○ ○ ○
• Seizure Precautions	○ ○ ○ ○
• Spinal Precautions	○ ○ ○ ○
Care of the Patient with	
• Carotid Endarterectomy	○ ○ ○ ○
• Closed Head Injury	○ ○ ○ ○
• Coma	○ ○ ○ ○
• CVA	○ ○ ○ ○
• DI/SIADH	○ ○ ○ ○
• Increased ICP/ICP Monitoring	○ ○ ○ ○
• Meningitis	○ ○ ○ ○
• Post Craniotomy	○ ○ ○ ○
• Spinal Cord Injury	○ ○ ○ ○
• Intracranial Bleed	○ ○ ○ ○
Medications	
• Ativan	○ ○ ○ ○
• Barbiturate Coma-Titration to Maintain	○ ○ ○ ○
• Dilantin (Phenytoin)	○ ○ ○ ○
• Haldol (Haloperidol)	○ ○ ○ ○
• Morphine	○ ○ ○ ○
• Narcotic Analgesics (Fentanyl)	○ ○ ○ ○
• Nimbex (Cisatracurium)	○ ○ ○ ○
• Succinylcholine	○ ○ ○ ○
<u>GASTROINTESTINAL</u>	1 2 3 4
Assessment	
• Abdominal/Bowel Sounds	○ ○ ○ ○



• Nutritional					
Interpretation of Lab Results					
• Serum Ammonia/Amylase/LFTs					
Equipment & Procedures					
• Tube Feedings					
• Balloon Tamponade					
• Iced Saline Lavage					
Management of					
• G Tube/J Tube					
• T Tube					
• TPN/Lipid Administration					
Care of the Patient with					
• Major Trauma					
• Bowel Obstruction					
• Colostomy/Ileostomy					
• ERCP					
• Esophageal/GI Bleeding					
• GI Surgery					
• Hepatitis					
• Inflammatory Bowel Disease					
• Liver Failure					
• Liver Transplant					
• Pancreatitis					
Medications					
• Aquamephyton (Vitamin K)					
• Inderal (Propanolol)					
• Kayexelate					
• Lactulose (Cephulac)					
<u>RENAL/GENITOURINARY</u>					
Assessment	1	2	3	4	



- AV Fistula/Shunt
- Fluid Status

○ ○ ○ ○
○ ○ ○ ○

Interpretation of Lab Results

- BUN/Creatinine/Electrolytes

○ ○ ○ ○

Equipment & Procedures

- Bladder Irrigation
- Insertion/Care of Bladder Catheter
- 3 Way Catheter
- Suprapubic Catheter

○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○

Care of the Patient with

- Acute Renal Failure
- CVVH/CVVHD
- Hemodialysis
- Nephrectomy
- Peritoneal Dialysis
- Renal Rejection
- Renal Transplant

○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○

ENDOCRINE/METABOLIC

1 2 3 4

Interpretation of Lab Results

- Blood/Urine Glucose

○ ○ ○ ○

Equipment & Procedures

- Bedside Blood Glucose Monitoring/Equipment

○ ○ ○ ○

Care of the Patient with

- Adrenal Gland Disorders
- Diabetes Mellitus
- Diabetic Ketoacidosis
- Hyper/Hypoglycemia
- Insulin Shock
- Pituitary Gland Disorders

○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○

Medications



• Insulin/Insulin Drip	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<u>WOUND MANAGEMENT</u>	1	2	3	4
Assessment				
• Skin for Impending Breakdown	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Surgical Wound Healing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Equipment & Procedures				
• Specialty Beds	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Sterile Dressing Changes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Care of the Patient with				
• Burns	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Decubitus Ulcers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Staged Decubitus Ulcers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Surgical Wounds/Drains	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<u>INFECTIOUS DISEASE</u>	1	2	3	4
Assessment of Culture Results	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Equipment & Procedures				
• Obtaining Cultures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Care of the Patient with				
• MRSA	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• VRE	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Organ Specific Infection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Septic Shock	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medications				
• Aminoglycosides	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Antifungals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Cephalosporins	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Xigris	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<u>PHLEBOTOMY/IV THERAPY</u>	1	2	3	4
Equipment & Procedures				
• Administration of Blood/Blood Products	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



• Starting IVs	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
Care of the Patient with	
• A Lines/Dressings	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
• CVP Lines/Dressings	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
• PA Lines/Dressings	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
• PICC Lines/Dressings	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
• Tunneled Lines/Dressings	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
<u>PAIN MANAGEMENT</u>	1 2 3 4
Assessment of Pain Level	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
Assessment of Response to Pain Management Interventions	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
Care of the Patient with	
• Epidural Anesthesia/Analgesia	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
• Moderate Sedation	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
• Patient Controlled Analgesia (PCA)	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
<u>MISCELLANEOUS</u>	1 2 3 4
National Patient Safety Goals	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
Computerized Charting	
• Cerner	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
• Eclipsys	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
• Epic	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
• McKesson	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
• Meditech	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
• Other: _____	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
Equipment & Procedures	
• Charge Experience	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
• Preceptor Experience	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
• Pyxis Medication Admin. System	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
• Other Medication Admin. System	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
Care of the Patient with	
• Anaphylactic Shock	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>



- Disseminated Intravascular Coagulation
- Hypovolemic Shock
- Immunosuppression
- Latex Allergy
- Malignant Hyperthermia
- Multisystem Organ Failure
- Organ Tissue Donation
- Trauma Response Team
- Immediate Post-Operative Recovery

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Age specific practice criteria

- | | |
|---|---|
| <p>A. Newborn/Neonate (birth - 30 days)</p> <p>B. Infant (30 days - 1 year)</p> <p>C. Toddler (1 - 3 years)</p> <p>D. Preschooler (3 - 5 years)</p> <p>E. School age children (5 - 12 years)</p> | <p>F. Adolescents (12 - 18 years)</p> <p>G. Young adults (18 - 39 years)</p> <p>H. Middle adults (39 - 64 years)</p> <p>I. Older Adults (64+)</p> |
|---|---|

Please check the boxes below for each age group for which you have expertise in providing age-appropriate care

Experience with age groups

Able to adapt care to incorporate normal growth and development.

A	B	C	D	E	F	G	H	I
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Able to adapt method and terminology of patient instructions to their age, comprehension and maturity level.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

Can ensure a safe environment reflecting specific needs of various age groups.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

My experience is primarily in the following settings

Cardiac

Yrs.

Cardiac Surgical

Yrs.



Medical
Surgical
Burn
Neuro
PACU
Other:

Yrs.
Yrs.
Yrs.
Yrs.
Yrs.
Yrs.

Certifications/Licensures/Registrations

Arrhythmia Course
Critical Care Course
ACLS
BLS
BTLS
CCRN
TNCC
ACLS Instructor
BLS Instructor
Other:

Date Taken:
Date Taken:
Exp. Date:
Exp. Date:
Exp. Date:
Exp. Date:
Exp. Date:
Exp. Date:
Exp. Date:
Exp. Date:

Critical Care/ICU Skills Checklist, version 2

I attest that the information I have given is true and accurate to the best of my knowledge and I am the individual completing this form. I hereby authorize the Company to release this Skills Checklist to the Client facilities in relation to consideration of employment as a Healthcare Professional with those facilities.

Signature: _____ Date: _____

12400 High Bluff Drive San Diego, CA 92130
Toll Free (800) 282-0300 Toll Free Fax (877) 282-0425

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This profile is for use by healthcare professionals in this discipline and specialty. It will not be a determining factor for the program. Return this checklist to us by toll free fax at (866) 808-6282.

Radiology Technologist Skills Checklist

* Denotes required field

This profile is for use by healthcare professionals in this discipline and specialty. It will not be a determining factor for the program.

Please enter your full legal name as it appears on your Social Security Card.

First Name* Middle Name Last Name*

Last 4 of Social Security Number* Date

☐ Please select checkbox in the event you do not currently hold a valid social security card

E-Mail Address* Phone Number*

Please mark your level of experience

1. No theory and/or experience
2. Limited experience/need supervision and/or support
3. Experienced/minimal support needed to perform
4. Proficient/can perform independently

SETTINGS

	1	2	3	4
Adult Inpatient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ER/Trauma	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adult Outpatient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pediatric Inpatient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pediatric Outpatient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

PROCEDURES

1 2 3 4



Chest Studies

Abdominal Studies

Foreign Body/Soft Tissue Studies

○ ○ ○ ○

Specimen Radiography

○ ○ ○ ○

Extremities

- Upper
- Lower
- Pelvis Obli/Judet Views
- Pelvis SI Joints
- Pelvis Sacrum/Coccyx

○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○

Spine

- Cervical Spine-Obli/Flexion/Extension
- Thoracic Spine-Swimmer's View
- Lumbar Spine-Obli/Flexion/Extension

○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○

Head

- Facial Bones
- Mandible
- Mastoids
- Orbits
- Sinus Series
- TMJ
- Skull Series

○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○

Tomography

- Renal
- TMJ
- Spine

○ ○ ○ ○
○ ○ ○ ○
○ ○ ○ ○

Fluoroscopy/Contrast Studies

- Barium Swallow/Esophagram
- Modified Barium Swallow/Protocol Swallow

○ ○ ○ ○
○ ○ ○ ○



• Swallow Studies with Videotaping	○ ○ ○ ○
• Upper GI Series-Single Contrast	○ ○ ○ ○
• Upper GI Series-Air Contrast	○ ○ ○ ○
• Small Bowel Follow Through	○ ○ ○ ○
Enema Studies	
• Barium Enema-Single Contrast	○ ○ ○ ○
• Barium Enema-Air Contrast	○ ○ ○ ○
• Water Soluble Contrast Enema (e.g. Hypaque)	○ ○ ○ ○
• Lower GI Studies thru Colostomy	○ ○ ○ ○
Cystography	
• Cystogram	○ ○ ○ ○
• Voiding Cystogram	○ ○ ○ ○
• Urethrography	○ ○ ○ ○
Contrast Injection Studies	
• IVP	○ ○ ○ ○
• IVP with Tomograms	○ ○ ○ ○
Myelograms	
• Cervical Spine	○ ○ ○ ○
• Thoracic Spine	○ ○ ○ ○
• Lumbar Spine	○ ○ ○ ○
Mobile C-Arm Fluoroscopy	
• Bronchoscopy with Fluoro Guidance	○ ○ ○ ○
• Bedside Line and Tube Placement	○ ○ ○ ○
OR Cases	
• Sterile Procedures in OR	○ ○ ○ ○
• Spine Work	○ ○ ○ ○
• Operative Cholangiography	○ ○ ○ ○
• Hip Studies	○ ○ ○ ○
• Extremity Studies	○ ○ ○ ○
• Cystography	○ ○ ○ ○



- Retrograde Urography

○ ○ ○ ○

PATIENT SAFETY

1 2 3 4

National Patient Safety Goals

○ ○ ○ ○

Computerized Charting

○ ○ ○ ○

Age specific practice criteria

- | | |
|--|---|
| A. Newborn/Neonate (birth - 30 days) | F. Adolescents (12 - 18 years) |
| B. Infant (30 days - 1 year) | G. Young adults (18 - 39 years) |
| C. Toddler (1 - 3 years) | H. Middle adults (39 - 64 years) |
| D. Preschooler (3 - 5 years) | I. Older Adults (64+) |
| E. School age children (5 - 12 years) | |

Please check the boxes below for each age group for which you have expertise in providing age-appropriate care

Experience with age groups

A B C D E F G H I

Able to adapt care to incorporate normal growth and development.

☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

Able to adapt method and terminology of patient instructions to their age, comprehension, and maturity level.

☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

Can ensure a safe environment reflecting specific needs of various age groups.

☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

My experience is primarily in the following settings

Adult Acute Care

Yrs.

ER Trauma

Yrs.

Portable

Yrs.

OR

Yrs.

Adult Outpatient

Yrs.

Pediatric Acute Care

Yrs.

Pediatric Outpatient

Yrs.



State Licenses:

State:

Exp. Date:

State:

Exp. Date:

State:

Exp. Date:

Radiology Technologist Skills Checklist, version 2

I attest that the information I have given is true and accurate to the best of my knowledge and I am the individual completing this form. I hereby authorize the Company to release this Skills Checklist to the Client facilities in relation to consideration of employment as a Healthcare Professional with those facilities.

Signature: _____ Date: _____

5001 Statesman Drive Irving, TX 75063
Toll Free (800) 544-7255 Toll Free Fax (866) 808-6282

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AMN Healthcare, Inc.

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Sample Submittal Profile: RN



Traveler Profile

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Cover Sheet

American Mobile Healthcare • Medical Express • Nurses Rx
Preferred Healthcare Staffing • O'Grady-Peyton International

Date: 8/14/2009, Placement ID: 2347667

Facility Information:

Facility: Allegheny General Hospital, Pittsburgh, PA

Attention:

Traveler Information:

Traveler Name:

Unit Submitted for: LD

Shift Posted: 12 D/N

Approximate Start Date: September 8, 2009

Cell Phone:

Current Perm Phone:

Other Phone: None

Best Time to Call:

Graduation Date/ Degree: 5/1997 - ASN, 5/2000 - BSN

Current Certifications: BLS(10/23/2009), NRP(01/31/2011)

AMN Healthcare Information:

Your Contact: Deirdre O'Regan

Phone: N/A

Fax: N/A

Email: Deirdre.O'Regan@amnhealthcare.com

Comments:





Traveler Profile

AMN Healthcare
American Mobile Healthcare - Medical Express - Nurses Rx
Preferred Healthcare Staffing - O'Grady-Peyton International

Traveler Profile

Name:
Professional Discipline: RN
Specialties: LD

Traveler Information

Home Phone:
Other Phone:
Current Address:
Permanent Address:
Email Address:

Licensure Information

State: North Carolina Exp Date: 03/31/2010
State: Alaska Exp Date: 11/30/2010

Certification Information

Certification: BLS	Exp Date: 10/23/2009
Certification: NRP	Exp Date: 01/31/2011

Education

School: UNC	Graduated: 05/2000	Degree: BSN	Country: USA
School: Excelsior College	Graduated: 05/1997	Degree: ASN	Country: USA

Emergency Contact

Name:
Address:
Relationship:
Phone Number:

Additional Questions

Professional license or certification has been investigated or suspended: N
Convicted of a crime other than a minor traffic violation: N
Named as a defendant in a professional liability claim: N
Verification of legal right to work in the U.S. can be submitted: Y



Work History

AMN Healthcare
American Mobile Healthcare - Medical Express - Nurses Rx
Preferred Healthcare Staffing - O'Grady-Peyton International

Work History

Friday, August 24, 2009

Traveler ID: 286967

Traveler Name:

Employment

Facility:	Carolina Pines Regional Medical Center	Facility Location:	Hartsville, SC
Employed From:	02/2009	To:	Yes
Unit/Floor/Dept.:	LD	Teaching Hospital:	
# of Beds in Unit:		Unit Specialty:	LD
Travel Assignment:		Reason for Leaving:	Currently employed PRN
		Local Staffing Agency:	

Employment

Facility:	Nova Hospital	Facility Location:	Jacksonville, NC
Employed From:	07/2008	To:	10/2008
Unit/Floor/Dept.:	LD	Teaching Hospital:	
# of Beds in Unit:		Unit Specialty:	LD
Travel Assignment:	Yes	Reason for Leaving:	End of Travel Assignment
		Local Staffing Agency:	

Employment

Facility:	Chesterfield General Hospital	Facility Location:	Cheraw, SC
Employed From:	06/2007	To:	02/2009
Unit/Floor/Dept.:	LD/Nursery Room	Teaching Hospital:	
# of Beds in Unit:	9	Unit Specialty:	LD
Travel Assignment:		Reason for Leaving:	
		Local Staffing Agency:	

Employment

Facility:	Parkridge Hospital	Facility Location:	Henderson, NC
Employed From:	06/2006	To:	06/2006
Unit/Floor/Dept.:	LD	Teaching Hospital:	
# of Beds in Unit:		Unit Specialty:	LD
Travel Assignment:	Yes	Reason for Leaving:	
		Local Staffing Agency:	

Employment

Facility:	Chesterfield General Hospital	Facility Location:	Cheraw, SC
Employed From:	03/2006	To:	06/2007
Unit/Floor/Dept.:	LD/Nursery Room	Teaching Hospital:	
# of Beds in Unit:	9	Unit Specialty:	LD
Travel Assignment:		Reason for Leaving:	
		Local Staffing Agency:	

Employment

Facility:	Sampson Regional Medical Center	Facility Location:	Clinton, NC
Employed From:	12/2004	To:	12/2005
Unit/Floor/Dept.:		Teaching Hospital:	



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Unit/Floor/Dept.:	LD	Unit Specialty:	LD
# of Beds in Unit:		Reason for Leaving:	
Travel Assignment:	Yes	Local Staffing Agency:	

Employment

Facility:	The Outer Banks Hospital	Facility Location:	Nags Head, NC
Employed From:	07/2004 To: 11/2004	Teaching Hospital:	
Unit/Floor/Dept.:	LD	Unit Specialty:	LD
# of Beds in Unit:		Reason for Leaving:	
Travel Assignment:	Yes	Local Staffing Agency:	

Employment

Facility:	Raleigh Community	Facility Location:	Raleigh, NC
Employed From:	05/2004 To: 07/2004	Teaching Hospital:	
Unit/Floor/Dept.:	LD	Unit Specialty:	LD
# of Beds in Unit:		Reason for Leaving:	
Travel Assignment:		Local Staffing Agency:	

Employment

Facility:	Chesterfield General Hospital	Facility Location:	Chesaw, SC
Employed From:	03/2004 To: 02/2006	Teaching Hospital:	
Unit/Floor/Dept.:	LD	Unit Specialty:	LD
# of Beds in Unit:	9	Reason for Leaving:	Currently employed PRN
Travel Assignment:		Local Staffing Agency:	

Employment

Facility:	St. Eugene Medical Center	Facility Location:	Dillon, NC
Employed From:	07/2002 To: 02/2004	Teaching Hospital:	
Unit/Floor/Dept.:	LD	Unit Specialty:	LD
# of Beds in Unit:		Reason for Leaving:	
Travel Assignment:		Local Staffing Agency:	



References

AMN Healthcare
American Mobile Healthcare - Medical Express - Nurses Rx
Preferred Healthcare Staffing - O'Grady-Peyton International

Professional Reference

Friday, August 14, 2009

Traveler ID: 288067		Traveler Name:	
Employment			
Facility:	Chesterfield General Hospital	Facility Location:	Charlottesville, VA
Employed From:	02/006	To:	06/2007
# of Beds in Facility:	66	Teaching Hospital:	
Unit Specialty:	LD	Unit/Floor/Dept.:	LD/Nursery Room
	# of Beds: 5	Avg. Patient caseload:	1:1.2
Unit Description:	This is a 9 Bed LD unit where was responsible for competent care in assisting high risk deliveries. She started M's, monitored preeclampsia, worked with mag sulfate, and performed blood transfusions. BLS is required. This facility sees 15-25 births per month. was full time on this unit, working 3-12hr. shifts per week until 05-01-2008 when she then went MNI working 1-2-12hr. shifts per week. floated to the nursery 45% off the time she on this unit.		
Position Held:	RN Traveler	Shift Worked:	
Travel Assignments:		Charge Experience:	
Eligible for Refine:	Yes	Local Staffing Agency:	
		Explanation:	
Evaluation:			
KEY:	A = Superior	B = Exceeds Standards	C = Meets Standards
			D = Does not meet Standards
Category	Rating	Category	Rating
Accurate Documentation	B - Exceeds Standards	Initiative	B - Exceeds Standards
Adaptability	B - Exceeds Standards	Professionalism	B - Exceeds Standards
Communication Skills	B - Exceeds Standards	Quality of Work	B - Exceeds Standards
Competency	B - Exceeds Standards	Reliability/Attendance	B - Exceeds Standards
Follows Safety/Emergency Protocols	B - Exceeds Standards	Teamwork/Cooperation	B - Exceeds Standards
Age Specific Competency:			
Category	Experience	Category	Experience
Adolescents	Yes	Older Children	Yes
Infants	No	Preschoolers	No
Middle Adults	Yes	Toddlers	No
Newborns/Neonates	No	Young Adults	Yes
Older Adults/Geriatrics	No		
Comments:			
Verified title on Unit# 124244, Sr. TQ# 05/06/09			
Evaluator:	Cecilia McCollin	Evaluator Title:	Unit Director/Writer ref
		Evaluation Date:	8/08/2009





AMN Healthcare
American Mobile Healthcare - Medical Express - Nurses Rx
Preferred Healthcare Staffing - O'Grady-Peyton International

Professional Reference

Friday, August 14, 2009

Traveler ID: 186067		Traveler Name:	
Employment			
Facility:	Chesterfield General Hospital	Facility Location:	Cheraw, SC
Employed From:	03/009	To:	02/2009
Teaching Hospital:		Unit/Floor/Dept.:	LD
# of Beds in Facility:	66	Avg. Patient Caseload:	1:1-2
Unit Specialty:	LD	# of Beds:	9
Unit Description:	This is a 9 Bed L&D unit where was responsible for competent care and assisting high risk deliveries. She started 7th, monitored pitocin drips, worked with mag sulfate, and performed blood transfusions. BLS is required. This facility sees 15-25 births per month. was full time on this unit, working 3-12hrs. shifts per week. dated to the nursery 45% of the time she on this unit.		
Position Held:	RN Staff	Shift Worked:	
Travel Assignment:		Local Staffing Agency:	
Eligible for Rehire:	Yes	Explanation:	
Evaluation:			
KEY: A = Superior B = Exceeds Standards C = Meets Standards D = Does not meet Standards			
Category	Rating	Category	Rating
Accurate Documentation	B - Exceeds Standards	Initiative	B - Exceeds Standards
Adaptability	B - Exceeds Standards	Professionalism	B - Exceeds Standards
Communication Skills	B - Exceeds Standards	Quality of Work	B - Exceeds Standards
Competency	B - Exceeds Standards	Reliability/Attendance	B - Exceeds Standards
Follows Safety/Emergency Protocols	B - Exceeds Standards	Teamwork/Cooperation	B - Exceeds Standards
Age Specific Competency:			
Category	Experience	Category	Experience
Adolescents	Yes	Older Children	Yes
Infants	No	Preschoolers	No
Middle Adults	Yes	Toddlers	No
Newborns/Neonates	No	Young Adults	Yes
Older Adults/Geriatrics	No		
Comments:			
Verified title on contract: Jacinda A. S., TQR 05/26/09			
Evaluator:	Claudia McColeen	Evaluator Title:	Director of Unit/Department
Evaluation Date:		02/02/09	



AMN Healthcare
American Mobile Healthcare - Medical Express - Nurses Rx
Preferred Healthcare Staffing - O'Grady-Peyton International

Professional Reference

Friday, August 14, 2009

Traveler ID: 286067		Traveler Name:	
Employment			
Facility:	Chesterfield General Hospital	Facility Location:	Cheraw, SC
Employed From:	06/2007 To: 02/2009	Teaching Hospital:	
# of Beds in Facility:	66	Unit/Floor/Dept.:	LD/Nursery Room
Unit Specialty:	LD/Room	# of Beds:	5
Unit Description:	This is a 9 Bed LD unit where I was responsible for couple care and assisting high risk deliveries. She started IVs, monitored phosin drops, worked with mag sulfate, and performed blood transfusions. BLS is required. This facility sees 15-25 births per month. I was full time on this unit, working 3-12hr shifts per week. I floated to the nursery 45% of the time she on this unit.		
Position Held:	RN Traveler (PRN) Shift Worked:	Charge Experience:	
Travel Assignment:		Local Staffing Agency:	
Eligible for Rehire:	Yes	Explanation:	
Evaluation:			
KEY:	A = Superior	B = Exceeds Standards	C = Meets Standards
	D = Does not meet Standards		
Category	Rating	Category	Rating
Accurate Documentation	B - Exceeds Standards	Initiative	B - Exceeds Standards
Adaptability	B - Exceeds Standards	Professionalism	B - Exceeds Standards
Communication Skills	B - Exceeds Standards	Quality of Work	B - Exceeds Standards
Competency	B - Exceeds Standards	Reliability/Attendance	B - Exceeds Standards
Follows Safety/Emergency Protocols	B - Exceeds Standards	Teamwork/Cooperation	B - Exceeds Standards
Age Specific Competency:			
Category	Experience	Category	Experience
Adolescents	Yes	Older Children	Yes
Infants	No	Preschoolers	No
Middle Adults	Yes	Toddlers	No
Newborns/Neonates	No	Young Adults	Yes
Older Adults/Seniors	No		
Comments:			
Verified title on unit** Jacinda A. St. TOR 05/20/09			
Evaluator:	Claudia McCollin	Evaluator Title:	Director of Unit/Department
		Evaluation Date:	5/20/2009



Skills Checklists

Labor and Delivery Skills Checklist - Version 2

Traveler Name: _____ Date Completed: 4/16/2009

Please mark your level of experience

1. No theory and/or experience
2. Limited experience/need supervision and/or support
3. Experienced/minimal support needed to perform
4. Proficient/can perform independently

ANTEPARTUM CARE	1	2	3	4		1	2	3	4
Assessment									
• Fetal Heart Rate Patterns	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	• Progression of Labor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
• Fetal Monitoring	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	• Reflexes/Clonus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
• Fetal Status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>					
Equipment & Procedures									
• Assist with Ultrasound	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	• Oxytocin Challenge Test	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
• Non-Stress Test	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	• Use of PICC/Other Long Term Lines	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Care of the Antepartum Patient with:									
• Diabetes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	• Pre-Term Labor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
• Fetal Demise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	• Pregnancy Induced Hypertension (PIH)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
• HELLP Syndrome	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	• Premature Rupture of Membranes (PROM)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
• Hyperemesis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	• Substance Abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
• Immunologic Disorder	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	• Underlying Cardiac Disorder	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
• Infectious Disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	• Underlying Neurologic Disorder	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
• Multiple Gestation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	• Underlying Pulmonary Disorder	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
• Placenta Previa/Abruption	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	• Underlying Renal Disorder	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
• Post-Trauma	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>					
LABOR MANAGEMENT	1	2	3	4		1	2	3	4
Admission Assessment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Breathing/Relaxation Techniques	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Identify Normal/Abnormal Maternal/Fetal VS	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Coaching	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Auscultate Fetal Heart Tones	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Positioning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
(Doppler/Fetoscope)					Determine Fetal Position	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Leopold's Maneuvers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Assess Contraction Characteristics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Assess for Clonus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Assess Status of Membranes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Assessment of Response to Pain Management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Assess Station	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Interventions					Assess for Edema	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Assess Dilation & Effacement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Assessment of Pain Level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>



AMN
Healthcare



Assist with External Version	○ ○ ○ ●	Use of Nitrazine/Fern Test	○ ○ ○ ●
Assist with Percutaneous Umbilical Sampling	○ ○ ● ○		
PAIN MANAGEMENT	1 2 3 4		1 2 3 4
Monitor and Assist with			
• Epidural Anesthesia	○ ○ ○ ●	• Local Anesthesia	○ ○ ○ ●
• General Anesthesia	○ ○ ○ ●	• Spinal Anesthesia	○ ○ ○ ●
POST PARTUM CARE	1 2 3 4		1 2 3 4
Care of the Post Partum Patient with HIV	○ ○ ○ ●	Pregnancy Induced Hypertension (PIH)	○ ○ ○ ●
Infectious Disease	○ ○ ○ ●	Seizures	○ ○ ○ ●
Multiple Births	○ ○ ○ ●	Substance Abuse	○ ○ ○ ●
Post Anesthesia Care			
• Epidural/Epidural Morphine	○ ○ ○ ●	• Local	○ ○ ○ ●
• General	○ ○ ○ ●	• Spinal	○ ○ ○ ●
Breastfeeding			
• Breast Care	○ ○ ○ ●	• Latch Score	○ ○ ○ ●
• Breast Milk Collection and Storage	○ ○ ○ ●	• Tube at Breast	○ ○ ○ ●
• Breast Pump	○ ○ ○ ●	• Finger Feeding	○ ○ ○ ●
Teach & Assist with			
• Contraceptive Counseling	○ ○ ○ ●	• Perineal Care	○ ○ ○ ●
• Infant Care Restraint Systems	○ ○ ○ ●	• Discharge Planning	○ ○ ○ ●
• Infant Caretaking Skills	○ ○ ○ ●		
NORMAL NEONATAL CARE	1 2 3 4		1 2 3 4
Assessment			
• Ballard Scale/Dubowitz	○ ○ ○ ●	• Infant Vital Signs	○ ○ ○ ●
• Infant Measurement	○ ○ ○ ●	• Bowel and Bladder Patterns	○ ○ ○ ●
• Reflexes	○ ○ ○ ●	• Assessment of Pain In Neonate	○ ○ ○ ●
• Jaundice	○ ○ ○ ●	• Assessment of Response to Pain Management Interventions	○ ○ ○ ●
• Respiratory Distress	○ ○ ○ ●		
Interpretation of Lab Results			
• Bilirubin	○ ○ ○ ●	• Neonatal CBC/Interpretation for Sepsis	○ ○ ○ ●
• Blood Cultures	○ ○ ○ ●	• Transcutaneous Bilirubin	○ ○ ○ ●
• Blood Glucose	○ ○ ○ ●		
Equipment & Procedures			
• Bulb Syringe	○ ○ ○ ●	• Neonatal CPR	○ ○ ○ ●
• Circumcision Care/Teach to Parents	○ ○ ○ ●	• Obtain Cultures	○ ○ ○ ●
• Cord Care/Teach to Parents	○ ○ ○ ●	• Obtain Specimens for Drug Screen	○ ○ ○ ●
• Heelstick	○ ○ ○ ●	• Obtain Urine/Stool Specimens	○ ○ ○ ●
• IM/Subcutaneous Injections	○ ○ ○ ●	• Phototherapy	○ ○ ○ ●
• Immunizations	○ ○ ○ ●	• Thermoregulation	○ ○ ○ ●
• Infant Identification/Security	○ ○ ○ ●		



MISCELLANEOUS

National Patient Safety Goals	1 2 3 4	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input checked="" type="radio"/>	Pixis Medication Admin. System	1 2 3 4	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input checked="" type="radio"/>
Restraint Use and Documentation		<input type="radio"/> <input type="radio"/> <input type="radio"/> <input checked="" type="radio"/>	Charge Experience		<input type="radio"/> <input type="radio"/> <input type="radio"/> <input checked="" type="radio"/>
Preceptor Experience		<input type="radio"/> <input type="radio"/> <input type="radio"/> <input checked="" type="radio"/>	Other Medication Admin. System		<input type="radio"/> <input type="radio"/> <input type="radio"/> <input checked="" type="radio"/>
Computerized Charting					
• Cerner		<input type="radio"/> <input checked="" type="radio"/> <input type="radio"/> <input type="radio"/>	• McKesson		<input type="radio"/> <input checked="" type="radio"/> <input type="radio"/> <input type="radio"/>
• Epic		<input type="radio"/> <input checked="" type="radio"/> <input type="radio"/> <input type="radio"/>	• Meditech		<input type="radio"/> <input type="radio"/> <input type="radio"/> <input checked="" type="radio"/>
		<input type="radio"/> <input checked="" type="radio"/> <input type="radio"/> <input type="radio"/>	• Other: <u>QIS</u>		<input type="radio"/> <input type="radio"/> <input type="radio"/> <input checked="" type="radio"/>

Age specific practice criteria

A. Newborn/Neonate (birth - 30 days)	F. Adolescents (12 - 18 years)
B. Infant (30 days - 1 year)	G. Young adults (18 - 35 years)
C. Toddler (1 - 3 years)	H. Middle adults (35 - 64 years)
D. Preschooler (3 - 5 years)	I. Older Adults (64+)
E. School age children (5 - 12 years)	

Please check the boxes below for each age group for which you have expertise in providing age-appropriate care

Experience with age groups	A B C D E F G H I
Able to adapt care to incorporate normal growth and development.	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Able to adapt method and terminology of patient instructions to their age, comprehension and maturity level.	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
Can ensure a safe environment reflecting specific needs of various age groups.	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

My experience is primarily in the following settings

Labor & Delivery - Yrs:	<u>12</u>	#Deliveries / month	<u>15</u>
LDRP - Yrs:	<u>5</u>	#Deliveries / month	<u>15</u>
Antepartum - Yrs:	<u>15</u>	#Deliveries / month	
Other - Yrs:		#Deliveries / month	

Certifications/Licensures/Registrations

ACLS	Exp. Date:	
SLS	Exp. Date:	10/10/2009
Fetal Monitoring Certificate	Date Taken:	
NRP	Exp. Date:	01/29/2009

Labor and Delivery Skills Checklist, version 2



AMN Healthcare, Inc.

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AMN Healthcare's EMR Conversion Support Services

The mission of AMN's EMR Staffing Solution is to provide a seamless adoption for the facilities' Electronic Medical Records implementation.

AMN's primary goal is to ensure that the facilities have highly qualified clinical and non-clinical staff available to support operations during EMR Implementation.

The initial key benefits of this project include the following:

- **EMR conversion experience to impact project scope direction and success**
- **A dedicated team that will provide 24/7 support to all facility locations and departments**
- **Scalable program options capable of providing back office logistics and clinical support**
- **Access to the industry's largest EMR support staff supply pool**

AMN Healthcare has partnered with over 100 hospitals to providing 10-700 clinicians per project, assisting organizations to maneuver through the complex landscape associated with EMR conversions of all types, including Meditech, EPIC, Cerner, GE Healthcare, McKesson, Siemens and others.

What all Go-Lives have in Common: "What you don't know, you don't know."

Healthcare organizations make large investments in time and dollars to select, configure and implement a new EMR system. Given that healthcare organizations are vast, complex organizations with many moving parts, the implementation phase of any EMR project presents a significant amount of risk to the organization in terms of continued productivity and continuity of patient care.

There are many factors to consider to successfully overcome risks. Below is an example of some of the items that should be considered:

- **RN's awareness and adaptability to software platform of choice**
- **Assignment contract flexibility**
- **Consistent project communication and updates**
- **Resource allocation during the conversion**
- **Coordination of on-boarding and orientation success**
- **The clarification of clinician responsibilities and assignment expectations**
- **Clinical quality assurance**
- **Productivity Loss**

AMN has a deep understanding of the challenges that can arise when trying to minimize productivity and service and staff-related disruptions. Through a sophisticated and consultative approach, AMN can significantly increase the value of your new EMR system on a go-forward basis and ultimately assist in providing maximum return on your investment.

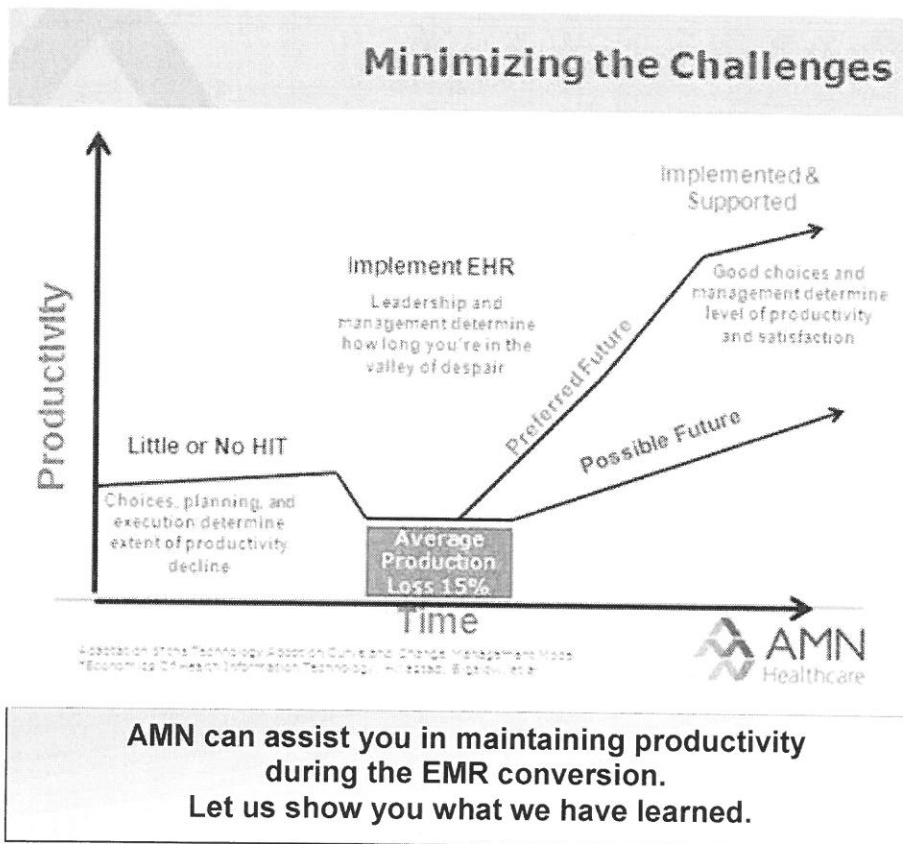


AMN Healthcare's EMR Conversion Support Program Highlights

AMN's Conversion program enables you to:

- Offset efficiency losses (average 15%) due to learning curve
- Accelerate system adoption via lower N:P ratios
- Keep beds open and operate as usual during training
- Reinforce compliance and charting processes
- Maintain hospital culture with EMR experienced Healthcare professionals
- Minimize stress and burnout experienced by core staff
- Maintain high quality patient care and satisfaction scores
- Access our large supply of IT savvy clinicians
- Relieve your internal Nurse Managers and Directors with the burden of conducting time consuming interviews
- Supports Overlake's involvement with orientation
- *Sleep at night...*

The next section's graph illustrates a typical healthcare organization's loss of productivity throughout the EMR implementation and highlights how a proactive, approach can maximize value and experience:



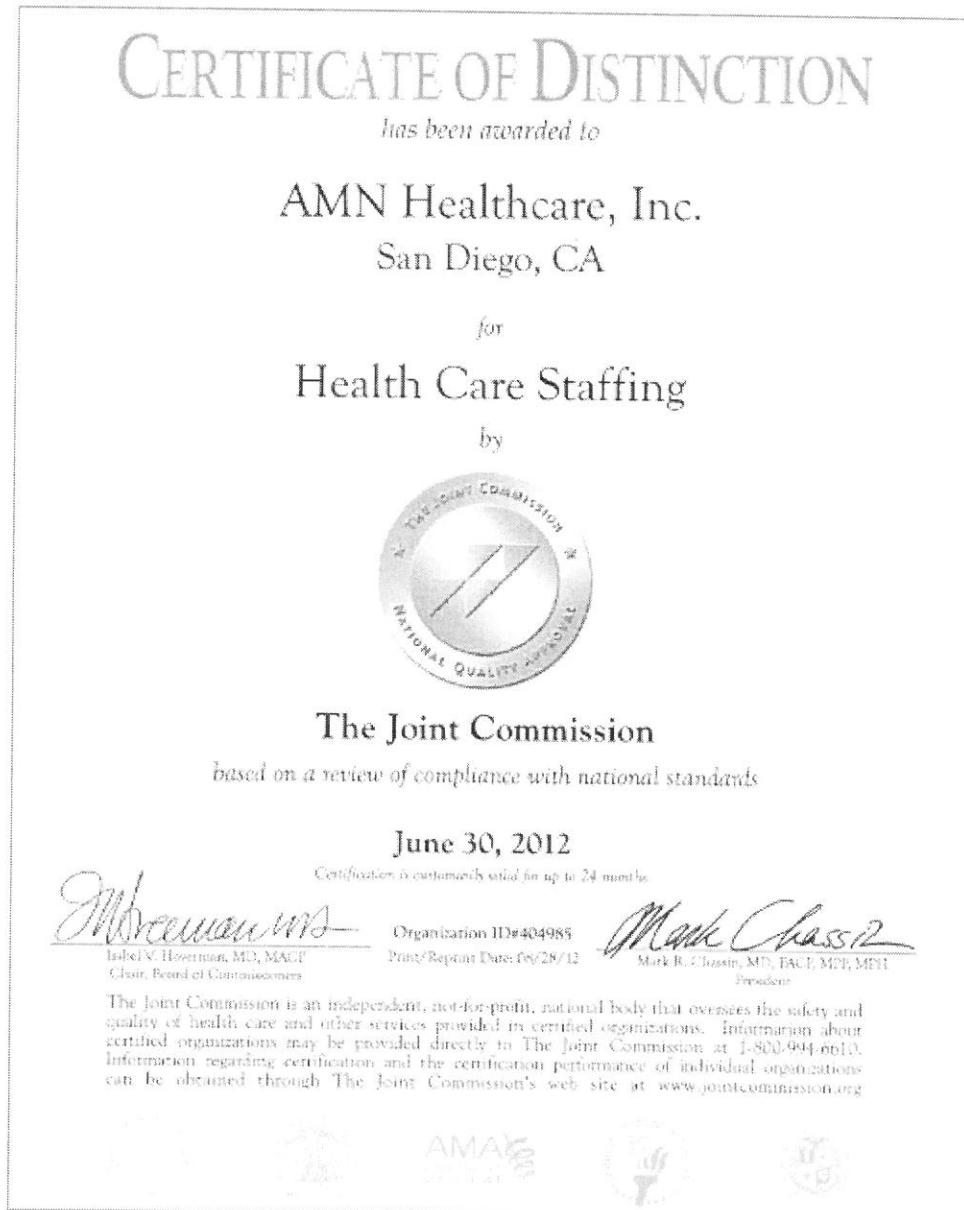


2005 Initial Corporate TJC Certification

AMN received the initial Corporate Certification from The Joint Commission (TJC) in 2005.

Corporate Certification means that all of AMN's Divisions, Brands, Policies and Procedures, Training Programs, Contracts, and therefore, AMN's Clinicians, are covered under this TJC Certification.

AMN Healthcare is currently certified until July, 2014.





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/03/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Aon Risk Insurance Services West, Inc. Sacramento CA Office 8880 Cal Center Drive, Suite 130 Sacramento CA 95826 USA		CONTACT NAME: PHONE (A/C No. Ext.): (916) 369-4800 FAX (A/C No.): (916) 369-4801 E-MAIL ADDRESS:															
INSURED AMN Healthcare Services, Inc. 12400 High Bluff Drive San Diego, CA 92130-3077 USA		INSURER(S) AFFORDING COVERAGE <table border="1"> <tr> <th>INSURER</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: Hartford Casualty Insurance Co</td> <td>29424</td> </tr> <tr> <td>INSURER B: Lexington Insurance Company</td> <td>19437</td> </tr> <tr> <td>INSURER C: Lloyd's Syndicate No. 2623</td> <td>AA1128623</td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>		INSURER	NAIC #	INSURER A: Hartford Casualty Insurance Co	29424	INSURER B: Lexington Insurance Company	19437	INSURER C: Lloyd's Syndicate No. 2623	AA1128623	INSURER D:		INSURER E:		INSURER F:	
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INSURER C: Lloyd's Syndicate No. 2623	AA1128623																
INSURER D:																	
INSURER E:																	
INSURER F:																	

COVERAGES **CERTIFICATE NUMBER:** 570049836689 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR (INSR) W/D	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
C	GENERAL LIABILITY		W13706130101	03/01/2013	03/01/2014	
	X COMMERCIAL GENERAL LIABILITY		General Liability			EACH OCCURRENCE \$1,000,000
	X CLAIMS-MADE <input type="checkbox"/> OCCUR		SIR applies per policy terms & conditions			DAMAGE TO RENTED PREMISES (Per occurrence) \$50,000
						MED EXP (Any one person)
						PERSONAL & ADV INJURY \$1,000,000
						GENERAL AGGREGATE \$3,000,000
						PRODUCTS - COMPROP AGG \$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER					
	POLICY <input type="checkbox"/> PRO- <input type="checkbox"/> LOC					
A	AUTOMOBILE LIABILITY		72ABS11102	09/01/2012	09/01/2013	
	X ANY AUTO		Business Auto			COMBINED SINGLE LIMIT (Per accident) \$1,000,000
	ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per person)
	X HIRED AUTOS <input type="checkbox"/> UNOWNED AUTOS					BODILY INJURY (Per accident)
						PROPERTY DAMAGE (Per accident)
	UMBRELLA LIAB <input type="checkbox"/> OCCUR					EACH OCCURRENCE
	EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE					AGGREGATE
	DED <input type="checkbox"/> RETENTION					
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		72WNS11100	09/01/2012	09/01/2013	
	ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER MEMBER EXCLUDED? (Mandatory in NJ)	Y/N	Workers' Comp.			X NO STATE TORY LIMITS
	2 yrs. duration limit					EL EACH ACCIDENT \$1,000,000
	DESCRIPTION OF OPERATIONS 0454	N/A				EL DISEASE-SEA EMPLOYEE \$1,000,000
						EL DISEASE-POLICY LIMIT \$1,000,000
B	Misc Med Prof		11231706	11/01/2012	03/01/2014	
			Professional Liab.-Nurses			Each Occ. \$2,000,000
						Aggregate \$4,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101. Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER

CANCELLATION

Evidence of Insurance	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE

ACORD 25 (2010/06)

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AMN Healthcare, Inc.

Information contained is for client's internal review only and is proprietary and confidential



AGENCY CUSTOMER ID: 570000037643

LOC #:



ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY Aon Risk Insurance Services West, Inc.		NAMED INSURED AMN Healthcare Services, Inc.	
POLICY NUMBER See Certificate Number: 570049836689			
CARRIER See Certificate Number: 570049836689	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM.

FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Full Named Insured Schedule:

AMN Healthcare Services, Inc. (AHS)
AMN Healthcare, Inc. (AMN)
AMN Services, LLC
AMN Services, Inc.
DBA: American Mobile Healthcare
DBA: Medical Express
DBA: Preferred Healthcare Staffing
DBA: NurseChoice
DBA: RN Extend
AMN Staffing Services, Inc.
O' Grady-Peyton International (USA), Inc. (OGP)
O' Grady-Peyton International (USA), Inc. (Singapore Branch)
O' Grady-Peyton International (India) Ltd.
O' Grady-Peyton International Recruitment U.K. Ltd.
O' Grady-Peyton International (SA) (Proprietary) Ltd.
O' Grady-Peyton International (Australia) (Proprietary) Ltd.
O' Grady-Peyton International (Europe) Ltd.
The MHA Group, Inc. (MHA Group)
Merritt Hawkins & Associates, LLC
DBA: Merritt Hawkins & Associates, Inc.
Staff Care, Inc.
Med Travelers, Inc. (MTI)
Med Travelers, LLC
RN Demand, Inc. (RND)
DBA: MTI Staffing
Rx ProHealth, Inc.
Pharmacy Choice, Inc.
DBA: AMN Healthcare Recruitment Process Outsourcing
AMN Allied Services, LLC
AMN Healthcare Allied, Inc.
AMN Staffing Services, LLC
AMN Services of Ohio, Inc.
AMN Services of New Hampshire, LLC
Medfinders
Nursefinders, Inc.
NF Investors, Inc.
NF Holdings Corporation
NF Acquisition Corporation
Nursefinders Acquisition Corporation
B.C.P., Inc. (divested 1/30/2012)
NF Services, Inc.
Linde Healthcare Staffing, Inc.
Jim Kendall and Associates, LLC
Staffco Holdings, Inc.
Club Staffing, Inc.
National Healthcare Staffing, LLC
M&E Affiliates, Inc. DBA: TVL Healthcare
Radiologic Enterprises, Inc. DBA: Resources On Call, Inc.
Nursefinders, LLC
Resources On Call, LLC
Nursefinders Restorative Care Services, Inc.
Nursefinders Acquisitions, LLC
Kendall & Davis

ACORD 101 (2008/01)

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**Thank you for considering
AMN Healthcare's staffing services!**

