

Ohio Attorney General's Office Bureau of Criminal Investigation Investigative Report



2021-0888

Officer Involved Critical Incident - 500 South Cleveland Ave., Westerville, Ohio 43081 (L)

Investigative Activity: Document Review, Records Received

Involves: Security (S), Security (S), Security

(S), Security (S)

Date of Activity: 05/04/2021

Activity Location: Mount Carmel St. Ann's Hospital – Business – 500 S. Cleveland

Ave., Westerville, OH 43081, Franklin County

Author: SAS Kevin Barbeau, #142

Narrative:

On Tuesday, May 4, 2021, the Bureau of Criminal Investigation (BCI) Special Agent Supervisor (SAS) Kevin Barbeau arrived at Mount Carmel Health System Building (6150 E. Broad St., Columbus, Ohio) in order to obtain records requested prior to this date pursuant to a subpoena service; also served prior to this date. The purpose of the subpoenaed records was to request information relevant to an Officer-Involved Critical Incident (OICI), which occurred at St. Ann's Hospital (500 South Cleveland Ave., Westerville, Ohio) on April 12, 2021. BCI learned Columbus Police officers were taking Miles Jackson (involved subject) into custody at St. Ann's Hospital Emergency Department (ED) room. A struggle ensued and CPD officers and St. Ann's (armed) Security Officers discharged their duty weapons. Miles died from apparent gunshot wounds.

SAS Barbeau was contacted by Jill Koppel (Associate General Counsel) and advised the records were ready to be picked up. SAS Barbeau received the following from Mount Carmel:

- Mount Carmel communication
- Mount Carmel Safety and Security Incident Report completed by Supervisor Chad Taylor
- Mount Carmel Use of Force Policy
- Personnel Files for:
 - Security Officer
 Security Officer
 Security Officer
 Security Officer

It should be noted a thumb drive was also provided that contained a file of St. Ann's Emergency Department video surveillance. This is a duplicate file; however, this video surveillance has

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been REDACTED. See IR-32 for a synopsis of the video surveillance previously received. The thumb drive is maintained in the physical case file.

The following was noted while reviewing the personnel file records:

- Security Officer
 - Hired July 23, 2019
 - Completed Ohio Peace Officer Training Commission; Private Security Firearms Requalification on November 20, 2020
- Security Officer
 - Hired February 24, 2015
 - Completed Ohio Peace Officer Training Commission; Private Security Firearms Requalification on August 2, 2020
- Security Officer
 - Hired November 7, 2016
 - Completed Ohio Peace Officer Training Commission; Private Security Firearms Requalification on August 2, 2020
- Security Officer
 - Hired August 8, 2020
 - Completed Ohio Peace Officer Training Commission; Private Security Firearms Requalification on November 27, 2019

See attached for additional details.

Attachments:

Attachment # 01: Mount Carmel Records Communication
Attachment # 02: Mount Carmel Use of Force
Attachment # 03: Mount Carmel Safety and Security Report
Attachment # 04: Personnel File
Attachment # 05: Personnel File
Attachment # 06: Personnel File
Attachment # 07: Personnel File

References:

USB Thumbdrive - St. Ann's REDACTED VIDEO

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Via Hand Delivery

May 3, 2021

Kevin Barbeau Special Agent Supervisor Special Investigations Unit – Major Crime Bureau of Criminal Investigation

Re: Mount Carmel St. Ann's

Investigator Barbeau:

Pursuant to the Bureau of Criminal Investigations subpoena issued on April 16, 2021 please find the enclosed documents:

- Personnel file for
- Personnel file for
- Personnel file for
- Personnel file for
- Use of Force Policy; and

Due M. Hoppel

Security report regarding the shooting on April 12, 2021.

It is my understanding that Christie Santa-Emma, Mount Carmel's Chief Compliance Officer, is providing you with copies of Mount Carmel's internal security video and Miles Jackson's medical record.

Please let me know if you have any questions or need any additional information.

Jill M. Koppel

Associate General Counsel Mount Carmel Health System

Trinity Health

Enclosures

MOUNT CARMEL HEALTH SAFETY AND SECURITY Policy

SUBJECT: Use of Force

PURPOSE

To provide guidelines for Security Officers in using force to control hostile persons and to provide guidelines for the use of defensive weapons.

POLICY

Security Officers must be prepared to perform assigned duties at all times. When using force to control a subject or to overcome resistance, the force must be based on the actions and behavior of the subject and be reasonable for the situation. The level of force used must be balanced against the likelihood of injury to the subject and/or officer.

The Safety and Security Department will use the USE OF FORCE CONTINUUM as a guide when dealing with an uncooperative subject. The USE OF FORCE CONTINUUM is a general guideline to be used in subject control and officer defense. Since confrontation is dynamic and is often unpredictable, an officer may be forced to escalate, de-escalate, or go from minimum to maximum use of force without resorting to each intermediate step. The Department's Use of Force Continuum is designed to aid and assist officers in the decision-making process.

Use of Force continuum and training in defensive weapons will take place within the first 90 days of employment for Safety & Security Officers and annual thereafter. Competencies/methodology of training will be tracked. Safety & Security will provide training on OC repellent, ASP Expandable Baton, and Defensive Tactics annually. In addition, Security Officers will have initial 20-hour security firearms training authorized by the State of Ohio and annual re-qualifications thereafter.

USE OF FORCE CONTINUUM

Savin Sin

- 1. Physical Presence of the Officer
- 2. Issuance of Verbal and Physical Directions or Commands
 - a. To direct subject
 - b. To inform bystanders
 - c. To create a voice stunning value
 - d. To calm subject
- 3. Empty Hand Control
 - a. Soft
 - 1. Assistance from other officers
 - 2. Escort Position

Laval Two

- b. Hard Defensive Tactics
 - 1. Joint Manipulations or pressure points, takedowns,
 - 2. Handcuffing

Level Three

Use of Non-Lethal Defensive Weapons

A. OC Repellent-Chemical

- 1. The OC repellent is a liquid or foam imitant. It requires direct application to the subject's face to be effective.
- 2. The application of the agent should be made ideally from a range of 6-12 feet. This distance also provides safety for the officer. If the agent is applied at a closer range it may affect the officer. When spraying the subject, the spray should be directed at the eyes for maximum effect. If the subject is wearing glasses spray at the top of the glasses and allow the agent to splash into the eyes. The agent should take full effect in 2-5 seconds.
- 3. Officers using the agent should not touch their face until they have had the opportunity to wash their hands with soap and water.
 - After spraying a person, afford that person an opportunity to wash the contaminated areas and remove any saturated clothing. The most effective antidote is a large amount of air. The subject should be taken to the Emergency Department to be checked.
 - If the agent is used in an enclosed area, such as a small room or vehicle, open all windows and allow the area to ventilate.
- 4. The OC agent should only be used when a physical confrontation is occurring or is about to occur.

B. Canine (K9)

If a perpetrator becomes violent and physically assaulting by way of non-deadly measures, K9s can be deployed to get the perpetrator(s) under control to prevent bodily harm/physical assault.

Level Tour

C. Expandable Baton

- 1. The expandable baton is to be primarily used as a defensive weapon. Striking a person with the baton is justified when an officer is:
 - a. Protecting him/herself or another from assault
 - b. Attempting to stop an individual's aggression or to overcome resistance or violent behavior where lessor means of physical force are ineffective.
- 2. The primary target areas for applying non-lethal force with the baton are the large muscle groups or bones. Light strikes to these areas will cause pain and minor bruising, although such a strike can potentially disable an assailant and bring the attack to an abrupt halt.
- 3. It is important to avoid striking the head, temple, throat, and the back of the neck. Even light strikes or pressure these areas could inflict serious or possibly fatal injuries.
- 4. If an officer strikes a person with the baton that person will be taken to the Emergency department to be checked.



Lethal/Deadly Force

Firearms

Select officers/ supervisors carry firearms and the use of firearms on a person is considered lethal and deadly force. The use of deadly force will be in accordance with Ohio State Laws (ORC) – and will only be used on a perpetrator for the protection of life from substantial risk of death or serious bodily injury to self or others. Officers/supervisors that carry firearms have gone through the OPOTA Security Firearms training program and have met proficiency/competency and will re-qualify on an annual basis. Armed security must make sound judgment when using fire arms in the above circumstances, but be cognizant to their action as it relates to the potential of bullets hitting and wounding innocent bystanders. Firearms should not be discharged on moving vehicles unless it is a situation that is life-threatening. Only authorized department firearms will be used.

SPECIAL PROVISIONS

Anytime that an officer uses the OC repellant, K9, baton, handcuffs, or firearm on any individual an Incident Report will be completed by the Officer's Supervisor/In Charge Officer. Local Law Enforcement Agency will also be contacted for possible charges on subject that OC repellant, K9, handcuffs, baton, firearm was used on. This report will be forwarded to the Regional System Manager of the Safety and Security Department. All Use of Force Incidents will be investigated by the Defensive Tactics Instructors.

Reviewed 09-2011 Revised 12/2012 Reviewed 08/2014 Reviewed 08/2016 Revised 11/2016, 12/2016 Firearms effective: 2/1/17

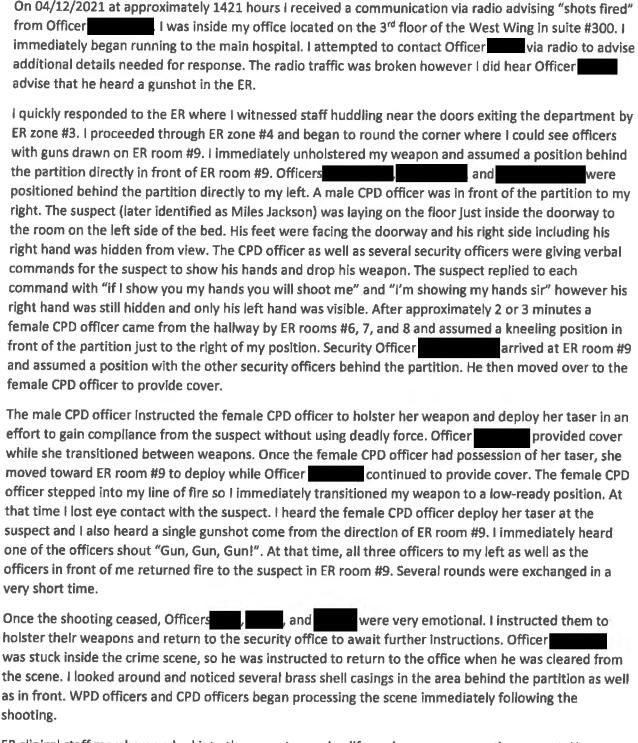
DEFINITIONS:

- 1. Active Resistance Behavior that consists of non-threatening physical opposition to being controlled.
- 2. Assaultive Behavior Aggressive physical opposition directed towards the officer or others by a subject. Assaultive behavior can be either an actual attack, or threat of attack conveyed through body language and assaultive verbalization.
- 3. Controlling Force Usually the minimal amount of physical force needed to control a subject who will not submit to verbal commands. Generally, this level of force involves the application of pain without injury. Controls techniques are used to encouraged a subject to go in a desired direction, and usually are applied to subjects that are either passively or actively resisting the officer's attempt to control them.
- 4. Deadly/Lethal Force Any force which carries a substantial risk that it will proximately result in the death or serious bodily injury of any person.
- 5. Reasonable Belief That belief by an officer, acting on personal knowledge of facts and circumstances which are reasonably trustworthy, that would justify a person of average caution to believe that a crime has been or is being committed. Similar to the probable cause standard.
- 6. Reasonable Force Force that will likely lead to a safe control of the subject. If a lesser force would likely lead to safe control the lesser force should be used.
- 7. Serious Physical Injury Injuries being inflicted or about to be inflected which could cause the death of any person.

Vehicle(s) Supplements

MOUNT CARMEL SAFETY AND SECURITY Incident Report

Location: MT. CARMEL ST. ANNS Report #: MCSA3672021 Report Date: 4/13/2021 Occur Day: Monday Category: SAFETY INCIDENTS Sub Catg: CODE SILVER Occurred Date: 4/12/2021 Occurred Time: 2:15:00 PM Outside Agency Notified/Name/Case #: Solucient Tracking: E K-9 Notified/Name; Supervisor Notified/Name/Date: ✓ AE265153 4/12/2021 Specific Location Emergency Room Hospital Administrator Notified/Name/Date: Time Spent: Sign off/Reviewer: Narrative: Incident report will be saved on another platform. Officer(s) Property Description(s)/Value Person(s) Involved



ER clinical staff members rushed into the room to employ life-saving measures on the suspect. He was placed onto an ER cot and rushed to ER Trauma #98. The area was then taped off to preserve the scene. WPD Officer Ward was assigned to me and he escorted me to my office to review CCTV footage of the incident. He was informed by his administration that Ohio BCI (Bureau of Criminal Investigations) would by handling the investigation. Once BCI started the investigation, WPD Officer Ward never left my side until I was escorted to Conference Room B to be photographed by a BCI agent. I was then escorted to

Conference room A where crisis intervention specialists were staged to provide relief to myself as well as Officers Stanley Miller, Luke Smith, Zachary Powell, and Phillip Blackburn. We were staged in conference room A until we were called one by one into conference room B to meet with BCI investigators where each officer provided a recorded oral interview and statement. Once officers were finished and cleared by BCI investigators, they were released from the room and the hospital.

Officers were advised that protestors were gathering near the hospital so they were instructed to remove their uniforms before exiting the building to maximize their safety until they were able to leave campus. I stayed at the hospital to assist officers who were stationed in parking lot D awaiting the protestors who were in route to the hospital.

Protestors arrived at the hospital entrance at approximately 2100 hours to protest. WPD officers as well as security staged in parking lot D during the protest which lasted approximately 45 minutes. Once the protestors disbursed, officers cleared parking lot D and returned to hospital interior patrol. Officers Brandon Stone and Andrew Francis continued to provide exterior patrol in the marked patrol vehicle. Nothing further to report at this time.

Chad Taylor
Safety and Security Supervisor
380-898-4125





A MEMBER OF 🀼 TRINITY HEALTH

POSITION DESCRIPTION

Armed Safety & Security Officer	DEPARTMENT: Safety & Security
JOB CODE: M4850	REPORTS TO: Armed Supervisor of Safety & Security
DATE ISSUED: 2/1/2017	SUPERVISES: N/A
DATE REVISED: 2/1/2017	MATRIX REPORTING RELATIONSHIPS: N/A

Mount Carmel Mission Statement and Guiding Behaviors

Mission: We serve together in Trinity Health, in the spirit of the Gospel, to heal body, mind and spirit, to improve the health of our communities and to steward the resources entrusted to us.

The Guiding Behaviors set the expectation for how we work together in living our Mission and Core Values. They are:

- We support each other in serving our patients and communities.
- We communicate openly, honestly, respectfully and directly.
- We are fully present.
- We are all accountable.
- We trust and assume goodness in intentions.
- We are continuous learners.

Job Summary

- In accordance with the Mission and Guiding Behaviors; the Safety & Security Officer is to provide protective services to all persons and property across the Mount Carmel Health System.
- Ensure a safe environment for all associates, physicians, patients, and visitors in compliance with various regulatory standards to include, JC, OSHA, ect.
- Provide a quality service consistant with the values of Mount Carmel Health System for our associates, physicians, patients and visitors.

Job Qualifications (Knowledge, Skills, and Abilities)

- Education: High school graduate or GED required.
- Licensure / Certification: Receipt of Ohio Peace Officer Training Academy certificate of completion prior to being assigned a shift as an Armed Safety and Security Officer for Mount Carmel
- Experience: Three to five years experience in security, law enforcement or military disciplines or equivalent training which might include criminal justice, homeland security, or law enforcement academy is preferred.
- Effective Communication Skills
- Valid driver's license with good driving record maintained
- Customer service oriented able to function in high stress situations with personal restraint, integrity, and control.
- Basic computer skills that commensurate with the job.
- Ability to communicate effectively and appropriately with diverse populations.
- Ability to write, read, and communicate effectively in the English language.

Essential Responsibilities

- Exhibits each of the Mount Carmel Service Excellence Behavior Standards holding self and
 others accountable and role modeling excellence for all to see. For example: demonstrates
 friendliness and courtesy, effective communication creates a professional environment and
 provides first class service.
- Meets population specific and all other competencies according to department requirements.
- Promotes a Culture of Safety by adhering to policy, procedures and plans that are in place to prevent workplace injury, violence or adverse outcome to associates and patients.
- Relationship-based Care: Creates a caring and healing environment that keeps the patient and family at the center of care throughout their experience at Mount Carmel following the principles of our interdisciplinary care delivery system.
- (For patient care providers) Provides nursing care, ensures an environment of patient safety, promotes evidence-based practice and quality initiatives and exhibits professionalism in nursing practice within the model of the ANCC Magnet Recognition Program®.
- Maintain a safe and secure environment through job knowledge, skills and engagement.
 Intervene as appropriate in any safety & security observed issues.
- Enforces all governmental regulations, standards, policies associated with Mount Carmel Health System and Safety & Security policies, (i.e. smoking policy).
- Communicate safety and security discrepancies to the appropriate parties for mitigation.
- Ensure department goals & objectives are reached/maintained during assigned shift(s).
- Responsible for assuring that the Safety, Life Safety, security, and Emergency Management, and the JC standards are followed as it relates to the position.
- Responsible for completing and documenting assigned tasks, such as fire drill and safety tours on time.
- Ensure accurate documentation during assigned shift (i.e. security reports, safety incidents, activity logs).
- Ensure consistent delivery of professional, friendly, and courteous service.
- Comply with the organization and department dress code.
- Conduct initial and follow-up investigations, if warranted or directed, ensuring documentation
 of investigative steps.
- Proactive patrolling of the campus by foot, segway, or vehicle as assigned.
- Respond to all "STAT" calls expeditiously and safely.

- Be familiar with all hospital emergency codes and appropriate responses
- Responsible for completing assigned tasks/duties on time (i.e. fire drills and safety tours).
- Provide on-the-spot in-service training to staff where knowledge related discrepancies are noted.
- Demonstrate sound judgment, decision skills, and prioritizing responses to emergency situations.
- Ability to perform duties in an independent manner.
- Custodial responsibility for patient valuables and maintaining lost and found by following the proper protocols.

Other Job Responsibilities

- Inspects panic alarms, AED's, and call boxes as assigned.
- Provides escorts for associates, patients, visitors and students (where located) in the hospital areas and areas contiguous to the hospital areas.
- Issue parking citations and enforce the parking policy.
- Provide helipad duties during helicopter landings and departures
- Assist in the collection of ICES data as directed
- Monitoring of cameras and access control responsibilities as assigned
- Citizen arrest duties only in accordance with applicable laws and statutes
- Assist motorist with vehicle assistance as appropriate (i.e. jump start)
- Traffic enforcement keeping emergency entrances and approaches clear of non-emergency vehicle traffic
- Respond to safety incidents/visitor injuries as appropriate, ensuring medical is summoned as appropriate.
- During emergent events direct media to the proper area/contact
- Perform other assigned duties as directed by Management.
- Use proper radio procedures and monitors on-going activity
- Be familiar with geographic location and facility layout
- Immediately report and respond appropriately to Salient events, communicating the event to your supervisor.
- Provide for security per policy for VIPs
- Chemical spill clean up as assigned.
- Responsible for compliance with Organizational Integrity through raising questions and promptly reporting actual or potential wrongdoing.
- All other duties as assigned.

EQUIPMENT: This section requires a response of Yes or No from drop down box.

Radiation: No Electrical: Yes Mechanical: No

KEY TO FREQUENCY CODES for Physical Requirement Sections: This section requires a numerical response from drop

down box.

1 = Up to 33% of the time 3 = Over 66% of the time 2 = From 33% - 66% of the time 4 = Not Applicable

PHYSICAL REQUIREMENTS

Sitting: 3 Balancing: 3

Standing: 3 Reaching Overhead: 1
Walking: 3 Grasping: 3
Ability to be Mobile: 3 Keyboarding : 3
Bending: 2 Pinching: 3
Kneeling/Crawling: 1 Twisting: 2
Stooping: 1 Climbing: 1

Turning/Pivoting: 2 Pulling: 2

Working Above Shoulder Level: 4

Pushing: 2 Maximum Weight: Equal to or greater than 35 lbs
Lifting: 3 Maximum Weight: Equal to or greater than 35 lbs

POTENTIAL EXPOSURE: This section requires a response of Yes or No from drop down box.

Blood / Body Fluid Contact: Yes Humidity: No Temperature: No Air-borne Pathogen: Yes Chemicals (Fumes / Burns): No Dust: No

Radiation: No Vibrations: No Noise: No

Personal Protective Equipment: This section requires a response of Yes or No from drop down box.

Gloves: Yes Shoes: No Goggles: Yes Aprons: No Masks: Yes Head Covering: No Gowns: Yes

Emotional / Psychological Factors: This section requires a response of Yes or No from drop down box.

Trauma: Yes Grief: Yes Death: Yes Public Contact: Yes Deadlines: Yes

This job description is intended to describe the general content of and requirements for the performance of this job. It is not to be considered an exhaustive statement of duties, responsibilities, or requirements.

Reviewed and Approved by: <u>Drew Evans</u>

Title: Manager System Safety and Security

Date: 3/15/2017
Compensation Rep: Jim Kousaie

Title: Sr. Compensation Consultant

Date: 3/15/2017

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Due to our upcoming transition to Workday at the end of 2016, Peoplesoft Self-Service is "view-only" for colleagues starting November 14, 2016. Please use this manual form to make your elections as a new hire or as a result of a life event. Send to the Benefits Team by fax or email, along with dependent documentation and life event documentation (if applicable). Please call or email with questions.

Colleague N	lame:		
Colleague II	D#:		
Event type:	New Hire	Date of Hire: 11/07/2016	
	Marriage	Date of Marriage:	
	Divorce	Date Divorce was finalized:	
	Birth / Adoption	Baby's date of birth:	1 11 mg m as manager
	Gain of Coverage	Effective date of New Coverage:	01/01/2017
	Loss of Coverage	Date other coverage ended:	причина в на
	Employment Statu	s Change Date of Change:	- Paris - Anna di Santa - Panis - Araban

Attached is a rate sheet for 2017, showing the per pay period premiums you will pay for each coverage elected. If you are adding dependents for the first time, please attach dependent documentation before sending to the Benefits Team for processing.

You can fax documentation to 614-234-6266 or email it to benefits@mchs.com. We do NOT recommend sending it by inter-office mail or US mail as it may not reach us in a timely manner.

Please call us at 614-234-6274, option 3, then option 0, or email us at beneits@mchs.com if you have any questions or need assistance. Thank you!



DEPENDENT INFORMATION

In order for new family members to be eligible for coverage under any Trinity Health Welfare Benefit Plan, you are required to provide proof of their dependent status. If you are planning to add family members, you must submit dependent verification information to Human Resources within 30 days of your hire date or life event. If you do not submit the required paperwork by the deadline, your newly added dependents will not be enrolled in coverage and you will be required to wait until the next annual enrollment period to enroll new dependents in the plan. For a list of required documents, visit http://wygenefits.trinity-health.org.

Spouse	Spouse Name: Date of Birth: /
	Coverage TypesMedicalDentalVisionLife InsuranceLegal
Eligible Adult	Eligible Adult Name: Date of Birth:/ SSN:
	MedicalDentalLife InsuranceLegal
Child	Child Name: Date of Birth:/ \$SN:
	Coverage Types MedicalDentalVisionLife InsuranceLegal
Çhild	Child Name: Date of Birth: / / SSN:
	Coverage TypesMedicalDentalVisionLife InsuranceLegal
Child	Child Name: Date of Birth: / SSN:
	Coverage TypesMedicalDentalVisionLife InsuranceLegal
Child	Child Name: Date of Birth://SSN:
	Coverage Types
	MedicalDentalVisionLife InsuranceLegal



MEDICAL
You have the following plan options:
I understand that the health plan coverage I am enrolling in provides benefits through a clinically integrated network of hospitals, physicians, and other healthcare providers and professionals, including care coordinators and case managers that monitor and coordinate all espects of an individual's medical care (CIN). I further understand that my employer and healthcare providers and professionals affiliated with my employer participate in the CIN. As a result, I understand that, although I and my dependents may not be treated at the facilities or by the employees of my employer or a healthcare provider or professional affiliated with my employer, employees of my employer or a healthcare provider or professional affiliated with my employer will have access to and may use and disclose my and my enrolled dependents' personal health information to manage and coordinate our care. Any access to and use and disclosure of protected health information will comply with the privacy and security regulations under the Health Insurance Portability and Accountability Act and any applicable state privacy and security laws.
Medical Plan Election
XX Traditional PPO
Health Savings PPO
\$Health Savings Account Annual Contribution* (Annual contribution, NOT per pay period amount)
(Note: When you enroll in the Health Savings PPO plan, you automatically have a Health Savings Account (HSA) to help pay for healthcare costs. You have the option to contribute pretax money from your paycheck to your Health Savings Account. If you wish to enroll in the HSA, please enter the annual amount you would like to contribute)
Essential PPO
No Coverage
Coverage Level
XX Employee Only Coverage Employee + Spouse / Eligible Adult Coverage Employee + Child(ren) Coverage Family Coverage
*To contribute to the Health Savings Account you are required to be enrolled in the Health Savings PPO
DENTAL
You have the following plan options:
Delta Dental Premier High Delta Dental Premier Standard No Coverage
Coverage Level
Employee Only Coverage Employee + Spouse / Eligible Adult Coverage Employee + Child(ren) Coverage Family Coverage



VISION		
You have the following plan o	ptions.	
Standard Plan	XX High Plan	No Coverage
Coverage Level XX Employee Only Cover Employee + Spouse / Employee + Child(ren Family Coverage	Eligible Adult Coverage	
LIFE INSURANCE		
additional coverage for yourse supplemental life insurance, pl	If in the increments displayed ace a check mark next to the	annual salary. In addition, you have the option to purchase d below. If you would like to purchase colleague e additional amount of coverage you are requesting. A ford by January 9, 2017 for all new elections and increases.
COLLEAGUE SUPPLEMENTAL	LIFE INSURANCE	COLLEAGUE SUPPLEMENTAL AD&D INSURANCE
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\$50,000 \$80,000 \$80,000 \$100,000		\$20,000
ONG TERM DISAB	ILITY	
ou have Long Term Disability	provided at 60%. You have	the option to buy up to 66 2/3%.
XX_60% (default)	66 2/3%	
.EGAL		
ou have the following plan opti	ons:	
Hyatt Legal Program	No Co	overage
overage Level Employee Only Coverage	ge .	

Colleague printed name



Colleague ID#

2016 / 2017 "Blackout Period" Election Form

FLEXIBLE SPENDING AC	COUNTS
You have the option to contribute money MUST make an election for 2017 - price	pre-tax to offset your health care and dependent care expenses. You repeat elections will NOT carry forward.
	dollars in amount between \$130 and \$2,550 annually. If you have enrolled not eligible for the Health Care Spending Account.
XX No coverage I elect to contribute	_annually to a Health Care Spending Account
DEPENDENT CARE SPENDING ACCOUNTY OU have the option to contribute pre-tax	dollars in amount between \$130 and \$5,000 annually.
XX No coverage	annually to a Dependent Care Spending Account
Colleague Acknowle	DGEMENT
	this form will become effective as of the date of my life event or after the rize Trinity Health to make the necessary deductions from my pay for the
	11/16/2016
Colleague signature	Date

Please remember to attach all required documents, consistent to your election (dependent verification documentation for new dependents and documentation for your life event, as applicable).

2017 Rates per Pay Check

Medical		Traditional PPD	9			The state of	And Spine		Shart Ann	SACOTO DIVE	A CONTRACTOR OF THE PARTY OF TH	SUCCESSION STATES		
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Colleague Only	(S)(C, JOS)	8 4215 60 page		98 535 88 (8)	9	570.45	\$70.45 \$97.05	15.	Sugas	537.75 E	5	30 500		
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The second secon														

חשווטו	High Plan
Your per pay period cost	TENA DE PORTE CONTRACTOR CONTRA
Colleague Only	57/23 (4-17) (4-17) (4-17)
Colleague plus spouse / eligible adult	18 12 15 16 16 16 16 16 16 16 16 16 16 16 16 16
Colleague plus children	\$1957
Colleague plus family	ESSIS 0.474 (ASSES) (ASSES)

Vision	High Plan
Your per pay period cost	naturally right
Colleague Dnly	SS75
Colleague plus spouse / efigible adult	55.07
Colleague pius children	
Collegene plac family	35.11
Language Control of the Control of t	77/ara

Incertive rates on the medical plan refer to compliance with the LYWT. Wellness Initiative during two (2) separate periods. Colleauges and their spouses / eligible adults must meet requirements to keep premiums lower. More information is available at http://mybenefits.trinity-health.org. NOTE: Colleagues enrolling in medical with an effective date of 1/10/2017 or later are exempt from plan requirements and will automatically receive the "incentive" rate all year.

Coverage Type Age Eggs Coverage Type Age Eggs Basic Life All Source Basic AD&D Vinder 25 Source Basic AD&D Vinder 25 Source Colleague Scarce Source Supplemental Life Scarce Source Spouse Life Scarce Source Spouse Life Scarce Source Scorce Source Supplemental AD&D Source Scarce Source Supplemental AD&D Source Supplem	Life	ife Insurance
Alf Sold Sold Sold Sold Sold Sold Sold Sold	Worthly Premium	Rates (per \$1000 of coverage)
All S01397 Junei 35 S1539	Coverage Type	Age
M. S0030 Dhaei 25 S0030 21.29 S0034 30.24 S0031 40.40 S0031 50.54 S0031 50.54 S0031 60.54 S0037 60.54 S0037 60.54 S0037 60.54 S0031 75 S1232 Mpt 76 S1332 Mpt 76 S1322 Mpt	Basic Life	Ail S0.56
15:29 \$00307 25:29 \$00347 35:39 \$00517 40:41 \$0.0517 40:41 \$0.0517 50:54 \$0.0517 50:54 \$0.0517 60:54 \$0.0517 70:74 \$12321 70:74 \$12321 70:74 \$12321 70:74 \$12321	Basic AD&D	Al Soni
25:29 S00:31 35:39 S00:31 40:40 S00:31 40:40 S00:31 50:54 S00:32 50:54 S00:32 60:54 S00:32 60:54 S00:32 75:7 S123 75:7 S123 10:75 S123 10:7		37.
25:35 SDDB1 40:41 SDDB1 40:41 SDDB1 40:42 SDDB8 50:54 SDDB8 50:54 SDDB1 60:54 SDDB1 75:7 SDDB1		25-29 50034750038
55:36 500537 40:44 500687 55:59 50.0237 60:54 50.00887 55:59 50.0237 75:7 51.2321 75:7 51.2321 75:7 51.2321 75:7 75.7 75.7 75.7 75.7 75.7 75.7 75.7		24 \$104675
40.44 S0.0687 45.49 S0.0687 55.59 S0.257 60.44 S0.242 75- S1.253, 46 S0.0		73905
45.49 \$0.0687 50.54 \$0.377 60.54 \$0.377 60.54 \$0.372 75- \$1.232 40.50.6 \$0.008 40.50.6 \$0.008 40.50.6 \$0.008		40-44 \$0.0587 \$0.070
55-29 50.27 (81340) 50.13 55-29 50.427 (81340) 50.43 55-59 50.427 (8134) 51.35 70-74 51.35 (8135) 51.35 Millio 26 50.10	Colleague	\$0008
65-59 50.237 65-59 50.742 75-7 51.2327 Mpto.26 50.00 Aft Scool	Spouse Life	SQUE
65-59 S054(2) 65-59 S0742 75-7 S165(7) Wp to 26 S01 Aft S00		357.65
65-59 50-72/51 70-74 51222/51 75-75-75 100-75-		50 at 27.
70-74 \$12 75- \$16 Uptitize		5/2/20203
Uproze Sile		10.74 SL232/51755
M0 to 26		Py 51(57)(5)(3)
Aff	Dependent Life	Mptb26 Still
-	Colleague	
	Supplemental AD&D	





2017-18 Staff Annual Performance Review

Organization: Valet Parking Mcsa (Taylor, Chad E

Location: MCHS - Mount Carmel St. Ann's

07/01/2017 - 06/30/2018

MCHS_Armed Safety and Security Officer_M4850

Manager: Taylor, Chad E (273267) Evaluated By: Taylor, Chad E (273267)

Overall

Manager Overall Evaluation

Calculated Rating: 3.14

Rating:

Fully Met

Comment:

is a great addition to the safety and security team! He works diligently to keep MCSA a safe

environment for all patients, visitors, and staff, Job well done!

Acknowledgement

Manager

Entered by:

Taylor, Chad E (273267)

Date:

08/17/2018

Status: Comment: Acknowledge Review without Comments

Employee

Entered by:

(On Leave) (

08/17/2018 Date:

Status:

Acknowledge Review without Comments

Comment:

Goals

Improve upon communication skills with patients and visitors to become better at resolving problems as they arise.

Due Date:

08/18/2018

Status:

Completed

Completion Date:

06/18/2018

Category:

1. People Centered Care

Weight:

33.4

Manager Evaluation

Employee Evaluation

Rating:

Exceeds

Rating:

Exceeds

Comment:

works extremely well with his communication skills. He is able to deescalate situations and communicate effectively with other colleagues to assure situations are handled appropriately.

Comment:

N/A

Additional Manager Evaluation

To become an effective leader with in the security department using the skills I have learned to

improve t	he quality of w	ork.				
Due Date:	08/18/2018	Status:	Completed	Completion	Date: 06/18/2018	
Category:	6. Effective Ste	ewardship				
Weight:	33.3					
Manager Ev	valuation			Employee Ev	valuation	
Rating:	Fully Meets			Rating:	Exceeds	
Comment:	safety and se in a hospital officer as nee in the safety rounded office	ecurity police setting. He eded and co field, makin er.	se his knowledge of ies and procedures helps the ILSM ompletes other tasks g him a more well-	Comment:	N/A	
Additional M	lanager Evaluati	on				_
	ete and obtain e security and		on for hospital se	ecurity and sa	afety through International associa	tion of
Due Date:	08/18/2018	Status:	In Progress	Completion I	Date:	
Category:	3. Operational	Excellence				
Weight:	33.3					
Manager Ev	aluation			Employee Ev	valuation	
Rating:	Partially Meets			Rating:	Partially Meets	
Comment:	obtaining the guide, he sho goal for next	certificatior ould be able year.	I the process of n. With the study to complete this	Comment:	N/A	
Additional M	lanager Evaluatio	on				-
Section	n Summary					
/lanager Ev	•			Employee E	Evaluation	
Rating:	Fully Me	ets		Rating:	Fully Meets	
Core Valu	ies					
Reverence						
We honor the	e sacredness an	d dignity of	every person.			
I respect evI use prefer	rred names, intro	duce mysel	y If, my role, and what rs, make eye contact	_	se and thank you.	

Employee Evaluation

• I am aware of my facial expressions and body language.

Manager Evaluation

Rating:	Exceeded	Rating:	Exceeded
+	nent to Those Who are Poor I with and serve those who are poor, especially the	ose most vulnerab	ole.
• I escort	out to help those in need. patients/family to their location. when others are suffering or struggling and reach	out to comfort and	d assist them.
Manager	Evaluation	Employee Eva	luation
Rating:	Exceeded	Rating:	Exceeded
Justice			
We foster	right relationships to promote the common good,	including sustaina	ability of Earth.
• I build aı • I avoid ju	every moment matter. nd maintain healthy and trusting relationships. udging others because of differences or circumsta and avoid interrupting and multitasking.	nces.	
Manager I	Evaluation	Employee Eva	luation
Rating:	Exceeded	Rating:	Exceeded
I engageI supportI own even	e every day with an owner's mind and a servant's latest others in fulfilling our Mission. ery problem and seek to find a resolution. ery self-care and invest in my own resilience.		
Rating:	Exceeded	Rating:	Exceeded
I am a chI put peoI practice	thful to who we say we are. nampion for our Mission and Core Values. ple at the center of all I do by being present and a gratitude. sponsibility for my role as a team member.	ttentive.	
Manager E	Evaluation	Employee Eval	uation
Rating:	Exceeded	Rating:	Exceeded
Secti	on Summary		
Manager E	evaluation	Employee Ev	raluation
Rating:	Exceeded	Rating:	Exceeded
Comment:	Eric is a role model for the MCH Mission and Core Values. He is always fully present and attentive to the needs of patients, visitors, and colleagues.	Comment:	

Colleague demonstrates the essential functions, knowledge and skills in the job description, including other duties and competencies as assigned.

Manager Evaluation

Rating:

Fully Met

Response:

s years of experience in law enforcement make him a great officer. He knows his role as safety and security officer and is able to make critical decisions as needed to provide the best possible outcomes for all patients, visitors, and colleagues. He is currently working through the IAHSS course to improve his knowledge of the safety aspects of the job.

Additional Manager Evaluation

In consideration and review of the colleague's job description, describe and give specific examples of what essential functions of the job the colleague is meeting or exceeding. What does the colleague do well?

Manager Evaluation

Rating:

Fully Met

Response:

really shines with customer service. He is able to effectively de-escalate situations through verbal communication. This is great because the safety of all individuals increases when officers do not have to use force. He is also great with his knowledge of the law and is often relied upon to make decisions regarding police interactions.

Additional Manager Evaluation

In consideration and review of the colleague's job description, describe and give specific examples of any essential functions of the job where the colleague is partially meeting or not meeting. Identify any areas for improvement.

Manager Evaluation

Rating:

Partially Met

Response:

has struggled in the past with turning in paperwork such as DAR reports before deadlines. He continues to improve in this area.

Section Summary

Manager Evaluation

Rating:

Fully Met

Colleague Role Specific Accountabilities of the Job Description

Colleague demonstrates the essential functions, knowledge and skills in the job description, including other duties and competencies as assigned.

Manager	Eva	lua	tion
---------	-----	-----	------

Rating:

Fully Meets

Response:

is a great officer, he is respected by his peers for his decision-making skills and his knowledge of the environment in which he works. He will continue to increase his knowledge of safety which will make him more "well-rounded" in the healthcare safety and security field and ultimately prepare him for a supervisory role in the organization.

Employee Evaluation

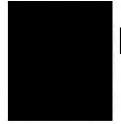
Rating:

Exceeds

Response:

Feel I have preformed at an exceptional level, followed the guidelines provided by the hospital, demonstrates abilities to adapt to any situational experience I encounter.

Additional Manager Evaluation



2018-19 Staff Annual Performance Review

MCHS_Armed Safety and Security Officer_M4850

Organization: Valet Parking Mcsa (Taylor, Chad E (273267))

Manager: Taylor, Chad E (273267) Evaluated By: Taylor, Chad E (273267) Location: MCHS - Mount Carmel St. Ann's 07/01/2018 - 06/30/2019

Overall

Manager Overall Evaluation

Calculated Rating: 3.23

Rating:

Fully Met

Acknowledgement

Manager

Entered by:

Taylor, Chad E (273267)

Date:

08/22/2019

Status:

Acknowledge Review without Comments

Comment:

Employee

Entered by:

(On Leave)

) Date:

08/22/2019

Status:

Acknowledge Review without Comments

Comment:

Goals

Become more engaged in colleague work groups or forums to assist in the daily functions of the security department.

Due Date:

06/30/2019

Status:

Completed

Completion Date:

06/14/2019

Category:

2. Engaged Colleagues

Weight:

33.3

Manager Evaluation

Rating: Comment: **Fully Meets**

has attended lunch with Unhee and

speaks up at forums and department meetings to assure a better work

environment for his co-workers as well as himself. He assures that information is passed on to a supervisor for follow-up in a

timely manner.

Employee Evaluation

Rating:

Fully Meets

Comment:

being able to communicate opening and

freely allows for a better work environment all

around.

To complete and obtain certification for hospital security and safety through International association of healthcare security and safety.

Due Date:

06/30/2019

Status:

In Progress

Completion Date:

Category:

3. Operational Excellence

Weight:

33.3

Manager Evaluation

Employee Evaluation

Rating:

Partially Meets

Rating:

Comment:

has studied the materials needed to complete the training but is currently waiting to take the test to obtain the certification.

Comment:

to help instruct in-service classes such as asp baton and OC

Due Date:

06/30/2019

Status:

In Progress

Completion Date:

Category:

6. Effective Stewardship

Weight:

Manager Evaluation

Employee Evaluation

Rating:

Fully Meets

Rating:

Comment:

has helped other officers with Defensive Tactics training and use of force scenarios to assure officers have the essential skills needed to perform the duties of the job. He is often relied on for guidance in law

enforcement related situations.

Comment:

Section Summary

Manager Evaluation

Employee Evaluation

Rating:

Fully Meets

Rating:

Does Not Meet

Core Values

Colleague demonstrates the Core Values of Trinity Health on a daily basis through his/her behavior and interaction with others, internally and externally, to achieve the goals and priorities of the organization. The Trinity Health Core Values are: Reverence, Commitment to Those Who Are Poor, Justice, Stewardship, and Integrity.

Manager Evaluation

Rating:

Exceeded

Response:

exhibits all Trinity Health Core Values through his interactions with patients, visitors, and staff. He is always friendly and polite and very easy to work with. He works with staff to assure patient and visitor needs are met in a timely manner. He also assures that less fortunate patients and visitors are provided assistance with transportation as

Employee Evaluation

Rating:

Exceeded

Response:

I strive to work in harmony with all my fellow coworkers to provide the best experience

possible for everyone involved.

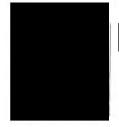
needed. He is a steward of resources and maintains his integrity in difficult situations.

Manager Eva	aluation	Employee Evaluation	
Rating: Exceeded		Rating: Exceeded	

Colleague demonstrates the essential functions, knowledge and skills in the job description, including other duties and competencies as assigned.

Manager Eva	aluation	Employee Ev	valuation
Rating:	Fully Met	Rating:	Fully Met
Response:	is a great officer! He is able to work with little supervision but assures that communication with security management is maintained when needed. He is often consulted by other officers for his extensive knowledge in law enforcement and conflict resolution. He maintains visibility while on duty and assures that safety concerns are addressed. He is well respected by other colleagues and maintains healthy relationships to assure important information is communicated to the department. He is constantly looking to improve processes and asks questions when he doesn't understand something. The has needed to be reminded to turn in necessary paperwork on occasion but excels in all other duties of the position. He has taken the initiative to learn some of the safety aspects of the job and is currently	Response:	I am always learning new and improved ways to preform my duties in the most proficient manor.

Sectio	n Summary			
Manager Ev	valuation	Employee E	valuation	
Rating:	Fully Met	Rating:	Fully Met	



Staff Annual Performance Review 2016 - 17

Organization: Valet Parking Mcsa (Taylor, Chad E

(273267)

Location: MCHS - Mount Carmel St. Ann's

07/01/2016 - 06/30/2017

MCHS_Armed Safety and Security Officer_M4850

Manager: Taylor, Chad E (273267) Evaluated By: Taylor, Chad E (273267)

Overall

Manager Overall Evaluation

Calculated Rating: 3.23

Rating:

Fully Met

Comment:

Eric keep up the good work!

Acknowledgement

Manager

Entered by:

Taylor, Chad E (273267)

Date:

09/29/2017

Status:

Acknowledge Review without Comments

Comment:

Employee

Entered by:

(On Leave) (

Date:

09/21/2017

Status:

Acknowledge Review without Comments

Comment:

Goals

expand job knowledge of ILSM procedures and inspections

Due Date:

07/31/2017

Status:

Completed

Completion Date:

07/31/2017

Category:

3. Operational Excellence

Weight:

33.3

Manager Evaluation

Rating: Comment: **Fully Meets**

has recently improved his knowledge of

ILSM procedures at MCSA. He worked with Sgt. Dexter Josey (ILSM Officer) to learn the process and also completed the proper paperwork associated with the task. He has assumed these responsibilities as needed to assure ILSM procedures are completed.

Employee Evaluation

Rating:

Fully Meets

Comment:

Working towards gain the experience necessary to preform the assessments

needed.

Additional Manager Evaluation

obtain an armed position with Mount Carmel health system

Due Date:

07/31/2017

Status:

Completed

Completion Date: 06/14/2017

Category:

3. Operational Excellence

Weight:

33.3

Manager Evaluation

Employee Evaluation

Rating: **Fully Meets**

Rating:

Comment:

Fully Meets

Comment:

became an armed security officer in June of 2017. His knowledge and skills as a police officer made him a good choice for the

position.

Additional Manager Evaluation

to help instruct in-service classes such as asp baton and OC

Due Date:

07/31/2017

Status:

In Progress

Completion Date:

Category:

6. Effective Stewardship

Weight:

33.3

Manager Evaluation

Employee Evaluation

Rating: Comment: **Partially Meets**

Rating: Comment:

Fully Meets have the educational background to assist in

has expressed his desire to assist with

officer training in the future. We will continue to provide additional training opportunities for

Eric as they become available.

this area.

Additional Manager Evaluation

Section Summary

Manager Evaluation

Employee Evaluation

Rating:

Fully Meets

Rating:

Fully Meets

Comment:

Comment:

Core Values

Reverence

We honor the sacredness and dignity of every person.

- · I connect with compassion and courtesy
- I respect every person.
- I use preferred names, introduce myself, my role, and what I am doing.
- I smile, acknowledge others, open doors, make eye contact, and say please and thank you.
- I am aware of my facial expressions and body language.

Manager Evaluation

Employee Evaluation

Rating:

Exceeded

Rating:

Exceeded

Comment:

always treats patients, visitors, and staff

Comment:

communication and behaviors are consistent

with respect. He is always professional and

with the core value of Reverence

approachable at MCSA.

Additional Manager Evaluation

Commitment to Those Who are Poor

We stand with and serve those who are poor, especially those most vulnerable.

- · I reach out to help those in need.
- · I escort patients/family to their location.
- · I notice when others are suffering or struggling and reach out to comfort and assist them.

Manager Evaluation

Rating: Exceeded

Comment: is an advocate for MCSA. He will engage individuals who need assistance and assure that they find the right person who can help.

Additional Manager Evaluation

Employee Evaluation

Rating: Exceeded

Comment: I assist those who are in need and offer support when needed.

Justice

We foster right relationships to promote the common good, including sustainability of Earth.

- · I make every moment matter.
- · I build and maintain healthy and trusting relationships.
- I avoid judging others because of differences or circumstances.
- I listen and avoid interrupting and multitasking.

Manager Evaluation Rating: Exceeded Comment: continues to build relationships with other colleagues at MCSA. He is friendly and approachable and engages in conversation. He approaches incidents with a neutral perspective which allows for more positive experiences at MCSA. Additional Manager Evaluation Employee Evaluation Rating: Exceeded Comment:

Stewardship

We honor our heritage and hold ourselves accountable for the human, financial and natural resources entrusted to our care.

- I engage every day with an owner's mind and a servant's heart.
- I support others in fulfilling our Mission.
- I own every problem and seek to find a resolution.
- I practice self-care and invest in my own resilience.

Manager Evaluation		Employee Evaluation					
Rating:	Exceeded	Rating:	Exceeded				
Comment:	embraces Mount Carmel's mission every day at MCSA. He is always looking for best practices and ways to help the department by improving forms and documents to reduce time needed to complete.						
Additional Ma	anager Evaluation						

Integrity

We are faithful to who we say we are.

• I am a champion for our Mission and Core Values.

Manager Ev	valuation	Employee Evalu	ation	
Rating:	Exceeded	Rating:	Exceeded	
Comment:	is always fully present and attentive while on duty. He is always visible and rounds frequently through the units.	Comment:		
Additional N	flanager Evaluation			
Section	n Summary			
lanager Ev	valuation	Employee Eva	luation	
ating:	Exceeded	Rating:	Exceeded	

• I put people at the center of all I do by being present and attentive.

• I practice gratitude.

Colleague demonstrates the essential functions, knowledge and skills in the job description, including other duties and competencies as assigned.

Manager Eva	aluation	Employee Ev	valuation
Rating:	Fully Met		
Response:	has embraced his role as Safety and Security Officer here at MCSA. His prior knowledge and skills helped him adapt to the environment and learn quickly. I would like to see Eric continue to improve his knowledge of the safety aspect of the job as it relates to Environment of Care and Joint Commission. This will make him more well-rounded as a hospital safety and security officer.	Response:	My job descriptions consist of protecting, preventing and assisting in the safety of employees, patents, and visitors. Officers providing preventative security to be proactive in locating possible problems or issues that may arise, then find a solution to correct it.
Additional Ma	anager Evaluation		`
Section	Summary		
	•		
lanager Eva	aluation		
ating:	Fully Met		

Mount Carmel Health System Competency-Based Orientation and Introductory Period Evaluation <u>Safety & Security</u>

Associate Name:	ID Number:	Job Title:	X New Hire
		Safety and Security Officer	Transfer Additional job code

	-		_		-		-		1	
Core Competencies	M			Compo			Ildatio thod)	n		
Based upon job description, performance standards, and regulatory/accrediting standards.	Return	Observation of daily work	Post-test	Mock Event/ Simulation	QI Monitors/ Audits	Peer Review	Case Study	Discussion Group	Date	Competency Assessed by: (signature and credentials)
Effective in patrol techniques, communications use of cameras-monitoring/recording, escorts, door openings, assist calls. Knowledge of location of Security sensitive areas.		X							12/5/16	Charleyh
Enforces policies & procedures		X							12/5/10	"list Tanker
Completes accurate incident report documentation/investigation and follow-ups as appropriate	X	X							12/5/16	Claro Tunk
Completes accurate activity logs	X	X					1		11/14/18	Chart Tark
Ability to apply clinical restraints and assistance	Xi	X							Inlie	hand faith
Ability to work independently	X	X					V	1		West Tests
Completes timely fire drills and critiques	X	X	X		-			Ý		Mud Taril
Inderstands ILSM protocols	N									The Talls
Ability to turn off Med Gas per policy	X					X		0	1101117	"Inad Taylor
Vorkplace Violence policy knowledge	1	X								They Torse
bility to process visitors after-hours or as required	1.0	X							-	Theo Tow
ability to lock and unlock facility (includes Lockdown lan)		X							414/16	Wed Tayl
Management of Aggressive Behavior and descalation techniques	-	X				X		1	1/11/16	hud Cayle
Inderstands Safe Medical Device Act responsibilities						X		1	2/5/16	well Tank
felicopter operations- Safety duties	_	X						1	215/16	XLUE, TEXL
iscernment of sentinel events-notification protocols		V						1	215/10	was law
nowledge of Emergency Codes and security esponse (i.e. Code Red, Code Adam, Code Orange, tc).		X							2/1/14/	West Carl
ollows the department uniform and dress code		X			11			1	11/4/14	her Tank
isseminates pertinent info (pass on book, memo, eports, BOLO)		X							2/5/16	was lank
nderstands Forensic responsibilities		X				X		1	15/16/	week Taislan
nderstands role and actions- VIP/Media event		父				X	300	12	15/16/	frest tasky
nforces Tobacco -Free policy		X				1	= 0 L	11	114/14	relet There
fficer can articulate use of force and demonstrate ake downs" and the use of defensive weapons: ASP Pepper Spray and law enforcement restraints: (i.e. andcuffs)				X		X			111/16/	West Pants
fficer demonstrates the ability to co-operate with		,			1			+	-	1
her agencies, departments, and staff as appropriate		X						12	1/5/16/	per Tana
fficer has a basic understanding of the National atient Safety Goals.		X						12	15/16	hustante
fficer demonstrates proper telephone etiquette.		X						1	114/16/6	hudrash

Officer demonstrates the prepar realis	1	7	. 1	r		T	1 1		,	Th.	10	_
Officer demonstrates the proper radio communications-understands RF interference		12	X						12/5/1	11ch	witas	di
Officer is knowledgeable of all security alarms and		+			_	-			1911	104	1	2
responds appropriately (panic, infant, etc).		X					1		12/5/1	6 (lu	40 14	-4
Officer conducts proper patient valuables receiving and returning	X	×							11/14/	Blu	nd to	w
Morgue procedures (MCSA only)		17				(11/2-1	Illoll	6 IN	U) 1/4	1
Traffic ingress/egress control- normal and emergency (i.e. emergency room areas)		X							12/5/1	6 Ch	w the	7
The officer has demonstrated the proper use of Fire Extinguisher and knows where and what K type extinguishers are used for.								X	12/19/	Che	Mar	1
Officer knows the Emergency Procedures for handling Hazardous Materials (chemical, asbestos, etc) and security response.								X	11/10/10	Cha	Sta	V
Officer understands their role in the incident command structure (HICS)			1	T				X	12/5/16	Che	d fan	1
Understanding of response to elevator malfunction	-3-0	-	+		-			Y.	Malu	11100	100	5
Proper PPE use- Infectious, Chemical, Noise, PAPR	-				+			V	Holio	1.	101	12
etc (i.e. universal precautions- chemical protection)								^	illulis	1 lua	8.Tan	A
MRI Safety								X	12/5/14	Che	11/2	w
Role in Bomb Threat- search techniques/staging								X	1/7/17	Class	d. The	Z
Knowledge of Burn Permit process			1)[.	= X /4 =		<u>- X</u>		X	12/5/16	The	1.400	1
Understands Property Search policy and role	X						X = 29 L	X	11/14/16	The	1 - Min	4
Suicide precautions/assessment	X	9 == 1		4					1215/14	Chele	1 16	4
Proper lifting/body mechanics Pediatric; (I year – 12 years)	X		1		-	1			12/5/16	The	1 TAL	14
Provide parents if possible: Provide privacy as appropriate. Allow child to exercise some control. Speaks at eye level maintaining eye contact Uses direct approach with child, giving one direction at a time. Allows choice when possible.	X								12 5 11	Cly	while	~
Adolescent: (13-17 years)			+		-	-	-	4				-
Needs to recognize that this age group: Needs to be called by name or preferred name. Provide privacy/modesty Allows choice when possible, and encourages verbalization of concerns and fears.	<								12/5/16	Ch	ugh	1
 Tells patients behaviors that are permitted. Watches for body language and cue for feelings. Speaks directly to patient in simple medical terms. Concerns and fears. 	,											
Geriatric: (65+)	-	_		1		-						1
 Needs to establish that the patient is wearing glasses, hearing aids, or may have memory loss and recognizes the tools that are needed for effective communications during interviews and investigations. 	X								2/5/1b	Chi	the second	1
Does not shout at patients, speak slowly and distinctly. Does not rush patient, gives them time to process information.										Tol		

	Respects patient right to make informed decisions. Assists in relinquishing valuables Watches body language as cue for feelings. Interviews patient in a calm, reassuring manner concerning lost articles. Assists in controlling confused patient.	X	12/5/16	Paylor
Adult ((18-64 years) Calls patient by preferred name. Allows choices when possible Provides for privacy/modesty		latalu	and.
:	Repeats instructions several times. Discuss one item at a time. Assist in transferring patient under direction of a Registered Nurse. Provide privacy/modesty	X	12/5/16	Church

Mount Carmel Health System Competency-Based Orientation and Introductory Period Evaluation (Safety and Security Department)

Associate Name:	ID Number:	Job Title:	Additional job code
		Safety and Security Officer	Date entered into role:
Attach above Competency Bas copies to Human Resources	ed Orientation to Intro	oductory Evaluation be	low and forward original
X has successfull	y completed the Introduc	ctory Period.	
☐ Developmental Needs identified	related to competency:		
☐ Additional needs identified during	g Introductory Period:		
Goals (includes identified competen	cy and developmental nee	ds):	
To learn more about special		training.	T N
 To help instruct in-service c To be a positive role model 			
		Ω	10.
Associate Signature	Date 2/17/17 N	Manager Signature	Wayle Date 2/17/2017



Position Applied For

Position: Safety and Security Officer Facility: Mount Carmel -New Albany Department: Security MCNA

Schedule: Full Time Reg Num: 15356

Application for Employment

We consider applicants for all positions without regard to race, color, religion, creed, national origin, age, disability, sexual orientation, marital status, or any other legally protected status.

Instructions to Applicant

- You must fully and accurately complete the Application for Employment. Incomplete applications will not be considered. Mount Carmel Health System may use the information given in the application to investigate the applicant's previous employment and background.
- 2. If you are hired, proof of citizenship or immigration status will be required to verify your lawful right to work in the United States.

* Required Information

October 6, 2016

SOURCE TRACKING

How did you find out about this position?* Email

Specific Source:* Email Blast

PERSONAL INFORMATION

Prefix:

First Name:*

MI:

Last Name:*

Suffix:

Address:*

City:* Lancaster

State:* OH

Province/Region:

Zip:* 43130

Country:* United States

Home/Other Phone:*

Work Phone:

Cell Phone:

Best way to Home Phone

contact:*

Email Address:*

WORK HISTORY

List all work experience below beginning with your current (or most recent) position.

Are you currently employed?* Yes

Name of Company:* Hocking County Sheriff's Office

Street: 25 East 2nd street

City:* Logan

State:* OH

Job Duties and Responsibilities:*

Supervised other deputies, dispatchers, transport officers, investigate crimes, and wrote reports, issued citations, made arrest when appropriate, processed crime scenes.

processed crime scenes

Reason For Leaving:*

Zip:* 43138

Province/Region:

Country: United States

Employer's Phone:* 740-385-2131

Job Title:* Sergeant Road Patrol

Employed From:* 05 1992

Employed To:* 08 2013

19.00 Jerod Alford Full Time Moved out of area

May we contact this employer for a reference?*

While in this position, if you were employed under a different legal name, please list that here:

Name of Company: Hocking College

Street:

City:

State:

Zip:

Province/Region:

Country: Employer's Phone: 740-753-6451

I-E TM- A P A C A

Job Title: Adjunct instructor

Employed From:
Employed To:
Ending Salary:

Supervisor's Name: Tim Voris

Employment Status:

Job Duties and Responsibilities:

Instructed classes in Ohio Peace Office Academy, taught introduction to firearms in Police Science program.

Reason For Leaving: Moved out of area

May we contact this employer for a reference?

While in this position, if you were employed under a different legal name, please list that here:

Name of Company: Columbus Dispatch Corperate Security

Street: 34 south Third STreet

City: Columbus

State: OH

Zip: 43215

Province/Region:

Country: United States Employer's Phone: 614-469-5143

Job Title: Supervisor of Security

Employed From: 10 2013 Employed To: 11 2015 Ending Salary: 52,000

Supervisor's Name: Donald Burrier Employment Status: Full Time Job Duties and Responsibilities:

Supervisor on third shift, check alarms, monitor closed circut video, respond to incidents on property or off property related to company activity, check commercial and residential properties.

Reason For Leaving: Laid Off

May we contact this employer for a reference?

While in this position, if you were employed under a different legal name, please list that here:

Name of Company: The Dispatch Printing Company

Street: 34 South Third Street

City: Columbus

State: OH

Zip: 43215

Province/Region:

Country: United States

Employer's Phone: 614-461-5012

Job Title: Security Officer

Employed From: 09 2016

Employed To:

Ending Salary: 14.00

Supervisor's Name: Ed CAsner

Employment Status: Part Time

Job Duties and Responsibilities:

Check of interior and exterior building, offices and personal, check of properties owned or occupied by Dispatch Printing Company, monitor fire, and burglary alarms, responding to accidents involving employee's, writing reports, keeping detailed log.

Reason For Leaving: Still Employeed

May we contact this employer for a reference? Yes

While in this position, if you were employed under a different legal name, please list that here:

EDUCATION

High School/GED

Name of school: * Logan Elm High School Did you graduate? * Yes

City:* Circleville

Diploma Type:* HIGH SCHOOL

State:* OH Province/Region:

Zip:* 28840

Country:* United States

List scholastic honors, specialized training and/or apprenticeship details that may be helpful in considering your application. When adding, please provide as much detail as possible about the dates of these activities, locations and skills or experience obtained.

CPR/FIRST AID
Ohio Peace Officer Certificate
OPOTA Instructor Certificate

LICENSES/CERTIFICATIONS

Professional Licensure

Please Provide Professional Licenses/Registrations held. Include License Number and Expiration Date.

Type State Number Date Issued Expiration Date

If you are applying for a job category that requires licensure, please answer the following question: Is your license currently subject to any investigation by a licensing agency?

EMPLOYMENT PREFERENCES

Please indicate your employment preferences below:

Minimum Salary Desired:* 14.00

Date Available for Work:* 10/05/2016

Are you willing to relocate? Yes

Which shifts are you willing to work?

Which schedules are you willing to work?

Job Application Page 4 of 6

Please answer all of the following questions.

* No Do you have any relatives that currently work for Mount Carmel Health System or any of its affiliates?

If yes, please list their name(s):

* No Have you ever been employed by Mount Carmel Health System or any other facility sponsored by

Mount Carmel Health System?

If yes, enter the name and address of member/facility and dates of employment:

Name:

Address:

Dates of employment:

WORK AUTHORIZATION/ELIGIBILITY

Please answer all of the following questions.

* Yes	Are you 18 years	of age or older?

* Yes Are you legally able to remain and work in the United States without Sponsorship?

 * No Other than a minor traffic violation, have you ever pled guilty to or been convicted of a crime?

Consideration will be given to the nature, timing and severity of the crime.

If yes, give the Offense, the dates plead guilty or convicted, and the Name and Location of the court that convicted you.

* No Have you ever been sanctioned by the Office of Inspector General of the Department of Health and Human Services (HHS/OIG) or the Government Services Administration (GSA) or excluded or

Human Services (HHS/OIG) or the Government Services Administration (GSA) or excluded or suspended from participation in any federal or state health care program?

Have you ever been found to have engaged in substantiated abuse or neglect of children or adults under the laws of any state of the United States?

If yes, please list the States, dates, and explain the findings.

REFERENCES

* No

Please give three professional references (DO NOT list relatives or personal references). All fields required.

Name*	Name of Company*	Phone Number*	Email Address*	Relationship*	Years Known*
Jerod Alford	Hocking County Sheriff Office	740-385-2131	alford9@hockingsheriff.org	Professional	16
Derek Boch	Ohio Casino Commission	740-283-8155	Hcso37S3@gmail.com	Professional	16
Steve Barron	Hocking College	740-603-1102	csrcka2177@roadrunner.com	Professional	25

RESUME

To copy and paste your resume:

- 1. Highlight the text on the resume you want to copy.
- 2. Press 'Ctrl C' to copy (Hold down the Ctrl key and press C).
- 3. Place the cursor in the RESUME box below.
- 4. Press 'Ctrl V' to paste the information.

Cover Letter

Resume

Logan, Ohio 43138, Primary Phone

email: HYPERLINK

"mailto: Summary

I was a Police Officer with 21 years in law enforcement, including assisting citizens, investigating accidents and conducting routine patrols. Exceptional report writing ability. I am a police officer versed in dealing with a wide range of difficult situations with a level head and calm disposition.

Highlights

- * Certified Police Officer OPOTA
- * Able to resolve conflicts
- * Familiar with Search and Seizure laws
- * Firearms instructor
- * Instructor in State of Ohio Police Academies
- * CPR/First Aid certified
- * Calm under pressure

Page 5 of 6

- * Advanced lethal weapons training
- * Crime scene processing
- * Exceptional problem solver
- * Sex crimes training
- * Radar speed measurement
- * Patrol procedures
- * Fingerprinting

Job Application

- * Arrest techniques
- * Able to defuse possible violent situation verbally

Accomplishments

Trained over 10 new officers as Field Training Officer (FTO). Obtained several certifications in the field of Law Enforcement to further my carrier. Ability to handle confrontational situations in a quick and timely manner.

Work Experience

The Columbus Dispatch Printing Company

September 2016 to current

Sucurity Officer, Foot and Road patrol of company properties and residences, respond to burglary and fire, medical alarms, escort employees after hours to vehicles if requested, write reports on incidents.

*Columbus Dispatch Corporate Security

From October 2013 thru November 2015

Supervised third shift security employees, monitored CCTV systems, fire and burglary alarm systems, preformed checks of buildings and all safety equipment, wrote reports, keep detailed logs,

* Hocking County Sheriff's Office, Sergeant Road Patrol

From: May 1992 to August 10, 2013

Supervised other deputies, dispatchers, transport officers, investigate crimes, and wrote reports, issued citations, made arrest when appropriate, processed crime scenes.

* Hocking College, Adjunct instructor

From: May 2010 to present

Instructed classes in Ohio Peace Office Academy, taught introduction to firearms in Police Science program.

Education

* Logan Elm High School, Circleville, Ohio 43113

Graduated 1990 with Diploma

* Hocking College, Nelsonville, Ohio 45764 Attended: September 1990 to May 1992

Course of Study: Natural Resources emphasizes on Law Enforcement

Degree: Never Obtained

Central Ohio Technical College Attended: January 2016 to current Course of Study; Health Care Services Degree; in process

References available upon request.

READ AND SIGN

Read the following carefully before signing.

- (X) * I CERTIFY that the information contained in this application is correct to the best of my knowledge. I UNDERSTAND I am applying for employment with Mount Carmel Health System. I understand that any false statements made as part of the application will be sufficient cause for dismissal. I also grant permission for the authorities of this institution to investigate my references and release said institution, as well as my former employers, from any and all liability resulting from such investigation. I further understand that the application does not constitute an employment contract and termination at will, by either me or Mount Carmel Health System, could occur during the employment relationship.
- (X) * I CONSENT to any and all medical and physical examinations including Substance and Alcohol tests as a condition of employment. I UNDERSTAND that as a condition of employment and continuing employment, if hired, I will, at least annually, obtain influenza vaccinations and/or immunizations if required by my Regional Health Ministry, unless I qualify for an exemption permitted under organizational policy or unless mandatory vaccinations and/or immunizations are prohibited under applicable State law
- (X) * I GRANT PERMISSION to Mount Carmel Health System to investigate any and all healthcare fraud and abuse charges and convictions. I agree to release the organization from any and all liability resulting from such investigation. I understand that omission or misrepresentation of convictions for healthcare fraud and abuse, on my behalf, will be sufficient cause for cancellation of consideration for employment or dismissal from the organization if I have been employed.

Job Application Page 6 of 6

(X) * I UNDERSTAND that unless prohibited by applicable state or federal law, Mount Carmel Health System will conduct a preemployment background check including criminal history, education verification, reference checks, license verification and driving records (if required for the position).

- (X) * I UNDERSTAND and AGREE that this application for employment and any of the investigations conducted regarding my application may be shared with other members of Mount Carmel Health System and/or affiliates for other employment opportunities.
- (X) * I AGREE to comply with Mount Carmel Health System rules, regulations and policies and ACKNOWLEDGE that these rules, regulations and policies may be changed, interpreted, withdrawn, or supplemented anytime and without prior notice to me. I understand that any violation may result in disciplinary action including termination of my employment.
- (X) * I AGREE to furnish proof of identity and employment eligibility to work in the U.S within 72 hours of commencing employment.
- (X) * I UNDERSTAND that if I am employed I will be subject to any applicable introductory period established by the Regional Health Ministry at which I am hired.

Mount Carmel Health System is a member of CHE Trinity Inc. and an Equal Opportunity Employer (EEO).

My typed name below shall have the same force and effect as my written signature.

Candidate's/Applicant's Signature:

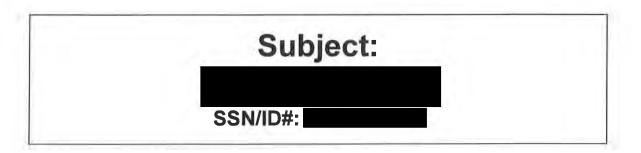
Date: October 6, 2016

Service	Description	Status				
Subject Data						
Sex Offenders	Subject Name: - National	0				
Sex Offenders	Subject Name: State: Ohio	0				
County Criminal	Felony, Misdemeanor and Other Offenses - Fairfield, Ohio	0				
County Criminal	Felony, Misdemeanor and Other Offenses - Athens, Ohio	0				
County Criminal	Felony, Misdemeanor and Other Offenses - Hocking, Ohio					
County Criminal	Felony, Misdemeanor and Other Offenses - Licking, Ohio	0				
County Criminal	Felony, Misdemeanor and Other Offenses - Pickaway, Ohio					
Federal Criminal	Felony, Misdemeanor and Other Offenses - Athens, OH; Fairfield, OH; Hocking, OH; Licking, OH; Pickaway, OH	0				
Driving History	Ohio	X				
Prior Employment	Hocking County Sheriff's Office	0				
Prior Employment	Hocking College	0				
Prior Employment	Columbus Dispatch Corperate Security	0				
Prior Employment	The Dispatch Printing Company					
Education	Logan Elm High School	0				
National Criminal Database	Subject Name:	0				
OIG & GSA Excluded Parties	OIG & GSA Excluded Parties	0				
SanctionsBase	Certiphi SanctionsBase	0				

 \blacksquare = Pass \blacksquare = Review \triangle = Pending \triangle = Pending Possible

NOTICE: Please be advised that Certiphi Screening's "Pass/Review" ratings are exclusively based on objective standards of interpreting background information legally obtained under The Fair Credit Reporting Act (15 U.S.C. section 1681). Such "Pass/Review" assessments should not be inferred nor understood as legally binding indications, recommendations or consumer rating assessments by Certiphi Screening. Any and all interpretive procedures utilized in characterizing what constitutes all "Pass/Review" ratings are established individually by each client of Certiphi Screening and are merely included in said report for that client's specific requirements. Certiphi Screening does not make any employment or contracting decisions for its clients based on background information in accordance with section 1681m of the FCRA.

Due Diligence Investigation Service **Entry/Support Positions - Standard Level**



Mount Carmel Health System - Human Client:

Resources

Client Code: 200-200

Requester: Nihal Abdalla / 72504.655500 Report #: 6732550

Delivery Date: 10/26/2016 Request Date: 10/21/2016

Personal & Confidential: This report is to only be used in strict adherence to the terms and conditions set forth in our Agreement. © Certiphi Screening, Inc., 2016. All rights reserved. Certiphi Screening, Inc. is a subsidiary company of Vertical Screen, Inc. Direct any questions to Certiphi Screening, Inc., P.O. Box 541, Southampton, PA 18966 USA. Phone: (800) 803-7860; Fax: (888) 260-1380.

Subject Data

Pass

Name:

Date of Birth:

Social Security /ID#:

01/29/1971

SSN/ID# Validation

State Issued:

OH

Date Issued:

01/01/1982-12/31/1983

DOB Scan:

Clear

Death Index: Valid SSN/ID#: Clear Yes

Current Address:

Lancaster, OH 43130 **Fairfield County**

United States

Other Addresses:

Education Address

Circleville, OH 43113

Pickaway County

United States

JOHNSTOWN, OH 43031

Licking County United States

Johnstown, OH 43031

Licking County United States

Logan, OH 43138 **Hocking County United States**

Nelsonville, OH 45764

Athens County

United States

Comments:

None

Sex Offender Registry

Pass

Source Searched: National Sex Offender Registry

Date of Search: 10/21/2016

Subject Covered:

Date of Birth: 01/29/1971

Search Results: No Records Found

Comments: None

Sex Offender Registry

Pass

Source Searched: Ohio's Sex Offender Registration and Notification System (SORN)

Date of Search:

10/21/2016

Subject Covered:

01/29/1971 Date of Birth:

No Records Found Search Results:

Comments: None

County Criminal

Pass

Source Searched: Fairfield County Common Pleas and County Seat Municipal Court

Records Covered: Felony, Misdemeanor and Other Offenses

Date of Search: 10/22/2016

Subject Covered:

Search Results: No records found

Comments: None **County Criminal**

Pass

Athens County Common Pleas Court and County Seat Municipal Source Searched:

Court

Records Covered: Felony, Misdemeanor and Other Offenses

10/24/2016 Date of Search:

Subject Covered:

Search Results: No records found

Comments: None

County Criminal

Pass

Hocking County Common Pleas and County Seat Municipal Court Source Searched:

Felony, Misdemeanor and Other Offenses **Records Covered:**

10/25/2016 Date of Search:

Subject Covered:

No records found Search Results:

Comments: None

County Criminal

Pass

Licking County Common Pleas Court and County Seat Municipal Source Searched:

Court

Records Covered: Felony, Misdemeanor and Other Offenses

Date of Search: 10/22/2016

Subject Covered:

Search Results: No records found

Comments: None

County Criminal

Pass

Source Searched: Pickaway County Common Pleas and County Seat Municipal

Court

Records Covered: Felony, Misdemeanor and Other Offenses

10/25/2016 Date of Search:

Subject Covered:

Search Results: No records found

Comments: None

Federal Criminal

Pass

Source Searched: USDC - Southern District of OH

Records Covered: Felony, Misdemeanor and Other Offenses

Date of Search: 10/24/2016

Subject Covered:

Search Results: No records found

Comments: None

Driving History

Review

Ohio Bureau of Motor Vehicles Source Searched:

Date of Search: 10/24/2016

License Number:

PERSONAL License Type: License Class: OPERATOR

License Status: Valid

01/31/2015 Issue Date: **Expiration Date:** 01/29/2019 **MOTORCYCLE Endorsements:**

Restrictions: **NONE**

OH Total Current Points: This state did not return a current, active point total

Activity History: See Below

OH Points Date Type Description ** ACCIDENT ** 0 08/29/2014 Accident 2 09/12/2014 Conviction ASSURED CLEAR DISTANCE

Comments: None

Supporting Documents: MVR Report **Prior Employment**

Pass

Employer: Hocking County Sheriff's Office

Location: Logan, OH

Position/Title: Sergeant Road Patrol Title Reported by Subject: Sergeant Road Patrol

Employment/Contract Dates: 05/19/1992 to 08/00/2013 **Dates Reported by Subject:** 05/00/1992 to 08/00/2013 Reason For Leaving: The subject resigned.

Eligible for Rehire/Contract: not available

Source: DavidValkinberg, Chief Deputy Sheriff

Date of Search: 10/26/2016

Comments: No further information released per company policy.

Prior Employment

Pass

Employer: Hocking College

Note: This employer was not contacted, as dates of

employment were not provided.

Prior Employment

Pass

Employer: Columbus Dispatch Corperate Security

Location: Columbus, OH

Position/Title: Security Supervisor Title Reported by Subject: Supervisor Of Security

Employment/Contract Dates: 10/14/2013 to 11/15/2015 **Dates Reported by Subject:** 10/00/2013 to 11/00/2015 Reason For Leaving: The subject was laid off.

Eligible for Rehire/Contract: Yes.

Source: BarbieWitt, Human Resources Generalist

Date of Search: 10/25/2016

Comments: No further information released per company policy.

Prior Employment

Pass

Employer: The Dispatch Printing Company

Location: not available

Position/Title: Contingent Security Officer

Title Reported by Subject: Security Officer

Employment/Contract Dates: 09/08/2016 to present **Dates Reported by Subject:** 09/00/2016 to present

Reason For Leaving: not available not available **Eligible for Rehire/Contract:**

Source: MarciaBlanchard, Human Resources Specialist

Date of Search: 10/24/2016

Comments: No further information released per company policy.

Education History

Pass

School: Logan Elm High School

Location: Circleville, OH

Years Attended: 00/00/1986 to 06/03/1990 Years Reported By Subject: 00/00/0000 - 00/00/0000 Degree: High School Diploma

Degree Reported by Subject: High School

DegreeScan: Clear

Credit Hours Obtained: not available Maior: not available Major Reported by Subject: None reported

Source: StephanieS., Guidance Secretary

Comments: None

National Criminal Database

Pass

Source Searched: National Criminal Database

Date of Search: 10/23/2016 Subject Covered: Eric J. Matheny Search Results: No records found

Comments: None

OIG & GSA Excluded Parties

Pass

Source Searched: OIG & GSA Excluded Parties

Date of Search: 10/24/2016

Subject Covered: Search Results: No records found

Comments: None

Note: This search covers the HHS Office of Inspector General's (OIG) List of Excluded Individuals/Entities (LEIE), and the General Service Administration (GSA) - Excluded Parties List (EPLS) and System for Award Management (SAM). These lists include individuals and entities excluded from federally-funded health care programs, and parties debarred, suspended, proposed for debarment, or declared ineligible by agencies or by the General Accounting Office.

Certiphi SanctionsBase ™

Pass

Source Searched: Certiphi SanctionsBase ™

Date of Search: 10/21/2016

Subject Covered:

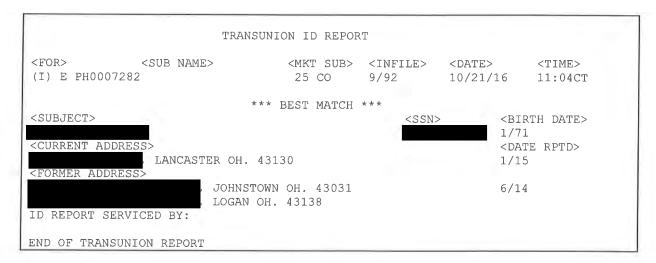
Search Results: No records found

Comments: None

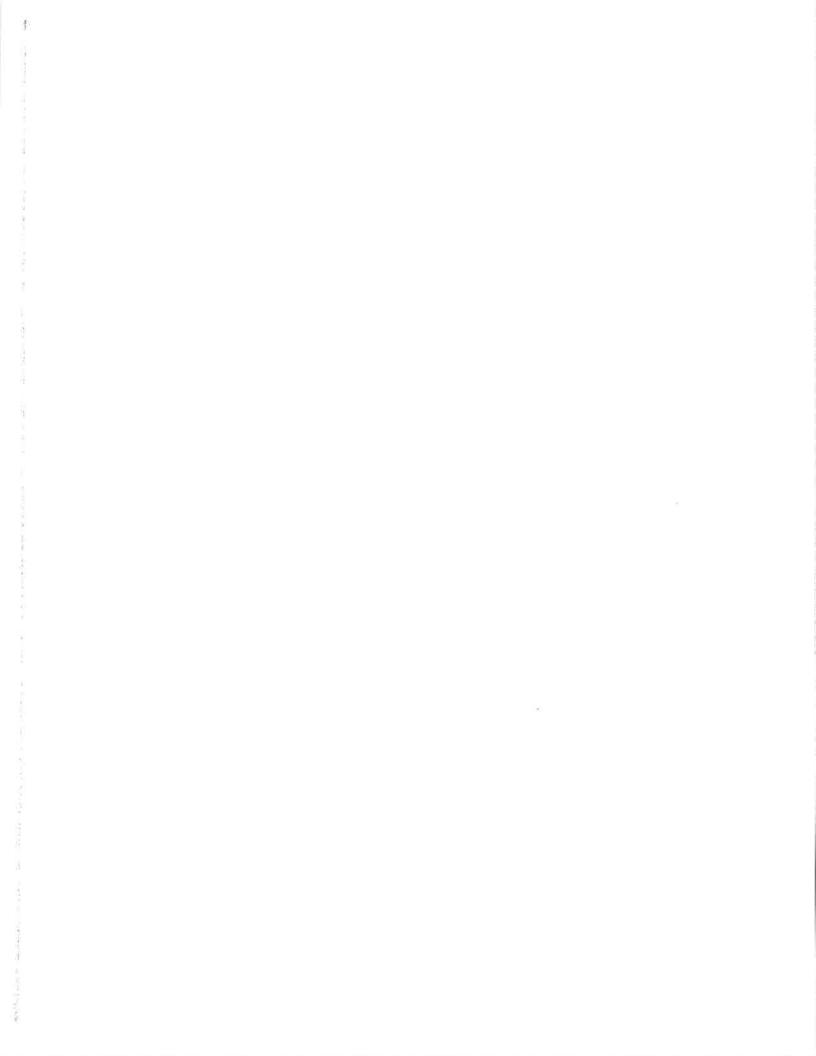
Note: The Certiphi SanctionsBase is a proprietary database of sanctions, disciplinary and administrative actions taken by various federal and state healthcare regulatory authorities. The database currently contains information from the FDA, NIH, GSA, OFAC as well as hundreds of other federal and state-level licensing and regulatory bodies. Please advise if you would like more detailed information on the exact contents of Certiphi's SanctionsBase.

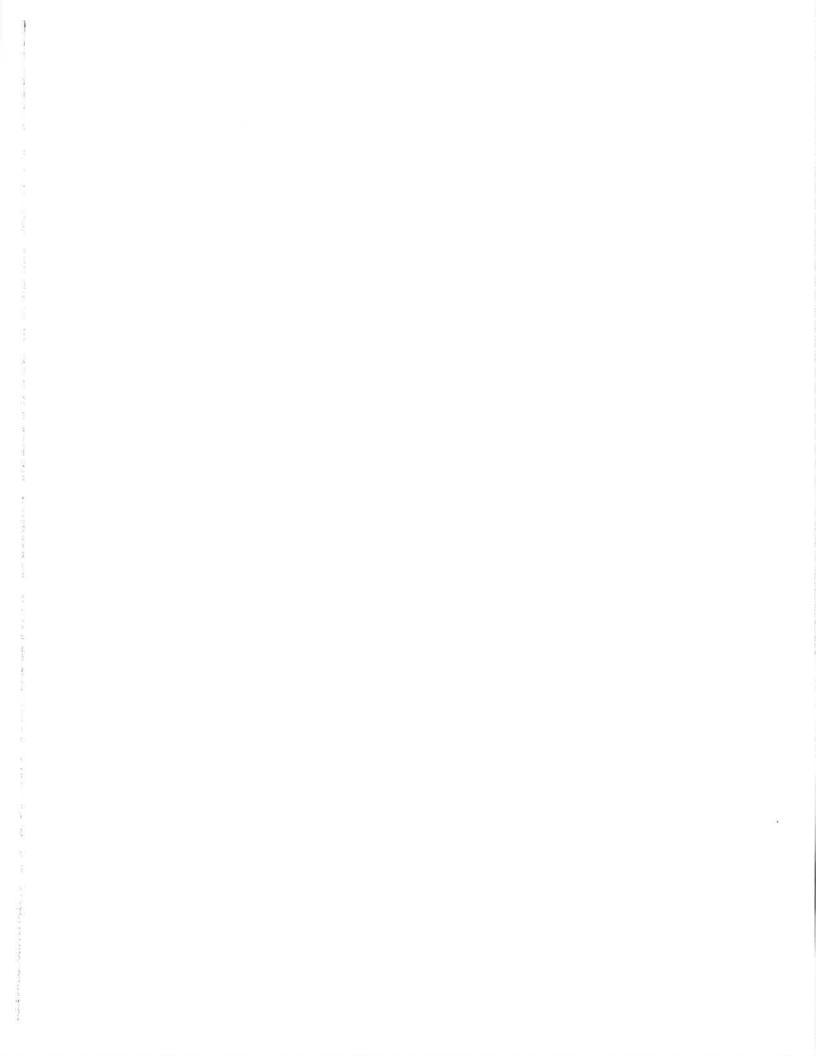
End of Report

Copy of Credit Report Attached



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3		
	al.	







FEEDBACK REPORT



CANDIDATE





Safety and Security Officer



SURVEY

Security Officer



CANDIDATE IP ADDRESS

24.145.224.12



CANDIDATE ASSIGNED TO

Nihal Abdalla



DATE

Wednesday, October 26, 2016



REPORT HISTORY

Report Generated: October 26, 2016 - 02:31PM



Note: The information provided in this report is based solely on Reference feedback submitted through SkillSurvey's Pre-Hire 360 solution. To preserve confidentiality of reference responses, this report should not be shared with the Candidate.

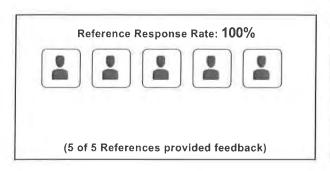


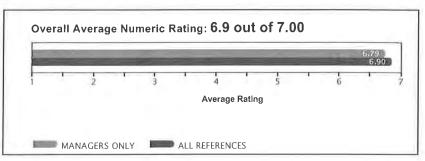
About SkillSurvey: SkillSurvey provides solutions that address critical points in the Candidate lifecycle to help talent management professionals contribute to their organization's business results by allowing them to obtain and apply more reliable, valid and compliant data to inform their hiring processes. The company's flagship solution, Pre-Hire 360, is an award-winning, patented technology that utilizes a unique combination of behavioral science and talent analytics, providing the customer with the ability to make comparisons to relevant norm groups. SkillSurvey's Pre-Hire 360 solution is scientifically proven to provide access to data that can be used to drive better hiring decisions based upon feedback provided by References on a Candidate's past job performance. SkillSurvey's cloud-based software products are being used by 1,400 companies, institutions and organizations. Visit SkillSurvey at www.skillsurvey.com.



PREDICTIVE ANALYTICS

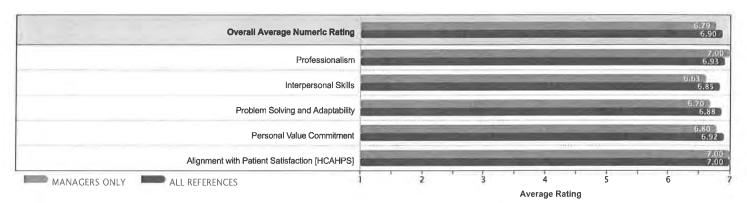
Numerous criterion-related validity studies conducted by the SkillSurvey analytics team who followed tens of thousands of new hires for an average of 21 months reveal that two factors - Reference response rate and overall average numeric rating - are statistically predictive of turnover for cause within a year of hire. These two factors are shown below.





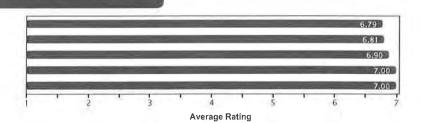
COMPETENCY CLUSTER SUMMARY

The Candidate's References rated him/her on job-specific behaviors which are grouped into a Competency Cluster. Below is a summary of the average ratings for each Competency Cluster. The job-specific behaviors that make up each Competency Cluster can be found in a later section of this report. If at least two of the Candidate's managers provided feedback, a "Managers Only" bar (in orange) is displayed.



AVERAGE RATING BY REFERENCE

The feedback from each Reference is presented in order by average numeric rating (shown at the end of the bar).





REFERENCE COMMENTS

Each Reference had the option of entering open-ended text comments on the Candidate's work-related areas for improvement and strengths. A horizontal line separates comments provided by different References. **Note:** comments are verbatim as provided by References.

WORK-RELATED STRENGTHS:

Interest in the welfare and safety of others, dedication to the job and loyalty

Dependable. Trust worthy, Loyal,

Eric is a strong leader, he is very brave, and keeps his emotions in check under extreme stress. I've seen this first hand, and would follow him anywhere.

Always cheerful and ready to work, strong communication skills, strong knowledge on how to handle any security situation as it may arise

Welling to help others Knowledge in the field Sound decision maker

WORK-RELATED AREAS FOR IMPROVEMENT:

Continued training and education, maintain physical and mental health, take time off for family

He is a good worker. I don't think there is anything that he needs to improve on.

Eric stays current in his field, my only suggestion is to obtain an advanced degree.

-always be in uniform -always work to be a better officer -always continue to learn new skills and techniques

The two years i worked with Eric I have no complaints and/or ways f5oe him to improve.

TIMELINE

User Submitted Candidate: October 21, 2016 - 11:34AM (CST) Candidate Submitted References: October 22, 2016 - 03:50PM (CST)

Candidate Response Time: 0.52 Business Days

Median Reference Response Time: 0.00 Business Days

1.18 Calendar Days 0.78 Calendar Days

Report First Ready to be Finalized: Report First Finalized:

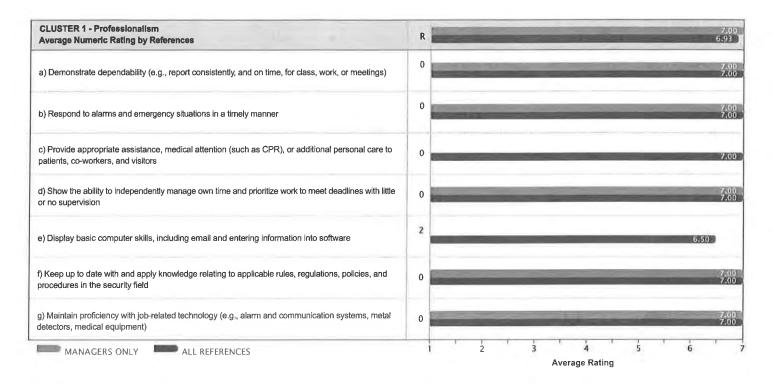
October 23, 2016 - 10:29AM (CST): 0.52 Business Days October 26, 2016 - 02:31PM (CST): 3.12 Business Days



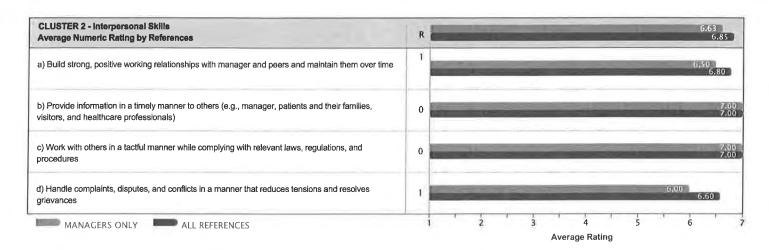
BEHAVIORAL QUESTIONS BY COMPETENCY CLUSTER

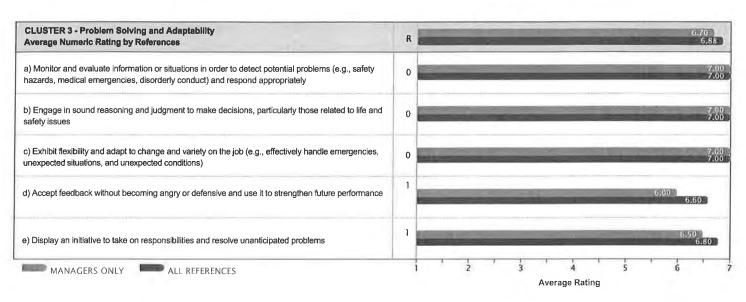
The section shows the average numeric ratings by competency cluster, such as "Interpersonal Skills". If at least two of the Candidate's managers submitted feedback, a "Managers Only" bar (in orange) is displayed.

The number in the column labeled "R" next to the behavioral question shows the range or difference between the highest and lowest rating submitted by the References for the behavior. Example with 3 References: Reference 1 rated a '7' on a behavior, Reference 2 rated a '6' on this same behavior, and Reference 3 rated a '5' on this same behavior, R = 2 (highest rating submitted minus lowest rating submitted, or 7 - 5 = 2).

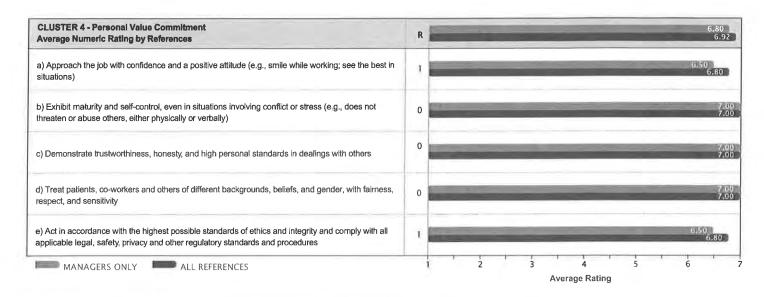


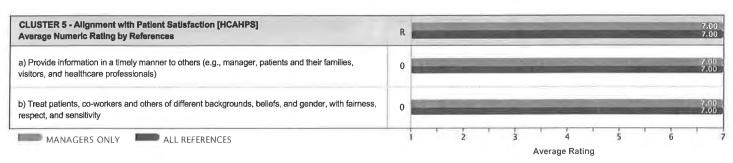












ADDITIONAL REFERENCE FEEDBACK

This section shows the responses by References to the following two questions

1. "Were you involved in the decision to hire this person at your company?"

Yes: 0/5

(0%)

No:

(100%)

*Based on responses from over 1 million References, 35.1% answered 'yes' to this question,

2. "Would you work with this person again?"

Yes:

5/5

5/5

(100%)

No:

0/5 (0%)

*Based on responses from over 1 million References, 99.2% answered 'yes' to this question,



REFERENCE CONTACT INFORMATION

Candidates initially submit information about their References, such as the nature and duration of their work relationship with them. If a Reference has changed any information supplied by the Candidate, the text of the information that was changed will appear in red font in this section. You may choose to discuss any text in red font with the Candidate.

The symbols indicating survey completion status of the Reference are as follows:

- Solid green checkmark (**): the Reference submitted his/her survey feedback responses prior to the time that the report was finalized by the
- Hollow checkmark outlined in black (\checkmark): the Reference submitted his/her survey feedback responses after the Candidate report was finalized, so this Reference's feedback is not included in the report. Re-finalize the report to include this Reference's feedback.
- The word "NO" in red font (NO); the Reference has not submitted his/her survey feedback responses.

MANAGER	MANAGER	NON-MANAGER
Mr. Jerrod Alford	Mr. Steve Barron	Mr. Derek Boch
Company: Hocking County Sheriff	Company: Hocking College	Company: Hocking County Sheriff
Reference Job Title: Captian at Hocking County Sheriff office	Reference Job Title: instructor during acadmey classes	Reference Job Title: Deputy and Sergeant
· ·	Relationship: Manager (Teacher (Professor,	Relationship: Coworker
Relationship: Manager	Instructor))	Phone#: Work: 740-243-8155
Phone#: Work: 740-403-1287 (Work: 740-703-1287)	Phone#: Work: 740-385-2177	Email: hcso37s3@gmail.com
,		IP Address: 66 117 230.20
Email: alfordk9@gmail.com	Email: csrcka2177@roadrunner.com	Completed: 10/23/2016 7:25:38 PM (0
IP Address: 70.208 229 252	IP Address: 45,52,122,21	Business days, 1 Calendar days)
Completed: 10/22/2016 4:19:49 PM (0 Business days, 0 Calendar days)	Completed: 10/23/2016 10:29:40 AM (0 Business days, 1 Calendar days)	Current Company: Ohio Casino Control Commission
Candidate Job Title:	Candidate Job Title:	Candidate Job Title:
Dates: 01/01/2000 To 09/13/2013 (13 years, 9 months) (07/08/1999)	Dates: 10/21/2016 To 10/22/2016 (0 years, 0 months)	Dates: 01/01/2000 To 09/13/2013 (13 years, 9 months)
Address: Logan, Ohio 43138 United States	Address: Nelsonville,Ohio 45764 United	Address: Logan,Ohio 43138 United States
Does Reference/Referee want to be informed	States	Does Reference/Referee want to be informed
of professional development opportunities?:	Does Reference/Referee want to be informed	of professional development opportunities?:
No	of professional development opportunities?:	No
	Yes	

NON-MANAGER	NON-MANAGER
Mr. Noah Bookman	Mrs. Sarah Tower
Company: Hocking county Sheriff Reference Job Title: supervised him at sheriff office (Deputy)	Company: Columbus Dispatch Reference Job Title: Security Relationship: Peer (or Colleague) (Manager)
Relationship: Coworker Phone#: Work: 740-438-6236 (Work: 740-385-7777) Email: n_bookman@hotmail.com IP Address: 45.52.111.198 Completed: 10/23/2016 7:51:49 AM (0	Phone#: Work: 614-929-8340 Email: stower223@gmail.com IP Address: 208.81.210.240 Completed: 10/24/2016 12:46:14 AM (0 Business day, 1 Calendar day) Current Company: The Dispatch Printing
Business days, 1 Calendar days) Current Company: Department of Justice Candidate Job Title: Dates: 01/01/2008 To 01/01/2013 (5 years, 0 months) (09/01/2005) To 01/07/2007 (1 year, 4 months)	Company Candidate Job Title: Dates: 10/01/2014 To 10/22/2016 (2 years, 1 month) Address: Columbus Ohio,Ohio 43138 United

Address: Logan,Ohio 43138 United States

Does Reference/Referee want to be informed
of professional development opportunities?:

No

States
(Columbus Ohio,Ohio 43215 United States)
Does Reference/Referee want to be informed of professional development opportunities?:
Yes

REFERENCE IP ADDRESS HISTORY

Alford, Jerrod		
IP Address	Date	Action
70.208.229.252	10/22/2016 4:12PM	Email Link Clicked
70.208.229.252	10/22/2016 4:19PM	Survey Completed

Barron, Steve		
IP Address	Date	Action
45.52.122.21	10/23/2016 10:10AM	Email Link Clicked
45.52.122.21	10/23/2016 10:29AM	Survey Completed

Boch, Derek		
IP Address	Date Date	Action
66.117.230.20	10/23/2016 7:17PM	Email Link Clicked
66.117.230.20	10/23/2016 7:25PM	Survey Completed

Bookman, Noah		
IP Address	Date	Action
45.52.111.198	10/23/2016 7:37AM	Email Link Clicked
45.52.111.198	10/23/2016 7:51AM	Survey Completed

Tower, Sarah		
IP Address	Date	Action
208.81.210.240	10/24/2016 12:36AM	Email Link Clicked
208.81.210.240	10/24/2016 12:46AM	Survey Completed



This is to certify that

THE OFFICE OF THE ATTORNEY GENERAL

has completed the Ohio Private Security Firearms Requalification Program

Conducted by
AimHi Private Security Academy
Awarded on
July 28, 2019

Dave Kost Attorney General

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

640925 A PSR19-290 REQUALIFICATION DUE BY 08/26/20



Jeffrey K. Scott, Executive Director
Ohio Peace Officer Training Commission

Duplicate Certificate
School Commander

This certificate alone does not authorize you to work as a security guard or private investigator. For licensing requirements, contact the Ohio Department of Public Safety/Private Investigator Security Guard Services or visit http://pisgs.ohio.gov/



OHIO PEACE OFFICER TRAINING COMMISSION THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that

has completed the Ohio Private Security Firearms Requalification Program

-

AimHi Private Security Academy

To the second



Jeffrey K. Scott, Executive Director
Ohio Peace Officer Training Commission

Duplicate Certificate

School Commander

640925 A PSR19-290 REQUALIFICATION DUE BY 08/26/20

This certificate alone does not authorize you to work as a security guard or private investigator. For licensing requirements, contact the Ohio Department of Public Safety/Private Investigator Security Guard Services or visit http://pisgs.ohio.gov/

MOUNT CARMEL HEALTH SYSTEM SAFETY AND SECURITY SECURITY OFFICER ORIENTATION

Orientee:	_
Primary Preceptor: Dexter Josey	
Secondary Preceptor: Chad Taylor #M-1	
Start Date: 11-7-2016	
Completion Date: 12-5-2016	
Reviewed By: () Last	

* Return to manager when completed *

INTRODUCTION AND OVERVIEW OF THE MOUNT CARMEL HEALTH SYSTEM

SYSTEM MISSION STATEMENT

Mount Carmel Health System
is a community of committed persons
working to extend God's ministry of health.
We seek out and respond to the health needs
of our communities.
We serve and care for all people
with fairness, respect and compassion.

As a member of the Holy Cross Health System
we dedicate ourselves to
Fidelity, Excellence, Empowerment and Stewardship
by living the values of
Dignity of Persons, Service to Others,
Social Justice for All.

Faithful to the spirit of the
Congregation of the Sisters of the Holy Cross
both the Holy Cross Health System
and the Mount Carmel Health System
exist to witness Christ's love through excellence in the
delivery of health services
motivated by respect for those we serve.
While stewarding our resources, we foster a climate
that empowers those who serve with us.

INTRODUCTION AND OVERVIEW OF THE MOUNT CARMEL HEALTH SYSTEM SAFETY AND SECURITY DEPARTMENT

Mission Statement

Safety and Security is a team of dedicated individuals working together to provide a safe and secure environment by providing high quality life safety, personal and property protection services.

We achieve timely, cost effective results through the collective knowledge, talents, and skills of Associates working together for the benefit of those we serve.

Simply stated, we:

- ☆ work as a team,
- ☆ strive for excellence,
- ☆ are on time,
- ☆ are within budget,
- ☆ enjoy our work and each other.

REQUIREMENTS

- Annual TB Test See Employee Health Services
- Annual Safety Education Training
- Completion of a Private Security Officer Course or Basic Peace Officer
- Completion of Healthcare Security and Safety Training Course
- Good written and verbal skills
- Computer Skills Windows 95 and Microsoft Office 97
 Demonstrates the Use of the Mouse
 Demonstrates the use of the Keyboard
 Demonstrates the use of the Registrar

SECURITY OFFICER ORIENTATION WEEKLY PROGRESS

		/	
Week One:	/	¥	System Orientation
		Day two:	Introduction to Employees
	2	$\langle \ \ \rangle$	Review Job Description
			Review Supervisor/Take Charge
	V		Responsibilities
	1	/	Department Goals and Objectives
	1	/.	Organizational Chart
	1		Campus Tour
	V		Work Schedule/Post Assignments/Overtime
		/	Meals and Breaks
	1	/	PLT/DIS/LOA's
	V		Clocking In/Absenteeism/Tardiness
	-		Dress Code
	1	Day three:	Department Resources and Manuals
	1		Review H.R. Policies and Procedures
	V		Emergency Operations Manuals
Week Two:	1	Safety Mana	gement
Week Three		Security Man	nagement and Emergency Preparedness
and Four:	V	Managemen	t
Week Five and		Hazardous N	Materials Management
Six:	1		
Week Seven	/	Life Safety N	Management
and Eight:	1		

GENERAL ORIENTATION CHECKLIST

ITEM	RESPONSIBLE PERSON	TIME FRAME	DATE COMPLETED	
Home Address & Telephone No.	Employee	Day 1	11/8/16 0.50	
Uniforms/Equipment	Supervisor	Day 1	11-10-16 Ct.	
Shift Assignment	Supervisor	Day 1	1/8/100.10.	
E-Mail Address	Supervisor	Week 1	11/10/16 CT	
Review Progressive Counseling Policy	Supervisor	Week 1	11/14/16 Ct	
Confidentiality Policy	Supervisor	Week 1	11-10-16 Ct	
JCAHO/Life Safety/OSHA Regulations	Supervisor	Week 3	11/14/16 CT	
Hospital Paging System	Supervisor	Week 1	11-10-16 CT	
Complaints against Security Officers	Supervisor	Week 1	11-14-16 CT	
Department Policies and Procedures	Supervisor	Week 1	11-14-16 Ct	
Department Forms/Pass-On Log	Supervisor	Week 1	11-14-16 CT	
Productivity Data Supervisor		Week 1	11-14-16 CF	

SECURITY OFFICER

		Pertinent mation	Performs With Assistance		Performs Independently	
	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials
SAFETY MANAGEMENT						
Describes AMA Patients	11101654	11-10-164			12-11-11	12-5-16 CF
Demonstrates Camera Center					A COLUMN TO THE REAL PROPERTY OF THE PERTY O	
Operations	VI LOLIA SA	11-10-16 ET			12/8/163	12-5-16 CA
Describes Correction of Hazardous		· · · · · · · · · · · · · · · · · · ·				
Conditions	111016Em	11-10-16 CT			125165	12-5-16 CF
Demonstrates Detainment/Restraint						
of Patients	1/10160	11-10-16 CT			175169	12-5-16 CI
Describes Elevator Locations &						
Operations	1110160	1410-16 CT			135/6 5	12-5-16 CI
Demonstrates Heliport						12-5-16 (1
Lighting/Traffic Control	1110160	11-10-16 4			12 8 11.82	12-3-16 0
Describes and Demonstrates						
Infectious Control/Universal	h	1: .m 16 18				
Precautions	11-10-1600	11-10-16 CF			125 169	12-5-16 Ct
Conducts Safety Inspections	11-109662	11-10-16 01			129/65	12-5-16 CT 12-5-16 CT
Completes Evaluation Form	11-10-1662	11-10-164		6	1254497	12-5-16 CT
SECURITY MANAGEMENT	1/2 m		V		B	
Demonstrates 10 codes / Two-Way						
Radio Communications	11-1846 En	11-14-16 4				72-5-16 Ct
Describes Areas Unauthorized	11-14-120	11-14-16 0			12.5.166	12-5-16 Cr
Demonstrates Vehicle Operations	11-14-11-50	11-14-16 CT			12616ch	125-16 CT
Demonstrates Bureau of Motor						
Vehicles (BMV)	11-14-160	11-14-16 CT			1251682	1245-16 Ct
Demonstrates writing Departmental						1
Forms / Pass-On Book	11-14-1661	11-14-16 Ct			1215660	12-5-16 C
Demonstrates and describes Door					The second second	
Lock / Unlock Schedules	11-18-1650	11-14-16 Cr			12/3/160	12.5-16 CI
Demonstrates Identification /					17	
Package Checks	11.14.16.00	11-14-16 CT			1261600	12-5-16 C
Demonstrates and describes		11-14-16 CT 11-14-16 CT				12-5-16 CI 12-5-16 CI 12-5-16 C
Visitation Policy	11-14-160	11-14-16-			12516/h	125-16 0

SECURITY OFFICER

	Reviews Pertinent Information		ms With	Performs Independently		
	Orientee Preceptor Orientee Date & Date & Date & Initials Initials Initials		Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials	
Demonstrates Numerical Keypads /				. 1		
Codes / Use of	111414	11-14-16 C1		12/9/16	12-5-16 CT	
Demonstrates Lost and Found	11141698	11-14-16 Ct		12/5/16/9	12-5-16 CT	
Describes Matrix System / Card				1		
Access	1114169	11-14-16 CT		12/5/10	12-5-16 CT	
Demonstrates Money / Protective				m	1	
Escorts	11/4/1/12	17-14-16 Ct		12/6/16	12-5-16 CT	
Demonstrates and describes Off				40		
Property Duties / Alarms	1114142	11-14-16 CT		12/5/16	12-5-16 CT	
Demonstrates and describes Parking						
Enforcement	1114140	11-14-16 CT		12/0/16	124516 Ct	
Demonstrates and describes Patient						
Valuables Policy / Procedure	17 19 11091	11-14-16 Ct		13/5/16	12-5-16 CT	
Demonstrates Patrols / Interior /						
Exterior / Emergency Room	1114/1	11-14-16 CT		12:5.16	12-5-16 (1	
Demonstrates PPCT and ASP				m		
Training	1/14160	11-111-16 CT		11/1/16	11-11-16 0	
Describes Removal of Belligerent /				1		
Combative Visitors, Patients, or				-		
Associates	11141600	11-14-16 CT		12516	12-5-16 Ct	
Demonstrates Safety / Security						
Vehicle Procedures	111416	11-14-16 Ct		125167	125-16 Cf	
Demonstrates Signing on						
Computers / Work Orders	1114/2	11-14-16 Cr		12516	12-5-16 CT	
LIFE SAFETY MANAGEMENT	17.7	, and a			146	
Conducts Construction Safety	an	1175-11-75			_	
Inspection	11/1016			12516	12.5-16 CI	
Completes Construction Safety	in	11-15-1625		-	_	
Evolution Form	7/15/6	11-0 3		12516	12-5-16 Ct	
Describes Electrical Safety	11/11/16	71-15-16 DS		175160	12-5-16 CT	
Conducts Fire Drills	14/16/100	11-15-16 05			12.5-16 CT	
Completes Drill Evaluation Form	11/15/16	-11-18-11 DS		12.610-02	12.5-16 CT	
2	110/10	11-15-15		10714	الكافاريا	

		Pertinent mation		ms With stance	AL CONTRACTOR	forms endently
	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials
Describes Fire Hazards	11/11/12	1-12605			12/5/68	72-5-16 Ct
Describes types of Fire Extinguishers	11/10/16	14171002			13/9/16	125-16 LF
Describes types of fires	11/11/16	-11-17-16 12				12.5-16 CT
Describes Fire Response Team	11/17/60	-11-17-16 05			125169	12-5-16CT
Demonstrates inspection of Fire Extinguishers & Locations	11/2/11/2	1127-10 05			13/5/14	12-5-16 CT
Describes locations of Fire System Pull-Boxes	11/0/16	11-11-16 05			13/5/16	2:5-16 CT
Describes locations of Halon Systems	NA	NIA			NA	NA
Describes location of Mechanical Rooms & Airhandlers	11/17/16	11-17-6 93			17/5/16	12-5-16 CT
Describes Simplex Fire Alarm System	14/1/16	11-17-16 05			17/5/16	12-5-16 CT
Describes Safety and Security Fire Plan	11/416	11-14-16CT			13/5/16	12-5-16 CF
Demonstrates Safety / Security Intervention Regarding Patients	14/1/10	11-1416 4			13/5/6	12.5-16 CT
HARARDOUS MATERIALS MANAGEMENT	7				, ,	
Demonstrates and describe Hazmat Suit / Location	11/17/16	11-17-14 03			12/9/16	12:5-16 CT
Describes MSDS Manuals	11/17/16	71-17-16 95			13/3/164	12-5-16 CT
Demonstrates use of MSDS	11/14/16	11-14-16/5			17/5/167	12.5-16 CT
Describes Mercury & Chemotherapy Spills	11/17/10	11-17-16 95			12/3/06	12.5-16 CT
Describes Personal Protective Equipment	11/14/16	11-14-160			12/3/16	12.5-16 CT

		Pertinent mation	Performs With Assistance		Performs Independently	
	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials
EMERGENCY PREPAREDNESS MANAGEMENT						
Demonstrates Trauma Team Alerts	0/14/160	- 11-14-16 Cr			12/5/16	12-5-160
		9				

10/21/19 und	have been issued 52 rounds of +P 124 Grain ammunition on erstand that this is the only duty ammunition and must carry in my duty weapon and
Received By:	A seguinal control of the control of

Issued By

I, Eric Matheny, have received the following issued uniforms from the Security Department at Mount Carmel St. Ann's Hospital.

1) 1-Set of MCH collar insignia

(2) 1- Badge

3) 3-Uniform Long sleeve shirts

(4) 1-Glove Holder

(5) 1-Key Holder

(6) 1-Handcuff case

(7) 1-Radio Holder

(8) 1-Set of belt keepers

(9) 1-Duty Belt

(10) 1-Office key

(11) 1-Set of handcuffs w/key

(12) 1- Duty Coat w/ liner

(13) 1- ASP/ Nylon Holder

(14) 1-Can OC/Nylon Holder

(15) 1- KENWOOD PHOIO D

(16) 1- PADIO CHARGER

Upon termination of employment, I understand that the above issued property must be turned into the Security Supervisor.

Printed Name:	
Signed	
Date: ////////////////////////////////////	
Issued By:	



THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that

Private Security Firearms Requalification Program AimHi Private Security Academy has completed the Ohio Conducted by

Awarded On August 02, 2020

Attorney General

Vernon P. Stanforth, Champerson

Ohio Peace Officer Training Commission

REQUALIFICATION DUE BY 8/26/2021



Dwight A Holcomb, Executive Director Ohio Peace Officer Training Commission

School Commander

This certificate alone does not authorize you to work as a security guard or private investigator. For licensing requirements contact the Ohio Department of Public Safety/Private Investigator Security Guard Services or visit http://pisgs.ohio.gov/





A MEMBER OF 🍪 TRINITY HEALTH

POSITION DESCRIPTION

POSITION TITLE: Armed Safety & Security Officer	DEPARTMENT: Safety & Security		
JOB CODE: M4850	REPORTS TO: Armed Supervisor of Safety & Security		
DATE ISSUED: 2/1/2017	SUPERVISES: N/A		
DATE REVISED: 2/1/2017	MATRIX REPORTING RELATIONSHIPS:		

Mount Carmel Mission Statement and Guiding Behaviors

Mission: We serve together in Trinity Health, in the spirit of the Gospel, to heal body, mind and spirit, to improve the health of our communities and to steward the resources entrusted to us.

The Guiding Behaviors set the expectation for how we work together in living our Mission and Core Values. They are:

- We support each other in serving our patients and communities.
- We communicate openly, honestly, respectfully and directly.
- We are fully present.
- We are all accountable.
- We trust and assume goodness in intentions.
- We are continuous learners.

Job Summary

- In accordance with the Mission and Guiding Behaviors; the Safety & Security Officer is to provide protective services to all persons and property across the Mount Carmel Health System.
- Ensure a safe environment for all associates, physicians, patients, and visitors in compliance with various regulatory standards to include, JC, OSHA, ect.
- Provide a quality service consistant with the values of Mount Carmel Health System for our associates, physicians, patients and visitors.

Job Qualifications (Knowledge, Skills, and Abilities)

- Education: High school graduate or GED required.
- Licensure / Certification: Receipt of Ohio Peace Officer Training Academy certificate of completion
- Experience: Three to five years experience in security, law enforcement or military disciplines or equivalent training which might include criminal justice, homeland security, or law enforcement academy is preferred.
- Effective Communication Skills
- Valid driver's license with good driving record maintained
- Customer service oriented able to function in high stress situations with personal restraint, integrity, and control.
- Basic computer skills that commensurate with the job.
- Ability to communicate effectively and appropriately with diverse populations.
- Ability to write, read, and communicate effectively in the English language.

Essential Responsibilities

- Exhibits each of the Mount Carmel Service Excellence Behavior Standards holding self and
 others accountable and role modeling excellence for all to see. For example: demonstrates
 friendliness and courtesy, effective communication creates a professional environment and
 provides first class service.
- Meets population specific and all other competencies according to department requirements.
- Promotes a Culture of Safety by adhering to policy, procedures and plans that are in place to prevent workplace injury, violence or adverse outcome to associates and patients.
- Relationship-based Care: Creates a caring and healing environment that keeps the patient and family at the center of care throughout their experience at Mount Carmel following the principles of our interdisciplinary care delivery system.
- (For patient care providers) Provides nursing care, ensures an environment of patient safety, promotes evidence-based practice and quality initiatives and exhibits professionalism in nursing practice within the model of the ANCC Magnet Recognition Program®.
- Maintain a safe and secure environment through job knowledge, skills and engagement.
 Intervene as appropriate in any safety & security observed issues.
- Enforces all governmental regulations, standards, policies associated with Mount Carmel Health System and Safety & Security policies, (i.e. smoking policy).
- Communicate safety and security discrepancies to the appropriate parties for mitigation.
- Ensure department goals & objectives are reached/maintained during assigned shift(s).
- Responsible for assuring that the Safety, Life Safety, security, and Emergency Management, and the JC standards are followed as it relates to the position.
- Responsible for completing and documenting assigned tasks, such as fire drill and safety tours on time.
- Ensure accurate documentation during assigned shift (i.e. security reports, safety incidents, activity logs).
- Ensure consistent delivery of professional, friendly, and courteous service.
- Comply with the organization and department dress code.
- Conduct initial and follow-up investigations, if warranted or directed, ensuring documentation of investigative steps.
- Proactive patrolling of the campus by foot, segway, or vehicle as assigned.
- Respond to all "STAT" calls expeditiously and safely.
- Be familiar with all hospital emergency codes and appropriate responses

- Responsible for completing assigned tasks/duties on time (i.e. fire drills and safety tours).
- Provide on-the-spot in-service training to staff where knowledge related discrepancies are noted.
- Demonstrate sound judgment, decision skills, and prioritizing responses to emergency situations.
- Ability to perform duties in an independent manner.
- Custodial responsibility for patient valuables and maintaining lost and found by following the proper protocols.

Other Job Responsibilities

- Inspects panic alarms, AED's, and call boxes as assigned.
- Provides escorts for associates, patients, visitors and students (where located) in the hospital areas and areas contiguous to the hospital areas.
- Issue parking citations and enforce the parking policy.
- Provide helipad duties during helicopter landings and departures
- Assist in the collection of ICES data as directed
- Monitoring of cameras and access control responsibilities as assigned
- Citizen arrest duties only in accordance with applicable laws and statutes
- Assist motorist with vehicle assistance as appropriate (i.e. jump start)
- Traffic enforcement keeping emergency entrances and approaches clear of non-emergency vehicle traffic
- Respond to safety incidents/visitor injuries as appropriate, ensuring medical is summoned as appropriate.
- During emergent events direct media to the proper area/contact
- Perform other assigned duties as directed by Management.
- Use proper radio procedures and monitors on-going activity
- Be familiar with geographic location and facility layout
- Immediately report and respond appropriately to Salient events, communicating the event to your supervisor.
- Provide for security per policy for VIPs
- Chemical spill clean up as assigned.
- Responsible for compliance with Organizational Integrity through raising questions and promptly reporting actual or potential wrongdoing.
- All other duties as assigned.

EQUIPMENT: This section requires a response of Yes or No from drop down box.

Radiation: No

Electrical: Yes

Chemical: Yes_

Mechanical: No

KEY TO FREQUENCY CODES for Physical Requirement Sections: This section requires a numerical response from drop

down box.

1 = Up to 33% of the time

3 = Over 66% of the time

Reaching Overhead: 1

Grasping: 3

Pinching: 3

Twisting: 2

Climbing: 1

Keyboarding : 3

2 = From 33% - 66% of the time

4 = Not Applicable

Pulling: 2

PHYSICAL REQUIREMENTS

Sitting: 3

Balancing: 3

Standing: 3

Walking: 3

Ability to be Mobile: 3

Bending: 2

Kneeling/Crawling: 1

Stooping: 1

Turning/Pivoting: 2

Working Above Shoulder Level: 4

Pushing: 2

Maximum Weight: Equal to or greater than 35 lbs

Lifting: 3

Maximum Weight: Equal to or greater than 35 lbs

POTENTIAL EXPOSURE: This section requires a response of Yes or No from drop down box.

Blood / Body Fluid Contact: Yes Humidity: No Temperature: No Air-borne Pathogen: Yes Chemicals (Furnes / Burns): No Dust: No

Radiation: No Vibrations: No Noise: No

Personal Protective Equipment: This section requires a response of Yes or No from drop down box.

Gloves: Yes Shoes: No Goggles: Yes Aprons: No

Masks: Yes Head Covering: No Gowns: Yes

Emotional / Psychological Factors: This section requires a response of Yes or No from drop down box.

Trauma: Yes Grief: Yes Death: Yes Public Contact: Yes Deadlines: Yes

This job description is intended to describe the general content of and requirements for the performance of this job. It is not to be considered an exhaustive statement of duties, responsibilities, or requirements.

Reviewed and Approved by:

Drew Evans

Title: Date:

Manager System Safety and Security

3/15/2017

Compensation Rep:

Jim Kousaie

Title:

Sr. Compensation Consultant

Date:

3/15/2017

MOUNT CARMEL POLICY/PROCEDURE

SUBJECT: Authorized Access to Medication Storage Areas

Appendix A

Orientation Checklist

Medication Storage Areas - Access by Non-Licensed Personnel

Employee ID Number:
Dept: Safrey . Sera rity Date: 4/20/20

- € Access to medication storage areas is restricted to authorized personnel.
- € Access to medication storage areas by non-licensed support services personnel is based on the need for the individual to perform their assigned task.
- € Authorization for non-licensed personnel to access a medication storage area is identified by job classification and department specific job description with competencies related to the specific role(s).
 - Environmental Services
 - Facility Operations/Engineering/Management
 - Security
- € Support services personnel that are <u>not</u> authorized access may only access a secure medication storage area in the presence of an authorized individual. (e.g. nurse, pharmacy)
- € Medications must be stored in a secure environment.
- € Medication storage areas (patient servers, medication carts, medication rooms, medication refrigerators, etc.) must be secured at all times.
- € Medications in patient care areas that are not actively staffed must be locked.
- € Medication storage areas must be clean and provide sanitary conditions for medication storage and preparation.
- € Medications and medication related supplies may not be placed by the sink or drain.
- € Contact the area supervisor or the pharmacy if work in a medication storage area may interfere with medication security or integrity (e.g. if medications need to be moved).
- € Report any suspected employee impairment, diversion or theft of medications, syringes, needles or any supplies to the area supervisor or pharmacy.

Preceptor's Name: () and / and /	(print)
Preceptor's Signature: Wat Taylor	Date: 4/20/2020
Employees Name: I acknowledge that I nave reau and understand my responsibilitie	(print) s related accessing medication storage areas.
The state of the s	retured accessing medication storage areas.
Employees Signature	Date: 4/20/20

MOUNT CARMEL POLICY/PROCEDURE

SUBJECT: Authorized Access to Medication Storage Areas

Appendix B

Medication Storage Areas - Access by Non-Licensed Personnel Competency

1.		cation storage ar True	reas can be accessed by any hospital employee. (B) False
2.	a. b.	May access the May access the	o in a secure medication storage area you; e area to do the job without authorization e area if authorized by your job description e area under the supervisor of an authorized nurse or pharmacy staff
3.	Medic medica a	ation carts, med ation storage ard True	lication rooms, medication refrigerators, freezers and warmers are all eas. b. False
4.	a. 6. c.	. You should; Move the cart t Report by conta	acting the area supervisor or pharmacy alone because the unit may reopen soon
5.	a. b. c.	al. You should; Clean it up and Not report this I Not report this i	and syringes when cleaning a restroom in a restricted access area of the continue working because you don't know who used them because it is not your responsibility port the finding to your supervisor

BASIC LIFE SUPPORT

BLS Provider





Issue Date

11/22/2019

Training Center Name

Mount Carmel Health System

Training Center ID

OH03247

Training Center Address

6150 E. Broad St

Columbus OH 43213 USA

Training Center Phone Number

614-234-5570

Recommended Renewal Date

11/2021

Instructor Name

Voice Assisted Manikin

Instructor ID

10190824478

eCard Code

195508537975

QR Code



To view or verify authenticity, students and employers should scan this QR code with their mobile device or go to www.heart.org/cpr/mycards.

© 2016 American Heart Association, All rights reserved. 15-3001 3/16



This is to certify that

has completed the Ohio
Private Security Firearms Requalification Program
Conducted by
AimHi Private Security Academy

Awarded on July 28, 2019

Dave Fost Attorney General

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

640925 A PSR19-290 REQUALIFICATION DUE BY 08/26/20



Jeffrey K. Scott, Executive Director Ohio Peace Officer Training Commission

Duplicate Certificate

School Commander

This certificate alone does not authorize you to work as a security guard or private investigator. For licensing requirements, contact the Ohio Department of Public Safety/Private Investigator Security Guard Services or visit http://pisgs.ohio.gov/



THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that

has completed the Ohio Private Security Firearms Requalification Program

Conducted by
AimHi Private Security Academy

Awarded on July 01, 2018

Mike DeWine
Attorney General

January G. AR.

Vernon P. Stanforth, Chairperson Ohio Peace Officer Training Commission

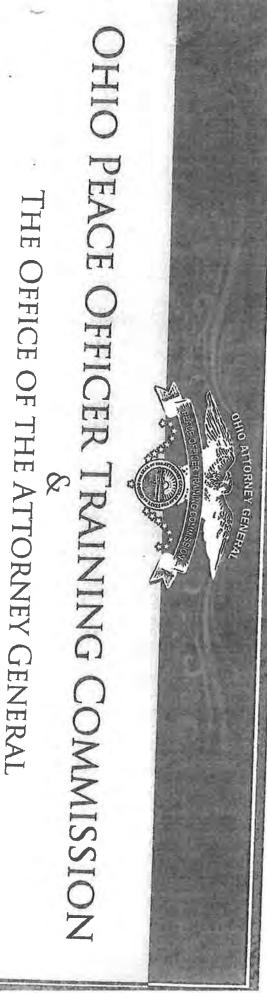
636258 A PSR18-259 REQUALIFICATION DUE BY 08/26/19



Mary E. Davis, Executive Director
Ohio Peace Officer Training Commission

School Commander

This certificate alone does not authorize you to work as a security guard or private investigator. For licensing requirements, contact the Ohio Department of Public Safety/Private Investigator Security Guard Services or visit http://pisgs.ohio.gov/



This is to certify that

has completed the Ohio Private Security Firearms Training Program

E.P.D. Training Academy

February 26, 2017

Mike DeWine
Attorney General

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

630439 A PSB17-090 REQUALIFICATION DUE BY 08/26/18



Mary E. Davis, Executive Director
Ohio Peace Officer Training Commission

School Commander



3.1

HANDCUFFING TEST

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
 - D.) ALL OF THE ABOVE
 - BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?

A.)TRUE (B)FALSE

- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?
 - A.) TRUE
 - B) FALSE

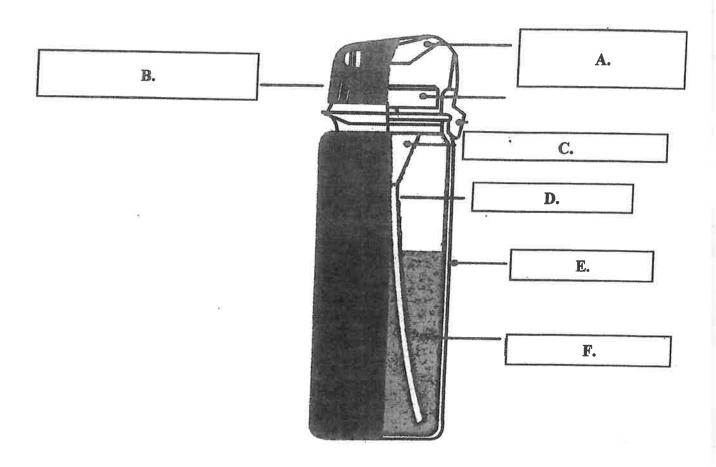
OC Test Mount Carmel Health System Safety and Security



- 1.) What does OC stand for? A. **Orange Crush**
 - B. Ocean Crust
 - Oleoresin Capsicum
- What is the average expiration date on an OC canister? 2.)
 - 1-2 years
 - 3-4 years
 - 4-5 years
- How often should you check your OC spray for adequate spray strength? 3.)
 - A. 30 days
 - B. 60 days
 - C) 90 days
- How long of a burst should you use on a threat? 4.)
 - 1-2 seconds
 - B. 2-4 seconds
 - C. Empty the entire can
- What is Oleoresin Capsicum commonly known as? **5.)**
 - A. Mace
 - Pepper Spray
 - Gas
- When deploying OC, what area of the body should you deploy the OC **6.**) towards?
 - A. Arms
 - Chest
 - Face and eyes
- After using OC on a subject, what should you immediately do with the 7.) subject?
 - Leave lying on the ground. A.
 - Remove from contaminated area
 - Spray again

8.)		at is the second step in the decontamination process?
	A.	Spray them again
	B.	Tell them to stop crying like a baby
	E	Offer verbal rapport to the subject
9.)		at is the third step of the decontamination process?
	(A)	Expose subject to fresh air
	В.	Throw the subject a bottle of water
	C.	Stand there and record them with your cellphone
10.)	Wha	at is the best way to flush the eyes?
	A.	Using milk
	B.	Rubbing eyes continually
	©	Water
11.)		t type of agent is OC?
	A.	Glue
	B .	9
	6	Inflammatory
12.)	Wha	t is the main ingredient of OC?
	A.	Water
	B . C.	Cayenne Pepper
	C.	Powder
13.)		CMS (Center for Medicaid/Medicare System) guidelines allow for
	OC to	o be used on a PATIENT?
	A.	Yes
	B.	No
	C.	Only if they deserve it.
14.)	List t	he nomenclature of a canister of OC
	A.	Fliptop
	В.	nozzle / Actualor
	C.	Walve Assembly
	D.	Tube
	E.	Conister
	F.	Formulation

av.



50

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*



Box 1794 Appleton, Wi 54912 (920) 735-6242 · Fax (920) 735-8245 asp-uss.com

ASP Basic Certification (ABC)

EXPANDABLE BATON TRAINING

Information Sheet

(Please Print)		Date 4/2/21
☐ Initial Certification	Recertification	
First Name		
Home Address	Last Name_	
City Lancaster	State # Province	- 415.13
Telephone	E-mail Address	Z10 4/2/30
	Z man rodroso_	/
Employing Agency Mf. Com	elsh. Ann's	
Agency Address 500 S. C/	evelonel	
City westerville	State H Province	Zip
Agency Telephone (380) 898 4	600 E-mail Address	
Duty Status: Full Duty Restricte	ed Duty	
Has your agency adopted or authorized t		
How many officers are in your agency?	20	
Height 6'4 Weight 289	Age 50 Date of Birth //z	9/7/
January 1 4 6 1 / /		.,,,
Do you have any knee, back or health pro	oblems? VCS	
Are you on any medication? VCS		
Person to be notified in case of emergen Name _ Phone (
Relationship ker Fe	Alternate ()	
	1	
riefly describe any health problems:		Injury Check: 1A 1
	WAIVER	
Relea	se from Liability and Assumption of Rick Agreement	:
 Intending that this Agreement be legally rever discharge Armament Systems and Proced at assigns, of and from any and all claims, dema ny and all lonown and unknown, foreseen and unit ASP Expandable Baton certification training actives (a) In signing this Release, I assert that (a) I. 	binding upon me, my heirs, executors, administrators ures, INC, and all of their agents, representatives, it nds, rights and causes of action of whatsoever kind pressen physical and mental injuries and consequentities. am presently in good physical and mental health; (b)	neira, executors, administrators, successor and nature, arising from, and by reason o ces thereof, suffered by me during any an
(d) That's rocks and rolly talearagued the tell	nis and conditions of this Agreement.	
Line program to competency based	Mere participation does not automatically assi	ure successful completion.
4/2/71		
Date	-	

ASP Basic Certification

WRITTEN EXAMINATION

- (a.) Control v injure
- b. Maim v Destroy
- c. Threaten v Control
- d. React v Act
- e. Demonstrate the Officers skill
- 2. The primary striking surface of an open ASP Baton is the:
 - a. Cap
 - b. Center of the shaft
 - (C.) Last 3" of the baton
 - d. First Joint
 - e. Handle
- 3. The hand using the service firearm is the:
 - a. Weak hand
 - b. Contact hand

 - d. Reaction hand
 - e. Support hand
- 4. The ASP baton should not be opened:
 - a. To the sky
 - b. To the ground
 - c. During a strike
 - (d)_ To the side
 - e. Towards the threat
- 5. The two baton modes are:
 - (a.) Open and Closed
 - b. Interview and Combat
 - c. Weapon and Reaction
 - d. Concealed and Loaded
 - e. Ready and Extended
- 6. Which is not an ASP target area:
 - a. Center mass of the arms
 - b. Center mass of the legs
 - c. Center mass of the body
 - Groin or Sternum
 - e. The Weapon Delivery System
- 7. Targeting specific points violates which training principle:
 - Forgiving techniques
 - b. Fine motor skills
 - c. Spaced practice
 - d. Static training
 - e. Complex techniques

- 8. The ASP baton is always carried:
 - a. On the right side
 - b. In the front
 - c. On the reaction side
 - d. Tip down
 - e. Left side
- 9. The Reaction Strike is primarily a:
 - a. Strong strike
 - b. Closed strike
 - (c) -- Clearance strike
 - i. Offensive strike
 - e. Initial strike
- 10. The most frequently used ASP strike is the:
 - a. Reaction strike
 - (b) Weapon strike
 - c. Straight strike
 - d. Clearance strike
 - e. Reverse strike
- 11. When performing an Open Straight Strike, the Reaction Hand is:
 - a. Palm up on the shaft
 - b. Maintaining distance
 - c. Guarding the face
 - (d) Palm down gripping the shaft
 - e. Executing a downward block
- 12. If the baton opens too easily:
 - a. Make the retaining clip smaller
 - b. Replace the o-ring
 - C. Widen the retaining clip
 - d. Remove the retaining clip
 - e. Lubricate the baton
- 13. The most common problem in opening the baton is:
 - a. Grip of the baton
 - . Loose o-ring
 - c. Broken retaining clip
 - Operator error
 - e. Loose handle cap
- 14. Special Circumstances include:
 - a. Age
 - b. Size
 - 9
 - Weapon proximity
 - d. Skill level
 - e. Mutiple Officers

b. A loose flexible grip	
c. Two fingers and the thumb	
(a) Full hand grip	
e. Both hands	
17. Officer/Subject factors include:	
a. Special knowledge	
b. Imminent danger	
c. Injury or exhaustion	
d.) Size	
e. Officer on the ground	
18. If the subject complies, the Officer doesn't not	
advance/strike	
(a) True	
False	
19. The ASP Baton is designed to be	
a. An offensive weapon	
b. A comealong device	
A defensive weapon	
d. A deadly force option	
e. A restraining device	
20. The principle goal of any arrest or physical	
confrontation is:	
(a.) Establishing control	
b. Superior Officer skill	
c. Subject safety	
d. Documentation	
e. Punishment	
1 1 1	
A V III	
Graded By: NOAU TIMER NOT	
101	
ASP Written Ekayn: Pass Fail	
Indiana / Dilliana	
Instructor: July and B-41764	
Date: 4/2/21	
vate. The variable of the vari	

15. ASP Weapon Side Strikes are intended to be

16. When striking the ASP Batton is gripped with:a. The index finger and thumb

a. 45 degree angle
b. 180 degree angle
c. Horizontal angle
d. 90 degree angle
e. Vertical angle

performed at a:

Baton Basic Certification

TECHNIQUE PROFICIENCY CHECKLIST

1)	Check:	Pass:	Fail:
2)	Redirection:	Pass:	Fail:
3)	Closed Mode Weapon Strike	Pass:	Fail:
4)	Closed Mode Reaction Strike	Pass:	Fail:
5)	Closed Mode Straight Strike	Pass:	Fail:
6)	Opening the Baton	Pass:	Fail:
7)	Open Mode Weapon Strike	Pass:/	Fail:
8)	Open Mode Reaction Strike	Pass:	Fail:
9)	Open Mode Straight Strike	Pass:	Fail:
	Closing the Baton	Pass:	Fail:
		×	
TECHNI	QUE PROFICIENCY	PASS:	FAIL:
COUNS	ELED:	1	
	Λ .	CERTIFICATION DENIED	. 15
CERTIFI	CATION APPROVED:		.—
NSTRU	CTOR: / May Tay M	B-41764	
	412-12-1		

DT Training Scenarios

1. Patient Wanding – Patient arrives at the hospital via private transport. Patient checks in stating "I do not wish to live anymore" and is immediately taken to the triage area for further evaluation. Patient is carrying a small bag and has on street clothes. Charge RN contacts Safety and Security regarding wanding the patient due to the statements made by the patient. Verbalize response and next steps prior to intervention with patient.

PASS FAIL

- 2. Code Violet Security is called STAT to ER for verbally aggressive patient. While responding to STAT call, Security hears "Code Violet ER #9" paged overhead. Security arrives to find staff attempting to hold patient down in bed. Patient is making verbal threats while trying to bite, spit, kick, and punch at staff who are attempting to control patient. Verbalize response to code violet and further information needed before scenario resumes.
 PASS FAIL
- 3. Restraint Security is responding to call for service on in-patient unit. Not much information is given prior to responding. Upon arrival Security witnesses several staff members attempting to keep confused patient in bed. Patient is flailing his arms and legs attempting to "escape" from the hospital. Patient recognizes Security as law enforcement and begins to focus on officers. Patient is begging Security to take him with them because he is not safe around nursing staff. Verbalize response and de-escalation efforts needed before scenario resumes. Obtain additional information as needed.

PASS/ FAIL

DT Training Scenarios

1. Patient Wanding – Patient arrives at the hospital via private transport. Patient checks in stating "I do not wish to live anymore" and is immediately taken to the triage area for further evaluation. Patient is carrying a small bag and has on street clothes. Charge RN contacts Safety and Security regarding wanding the patient due to the statements made by the patient. Verbalize response and next steps prior to intervention with patient.

PASS / FAIL

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 PASS / FAIL
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PASS / FAIL

4. Pink Slip — Security responding to disturbance in ER. Upon arrival Security intercepts patient attempting to leave the hospital. Staff is stating that the patient cannot leave. What is the response by Security at that exact moment? Patient becomes verbally aggressive with Security stating "you cannot hold me!" Verbalize efforts to get the patient back to his room and information needed to make appropriate decisions during the incident. What factors are important to consider? Resume scenario...

PASS / FAIL

5. Suspicious Person – Security receives a call from a visitor stating that they have observed a vehicle on campus that appears to be occupied sitting at the edge of property near connex boxes that contain contractor tools and equipment. This box has already been broken into previously and several thousands of dollars in equipment was stolen. Describe steps taken when dispatched and actions on-scene. Start scenario...

PASS / FAIL

6. Domestic Situation – Security responding to a disturbance in Maternity unit. Upon arrival security speaks with RN who advises that she has heard yelling and screaming coming from inside the room. She further advises that the only people inside the room are the patient and the father of the baby. Security responds to the room and finds patient in tears stating that she has been physically assaulted by the male party. Male party states that is not leaving his baby! Start scenario...

PASE / FAIL

7. Elopement – Security receives frantic call from ER staff stating that the patient in ER #9 is running out the squad bay doors. Security responds and sees patient attempting to run off property. Describe steps taken and ask for any additional information needed at that time. Security catches up to patient just before he leaves property but are unable to stop and hold at that point. Describe next steps needed at that time. Begin scenario....

PASS/ FAIL

8. Security is advised of a juvenile patient who arrived at the hospital due to an overdose. Patient took multiple prescription pills as an attempt to end her life. She had made comments that she does not wish to live anymore and wants the pain to go away. Patient's parents show up to the hospital and demand to be reunited with their daughter immediately. Mom makes the statement that she has not given MCHS consent to treat her daughter and will not be cooperating with staff requests. Urine test completed by daughter with mother inside the bathroom. Results of urine show that urine has been diluted with water and mother states that MCHS will never get an accurate urine sample from the patient. Physician responds to the room and advises that discharge of the patient is dependent on blood lab results. Parents consent to the blood draw which shows serious medical concerns and patient is pink slipped for medical conditions and is being transferred to Nationwide Children's Hospital for further evaluation. Mother makes the statement that she will not allow the hospital to put her daughter in a purple gown because she knows what it represents...GO!

PASS / FAIL

- 9. GSW Security is sitting post in ER lobby when GSW arrives via private vehicle. Two individuals carry the GSW into the ER lobby and drop him near the entrance. Both individuals flee the ER to their vehicle (Late model Infinity SUV, black with orange wheels with orange Infinity logo on each side). Patient has been shot in the chest. Gather additional information and advise response. Action...
 - PASS / FAIL
- 10. Property Search/Overdose Security called to in-patient room for suspicion of patient using drugs in the room. Upon arrival security speaks with physician who advises that she has spoken with the patient on two occasions today. The first time he was alert and oriented and even energetic. The second time he appeared lethargic and completely out of it, he was having trouble finishing sentences without falling asleep. None of the medications he is receiving would cause the change in behavior. The patient also has a history of IV drug abuse and admitted to using drugs 3 days prior to admission into the hospital. He is there for an abscess that is infected on his arm that he needs to receive surgery for. Please provide steps needed to perform search and explain how these are communicated to the patient. Also state any notifications that are made and any witnesses to the search. Begin...

PASS / FAIL

11. Discharged Patient – Security called to ER because discharged patient is refusing to leave the room. Patient states that he is not ready to leave because staff and the doctor has not addressed his concerns. Patient is being passive aggressive with staff and stating that he will not leave until he has had an opportunity to speak with the doctor about his care. Ask any additional questions as appropriate and determine your strategy for his removal from the room. Scenario resumes when ready...

PASS / FAIL

12. Criminal Trespass – Security called to suspicious visitor who was found sleeping in an empty patient room by staff on the unit. Security speaks with visitor upon arrival, but visitor refuses to identify himself to security. He further states that he is homeless, and he needs to be seen because he is having suicidal thoughts. Officer evaluates the situation and determines course of action...Play scenario

PASS / FAIL

Patient checks in to ER for psychiatric evaluation. Case Management and doctor both evaluate patient and determine that he is not suicidal. Patient is discharged from the ER but again refusing to leave...resume scenario PASS/FAIL



A MEMBER OF 🚳 TRINITY HEALTH

Safety and Security Defensive Tactics / OC Repellant / ASP Baton Competency Form

Students Name (print): I.D. Number: Date: 4/2/2/ Campus: 5+- 4nn 9		
1. Escort Position	Pass	Fail
2. Balance Displacement a. At the shoulder b. Friction on the back c. At the hip	Pass Pass	Fail Fail Fail
Handcuffing a. Standing/Prone Position b. Removing Handcuffs	Pass Pass	Fail Fail
4. Armbars/Wristlocks a. Transport Wristlock b. Transport Wristlock Takedown to Handcuffs c. Straight Arm bar d. Straight Arm bar Takedown to Handcuffs	Pass Pass Pass Pass	Fail Fail Fail
5. Weapon Retention Drillsa. Holsteredb. Un-holsteredc. Stripping Weapon from Subject	Pass Pass Pass	Fail Fail Fail
6. Oleoresin Capsicum (OC) a. Nomenclature b. Spray Patterns i. Balance/Movement/Verbal Commands/Control ii. Up/Down iii. Side to Side iv. Circular	Pass Pass Pass Pass	Fail Fail Fail Fail Fail
c. Decon Process	1 01000	1 6411

7. ASP Baton

a.	Balance/Movement/Verbalization/Technique/Targeting	Dans	Eatl
b.	Ready Position		Fail
C.	Closed Mode Weapon Strike	Pass)	Fail
d.	Closed Mode Reaction Strike	7933	Fail
e.	Closed Mode Straight Strike	Pass	Fail
f.	Closed Made Wester (2)	Pass	Fail
	Closed Mode Weapon/Reaction/Straight Strike	Pass	Fail
g.	Opening the ASP Baton	Pass	Fail
h.	Open Mode Weapon Strike	(9-700)	Fail
i.	Open Mode Reaction Strike	1 433	
1.	Open Mode Straight Strike	ass	Fail
le	Open Mode Wesser (D	Pass)	Fail
1	Open Mode Weapon/Reaction/Straight Strike	Pass	Fail
1.	Closing the ASP Baton/Transitioning to baton holster	Pass	Fail
m.	Emergency Open Strike/Closing baton/holster	Pass	Fail

If an Officer cannot close their baton, a recommendation needs to be forwarded to their Supervisor that an ASP Talon baton be issued to that Officer

8.	Scenario	Based	Training
----	----------	-------	----------

- a. Patient Wanding
- b. Code Violet
- c. Patient Restraint
- d. Combative Patient Restraint
- e. Pink Slip Patient
- f. Suspicious Person(s)
- g. Domestic Dispute
- h. Elopement
- i. Juvenile Patient Elopement via Parent/Guardian
- j. GSW Patient
- k. Property Search
- I. Discharged Patient Refusing to Leave
- m. Criminal Trespass

-	
Pass	Fai
Pass	Fai
(Pass')	Fail
Pass	Fail
(Pass')	Fail
Pass	Fail
Pass	Fail
(Pass)	Fail
(Pass)	Fail
(Pass)	Fail
Pass	Fail
Pass	Fail
Pass	Fail

Grading Scale:

Passing = performs w/out prompting

Failed = needs prompting / repeated instruction, or cannot perform task

Instructors Signature and ID Number:

Instructors Signature and ID Number:

Mount Carmel Health System Competency Assessment Safety & Security Safety & Security Officer

Associate Name:	ID Number:	Job Title:	
Associate Name.	ib indiliber.		,
		Hrmed	Security of
			2000.
☐ High Risk ☐ Low Volume ☐	Problem Prone New	Equipment/Service Pro	cess Change
	CARING COMPONENT		ooo onungo
Demonstrates service excellence behavior			
	WLEDGE AND SKILL COM	ADONENTS:	
Effective in patrol techniques, communication			ning assist calls
Knowledge of location of Security sensitive		migricus amig, custonia, acor ope	iningo, acolot cans.
Enforces policies & procedures			
Completes accurate incident report docume	entation/investigation and fol	low-ups as appropriate	
Completes accurate activity logs			
Ability to apply clinical restraints and assista	ance		
Ability to work independently			
Completes timely fire drills and critiques			
Understands ILSM protocols			
Ability to turn off Med Gas per policy			
Workplace Violence policy knowledge			
Ability to process visitors after-hours or as r			
Ability to lock and unlock facility (includes L			
Management of Aggressive Behavior and d			
Understands Safe Medical Device Act response	onsibilities		
Helicopter operations- Safety duties			
Discernment of sentinel events-notification			
Knowledge of Emergency Codes and secur		Code Adam, Code Orange, et	c).
Follows the department uniform and dress of			
Disseminates pertinent info (pass on book,	memo, reports, BOLO)		
Understands Forensic responsibilities			
Understands role and actions- VIP/Media e			
Officer can articulate use of force and demo		e use of defensive weapons: A	SP & Pepper Spray
and law enforcement restraints: (i.e. handcu		the sale and staff as a second staff	
Officer demonstrates the ability to co-opera		irtments, and starr as appropria	ie .
Officer has a basic understanding of the Na Officer demonstrates proper telephone etique			
Officer demonstrates proper telephone education of the community of the co		interference	
Officer is knowledgeable of all security alarm			
Officer conducts proper patient valuables re		ery (partie, irriant, etc).	
Morgue procedures (MCSA only)	ceiving and returning		
Traffic ingress/egress control- normal and e	mergency (i.e. emergency r	nom areas)	
The officer has demonstrated the proper use			dinguishers are
used for.	5 of 1 inc Extinguisher and Ki	lows where and what it type ex	unguishers are
Officer knows the Emergency Procedures for	or handling Hazardous Mate	rials (chemical asbestos etc) a	and security
response.		(5/10/1/104/, 40500000, 000)	and cooding
Officer understands their role in the incident	command structure (HICS)		
Understanding of response to elevator malf			
Proper PPE use- Infectious, Chemical, Nois		precautions- chemical protection	n)
MRI Safety			
Role in Bomb Threat- search techniques/sta	iging		
Knowledge of Burn Permit process			

Understands Pr	roperty Search policy and role
Suicide precaut	tions/assessment
Proper lifting/bo	ody mechanics
Pediatric; (I yea	
Needs to involv	re parents if possible:
 Provide 	e privacy as appropriate.
Ailow c	hild to exercise some control.
	at eye level maintaining eye contact
 Uses di 	rect approach with child, giving one direction at a time.
Allows choice w	hen possible.
Adolescent: (13	-17 years)
	nize that this age group:
	to be called by name or preferred name.
	e privacy/modesty
Allows	choice when possible, and encourages verbalization of concerns and fears.
 Tells pa 	atients behaviors that are permitted.
Watche	es for body language and cue for feelings.
Speaks	s directly to patient in simple medical terms.
 Concer 	ns and fears.
Geriatric: (65+)	
	o establish that the patient is wearing glasses, hearing aids, or may have memory loss and recognizes the
tools tha	at are needed for effective communications during interviews and investigations.
 Does n 	ot shout at patients, speak slowly and distinctly.
 Does no 	ot rush patient, gives them time to process information.
 Repeats 	s instructions several times.
	one item at a time.
	transferring patient under direction of a Registered Nurse.
	privacy/modesty
Adult (18-64 yea	
	tient by preferred name.
	hoices when possible
	s for privacy/modesty
	s patient right to make informed decisions.
	n relinquishing valuables
	s body language as cue for feelings.
Interview	vs patient in a calm, reassuring manner concerning lost articles.
Assists i	n controlling confused patient.
Knowledge of Au	utomated External Defibrillator (AED) –location and use
Able to act appro	opriately in an emergent or sentinel type of event
	METHOD OF COMPETENCY VALIDATION:
Return Demon	
1	U WOTHLOTS/AUGIES
Observation of	
Post Test	□ Case Study
Mock Event/Sir	mulation Discussion Group
	idated By: (Signature and credentials) Washington Date 3/12/20
evelopmental N	leeds identified: (See Performance Evaluation for related goals)
secoloto Sianat	
ssociate Signati	- Managor Olgriature
:vidence Based	References/Resources (if applicable):

Mount Carmel Health System Competency Assessment Safety & Security STRAIGHT BATON/O.C. REPEL

DEFENSIVE TACTICS/HANDCUFFING/STRAIGHT BATON/O.C. REPELLANT/DE-ESCALATION/RESTRAINTS

DEFENSIVE TACTICS/HANDCOFFINGIS	TRAIGHT BATOMO.C. RE	FELLAN IDE-ESCALATIONINES INAINTS
Associate Name:	ID Number:	Job Title:
	No.	
		Starity
	_	
☐ High Risk ☐ Low Volume ☐ P		quipment/Service Process Change
	CARING COMPONENTS	:
Demonstrates service excellence behavior		
	LEDGE AND SKILL COMP	ONENTS:
ABILITY TO EXPLAIN THE USE OF FORCE		
ABILITY TO PERFORM BALANCE DISPLAC		R
ABILITY TO PERFORM BALANCE DISPLAC		
ABILITY TO PERFORM BALANCE DISPLAC		
ABILITY TO PERFORM A TRANSPORT WRI		
ABILITY TO PERFROM A TRANSPORT WRI		
ABILITY TO PERFORM A STRAIGHT ARM B		
ABILITY TO PERFORM A STRAIGHT ARM B		NDCUFFING '
ABILITY TO USE HANDCUFFS IN THE STAN		
ABILITY TO USE HANDCUFFS FROM THE	MEELING POSITION	
ABILITY TO REMOVE HANDCUFFS ABILITY TO UNDERSTAND WHEN TO PLACE	E HANDCHEES ON SLIB II	ECT
ABILITY TO UNDERSTAND WHEN TO PLACE ABILITY TO PERFORM WEAPON RETENTION		ECT
ABILITY TO PERFORM WEAPON RETENTION		SITION
ABILITY TO PERFORM WEAPON RETENTA		
ABILITY TO PERFORM THE USE OF STRAI		
ABILITY TO PERFORM THE USE OF STRAI		
ABILITY TO PERFORM THE USE OF STRAI		
ABILITY TO PERFORM THE USE OF STRAI		
ABILITY TO PERFORM THE USE OF STRAI		
ABILITY TO CLOSE THE BATON FROM THE		DAORITAND OTRINE
ABILITY TO CLOSE THE BATON FROM THE		
ABILITY TO OPEN AND USE THE BATON F)N
ABILITY TO EXPLAIN WHEN TO USE BATO		
ABILITY TO EXPLAIN WHAT O.C. STANDS		
ABILITY TO EXPLAIN WHEN TO USE O.C.		
ABILITY TO EXPLAIN WHEN NOT TO USE O	D.C.	
ABILITY TO EXPLAIN WHETHER TO USE O		
ABILTY TO EXPLAIN THE EFFECTS OF O.C.		
ABILITY TO EXPLAIN THE DECONTAMINAT		
ABILITY TO VERBALLY DE-ESCALATE (CIT		BEHAVIOR TRAINING)
ABILITY TO APPLY RESTRAINTS		
ABILITY TO POSITION PATIENT ON THE BI	ED/CART	
ABILITY TO LOOP THE CONNECTING STR	AP AROUND THE BED FRA	AME
ABILITY TO PLACE THE PROPER COLORE	D CUFF ON THE PROPER	LIMB (BLUE FOR WRISTS/RED FOR
ANKLES, LOCKING)		
ABILITY TO PASS TWO FINGERS BETWEE		ATIENTS WRIST/ANKLE
ABILITY TO PASS DT TRAINING SCENARIO	S ANNUALLY	
 Able to act appropriately in an emergent of 	r sentinel type of event	

,	METHOD OF	COMPETENCY VALIDATION:		
Return Demonstration		☐ QI Monitors/Audits		
☐ Observation of Daily Work		☐ Peer Review		
Post Test		☐ Case Study		
□ Mock Event/Simulation		☐ Discussion Group		
Competency Validated By: (Sign		Glas Paulin	Date 3/6/20	
Developmental Needs identified	: (See Performance E	Evaluation for related goals)		
Associate Signature	Date	Instructor(s) Signature	Date	
Evidence Based References/Re	esources (if applicable):			_



A MEMBER OF 🍪 TRINITY HEALTH

Safety and Security Defensive Tactics / OC Repellant / ASP Baton Competency Form

Students Name (print):		
I.D. Number:		
Date: 3/5/20		
Campus: sr. Anns		
1. Escort Position	Pass	Fail
2. Balance Displacement		
a. At the shoulder	Pass	Fail
b. Friction on the back	(Pass)	Fail
c. At the hip	Pass	Fail
3. Handcuffing		
a. Standing/Prone Position	(Pass)	Fail
b. Removing Handcuffs	Pass	Fail
4. Armbars/Wristlocks		
a. Transport Wristlock	(Pass)	Fail
 b. Transport Wristlock Takedown to Handcuffs 	Pass	Fail
c. Straight Arm bar	Pass	Fail
d. Straight Arm bar Takedown to Handcuffs	Pass	Fail
5. Weapon Retention Drills		
a. Holstered	Pass	Fail
b. Un-holstered	Pass	Fail
c. Stripping Weapon from Subject	Pass	Fail
6. Oleoresin Capsicum (OC)		
a. Nomenclature	(Pass)	Fail
b. Spray Patterns		
i. Balance/Movement/Verbal Commands/Control	Pass	Fail
ii. Up/Down	(Pass)	Fail
iii. Side to Side	Pass	Fail
iv. Circular	Pass	Fail
c. Decon Process	(Pass)	Fail

7. ASP Baton a. Balance/Movement/Verbalization/Technique/Targeting (Pass Fail b. Ready Position Fail Pass c. Closed Mode Weapon Strike Fail d. Closed Mode Reaction Strike Fail e. Closed Mode Straight Strike Fail f. Closed Mode Weapon/Reaction/Straight Strike Fail ass g. Opening the ASP Baton Pass Fail h. Open Mode Weapon Strike Pass) Fail i. Open Mode Reaction Strike (Pass) Fail j. Open Mode Straight Strike Pass Fail k. Open Mode Weapon/Reaction/Straight Strike Pass Fail I. Closing the ASP Baton/Transitioning to baton holster Pass Fail m. Emergency Open Strike/Closing baton/holster

If an Officer cannot close their baton, a recommendation needs to be forwarded to their Supervisor that an ASP Talon baton be issued to that Officer

Pass

Fail

Fail

Fail

Fail

Fail

8.	Scenario Based Training		
	a. Patient Wanding	Page	Fail
	b. Code Violet	Pass	Fail
	c. Patient Restraint	Pass	Fail
	d. Combative Patient Restraint	17259	Fail
	e. Pink Slip Patient	Pass	Fail
	f. Suspicious Person(s)	Pass	Fail
	g. Domestic Dispute	Pass	Fail
	h. Elopement	Pass	Fail
	i. Juvenile Patient Elopement via Parent/Guardian	Pass	Fail
	j. GSW Patient	Page	Eail

Grading Scale: Passing = performs w/out prompting

I. Discharged Patient Refusing to Leave

k. Property Search

m. Criminal Trespass

Failed = needs prompting / repeated instruction, or cannot perform task

Student Signature and ID Number: Instructors Signature and ID Number: Instructors Signature and ID Number:



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ASP Basic Certification (ABC)

EXPANDABLE BATON TRAINING

Information Sheet

(Please Print)		Date 3/6/20
☐ Initial Certification	☑ Recertification	
First Name	Last Name	
Home Address	Last Name	
City Lancaster	State <u>ohio</u> Province	7in 43/20
Telephone	E-mail Address	
relepitorie	E-mail Address	
Employing Agonay Mt Cons	nel st. Ann's	
Agency Address Coo S. Clar	veland Ave	
	State Province	
	State Sylvince Frounce E-mail Address	
Agency relephone (30) 2787	E-mail Address	
Duty Status: Full Duty Restrict	ted Duty	
	I the use of the ASP Baton?	
How many officers are in your agency?		
Holph A '4 Wolcht 2 /2 5	Age	2/2/
Have you been exercising?	problems? <u>リ</u> ンジ	
	/	
Are you on any medication?		
Person to be notified in case of emerge Name Phone Relationship (12) RC	Alternate ()	Injury Check: ☑ 1A 🗹 1F
Briefly describe any health problems: 1	Torn Miniscus Rtknee	injury check. Light 21 in
	WAIVER	
Re	elease from Liability and Assumption of Risk Agreement	
forever discharge Armament Systems and Production and assigns, of and from any and all claims, deany and all known and unknown, foreseen and all ASP Expandable Baton certification training and the state of the second state of	a) I am presently in good physical and mental health; (b) I ware of, and do acknowledge and assume all risk of injury	irs, executors, administrators, successors and nature, arising from, and by reason on the street, suffered by me during any and have no reason to believe that I am not in
	sed. Mere participation does not automatically assu	re successful completion.
7/1/20		
5/0/10 Date	-	

ASP Basic Certification

WRITTEN EXAMINATION

- 1. A defensive tactic is evaluated by it's ability to:
 - (a) Control v Injure
 - Maim v Destroy
 - Threaten v Control
 - React v Act
 - Demonstrate the Officers skill
- 2. The primary striking surface of an open ASP Baton is the:
 - a. Cap
 - b. Center of the shaft
 - Last 3" of the baton First joint
 - e. Handle
- 3. The hand using the service firearm is the:
 - a. Weak hànd
 - b. Contact hand
 - Weapon hand
 - Reaction hand
 - e. Support hand
- The ASP baton should not be opened:
 - a. To the sky
 - To the ground b.
 - During a strike
 - To the side
 - e. Towards the threat
- 5. The two baton modes are:
 - Open and Closed
 - **b**. Interview and Combat
 - c. Weapon and Reaction
 - Concealed and Loaded
 - Ready and Extended
- 6. Which is not an ASP target area:
 - a. Center mass of the arms
 - b. Center mass of the legs
 - Center mass of the body
 - **Groin or Sternum**
 - e. The Weapon Delivery System
- 7. Targeting specific points violates which training principle:
 - Forgiving techniques
 - Fine motor skills
 - Spaced practice
 - d. Static training
 - Complex techniques

- 8. The ASP baton is always carried:
 - On the right side a.
 - In the front b.
 - c. On the reaction side
 - Tip down
 - Left side e.
- 9. The Reaction Strike is primarily a:
 - Strong strike a.
 - Closed strike
 - Clearance strike
 - Offensive strike
 - Initial strike
- 10. The most frequently used ASP strike is the:
 - Reaction strike
 - Weapon strike
 - Straight strike
 - Clearance strike
 - Reverse strike
- 11. When performing an Open Straight Strike, the Reaction Hand is:
 - Palm up on the shaft
 - b. Maintaining distance
 - Guarding the face
 - Palm down gripping the shaft
 - **Executing a downward block**
- 12. If the baton opens too easily:
 - a. Make the retaining clip smaller
 - Replace the o-ring
 - Widen the retaining clip
 - Remove the retaining clip
 - Lubricate the baton
- 13. The most common problem in opening the baton is:
 - a. Grip of the baton
 - b. Loose o-ring
 - Broken retaining clip
 - Operator error
 - Loose handle cap
- 14. Special Circumstances include:
 - a. Age
 - b. Size
 - Weapon proximity
 - Skill level
 - **Mutiple Officers**

	perform	ed at a:			
	(a)	45 degree angle			
	Ъ.	180 degree angle			
	c.	Horizontal angle			
	d.	90 degree angle			
	e.	Vertical angle			
16.	When st	iking the ASP Baton is gripped w	ith:		
	a.	The index finger and thumb		8	
	b.	A loose flexible grip			
	c.	Two fingers and the thumb			
	(Full hand grip			
	e.	Both hands			
17.	Officer/S	ubject factors include:			
	a.	Special knowledge			
	b.	Imminent danger			
	ج	Injury or exhaustion			
	(d)	Size			
	e.	Officer on the ground			
18.	If the su	bject complies, the Officer doesn	't not		
	advance				
	@	True			
	b.	False			
19.	The ASP	Baton is designed to be			
		An offensive weapon			
	b.	A comealong device			
	(c.)	A defensive weapon			
	ď.	A deadly force option			
	⁻⁻e.	A restraining device			
20.	The prin	ciple goal of any arrest or physic	al		
		tation is:			
	(a)	Establishing control			
×	\ ∀ .	Superior Officer skill			
	c.	Subject safety			
	d.	Documentation			
	e.	Punishment			
	-	- 11 -	880		
Gradeo	d By: 🕒	Jennifer Hastir	195		
		\wedge	9		
ASP W	ritten E	kam:// Pass 🗸 /	ail	5	
		WIND Tour	/		
Instruc	ctor:	May / My			
-	316	12020			
Date: _	014	Tacac .			

15. ASP Weapon Side Strikes are intended to be

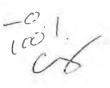
Baton Basic Certification

TECHNIQUE PROFICIENCY CHECKLIST

1) Cneck:	Pass: _//	Fail:
2) Redirection:	Pass:	Fail:
3) Closed Mode Weapon Strike	Pass:	Fail:
4) Closed Mode Reaction Strike	Pass:	Fail:
5) Closed Mode Straight Strike	Pass:	Fail:
6) Opening the Baton	Pass:	Fail:
7) Open Mode Weapon Strike	Pass:	Fail:
8) Open Mode Reaction Strike	Pass:	Fail:
9) Open Mode Straight Strike	Pass:	Fail:
10) Closing the Baton	Pass:	Fail:
TECHNIQUE PROFICIENCY	PASS: <u></u>	FAIL:
COUNSELED:		
CERTIFICATION APPROVED:	CERTIFICATION DENIES	D:
INSTRUCTOR: May Tuym	D-41164	
DATE: 2/1/20		

3/4/20 mi. Cormel St Ann

OC Test Mount Carmel Health System Safety and Security

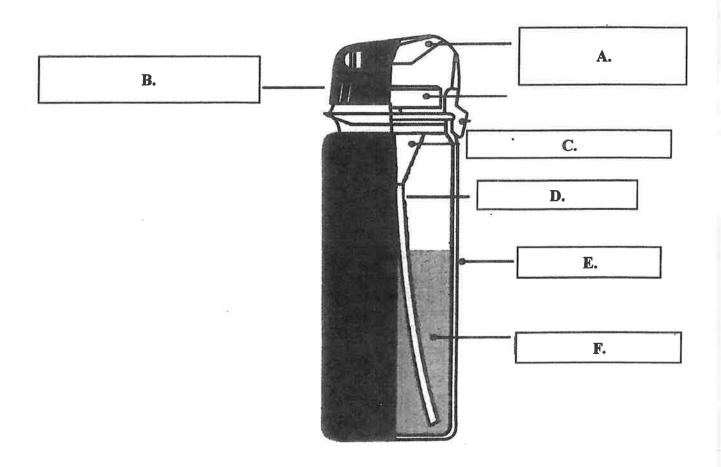


- 1.) What does OC stand for?
 - **Orange Crush** A.
 - B. Ocean Crust
 - **3**. Oleoresin Capsicum
- 2.) What is the average expiration date on an OC canister?
 - 1-2 years
 - B. 3-4 years
 - C. 4-5 years
- How often should you check your OC spray for adequate spray strength? 3.)
 - A. 30 days
 - **B.** 60 days
 - (C) 90 days
- 4.) How long of a burst should you use on a threat?
 - A B. 1-2 seconds
 - 2-4 seconds
 - C. Empty the entire can
- 5.) What is Oleoresin Capsicum commonly known as?
 - Mace A.
 - B) Pepper Spray
- **6.)** When deploying OC, what area of the body should you deploy the OC towards?
 - A. Arms
 - Chest **B**.
 - Face and eyes
- 7.) After using OC on a subject, what should you immediately do with the subject?
 - A. Leave lying on the ground.
 - Remove from contaminated area
 - Spray again

· 8.)	Wh A. B.	at is the second step in the decontamination process? Spray them again Tell them to stop crying like a baby Offer verbal rapport to the subject
9.)	What B. C.	at is the third step of the decontamination process? Expose subject to fresh air Throw the subject a bottle of water Stand there and record them with your cellphone
10.)	What A. B.	at is the best way to flush the eyes? Using milk Rubbing eyes continually Water
11.)	Wha A. B.	of type of agent is OC? Glue Cleaning Fluid Inflammatory
12.)	Wha A. B) C.	t is the main ingredient of OC? Water Cayenne Pepper Powder
13.)	Does OC t A. B. C.	CMS (Center for Medicaid/Medicare System) guidelines allow for o be used on a PATIENT? Yes No Only if they deserve it.
14.)	List t	he nomenclature of a canister of OC
	A.	This top
	В.	Acutator Morrel
	C.	Value Assembly
	D.	Tube
	E.	Conister
	F.	Formulation

.

€ *



Name:

Campus: 51.1+nn

Date: 3/6/20

HANDCUFFING TEST

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
 - D.) ALL OF THE ABOVE
 - (E) BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?

A.)TRUE

- B)FALSE
- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - (3.) SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?

A.) TRUE

(B) FALSE

Mount Carmel Health System Competency Assessment Safety & Security

DEFENSIVE TACTICS/HANDCUFFING/STRAIGHT BATON/O.C. REPELLANT/DE-ESCALATION/RESTRAINTS Associate Name: ID Number: Job Title: Sccurin €High Risk €Low Volume €Problem Prone € New Equipment/Service €Process Change CARING COMPONENTS: Demonstrates service excellence behavior KNOWLEDGE AND SKILL COMPONENTS: ABILITY TO EXPLAIN THE USE OF FORCE CONTINUUM ABILITY TO PERFORM BALANCE DISPLACEMENT AT THE HIP ABILITY TO PERFORM BALANCE DISPLACEMENT ON THE BACK ABILITY TO PERFORM BALANCE DISPLACEMENT AT THE SHOULDER ABILITY TO PERFORM A TRANSPORT WRIST LOCK TO BOTH THE RIGHT AND LEFT SIDE ABILITY TO PERFORM A STRAIGHT ARM BAR TO BOTH THE RIGHT AND LEFT SIDE ABILITY TO USE HANDCUFFS IN THE STANDING METHOD ABILITY TO USE HANDCUFFS FROM THE KNEELING POSITION ABILITY TO REMOVE HANDCUFFS ABILITY TO UNDERSTAND WHEN TO PLACE HANDCUFFS ON SUBJECT ABILITY TO PERFORM SEPERATION FROM SUBJECT GRABBING ABILITY TO PERFORM PEELING OF THE HAND(S) OF SUBJECT DURING A GRAB ABILITY TO PERFORM SEPERATION FROM A FINGER JAB ABILITY TO PERFORM PEELING OF FINGER(S)/HAND(S) DURING A FINGER JAB ABILITY TO PERFORM A SCARF POSITION ON SUBJECT ABILITY TO PERFORM A SIT OUT MANEUVER DURING THE SCARF ABILITY TO PERFORM A MOUNT POSITION ON A SUBJECT ABILITY TO MAINTAIN CONTROL OF SUBJECT WHILE IN THE MOUNTED POSITION ABILITY TO ESCAPE A MOUNT POSITION FROM A SUBJECT ABILITY TO PERFORM A GUARD POSITION ON A SUBJECT ABILITY TO ESCAPE A GUARD POSITION FROM A SUBJECT ABILITY TO PERFORM WEAPON RETENTION FROM THE HOLSTER ABILITY TO PERFORM WEAPON RETENTION FROM SHOOTING POSITION ABILITY TO PERFORM WEAPON STRIP FROM SUBJECT IN SHOOTING POSITION ABILITY TO PERFORM THE USE OF STRAIGHT BATON FROM THE FIELD INTERVIEW STANCE ABILITY TO PERFORM THE USE OF STRAIGHT BATON FRON THE READY STANCE ABILITY TO PERFORM THE USE OF STRAIGHT BATON USING THE FORWARD FLUID SHOCKWAVE STRIKE ABILITY TO PERFORM THE USE OF STRAIGHT BATON USING THE FORWARD CUTTING STRIKE ABILITY TO PERFORM THE USE OF STRAIGHT BATON USING THE BACKHAND STRIKE ABILITY TO CLOSE THE BATON FROM THE STANDING POSITION ABILITY TO CLOSE THE BATON FROM THE KNEELING POSITION ABILITY TO OPEN AND USE THE BATON FROM THE CRISIS POSITION ABILITY TO EXPLAIN WHEN TO USE STRAIGHT BATON AND WHEN NOT TO USE STRAIGHT BATON ABILITY TO EXPLAIN WHAT O.C. STANDS FOR ABILITY TO EXPLAIN WHEN TO USE O.C. ABILITY TO EXPLAIN WHEN NOT TO USE O.C. ABILITY TO EXPLAIN WHETHER TO USE O.C. ON A PATIENT OR NOT ABILTY TO EXPLAIN THE EFFECTS OF O.C. ON A SUBJECT ABILITY TO EXPLAIN THE DECONTAMINATION PROCEDURES ABILITY TO VERBALLY DE-ESCALATE (CIT TRAINING/AGGRESSIVE BEHAVIOR TRAINING) ABILITY TO APPLY RESTRAINTS ABILITY TO POSITION PATIENT ON THE BED/CART

ABILITY TO LOOP THE CONNECTING STRAF	AROUND THE BED FRAME
ABILITY TO PLACE THE PROPER COLORED	CUFF ON THE PROPER LIMB (BLUE FOR WRISTS/RED FOR
ANKLES LOCKING)	
ABILITY TO PASS ONE FINGER BETWEEN T	HE RESTRAINT AND PATIENTS WRIST/ANKLE
ABILITY TO PLACE PATIENT INTO POSEY VI	EST
ABILITY TO SECURE POSEY VEST STRAPS	TO THE BED FRAME
ABILITY TO PASS DT TRAINING SCENARIOS	ANNUALLY
Able to act appropriately in an emergent or	sentinei type of event
METHOD	OF COMPETENCY VALIDATION:
€ Return Demonstration	€ QI Monitors/Audits
€ Observation of Daily Work	€ Peer Review
-	€ Case Study
€ Post Test	
€ Mock Event/Simulation	
Competency Validated By: (Signature and credential Developmental Needs identified: (See Performance)	
Developmental Needs Identified. (See Perform	and Lyaidation for folding goals)
Associate Signature Date	
Evidence Based References/Resources (if applic	able):

Competency Form

	Sompotonioy i on in			
STUDENTS	NAME: INSTRUCTORS:	Cha	di	Taylo
		11		
		1.0//	14	1
		U"	Low	Van.
JOINT	LOCKS	1	uy	10
1. BAI	LANCE DISPLACEMENT TECHNIQUE			
(At the hip)		8		
a.	Starts from Escort Position	(3)	Α	F
b.	Starts from Escort Position Removes hand from Triceps and places it on rear waist of suspect Presses hand forward and downward, displacing balance	ct (S)	Α	Ę
d.	Suspect steps in desired direction	8	A	F F F
Comments:				
(Friction on	the Back)			
`a.	Starts from Escort Position	6	Α	F
b.	Places hand in the middle of suspect's back and presses forward	(\$)	A A A	F
C.	Moves hand in random manner, forcing steps in desired direction	(3)	Α	F
Comments:				
(Random M	otion at the Shoulder)	_		
•	Starts from the Escort Position	(Α	F
	Continually moves suspect's arm in a random manner	(3)	A	F
c.	Suspect is off balance and moves in desired direction	3	Α	F
Comments:				
	SPORT WRIST LOCK	0		
e.	Elbow tucked between arm and body	(S)	Δ	E

f. Forearm elevation

Comments:

g. Wrist hyperextensionh. To the ground

3.	 i. Decentralize the center of gravity j. Maintain control over subject's arm k. Maintained balance while lowering center for takedown l. To the ground m. Control for handcuffing procedure 	<u> </u>	A A A A	
Comn	nents:			
HA	NDCUFFING			
4.	 a. Approach is from rear b. Simultaneous Control at application, thumb lock/cuff push c. Position maintained with the flip under technique d. Second cuff applied without loss of control 	<u>@</u>	A A A	F F F
Comm	ents:	_		
5.	 TAKEDOWN FROM KNEELING POSITION e. All slack is removed from cuffed hand f. Decentralized towards the 2.5 position g. Iron wrist lock is applied simultaneously with decentralized pull h. Straight arm applied after proning the target i. Second cuff applied without loss of control 	(S)	A A A	F F F F
Comm	ents:			
6.	 a. Officer Instructs suspect he is going to be de-cuffed b. Suspect is told to leave uncuffed hand on his hip c. Open handcuff closed immediately and put in weak hand d. Officer steps to rear 45 degrees while holding cuff at arms length e. Second cuff is removed 	<u>@@@@@</u>	A A A A	F F F F

Defensive Counter Manuevers

7. GRABBING

- a. Seperation
- b. Verbal Commands
- c. Peeling the hand(s)
 - 1. Outside/In
 - 2. Inside/Out



A F A F

F

F

Comments:

8. FINGER POKES

a. Seperation

Comments:

- b. Verbal Commands
- c. Peeling the fingers/hands
- d. Second Responding Officer Action



.

\ F

A F

Ground Techniques

9. Scarf Position (Left/Right)

- a. From the side/cross mount position
- b. Perform a sit out maneuver
- c. Right leg ends at 10 o'clock position
- d. Keep hips off of the ground
- e. Left foot is at 8 o'clock position
- f. Right arm around subjects neck/head
- g. Left arm and hand secures subjects arm
- h. Pin your chest to subjects chest



4 F

A F

Α F

A F

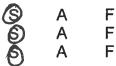
A F

4

Comments:

Mounted Position 10.

- a. Knees slide up
- b, Feet are used to feel where hips c. Moving to control positions



mments:				

Grading Scale:

S = Satisfactory (performs w/out prompting)

A = Acceptable (performs with minimal prompting)
F = Failed (needs prompting / repeated instruction, or can not perform task)



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ASP Basic Certification (ABC) EXPANDABLE BATON TRAINING

Information Sheet

(Please Print)		Date(2- /7 -/8
☐ Initial Certification	☐ Recertification	
First Name Dexter		
Home Address	Last Name Tosay	
City Reynadeburg	State (2// D :	
Telephone	State <u>U/</u> Province	Zip 4/3068
	E-mail Address	and the same of th
Employing Agency Mount Carne	(St Ann's	
Agency Address 500 5 Cleveland	T Man 2	
City WasterVIIIe	State OV Province	- //
Agency Telephone (380) 898-4	E-mail Address	Zip_43081
, , , , , , , , , , , , , , , , , , , ,	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Duty Status: Trull Duty Restrict	ted Duty	
Has your agency adopted or authorized	the use of the ASP Baton? V/45	
How many officers are in your agency?	//	
Height Weight/95	Age 36 Date of Birth 7-/4	4-82
Have you been exercising?		
Do you have any knee, back or health pr	roblems? No	
Are you on any medication?		
Person to be notified in case of emerger Name Latia Ogaler Phone Relationship Ginthe	Alternate ()	1-
Briefly describe any health problems:		Injury Check: 1A 1P
	WAIVER	
Rele	ease from Liability and Assumption of Risk Agreement	
Intending that this Agreement be legally forever discharge Armament Systems and Proceed and assigns, of and from any and all claims, demany and all known and unknown, foreseen and untall ASP Expandable Baton certification training actions are signing this Belease Lassert that (a).	y binding upon me, my heirs, executors, administrators, dures, INC, and all of their agents, representatives, he ands, rights and causes of action of whatsoever kind a foreseen physical and mental injuries and consequence livities. I am presently in good physical and mental health; (b) I am present of and do acknowledge and and mental health; (b) I	irs, executors, administrators, successors and nature, arising from, and by reason of es thereof, suffered by me during any and
	d. Mere participation does not automatically assur	
12-17-18	Donto Juy	
Date	Signed	

Baton Basic Certification WRITTEN EXAMINATION

For each question below, circle the option that is the <u>most</u> correct.

1	A defensive tactic is evaluated by its ability to:	The ASP Baton is always carried: On the right side	 ASP Weapon Side Strikes are intended to be performed at a:
	Control v Injure	b) In the front	(a) 45 degree angle
	b) Maim v Destroy	c) On the Reaction Side	b) 180 degree angle
	c) Threaten v Control	n Tip down	c) Horizontal angle
	d) React v Act	Tip down On the left side	d) 90 degree angle
	e) Demonstrate the officer's	.,	e) Vertical angle
	skill	9. The Reaction Strike is primarily a:	-,
		a) Strong strike	16. When striking, the ASP Baton is gripped
2.	2. The primary striking surface of an	b) Closed strike	with:
	open ASP Baton is the:	Clearance strike	a) The index finger and thumb
	a) Cap	d) Offensive strike	b) A loose flexible grip
	b) Center of the shaft	e) Initial strike	c) Two fingers and the thumb
	Last 3" of the baton	e) muai suike	Full hand grip
	d) First joint	10. The most frequently used ASP	e) Both hands
	e) Handle	strike is the:	e) Both nands
		a) Reaction Strike	Special circumstances do not
3.	 The hand using the service firearm is 	Weapon Strike	include:
	the:	c) Straight Strike	 a) Special knowledge
	a) Weak Hand	d) Clearance Strike	b) Imminent danger
	b) Contact Hand	e) Reverse Strike	c) Injury or exhaustion
	(C) Weapon Hand	•	6 Size
	Weapon Hand Reaction Hand	11. When performing an Open Straight	e) Officer on the ground
	e) Support Hand	Strike, the Reaction Hand is:	5,
		 a) Palm up on the shaft 	Safety is the ultimate responsibility
4.	. The ASP Baton should not be	 b) Maintaining distance 	of the:
	opened:	c) Guarding the face	a) Student
	a) To the sky	Palm down gripping the	b) Training partner
	b) To the ground	shaft	c) Course coordinator
	c) During a strike	 e) Executing a downward block 	instructor
	To the side		e) Administrative officer
	e) Towards the threat	If the baton opens too easily:	•
		 a) Make the retaining clip 	The ASP Baton is designed to be:
5.	The two baton modes are:	smaller	a) An offensive weapon
	Open and Closed	 b) Replace the o-ring 	b) A comealong device
	 b) Interview and Combat 	Widen the retaining clip	
	c) Weapon and Reaction	d) Remove the retaining clip	A defensive weapon d) A deadly force option
	d) Concealed and Loaded	e) Lubricate the baton	e) A restraining device
	e) Ready and Extended	•	-,
		13. The most common problem in	20. The principle goal of any arrest or
3.	Which is not an ASP Target area:	opening the baton is:	physical confrontation is:
	 a) Center mass of the arms 	a) Grip of the baton	Establishing control
	b) Center mass of the legs	b) Loose o-ring	b) Superior officer skill
	c) Center mass of the body	c) Broken retaining clip	c) Subject safety
	Groin or sternum	Operator error	d) Documentation
	e) The Weapon Delivery System	e) Loose handle cap	e) Punishment
		14. Officer-Subject Factors do not	
' .	Targeting specific points violates	include:	
	which training principle:	a) Age	
	Forgiving techniques	b) Size	
	b) Fine motor skills	Weapon proximity	
	c) Spaced practice	A Skill level	
	d) Static training	e) Multiple officers	
	e) Complex techniques	54	
	•		
	E	h assertion is small for (5)	
	Eac	h question is worth five (5) points	

Each question is worth five (5) points.

The minimum acceptable score is 80% (16 correct).

FINAL SCORE: 100/	GRADED BY:		l	
ASP WRITTEN EXAM:	ACCEPTABLE	NOT ACC	EPTABLE	
COUNSELED //	201			
INSTRUCTOR /	Taylor	13-41764	DATE 12/11/2016	5
0	V		1-1	

Baton Basic Certification TECHNIQUE PROFICIENCY CHECKLIST

The following checklist is designed to assist you and the ASP Instructor in evaluating your performance of ASP Techniques. Those components of the technique that are acceptable are checked.

1)	Check Balance Movement Verbalization Technique Target	6) Opening the Baton Balance Movement Verbalization Technique Target
2)	Redirection Balance Movement Verbalization Technique Target	7) Open Mode Weapon Strike Balance Movement Verbalization Technique Angle Target
3)	Closed Mode Weapon Strike Balance Movement Verbalization Technique Angle Target	8) Open Mode Reaction Strike Balance Movement Verbalization Technique Target
4)	Closed Mode Reaction Strike Balance Movement Verbalization Technique Angle Target	9) Open Mode Straight Strike Balance Movement Verbalization Technique Target
5)	Closed Mode Straight Strike Balance Movement Verbalization Technique Target	10) Closing the Baton Balance Movement Technique
	Three of the components n Each technique must have	n acceptable observed action. nust be acceptable for a passing score. a passing score for certification. re is 100% (10 techniques).

WRITTEN EXAMINATION **TECHNIQUE PROFICIENCY CHECKLIST**

COMMENTS:

Certification Approved

Certification Denied INSTRUCTOR

OC Test **Mount Carmel Health System** Safety and Security

- 1.) What does OC stand for?
 - **Orange Crush**
 - B. Ocean Crust
 - 10. Oleoresin Capsicum
- 2.) What is the average expiration date on an OC canister?
 - 1-2 years
 - (B) 3-4 years
 - C. 4-5 years
- 3.) How often should you check your OC spray for adequate spray strength?
 - A. 30 days
 - B. 60 days
 - 90 days
- 4.) How long of a burst should you use on a threat?
 - A. B. 1-2 seconds
 - 2-4 seconds
 - Empty the entire can C.
- 5.) What is Oleoresin Capsicum commonly known as?
 - A. Mace
 - Pepper Spray **B**
 - Č. Gas
- **6.)** When deploying OC, what area of the body should you deploy the OC towards?
 - A. Arms
 - B. Chest
 - Face and eyes
- 7.) After using OC on a subject, what should you immediately do with the subject?
 - Leave lying on the ground. B)
 - Remove from contaminated area
 - C. Spray again

		*1
8.)	Wha	at is the second step in the decontamination process?
	A.	Spray them again
	В.	Tell them to stop crying like a baby
	0.	Offer verbal rapport to the subject
9.)	Wha	t is the third step of the decontamination process?
1 30	A.	Expose subject to fresh air
	B.	Throw the subject a bottle of water
	C.	Stand there and record them with your cellphone
10.)	What	t is the best way to flush the eyes?
	A.	Using milk
	B.	Rubbing eyes continually
	Œ.	Water
11.)	What	type of agent is OC?
	A.	Glue
	В.	Cleaning Fluid
	9	Inflammatory
12.)	What	is the main ingredient of OC?
	A.	Water
	B .	Cayenne Pepper
	C.	Powder
13.)		CMS (Center for Medicaid/Medicare System) guidelines allow for
		be used on a PATIENT?
	A.	Yes
	3 9.	No
	C.	Only if they deserve it.
8		
		· 050

Name: Deuter Jossy
Campus: SA Ann's
Date: 12- 17-18

HANDCUFFING TEST

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
 - D.) ALL OF THE ABOVE
 - E BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?
 - A.)TRUE
 - B)FALSE
- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - S) SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?
 - A.) TRUE
 - (B) FALSE

Charles Charles

Mount Carmel Health System Competency Assessment <u>Safety & Security</u>

DEFENSIVE TAC	CTICS/HANDCUFFING/ST	RAIGHT BATON/O.C	REPELLANT/DE-ESC	ALATION/RESTRAINTS
Associate Name:		ID Number:	Job T	itle:
		A	Sec	curity
				/
☐ High Risk	☐ Low Volume ☐ Pro	oblem Prone 🔲 Ne	w Equipment/Service	☐ Process Change
		CARING COMPONE		
Demonstrates service	e excellence behavior			
		EDGE AND SKILL CO	MPONENTS:	
	N THE USE OF FORCE C			
	RM BALANCE DISPLACE			
	RM BALANCE DISPLACE			
	RM BALANCE DISPLACE			
	RM A TRANSPORT WRIS			JE
	RM A STRAIGHT ARM BA NDCUFFS IN THE STANI		HI AND LEFT SIDE	
	NDCUFFS FROM THE KI			
ABILITY TO REMOV		ALLEHAG I OSHTON		
	STAND WHEN TO PLACE	HANDCUFES ON SI	IBJECT	
	RM SEPERATION FROM			
	RM PEELING OF THE HA			
	RM SEPERATION FROM			
	RM PEELING OF FINGER		A FINGER JAB	
	RM A SCARF POSITION O			
	RM A SIT OUT MANEUVE		RF	
	RM A MOUNT POSITION			
	IN CONTROL OF SUBJEC		UNTED POSITION	
	A MOUNT POSITION FF			
	RM A GUARD POSITION			
	E A GUARD POSITION FR RM WEAPON RETENTION		'n	
	RM WEAPON RETENTION			
	RM WEAPON STRIP FRO			
	RM THE USE OF STRAIG			TANCE
	RM THE USE OF STRAIG			7,1102
	RM THE USE OF STRAIG			OCKWAVE STRIKE
	RM THE USE OF STRAIG			
ABILITY TO PERFOR	RM THE USE OF STRAIG	HT BATON USING TH	E BACKHAND STRIKE	
	THE BATON FROM THE S			
	THE BATON FROM THE I			
	ND USE THE BATON FRO			
	WHEN TO USE STRAIG		N NOT TO USE STRAI	GHT BATON
	WHAT O.C. STANDS FO	DR		
	WHEN TO USE O.C.			
	N WHEN NOT TO USE O.O N WHETHER TO USE O.C		NOT	
	THE EFFECTS OF O.C.		101	
	THE DECONTAMINATION			
	LY DE-ESCALATE (CIT T		/E BEHAVIOR TRAININ	IG)
ABILITY TO APPLY R				-,
	N PATIENT ON THE BED	/CART		

ABILITY TO LOOP THE CONNE	CTING STRAP AROL	IND THE BED FRAME	D MIDIOTO IDED FOR
ABILITY TO PLACE THE PROPE	R COLORED CUFF	ON THE PROPER LIMB (BLUE FO	R WRISTS/RED FOR
ANIZEC LOCKING			
ABILITY TO PASS ONE FINGER	BETWEEN THE RES	STRAINT AND PATIENTS WRISTI	HANCE
ABILITY TO PLACE PATIENT IN	TO POSEY VEST	- BED EBAME	* 1
ABILITY TO SECURE POSEY V	EST STRAPS TO THE	ALLY	
ABILITY TO PASS DT TRAINING Able to act appropriately in an	SCENARIOS ANNO	ALLT	
	METHOD OF CO	OMPETENCY VALIDATION:	
	WETHOD OF C		
Return Demonstration		☐ QI Monitors/Audits	
Observation of Daily Work		☐ Case Study	
□ Post Test		Discussion Group	
Mock Event/Simulation	\cap	b Wisconson 2:22	
Competency Validated By: (Signal	ture and credentials)		Date 10 Nov 17
Developmental Needs identified:	(See Performance E	valuation for related goals)	
			Data
Associate Signature	Date	Instructor(s) Signature	Date
Evidence Based References/Res	sources (if applicable):		

*

Defensive Tactics / Impact Weapon Competency Form

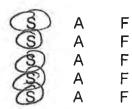
STUDENTS NAME:			INSTRUCTORS:	
OTOBERTO NAME.		-	INSTRUCTORS.	
	Soint Knn &	-		

JOINT LOCKS

1.	BALANCE DISPLACEMENT TECHNIQUE			
(At the hip)				
	Starts from Escort Position	S	Α	F
b.	Removes hand from Triceps and places it on rear waist of suspect Presses hand forward and downward, displacing balance	t(S)	A	F F
		0	Α	F
a.	Suspect steps in desired direction	(3)	Α	F
Comments:				
GOTTIMOTICO.				
(Friction on	the Back)			
	Starts from Escort Position	(6)	٨	_
	Places hand in the middle of suspect's back and presses forward	8	Ä	F
c.	Moves hand in random manner, forcing steps in desired direction	(2)	A	F
Comments:			-	
(Random M	otion at the Shoulder)			
	Starts from the Escort Position	(S)	Α	F
	Continually moves suspect's arm in a random manner	(8)	A A A	F
C.	Suspect is off balance and moves in desired direction	0	Α	F
Comments:				
2. T	RANSPORT WRIST LOCK			
	Elbow tucked between arm and body	(S)	Α	F
f.	Forearm elevation	15	Α	F
_	Wrist hyperextension	15	A A A	F F
	To the ground	0	Α	F
Comments: _		-		

3. STRAIGHT ARM BAR

- i. Decentralize the center of gravity
- j. Maintain control over subject's arm
- k. Maintained balance while lowering center for takedown
- I. To the ground
- m. Control for handcuffing procedure



Comments: __

HANDCUFFING

4. STANDING METHOD

- a. Approach is from rear
- b. Simultaneous Control at application, thumb lock/cuff push
- c. Position maintained with the flip under technique
- d. Second cuff applied without loss of control



Comments:

5. TAKEDOWN FROM KNEELING POSITION

- e. All slack is removed from cuffed hand
- f. Decentralized towards the 2.5 position
- g. Iron wrist lock is applied simultaneously with decentralized pull
- h. Straight arm applied after proning the target
- i. Second cuff applied without loss of control



A F

F

4 F

Comments:

6. REMOVING HANDCUFFS

- a. Officer Instructs suspect he is going to be de-cuffed
- b. Suspect is told to leave uncuffed hand on his hip
- c. Open handcuff closed immediately and put in weak hand
- d. Officer steps to rear 45 degrees while holding cuff at arms length
- e. Second cuff is removed



۹ <u>۱</u>

A F

A F

Defensive Counter Maneuvers

7. GRABBING

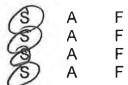
- a. Separation
- b. Verbal Commands
- c. Peeling the hand(s)
 - 1. Outside/In
 - 2. Inside/Out



Comments:

8. FINGER POKES

- a. Separation
- b. Verbal Commands
- c. Peeling the fingers/hands
- d. Second Responding Officer Action

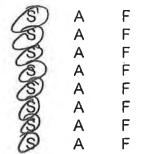


Comments:

Ground Techniques

9. Scarf Position (Left/Right)

- a. From the side/cross mount position
- b. Perform a sit out maneuver
- c. Right leg ends at 10 o'clock position
- d. Keep hips off of the ground
- e. Left foot is at 8 o'clock position
- f. Right arm around subjects neck/head
- g. Left arm and hand secures subjects arm
- h. Pin your chest to subjects chest



Comments:

10. Mounted Position

- a. Knees slide up
- b, Feet are used to feel where hips
- c. Moving to control positions



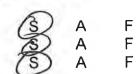
Mounted Position - subject sits back

- a. Protect Face
- b. Reach Up and Grab
- c. Pull Subject to you/ pull yourself to subject
- d. Two arm body lock (bear hug)
- e. Slide down toward waist
- f. Place foot flat on floor
- g. Stomp foot and turn subject



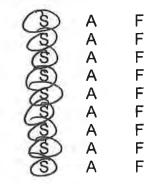
Mounted Position - subject traps your arms

- a. Bridge-Arch-Push and turn
- b. Work your way out the back door
- c. Protect Head



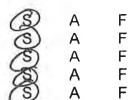
Mounted Position - escape

- a. Table Theory
- b. Keep them off your chest
- c. Protect your air
- d. Elbows to thighs/ squirm forward
- e. Protect your head
- f. Buck your hips
- g. Trap leg and arm
- h. Opposite foot flat on the floor
- i. Stomp foot and push



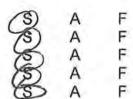
Guard Position(subject on top)

- a. Wrap legs around waist or feet flat on floor
- b. Sit up on forearm
- c. Free arm grabs elbow
- d. Roll subject toward forearm side
- e. Techniques for large person



11. Weapon Retention Drills (Holstered)

- a. subject grabs holstered weapon
- b. weapon hand on subject's hand
- c. spin body toward weapon side
- d. maintain control of subject's hand/wrist
- e. Practice subject front/back/side position



Weapon Retention Drills(un-holstered)

- a. lunge forward toward subject
- a. push weapon toward subject
- c. pull weapon toward officer
- d. create distance



Weapon Stripping Drills

- a. hand grabs slide of weapon pushing off target
- b. other hand grabs other side of slide
- c. step towards subject utilizing strength
- d. hands push weapon barrel upward toward subject
- e. step back to create space
- f. pull weapon toward officer

(S)	Α	F
(3)	Α	F
(S)	Α	F
(5)	Α	F
S	Α	F
75)	Δ	F

Comments:		
Comments.		

Grading Scale:

S = Satisfactory (performs w/out prompting)

A = Acceptable (performs with minimal prompting)

F = Failed (needs prompting / repeated instruction, or can not perform task)



Box 1794 · Appleton, WI 54912 · (920) 735-6242 · Fax (920) 735-6245 · asp-usa.com

ASP Basic Certification (ABC) EXPANDABLE BATON TRAINING

Information Sheet

(Please Print)		Date 11/10/17
☐ Initial Certification	Recertification	
First Name	Last Name_	
Home Address	Last Name _	
City lanca SI-er	State of Province	7in 6/2/10
Telephone	E-mail Address	/in 5/2/\ A
A CONTRACTOR OF THE		
Employing Agency Mr. Commo	1 Saint Ann's	
Agency Address Soc S. Chei	pland Airo	
City westerwille	State OH Province	Zip
Agency Telephone (380) 898	6-mail Address	
Duty Status: Full Duty Resti	ed the use of the ACD D	
How many officers are in your agency	ed the use of the ASP Baton? 155	
Height 6 '4 Weight 2/	Age Date of Birth/2	
Have you been exercising?	Age Date of Birth/2	8/1971
Do you have any knee, back or books	mahlanan Wash	
Are you on any medication?	problems? Yes	
7		
Person to be notified in case of amore	10704	
Name		
Phone Relationship 5000	Alternate ()	
Treationship		
Oriothy doposites 1	P. 1	
orielly describe any health problems: '	Torn Right meniscus Chare	Injury Check: ☐ 1A ☐ 1
		_
	WAIVER	
1) Intending that this A	Release from Liability and Assumption of Risk Agreement	
orever discharge Armament Systems and Pro	ally binding upon me, my heirs, executors, administrators, occurres, INC, and all of their agents, representatives, he emands, rights and causes of action of whatevers to the	and assigns, I hereby waive, release, ar
and assigns of and from any and all claims of	and an or their agains, representatives, ne	irs, executors, administrators, successor
iny and all known and unknown, foreseen and Il ASP Expandable Baton certification training	emands, rights and causes of action of whatsoever kind a unforeseen physical and mental injuries and consequenc activities.	es thereof, suffered by me during any ar
2) In signing this Release I accort that	(a) I am man and the transport	
ood physical and mental health; (c) I am fully a	(a) I am presently in good physical and mental health; (b) I ware of, and do acknowledge and assume all risk of injury e terms and conditions of this Agreement.	nave no reason to believe that I am not
	and deficitions of this Agreement.	
This program is competency ba	sed. Mere participation does not automatically assu	re successful completion
0		onpienon.
21.1.		
11/10/17		9 6000
/ Date	- No. 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	

Baton Basic Certification WRITTEN EXAMINATION

For each question below, circle the option that is the most correct.

On the Reaction Side

15. ASP Weapon Side Strikes are

Intended to be performed at a:
45 degree angle
180 degree angle

Horizontal angle

90 degree angle

16. When striking, the ASP Baton is gripped

A loose flexible grip

The index finger and thumb

Two fingers and the thumb

Vertical angle

Full hand grip

Both hands

C)

with:

b)

C)

8. The ASP Baton is always carried:

On the right side

On the left side

The Reaction Strike is primarily a:
 Strong strike

Closed strike

Initial strike

10. The most frequently used ASP

strike is the:

Clearance strike

Offensive strike

In the front

Tip down

b)

1. A defensive tactic is evaluated by

Control v Injure

Malm v Destroy

2. The primary striking surface of an

Center of the shaft

Last 3" of the baton

React v Act

open ASP Baton is the:

First joint

Handle

Cap

Threaten v Control

Demonstrate the officer's

its ability to:
a) Contro

c)

d)

3.	The h	nand using the service firea	rm is	9	Reaction Strike Weapon Strike		17.		cial circumstances do not
	the:			8				inclu	
	a)	Weak Hand		d)	Clearance Strike			a)	Special knowledge
	b)	Contact Hand		e)	Reverse Strike			b)	Imminent danger
	ை	Weapon Hand		٠,	1 ICVOISE CLIRE			<u>ç</u>)	Injury or exhaustion
	a)	Reaction Hand	11	Who	n performing an Open Str	-1-64		6)	Size
	e)	Support Hand	• • • • • • • • • • • • • • • • • • • •	Ctdle	e, the Reaction Hand is:	aignt		е)	Officer on the ground
	٠,	- apport rains							
4.	The A	SP Baton should not be			Palm up on the shaft		18.		ly is the ultimate responsibility
"	opene			b)				of the	9:
	a)	To the sky		c)				a)	Student
	b)			ூ				b)	Training partner
		To the ground			shaft			c)	Course coordinator
	2)	During a strike		6)	Executing a downward b	olock		(1)	Instructor
	9	To the side						a	Administrative officer
	67	Towards the threat	12,	If the	baton opens too easily:			-,	
_	_			a)	Make the retaining clip		19.	The A	ASP Baton is designed to be:
5.		vo baton modes are:			smaller			a)	
	9	Open and Closed		b)	Replace the o-ring			b)	
	6)	Interview and Combat		_/	Widen the retaining clip				
	c)	Weapon and Reaction		9	Remove the retaining cli	n		Q	A defensive weapon
	d)	Concealed and Loaded		e)	Lubricate the baton	P			A deadly force option
	e)	Ready and Extended		9/	FARIORIE HIE DEIDH			e)	A restraining device
	•		13	The n	oet common problem in			_	
6.	Which	Is not an ASP Target area			nost common problem in ng the baton is:		20.	The p	rinciple goal of any arrest or
	a)	Center mass of the arms	•						cal confrontation is:
		Center mass of the legs		a)	Grip of the baton				Establishing control
	. ,	Center mass of the body		b)	Loose o-ring				
		Groin or sternum		<u>c)</u>	Broken retaining clip			C)	Subject safety
	9			(D)	Operator error			d)	Documentation
	-,	The Weapon Delivery		e)	Loose handle cap			e)	Punishment
		System						•	
_					r-Subject Factors do not				
1.	arget	ing specific points violates		includ	9:				
	which i	training principle:		a)	Age				
	(3)	Forgiving techniques		b)	Size				
		Fine motor skills		c)	Weapon proximity				
		Spaced practice		A	Skill level				
	d) .	Static training		8	Multiple officers				
	e) 1	Complex techniques		-,					
	•	•							
			Fach acces	Hau :	an and Co. (E)				
		•			s worth five (5) points				
			The minim	um a	cceptable score is 809	% (16 aarmaa	۵)		
						o (10 correc	y.		
		Q			7				
		CORE. 100 %			1.7.1.1.	1 111	-		
-INA	IL SC	ORE: 100	GRADE	D B	June 1	rvo	7	-	
ASP	WRI	TTEN-EXAM:	ACCEP	TAB	E	NOT ACC	=p-	ΓΔΒΙ	F
		/_ \(1			1101 700	-'	וטרו	
OU	NSE	LED\	1						
			1	34			_	_	
NST	RUC	KOR &		-			г	ATE	10 NOV17
	100						L	AIL	TO MOVI

Baton Basic Certification TECHNIQUE PROFICIENCY CHECKLIST

The following checklist is designed to assist you and the ASP Instructor in evaluating your performance of ASP Techniques. Those components of the technique that are acceptable are checked.

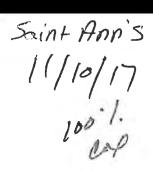
	UCTOR CONTRACTOR	DATE 10 NOVIT
	NIQUE PROFICIENCY: ACCEPTABLE_	NOT ACCEPTABLE
	· The minimum passing	score is 100% (10 techniques).
		have a passing score for certification.
		nts must be acceptable for a passing score.
		s an acceptable observed action.
	Technique Target	
	Verbalization	Technique
	Balance Movement	Movement
5)	Closed Mode Straight Strike	Balance
50	Authorize with Solve E. E.	10) Closing the Baton
	Target	Target
	Technique Angle	Technique
	Verbalization	Verbalization
	Movement	Movement
4)	Closed Mode Reaction Strike Balance	Open Mode Straight Strike Balance
	Target	Target
	Angle	Verbalization Technique
	Verbalization Technique	Movement
	Movement	Balance
3)	Balance	8) Open Mode Reaction Strike
- 03	the state of the s	Target
	Target	Angle
	Technique	Technique
	Verbalization	Verbalization
	Movement	Balance Movement
2)	Balance	7) Open Mode Weapon Strike
a)	Redirection	
		rarget
	Target	Technique Target
	Verbalization Technique	Verbalization
	Movement	Movement
	Balance	Balance
1)	Chaek	6) Opening the Baton

WRI	TTEN	FXAN	AINA	TION
**1 10			VIII W/-	

TECHNIQUE PROFICIENCY CHECKLIST

COMMENTS:

OC Test Mount Carmel Health System Safety and Security



- 1.) What does OC stand for?
 - A. Orange Crush
 - B. Ocean Crust
 - Oleoresin Capsicum
- 2.) What is the average expiration date on an OC canister?
 - A. 1-2 years
 - \mathbf{B} 3-4 years
 - C. 4-5 years
- 3.) How often should you check your OC spray for adequate spray strength?
 - A. 30 days
 - **B.** 60 days
 - 90 days
- 4.) How long of a burst should you use on a threat?
 - A. 1-2 seconds
 - B. 2-4 seconds
 - C. Empty the entire can
- 5.) What is Oleoresin Capsicum commonly known as?
 - A. Mace
 - **B**. Pepper Spray
 - C. Gas
- 6.) When deploying OC, what area of the body should you deploy the OC towards?
 - A. Arms
 - B. Chest
 - Face and eyes
- 7.) After using OC on a subject, what should you immediately do with the subject?
 - A. Leave lying on the ground.
 - Remove from contaminated area
 - C. Spray again

	8.)	What is the second step in the decontamination process? A. Spray them again
Mar		B. Tell them to stop crying like a baby
701		Offer verbal rapport to the subject
	9.)	What is the third step of the decontamination process?
		Expose subject to fresh air B. Throw the subject a bottle of water
		C. Stand there and record them with your cellphone
	10.)	What is the best way to flush the eyes?
		A. Using milk
		B. Rubbing eyes continually
		Water Water
	11.)	What type of agent is OC?
		A. Glue
		B. Cleaning Fluid
		B. Cleaning Fluid Inflammatory
	12.)	What is the main ingredient of OC?
		A. Water
		A. Water B. Cayenne Pepper C. Powder
		C. Powder
	13.)	Does CMS (Center for Medicaid/Medicare System) guidelines allow for
		OC to be used on a PATIENT?
		A. Yes
		A. Yes B No C. Only if they deserve it.
		C. Only if they deserve it.

Name:
Campus: Saint 14nn 5
Date: 11/10/17

HANDCUFFING TEST

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
 - D.) ALL OF THE ABOVE
 - (E)) BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?
 - A.)TRUE B.)FALSE
- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - (C) SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?
 - A.) TRUE
 - B) FALSE

Mount Carmel Health System Competency-Based Orientation and Introductory Period Evaluation Safety & Security

Associate Name:	ID Number:	Job Title:	X New Hire		
		Safety and Security Officer	Transfer Additional job code		

Core Competencies	IV	lethod	of (Comp	etenc	y Va	lidatio	on		
Based upon job description, performance		(ma	y use	more ti	nan or	ne met	thod)			
standards, and regulatory/accrediting standards.	Return Demonstration	Observation of daily work	Post-test	Mock Event/ Simulation	QI Monitors/ Audits	Peer Review	Case Study	Discussion Group	Date	Competency Assessed by: (signature and credentials)
Effective in patrol techniques, communications use of cameras-monitoring/recording, escorts, door openings, assist calls. Knowledge of location of Security sensitive areas.		X							12/5/16	Chafayl
Enforces policies & procedures		X					1		Dielio	MILL A Tours
Completes accurate incident report documentation/investigation and follow-ups as appropriate	X	X					3	H	is telu	Market Com
Completes accurate activity logs	X	1	-		-				12)3466	Jan Jayr
Ability to apply clinical restraints and assistance	X	2		-	_				11/14/10	Char Tay
Ability to work independently	X	2							11/11/16	
Completes timely fire drills and critiques	X	X	X							Chert Tas
Understands ILSM protocols	8	^	/					-1	2/5/14	Thus Tay
Ability to turn off Med Gas per policy	_					VI		1	INRIG	Charl tall
Vorkplace Violence policy knowledge	X	V	-			X			01/07//7	Charle Tayl
Ability to process visitors after-hours or as required		X	-	(-	_		-	-	11/11/16	Cohord Tessys
Ability to lock and unlock facility (includes Lockdown plan)		X							2/5/16	Uner Taly
Management of Aggressive Behavior and de- escalation techniques		Y				X			14/4//b	Ment land
Inderstands Safe Medical Device Act responsibilities		^				X			2/5/16	Little Pros
Helicopter operations- Safety duties	8	X				-			12/5/16	Thut fact
Discernment of sentinel events-notification protocols	1	V		-					Dichu	Olive Hall
Knowledge of Emergency Codes and security esponse (i.e. Code Red, Code Adam, Code Orange, etc).		X							nieliu	Unul fach
follows the department uniform and dress code		Y						- 1	43119	Oliva Fil
Disseminates pertinent info (pass on book, memo, eports, BOLO)		X							2 lela	Qued la da
Inderstands Forensic responsibilities		M				X		-1		The layer
Inderstands role and actions- VIP/Media event		X				X		- 1	215/10/	will find
nforces Tobacco -Free policy		x				^	-	- 1	43/16	free cough
Officer can articulate use of force and demonstrate									thall a	men (fresh
take downs" and the use of defensive weapons: ASP Repper Spray and law enforcement restraints: (i.e. andcuffs)				χ		X			Hilibl	West Pans
Officer demonstrates the ability to co-operate with		1							7	1
ther agencies, departments, and staff as appropriate		X						1	2/5/16/	Irab Tank
Officer has a basic understanding of the National atient Safety Goals.		X							15/16/	The Hall
Officer demonstrates proper telephone etiquette.		Y	-		-		-	- 1	טיורף	mus gyer

Officer demonstrates the proper radio communications-understands RF interference		X		la lule	Chulfala
Officer is knowledgeable of all activities		\\		12/5/11	Com land
Officer is knowledgeable of all security alarms and responds appropriately (panic, infant, etc).		X		145/16	Cleve Cayon
Officer conducts proper patient valuables receiving and returning	X	X		11/14/1	Cherd fanh
Morgue procedures (MCSA only)		X		11/11/1	Marie Santa
Traffic ingress/egress control- normal and emergency		1.5		111/01/	The tayou
(i.e. emergency room areas)		X		12/5/18	Mus Tayan
The officer has demonstrated the proper use of Fire			1 -1 - 1 - 1	1	1
Extinguisher and knows where and what K type extinguishers are used for				(12/19/1	Mudaya
Officer knows the Emergency Procedures for		0 1 5 1			6
handling Hazardous Materials (chemical, asbestos,				Callete	11 1/11/1
etc) and security response.				11/10/16	Chas layer
Officer understands their role in the incident				1	11.101
command structure (HICS)				12/5/16	Who Taylor
Understanding of response to elevator malfunction				01/10/10	Charle Pour
Proper PPE use- Infectious, Chemical, Noise, PAPR				(' '	11 1011
etc (i.e. universal precautions- chemical protection)				11/14/16	Charl Tank
MRI Safety				12/5/11	Chert Park
Role in Bomb Threat- search techniques/staging) Ý	1/7/11	Cheed Thurston
Knowledge of Burn Permit process		7-11-41	X	12/5/16	Theed French
Understands Property Search policy and role	X		X	11/14/16	Theil flusher
Suicide precautions/assessment	X			12/5/14	Chul Park
Proper lifting/body mechanics	X			12/5/16	Thud Tales
Pediatric; (I year - 12 years)	1	1 - 1			0
Needs to involve parents if possible:					
 Provide privacy as appropriate. 					A .
 Allow child to exercise some control. 				12/5/11	111.11.11
 Speaks at eye level maintaining eye contact 	X			1017	101111111111111111111111111111111111111
 Uses direct approach with child, giving one 	$ \Delta \rangle$				Nyman
direction at a time.					0 - 1000
Allows choice when possible.					- 19 mar
Adolescent: (13-17 years)	-				4
Needs to recognize that this age group:				1 9	
Needs to be called by name or preferred		1 1			111. 1.1
name.	1 1				May,
Provide privacy/modesty Allows chains when provide and				1-1-11	1/1/
Allows choice when possible, and				12/5/18	1/W/W
encourages verbalization of concerns and fears.					Charle
	$ \Lambda $				20.30
Tells patients behaviors that are permitted. Watches for body language and are for					
Watches for body language and cue for feelings				1 1	
feelings.					
 Speaks directly to patient in simple medical terms. 					
Concerns and fears.					
Geriatric: (65+)					
Needs to establish that the patient is wearing along the state of the state o					1
glasses, hearing aids, or may have memory					ALUE
loss and recognizes the tools that are needed for effective communications during	Y			In Inl.	Thurs X
interviews and investigations.	/\			14/5/14	00/11/
-				' '	Church
 Does not shout at patients, speak slowly and distinctly. 				1	-100
 Does not rush patient, gives them time to 					
process information.					

:	Repeats instructions several times. Discuss one item at a time. Assist in transferring patient under direction of a Registered Nurse.	X	12/5/16	Chris
	Provide privacy/modesty			U
Adult (18-64 years)			
•	Calls patient by preferred name.			a
	Allows choices when possible Provides for privacy/modesty			MALU
•	Respects patient right to make informed decisions.		12/5/16	() ()
	Assists in relinquishing valuables	X		1 M
	Watches body language as cue for feelings.	/ *		- 0
•	Interviews patient in a calm, reassuring manner concerning lost articles.			
	Assists in controlling confused patient.			

Mount Carmel Health System Competency-Based Orientation and Introductory Period Evaluation (Safety and Security Department)

ID Number:

Associate Name:	ID Number:	Job Title:	_X_New Hire Transfer Additional job code
		Safety and Security Officer	Date entered into role: 11 / 17 / 2017
Attach above Competency copies to Human Resources			low and forward original
X (Eric Matheny) has success	fully completed the Introduc	ctory Period.	
☐ Developmental Needs identifi	ied related to competency:		
☐ Additional needs identified du	ring Introductory Period:		
Goals (includes identified compe	tency and developmental nee	ds):	
	cial functions such as Hazmat	training.	
 To help instruct in-services To be a positive role modern 			
The state of the s	tor for follow officers.		
		Ω_{I}	4.0
ssociate Signature	Date 2/17/17 N	100000 5: 1/1/1	Marke alaba
o Daniel	Date of 1 1/1/7 N	Manager Signature	Date 2/17/2017

Associate Name:

Mount Carmel Health System Competency Assessment Safety & Security

ssociate Name:	ID Number:	Job Title:
		Security
☐ High Risk ☐ Low Volum	ne 🗌 Problem Prone 🗌 New E	quipment/Service Process Change
	CARING COMPONENTS	t.
emonstrates service excellence bel		
	KNOWLEDGE AND SKILL COMP	ONENTS:
BILITY TO EXPLAIN THE USE OF	FORCE CONTINUUM	
BILITY TO PERFORM BALANCE D	DISPLACEMENT AT THE HIP	
BILITY TO PERFORM BALANCE D	DISPLACEMENT ON THE BACK	
BILITY TO PERFORM BALANCE	DISPLACEMENT AT THE SHOULDE	R
SILITY TO PERFORM A TRANSPO	ORT WRIST LOCK TO BOTH THE R	IGHT AND LEFT SIDE
SILITY TO PERFORM A STRAIGH	T ARM BAR TO BOTH THE RIGHT /	AND LEFT SIDE
BILITY TO USE HANDCUFFS IN T	HE STANDING METHOD	
BILITY TO USE HANDCUFFS FRO	M THE KNEELING POSITION	
BILITY TO REMOVE HANDCUFFS	TO DI 10E ((1) DO (1)	
ILITY TO DEDECOM SEDEDATION	TO PLACE HANDCUFFS ON SUBJE	CT
BILITY TO PERFORM SEPERATION	IN FROM SUBJECT GRABBING	
ILITY TO PERFORM PEELING OF	F THE HAND(S) OF SUBJECT DURI	NG A GRAB
BILITY TO PERFORM SEPERATION	IN FROM A FINGER JAB	
ILITY TO PERFORM PEELING OF	F FINGER(S)/HAND(S) DURING A F	INGER JAB
BILITY TO PERFORM A SCARF PO	JSITION ON SUBJECT	
BILITY TO PERFORM A MOUNT P	MANEUVER DURING THE SCARF	
ILITY TO MAINTAIN CONTROL O	OSITION ON A SUBJECT	TED DOGUMENT
II ITY TO PEDECOM THE LICE OF	F SUBJECT WHILE IN THE MOUNT	ED POSITION
II ITY TO PERFORM THE USE OF	F STRAIGHT BATON FROM THE FIE F STRAIGHT BATON FRON THE RE	ADVIOTANCE
II ITY TO PERFORM THE USE OF	STRAIGHT BATON FROM THE RE	DRWARD FLUID SHOCKWAVE STRIKE
II ITY TO PERFORM THE USE OF	STRAIGHT BATON USING THE FO	DRWARD FLUID SHOCKWAVE STRIKE
ILITY TO PERFORM THE USE OF	STRAIGHT BATON USING THE PO	OKWARD CUTTING STRIKE
ILITY TO CLOSE THE BATON FRO	OM THE STANDING POSITION	ACKHAND STRIKE
ILITY TO CLOSE THE BATON FRO		
	ATON FROM THE CRISIS POSITION	
ILITY TO EXPLAIN WHEN TO US	E STRAIGHT BATON AND WHEN NO	OT TO LISE STRAIGHT BATON
ILITY TO EXPLAIN WHAT O.C. ST	ANDS FOR	OT TO USE STRAIGHT BATON
ILITY TO EXPLAIN WHEN TO USE		
ILITY TO EXPLAIN WHEN NOT TO		
	USE O.C. ON A PATIENT OR NOT	
ILTY TO EXPLAIN THE EFFECTS	OF O.C. ON A SUBJECT	
LITY TO EXPLAIN THE DECONTA	AMINATION PROCEDURES	
LITY TO EXPLAIN THE NOMENC	LATURE OF THE PRO V2 DEVICE	
LITY TO EXPLAIN THE USE OF P	PRO V2 DEVICE IN REGARDS TO U	SE OF FORCE CONTINUUM
LITY TO PERFORM THE USE OF	PRO V2 DEVICE	GE OF TORGE CONTINUOUS
LITY TO VERBALLY DE-ESCALAT	TE (CIT TRAINING/AGGRESSIVE BE	FHAVIOR TRAINING)
LITY TO APPLY RESTRAINTS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ELITATION TRANSPORT
LITY TO POSITION PATIENT ON	THE BED/CART	
LITY TO LOOP THE CONNECTING	G STRAP AROUND THE BED FRAM	/E
LITY TO PLACE THE PROPER CO		

ABILITY TO PASS ONE FING	ER BETWEEN THE RESTE	RAINT AND PATIENTS WRIST/ANKLE
ABILITY TO PLACE PATIENT		WINT AND I ATILITIE WHO I ANICE
ABILITY TO SECURE POSEY		ED FRAME
ABILITY TO PASS DT TRAINII		
	an emergent or sentinel typ	
		4.
	METHOD OF COMP	PETENCY VALIDATION:
☑ Return Demonstration		□ QI Monitors/Audits
□ Observation of Daily Work		□ Peer Review
Post Test		□ Case Study
Mock Event/Simulation		☐ Discussion Group
WINDER EVERIUS ITTUIATION	- 12	
Competency Validated By: (Sign	ature and credentials	Date -11-16
Developmental Needs identified	l: (See Performance Evalua	ation for related goals)
Associate Signatur	Date	Instructor(s) Signature Date Date
Evidence Based R	:es (if applicable):	

.

Defensive Tactics / Impact Weapon Competency Form

STUDENTS NAME:

INSTRUCTORS:____

JOINT LOCKS

1. BALANCE DISPLACEMENT TECHNIQUE

(At the hip)				
a.	Starts from Escort Position	(s)	Α	F
b.	Removes hand from Triceps and places it on rear waist of suspect	S	Α	F
c.	Presses hand forward and downward, displacing balance	5	Α	F
d.	Starts from Escort Position Removes hand from Triceps and places it on rear waist of suspect Presses hand forward and downward, displacing balance Suspect steps in desired direction	8	A	F
Comments:				
(Friction on	the Back)	-		
	Starts from Escort Position	(5)	Α	F
b.	Places hand in the middle of suspect's back and presses forward	(5)	Α	F F
	Moves hand in random manner, forcing steps in desired direction	900	A A A	F
Comments:				
(Random Me	otion at the Shoulder)			
	Starts from the Escort Position	S	Α	F
	Continually moves suspect's arm in a random manner	(3)	A A	F F
	Suspect is off balance and moves in desired direction	9	A	F
Comments:				
2. TRAN	ISPORT WRIST LOCK			
e.	Elbow tucked between arm and body	S	Α	F
	Forearm elevation	S	A	F F
g.	Wrist hyperextension	0	Α	F
	To the ground	G 1000	Α	F
Comments:	-			

12

1	i. Decentralize the center of gravity j. Maintain control over subject's arm k. Maintained balance while lowering center for takedown l. To the ground m. Control for handcuffing procedure	ଉତ୍କଳ) A A A A	F F F F
Comments	S:			
HAND	CUFFING			
4. ST	ANDING METHOD			
i i	 Approach is from rear Simultaneous Control at application, thumb lock/cuff push Position maintained with the flip under technique Second cuff applied without loss of control 	ଉତ୍ତତ୍ତ୍ୱ	A A A	F F F
Comments		30	10	
e f. g h	KEDOWN FROM KNEELING POSITION All slack is removed from cuffed hand Decentralized towards the 2.5 position Iron wrist lock is applied simultaneously with decentralized pull Straight arm applied after proning the target Second cuff applied without loss of control	00000	A A A A A	F F F
a. b. c. d.	Officer Instructs suspect he is going to be de-cuffed Suspect is told to leave uncuffed hand on his hip Open handcuff closed immediately and put in weak hand Officer steps to rear 45 degrees while holding cuff at arms length Second cuff is removed	90000	A A A A	F F F

Defensive Counter Manuevers

7. GRABBING

- a. Seperation
- b. Verbal Commands
- c. Peeling the hand(s)
 - 1 Outside/In
 - 2. Inside/Out



Comments:

8. FINGER POKES

- a. Seperation
- b. Verbal Commands
- c. Peeling the fingers/hands
- d. Second Responding Officer Action

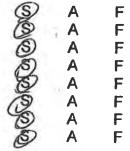
S A F

Comments:

Ground Techniques

9. Scarf Position (Left/Right)

- a. From the side/cross mount position
- b. Perform a sit out maneuver
- c. Right leg ends at 10 o'clock position
- d. Keep hips off of the ground
- e. Left foot is at 8 o'clock position
- f. Right arm around subjects neck/head
- g. Left arm and hand secures subjects arm
- h. Pin your chest to subjects chest



Comments:

10. Mounted Position

- a. Knees slide up
- b, Feet are used to feel where hips
- c. Moving to control positions



Comments:		

Grading Scale:

S = Satisfactory (performs w/out prompting)

A = Acceptable (performs with minimal prompting)

F = Failed (needs prompting / repeated instruction, or can not perform task)



Box 1794 · Appleton, WI 54912 · (920) 735-6242 · Fax (920) 735-6245 · asp-usa.com

ASP Basic Certification (ABC) EXPANDABLE BATON TRAINING

Information Sheet

(Please Print)		Date 1/- //- 20/6
First Name Home Address	Recertification Last Name	
City Lancas her Telephone	State O H Province // S E-mail Address	Zip 9.31.30
Employing Agency Savat Adagency Address Soc Cl City USharuille Agency Telephone (6/4) 89	State OH Province U	S zip 43081
Duty Status: Full Duty Res Has your agency adopted or authoriz How many officers are in your agency Height 6'4 Weight 27 Have you been exercising? 10	tricted Duty zed the use of the ASP Baton? Sy?	
Person to be notified in case of eme Name Phone Relationship	Alternate ()	
Briefly describe any health problems	:	Injury Check: 1A 1P
	WAIVER Release from Liability and Assumption of Risk Agreement	
forever discharge Armament Systems and and assigns, of and from any and all claims any and all known and unknown, foreseen all ASP Expandable Baton certification traini 2) In signing this Release, I assert the good physical and mental health; (c) I am ful	legally binding upon me, my heirs, executors, administrator Procedures, INC, and all of their agents, representatives, it, demands, rights and causes of action of whatsoever kind and unforeseen physical and mental injuries and consequent a activities. It is a presently in good physical and mental health; (but aware of, and do acknowledge and assume all risk of injurit terms and conditions of this Agreement.	heirs, executors, administrators, successors d and nature, ansing from, and by reason of nces thereof, suffered by me during any and o) I have no reason to believe that I am not in
This program is competency -	based. Mere participation does not automatically as.	sure successful completion.



Baton Basic Certification WRITTEN EXAMINATION

For each question below, circle the option that is the most correct.

1. A defensive tactic is evaluated by

1		ensive tactic is evaluated by	8	. The	ASP Baton is always carried:	18	. ASP	Weapon Side Strikes are
	its ab	lity to:		a)			Inte	nded to be performed at a:
	ניש -	Control v Injure Malm v Destroy		b)	In the front		a	45 degree angle 180 degree angle
				<u>c)</u>	On the Reaction Side		b)	180 degree angle
	c)	Threaten v Control		(മ)	- Tip down		c)	Horizontal angle
	d)			्र हो	On the left side		d)	
	e)	Demonstrate the officer's					e)	
		skili	9	. The	Reaction Strike is primarily a:		•	
_				a)	Strong strike	16	. Whe	n striking, the ASP Baton is gripped
2.		rimary striking surface of an		b)	Closed strike		with:	grippor
		ASP Baton is the:		A	Clearance strike		a)	
		Сар		8	Offensive strike		b)	A loose flexible grip
	b)	Center of the shaft		e)	Initial strike		c)	
	(C)	Last 3" of the baton		-,				
	9	First joint	10	The	nost frequently used ASP		9	
	e)	Handle			is the:		9)	Both nangs
					Reaction Strike	4-	•	
3.	The h	and using the service firearm is		&		17		cial circumstances do not
-	the:	and doing the service inegitt is		6	Weapon Strike		inclu	
	a)	Weak Hand			Straight Strike		a)	•
		Contact Hand		d)	Clearance Strike		b)	Imminent danger
				e)	Reverse Strike		c)	Injury or exhaustion
	(2)	Weapon Hand Reaction Hand					Æ)	Size
			11.	Wher	performing an Open Straight		न	Officer on the ground
	0)	Support Hand		Strike	, the Reaction Hand is:			
				a)	Palm up on the shaft	18.	Safet	y is the ultimate responsibility
4.	The A	SP Baton should not be		b)	Maintaining distance		of the	y to the blantate responsionity
	opene	d:			Guarding the face		a)	Student
	a)	To the sky		6	Palm down gripping the		b)	
		To the ground		0	shaft			Training partner
		During a strike		e)	Executing a downward block		c)	Course coordinator
	(G)	To the side		0,	Executing a downward Dlock		(10)	Instructor
		Towards the threat	10	If the	hoton t W		-64	Administrative officer
	-	Towards the threat	12.		baton opens too easily:			
5	The to	o baton modes are:		a)	Make the retaining clip	19.	The A	ASP Baton is designed to be:
J.					smaller		a)	An offensive weapon
		Open and Closed		b)	Replace the o-ring		b)	A comealong device
		Interview and Combat		Ø	Widen the retaining clip		ର	A defensive weapon
		Weapon and Reaction		ď	Remove the retaining clip		©	A deadly force option
	d)	Concealed and Loaded		e)	Lubricate the baton		e)	A restraining device
	e)	Ready and Extended		-,			٠,	V restraining nevice
		-	13.	The m	ost common problem in	20	The n	orinciple goal of any arrest or
6.	Which	is not an ASP Target area:		openi	ng the baton is:	20.		cal confrontation is:
		Center mass of the arms		a)	Grip of the baton		HAVSIN	Cai Confortation is:
		Center mass of the legs					(a)	Establishing control
		Center mass of the body		b)	Loose o-ring		D	Superior officer skill
	Ã	Groin or sternum			Broken retaining clip		c)	Subject safety
		The Weapon Delivery		@	Operator error		d)	
				e)	Loose handle cap		e)	Punishment
		System						
-	T		14.		r-Subject Factors do not			
		ing specific points violates		Include	9:			
		raining principle:		a)	Age			
		Forgiving techniques		b)	Size			
		Fine motor skills		1	Weapon proximity			
		Spaced practice		Ø	Skill level			
	d) (Static training		e	Multiple officers			
	e) (Complex techniques						
		, , , , , , ,						
		Fac	sh awas		annesda Con (E) and			
		Eac	n ques	uon i.	s worth five (5) points.			
		The	minim	um a	cceptable score is 80% (16	correct		
					13 0070 (10	correct).	9	
					1.0 - 1	1 1/2	9	0
		2 20				1		
					11 " 11 10 12 111	10	A	2
FIN	AL SC	CORE:	RADE	ED B	Y: 1000	1 416	Mill	
		-			00	1	1	
ASF	WRI	TTEN/EXAM:	CCEP	TAR	F M NOT	ACCEP	AD	I E
			1-	. A	NO	HOUEF	IMB	leibe
COL	JNSE	LED	1		1			
		1			1	_	-	
INS	TRUC	TOR VI	7	2			DATE	= (+1+16
			-					

Baton Basic Certification TECHNIQUE PROFICIENCY CHECKLIST

The following checklist is designed to assist you and the ASP Instructor in evaluating your performance of ASP Techniques. Those components of the technique that are acceptable are checked.

1)	Check	6) Opening the Baton
- 0.	Balance	Balance
	Movement	Movement
	Verbalization	Verbalization
	Technique	Technique
	Target	
	rarget	Target
ο\	Dedication	7) Onen Made Mosmon Strike
2)	Redirection	7) Open Mode Weapon Strike
	Balance	Balance
	Movement	Movement
	Verbalization	Verbalization
	Technique	Technique
	Target	Angle
		Target
3)	Closed Mode Weapon Strike	
-,	Balance	8) Open Mode Reaction Strike
	Movement	Balance
	Verbalization	Movement
	Technique	Verbalization
	Angle	Technique
	Target	Target
	raiget	raiget
4	Classed Manda Danation Chiles	O) On an Mada Cárriala Cárilea
4)	Closed Mode Reaction Strike	9) Open Mode Straight Strike
	Balance	Balance
	Movement	Movement
	Verbalization	Verbalization
	Technique	Technique
	Angle	Target
	Target	
		10) Closing the Baton
5)	Closed Mode Straight Strike	Balance
•	Balance	Movement
	Movement	Technique
	Verbalization	
	Technique	
	Target	
	rarget	
	A check mark ind	icates an acceptable observed action.
		conents must be acceptable for a passing score.
	The second secon	ust have a passing score for certification.
	The minimum pas	sing score is 100% (10 techniques).
TECH	NIQUE PROPERENCY: ACCEPTABLE	NOT ACCEPTABLE
		NOT ACCEPTABLE
COUN	ISELED	1
INICTE	RICTOR	DATE IT-IO

WRITTEN EXAMINATION

TECHNIQUE PROFICIENCY CHECKLIST

COMMENTS:

☐ Certification Approved ☐ Certification Denied INSTRUCTOR

OC Test **Mount Carmel Health System** Safety and Security

1.)	What	does OC stand for?
	A.	Orange Crush
	B.	Ocean Crust

Oleoresin Capsicum

2.) What is the average expiration date on an OC canister? 1-2 years

3-4 years. 4-5 years

How often should you check your OC spray for adequate spray strength? 3.)

30 days B. 60 days 90 days

How long of a burst should you use on a threat? 4.)

1-2 seconds 2-4 seconds Empty the entire can C.

What is Oleoresin Capsicum commonly known as? **5.)** Mace

Pepper Spray Gas

When deploying OC, what area of the body should you deploy the OC **6.)** towards?

A. Arms B. Chest

Face and eyes

After using OC on a subject, what should you immediately do with the 7.)

Leave lying on the ground. A.

Remove from contaminated area

Spray again

8.)	What A. B.	is the second step in the decontamination process? Spray them again Tell them to stop crying like a baby Offer verbal rapport to the subject	
9.)	What A.B. C.	is the third step of the decontamination process? Expose subject to fresh air Throw the subject a bottle of water Stand there and record them with your cellphone	
10.)	What A. B.	is the best way to flush the eyes? Using milk Rubbing eyes continually Water	Q.~
11.)	A. B.	type of agent is OC? Glue Cleaning Fluid Inflammatory	
12.)	What A. B.	is the main ingredient of OC? Water Cayenne Pepper Powder	
13.)		CMS (Center for Medicaid/Medicare System) guidelines be used on a PATIENT? Yes No Only if they deserve it.	allow for

NAME: DATE:________

HANDCUFFING TEST

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
 - D.) ALL OF THE ABOVE
 - BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?

A.)TRUE

- (B)FALSE
- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - (2.) SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?
 - A.) TRUE
 - (B) FALSE





ProV2 User Course Written Test

- At what Activation Level would the Pro V2 start recording audio and photo/video?
 - a. Upon power-up
 - (b) Level-1
 - c. Level-2
 - d. Level-3
- At what Activation Level would the Laser Spotter come on?
 - Upon power-up
 - <u>(</u>Б. Level-1
 - Level-2
 - Level-3
- At what Activation Level would the Alerting Siren come on?
 - a. Upon power-up
 - b. Level-1
 - Level-2 **(6)**
 - d. Level-3
- At what Activation Level would O.C. Pepper Spray be deployed?
 - a. Upon power-up
 - b. Level-1
 - Level-2
 - Level-3



- What is the arrow pointing to in the above photo above? 5)
 - a. Strobe Light
 - b. Alerting Siren
 - d. Spray port Digital imager





- 6) What is the arrow pointing to in the photo above?
 - a. On-Off switch
 - 6 Speaker
 - c. Battery release
 - d. Illuminated sight



- 7) What is the arrow pointing to in the photo above?
 - (a.) Ambidextrous Call-button
 - b. Ambidextrous Trigger
 - c. USB port
 - d. Arming Switch
- 8) The left-side LED indicator on the Pro V2 indicates:
 - a. An failed Bluetooth connection
 - (b.) Spray canister has been used
 - c. Fault error
 - d. Battery needs charging
- 9) How long does it take for the Pro V2 battery to charge completely?
 - a. 30 minutes
 - b. 60 minutes
 - 90 minutes
 - 120 minutes
- 10) What is the range of the Bluetooth capability of the Pro V2
 - a. 5 feet
 - b. 10 feet
 - c. 15 feet
 - (d) 20 feet
- 11) What is the size of the Internal memory card for audio/photo/video files
 - a. 1 GB
 - b. 2 GB
 - (c) 4 GB
 - й. 8 GB



12) Where is the Serial Number located on the Pro V2?

20) How soon after O.C. Pepper Spray is used, should first-aid be rendered?

a. When help arrives

As soon as practical

c. Immediately

b. Anytime, but not more than 1 hour

	Inside the battery/canister compartment
	Inside the battery/canister compartment
	b. At the base of the battery
	c. On the right-side of the ProV2
	d. On the left-side of the ProV2
13) W	hat color is the label on the Practice (Water) Spray canister?
	(a) White with blue text
	b. Red with yellow text
	c. Black with white text
	d. Blue with green text
14) Car	the O.C. Pepper Spray be activated without the ProV2 being turned on?
	(a.) Yes
	b. No
15) On	the battery gauge LED lights, what does 2 lights indicate?
•	a. Less than 25% charge
/	b) 50% charged
(c. 75% charged
	d. 100% charged
	a. 20070 Glaiged
16) Doe	the Pro V2, by itself without Bluetooth connectivity, have the ability to dial the Command Center?
	a. Yes
7	B) No
17) How	long is the pre-recorded message?
i	a. 5 seconds
_	o. 10 seconds
(0	· ···
7	. 20 seconds
18) How	would a Pro V2 user activate Level-2?
a	Power-on the Pro V2
	Power-on the Pro V2 and turn the Arming Switch on
3	Power-on the Pro V2 turn the Arming Switch on
q	
_	Power-on the Pro V2, turn the Arming Switch on, and a full-pull of the trigger
19) At wh	at Activation Level will the Pro V2 automatically call the Command Center?
a.	Upon power-up
b.	Level-1
9	Level-2
ď.	Level-3



Position Applied For

Position: Safety and Security Officer Facility: Mount Carmel -New Albany

Department: Security MCNA

Schedule: Full Time Req Num: 15356

Application for Employment

We consider applicants for all positions without regard to race, color, religion, creed, national origin, age, disability, sexual orientation, marital status, or any other legally protected status.

Instructions to Applicant

- You must fully and accurately complete the Application for Employment. Incomplete applications will not be considered. Mount Carmel Health System may use the information given in the application to investigate the applicant's previous employment and background.
- 2. If you are hired, proof of citizenship or immigration status will be required to verify your lawful right to work in the United States.

* Required Information

October 6, 2016

SOURCE TRACKING

How did you find out about this position?* Email

Specific Source:* Email Blast

PERSONAL INFORMATION

Prefix:

First Name:*

Мŀ

Last Name:*

Suffix:

Address:*

City:* Lancaster

State:* OH

Province/Region:

Zip:* 43130

Country:* United States

Home/Other

Phone:*
Work Phone:

Cell Phone:

Best way to Home Phone

contact:*

Email Address:*

WORK HISTORY

List all work experience below beginning with your current (or most recent) position.

Are you currently employed?* Yes

Name of Company:* Hocking County Sheriff's Office

Street: 25 East 2nd street

City:* Logan

State:* OH

Job Duties and Responsibilities:*
Supervised other deputies, dispatchers, transport officers, investigate crimes, and wrote reports, issued citations, made arrest when appropriate,

processed crime scenes.

Reason For Leaving:*

Zip:* 43138

Province/Region:

Country: United States

Employer's Phone:* 740-385-2131

Job Title:* Sergeant Road Patrol

Employed From:* 05 1992

Employed To:* 08 2013

19.00 Jerod Alford **Full Time**

Moved out of area

May we contact this employer for a reference?*

While in this position, if you were employed under a different legal name, please list that here:

Name of Company: Hocking College

Street:

City:

State:

Zip:

Province/Region:

Country:

Employer's Phone: 740-753-6451

Job Title: Adjunct instructor

Employed From:

Employed To:

Ending Salary:

Supervisor's Name: Tim Voris

Employment Status:

Job Duties and Responsibilities:

Instructed classes in Ohio Peace Office Academy, taught introduction to firearms in

Police Science program.

Reason For Leaving: Moved out of area

May we contact this employer for a reference?

Yes

While in this position, if you were employed under a

different legal name, please list that here:

Name of Company: Columbus Dispatch Corperate Security

Street: 34 south Third STreet

City: Columbus

State: OH

Zip: 43215

Province/Region:

Country: United States

Employer's Phone: 614-469-5143

Job Title: Supervisor of Security

Employed From: 10 2013

Employed To: 11 2015

Ending Salary: 52,000

Supervisor's Name: Donald Burrier

Employment Status: Full Time

Job Duties and Responsibilities:

Supervisor on third shift, check alarms, monitor closed circut video, respond to incidents on property or off property related to company activity, check commercial and residential

properties.

Reason For Leaving:

Laid Off

May we contact this employer for a reference?

Yes

While in this position, if you were employed under a different legal name, please list that here:

Name of Company: The Dispatch Printing Company

Street: 34 South Third Street

City: Columbus

State: OH

Zip: 43215

Province/Region:

Country: United States

Employer's Phone: 614-461-5012

Job Title: Security Officer

Employed From: 09 2016

Employed To:

Ending Salary: 14.00

Supervisor's Name: Ed CAsner

Employment Status: Part Time

Job Duties and Responsibilities:

Check of interior and exterior building, offices and personal, check of properties owned or occupied by Dispatch Printing Company, monitor fire, and burglary alarms, responding to accidents involving employee's, writing reports, keeping detailed log.

Reason For Leaving: Still Employeed

May we contact this employer for a reference?

While in this position, if you were employed under a different legal name, please list that here:

EDUCATION

High School/GED

Name of school: Logan Elm High School Did you graduate? Yes

City:* Circleville

Diploma Type:* HIGH SCHOOL

State:* OH Province/Region:

Zip:* 28840

Country:* United States

List scholastic honors, specialized training and/or apprenticeship details that may be helpful in considering your application. When adding, please provide as much detail as possible about the dates of these activities, locations and skills or experience obtained.

> **CPR/FIRST AID** Ohio Peace Officer Certificate **OPOTA Instructor Certificate**

LICENSES/CERTIFICATIONS

Professional Licensure

Please Provide Professional Licenses/Registrations held. Include License Number and Expiration Date.

Type

State

Number

Date Issued

Expiration Date

If you are applying for a job category that requires licensure, please answer the following question: Is your license currently subject to any investigation by a licensing agency?

EMPLOYMENT PREFERENCES

Please indicate your employment preferences below:

Minimum Salary Desired:* 14.00

Date Available for Work:* 10/05/2016

Are you willing to relocate? Yes

Which shifts are you willing to work?

Which schedules are you willing to work?

Please answer all of the following questions.

Do you have any relatives that currently work for Mount Carmel Health System or any of its affiliates? * No

If yes, please list their name(s):

* No Have you ever been employed by Mount Carmel Health System or any other facility sponsored by Mount Carmel Health System?

If yes, enter the name and address of member/facility and dates of employment:

Address:

Dates of employment:

WORK AUTHORIZATION/ELIGIBILITY

Please answer all of the following questions.

* Yes	Are you 18 years of age or older?
* Yes	Are you legally able to remain and work in the United States without Sponsorship?
* No	Other than a minor traffic violation, have you ever pled guilty to or been convicted of a crime?
	Consideration will be given to the nature, timing and severity of the crime.
	If yes, give the Offense, the dates plead guilty or convicted, and the Name and Location of the court that convicted you.
* No	Have you ever been sanctioned by the Office of Inspector General of the Department of Health and Human Services (HHS/OIG) or the Government Services Administration (GSA) or excluded or suspended from participation in any federal or state health care program?
* No	Have you ever been found to have engaged in substantiated abuse or neglect of children or adults

If yes, please list the States, dates, and explain the findings.

REFERENCES

Please give three professional references (DO NOT list relatives or personal references). All fields required.

under the laws of any state of the United States?

	Name*	Name of Company*	Phone Number*		Relationship*	Years Known*
ı		Hocking County Sheriff Office	740-385-2131	alford9@hockingsheriff.org	Professional	16
١	Derek Boch	Ohio Casino Commission	740-283-8155	Hcso37S3@gmail.com	Professional	16
I	Steve Barron	Hocking College	740-603-1102	csrcka2177@roadrunner.com	Professional	25

RESUME

To copy and paste your resume:

Highlight the text on the resume you want to copy.

2. Press 'Ctrl C' to copy (Hold down the Ctrl key and press C).

3. Place the cursor in the RESUME box below.

4. Press 'Ctrl V' to paste the information.

Cover Letter

Resume

Eric J. Matheny

9099 St Rt 664 North Logan, Ohio 43138, Primary Phone (740)603-2442 C (740)707-7028 email: HYPERLINK "mailto:ejmatheny@gmail.com" ejmatheny@gmail.com Summary

I was a Police Officer with 21 years in law enforcement, including assisting citizens, investigating accidents and conducting routine patrols. Exceptional report writing ability. I am a police officer versed in dealing with a wide range of difficult situations with a level head and calm disposition.

Highlights

- * Certified Police Officer OPOTA
- * Able to resolve conflicts
- Familiar with Search and Seizure laws
- * Firearms instructor
- * Instructor in State of Ohio Police Academies
- * CPR/First Aid certified
- * Calm under pressure

- * Advanced lethal weapons training
- * Crime scene processing
- * Exceptional problem solver
- * Sex crimes training
- * Radar speed measurement
- * Patrol procedures
- * Fingerprinting
- * Arrest techniques
- Able to defuse possible violent situation verbally

Accomplishments

Trained over 10 new officers as Field Training Officer (FTO). Obtained several certifications in the field of Law Enforcement to further my carrier. Ability to handle confrontational situations in a quick and timely manner.

Work Experience

The Columbus Dispatch Printing Company

September 2016 to current

Sucurity Officer, Foot and Road patrol of company properties and residences, respond to burglary and fire, medical alarms, escort employees after hours to vehicles if requested, write reports on incidents.

*Columbus Dispatch Corporate Security

From October 2013 thru November 2015

Supervised third shift security employees, monitored CCTV systems, fire and burglary alarm systems, preformed checks of buildings and all safety equipment, wrote reports, keep detailed logs,

* Hocking County Sheriff's Office, Sergeant Road Patrol

From: May 1992 to August 10, 2013

Supervised other deputies, dispatchers, transport officers, investigate crimes, and wrote reports, issued citations, made arrest when appropriate, processed crime scenes.

* Hocking College, Adjunct instructor

From: May 2010 to present

Instructed classes in Ohio Peace Office Academy, taught introduction to firearms in Police Science program

* Logan Elm High School, Circleville, Ohio 43113

Graduated 1990 with Diploma

Hocking College, Nelsonville, Ohio 45764 Attended: September 1990 to May 1992

Course of Study: Natural Resources emphasizes on Law Enforcement

Degree: Never Obtained

Central Ohio Technical College Attended: January 2016 to current Course of Study; Health Care Services

Degree; in process

References available upon request.

READ AND SIGN

Read the following carefully before signing.

- (X) * I CERTIFY that the information contained in this application is correct to the best of my knowledge. I UNDERSTAND I am applying for employment with Mount Carmel Health System. I understand that any false statements made as part of the application will be sufficient cause for dismissal. I also grant permission for the authorities of this institution to investigate my references and release said institution, as well as my former employers, from any and all liability resulting from such investigation. I further understand that the application does not constitute an employment contract and termination at will, by either me or Mount Carmel Health System, could occur during the employment relationship.
- (X) * I CONSENT to any and all medical and physical examinations including Substance and Alcohol tests as a condition of employment. I UNDERSTAND that as a condition of employment and continuing employment, if hired, I will, at least annually, obtain influenza vaccinations and/or immunizations if required by my Regional Health Ministry, unless I qualify for an exemption permitted under organizational policy or unless mandatory vaccinations and/or immunizations are prohibited under applicable State
- (X) * I GRANT PERMISSION to Mount Carmel Health System to investigate any and all healthcare fraud and abuse charges and convictions. I agree to release the organization from any and all liability resulting from such investigation. I understand that omission or misrepresentation of convictions for healthcare fraud and abuse, on my behalf, will be sufficient cause for cancellation of consideration for employment or dismissal from the organization if I have been employed.

- (X) * I UNDERSTAND that unless prohibited by applicable state or federal law, Mount Carmel Health System will conduct a preemployment background check including criminal history, education verification, reference checks, license verification and driving records (if required for the position).
- (X) * I UNDERSTAND and AGREE that this application for employment and any of the investigations conducted regarding my application may be shared with other members of Mount Carmel Health System and/or affiliates for other employment opportunities.
- (X) * I AGREE to comply with Mount Carmel Health System rules, regulations and policies and ACKNOWLEDGE that these rules, regulations and policies may be changed, interpreted, withdrawn, or supplemented anytime and without prior notice to me. I understand that any violation may result in disciplinary action including termination of my employment.
- (X) * I AGREE to furnish proof of identity and employment eligibility to work in the U.S within 72 hours of commencing employment.
- (X) * I UNDERSTAND that if I am employed I will be subject to any applicable introductory period established by the Regional Health Ministry at which I am hired.

Mount Carmel Health System is a member of CHE Trinity Inc. and an Equal Opportunity Employer (EEO).

My typed name below shall have the same force and effect as my written signature.

Candidate's/Applicant's Signature: Eric J. Matheny

Date: October 6, 2016





Position Applied For

Position: Safety and Security Officer Facility: Mount Carmel St. Ann's Department: Security MCSA Schedule: Contingent Req Num: 2765

Application for Employment

We consider applicants for all positions without regard to race, color, religion, creed, national origin, age, disability, sexual orientation, marital status, or any other legally protected status.

Instructions to Applicant

- 1. You must fully and accurately complete the Application for Employment. Incomplete applications will not be considered. Mount Carmel Health System may use the information given in the application to investigate the applicant's previous employment and background.
- 2. If you are hired, proof of citizenship or immigration status will be required to verify your lawful right to work in the United States.

* Regulred Information

November 25, 2014

SOURCE TRACKING

How did you find out about this position?* Job Board

Specific Source:* Indeed.com

PERSONAL INFORMATION

Prefix: Mr.

First Name: MI:

Last Name:* Suffix:

Address:*

City:* Columbus

State:* OH

Province/Region:

Zip:* 43228

Country:* United States

Home/Other Phone:1

Work Phone:

Cell Phone:

Best way to No Preference contact:*

Email Address:*

WORK HISTORY

List all work experience below beginning with your current (or most recent) position.

Are you currently employed?* Yes

Name of Company:* G4S secure solutions

Street: 1418 Brice Road

City:* Reynoldsburg

State:* OH

43068

Job Duties and Responsibilities:* In charge of 4 onsite officers, site payroll and

scheduling. Monitor CCTV cameras. conduct routine patrols. Interact with upper management

on a daily basis.

Reason For Leaving:*

Zip:*

Province/Region:

Country: United States

Employer's Phone:* 614-322-5100

Job Title:* Site Supervisor

Employed From:* 09 2006

Employed To:*

Ending (or Current) 31200

Salary:*

Supervisor's Name:* Roger Nye

Employment Status: Full Time

Still there

May we contact this employer for a reference?*

Yes

While In this position, if you were employed under a

different legal name, please list that here:

Name of Company: G4S Secure Solutions

Street: 6499 N. Powerline Road

City: Ft. Lauderdale

State: FL

Zlp: 33309

Province/Region:

Country: United States

Employer's Phone: 954-771-5006

Job Title: Security officer/Site Supervisor

Employed From: 06 2000

Employed To: 09 2006

Ending Salary: 2440

Supervisor's Name: Ed Presutti

Employment Status: Full Time

Job Duties and Responsibilities:

Train new Officers for site specific duties. In charge of site scheduling and pay roll. Provides timely reports to upper management. * Maintain accident/incident reports and operation of CCTV

system.

Reason For Leaving: Moved to Ohio

May we contact this employer for a reference?

Yes

While in this position, if you were employed under a

different legal name, please list that here:

Name of Company: Baja Beach Club

Street: 3339 N. Federal Highway

City: Ft. Lauderdale

State: FL

Zip: 33309

Province/Region:

Country: United States

Employer's Phone:

Job Title: Door Greeter

Employed From: 05 1999

Employed To: 06 2000

Ending Salary: 16640

Supervisor's Name: Shane Land

Employment Status: Full Time

Job Duties and Responsibilities:

Checked Id's of patrons entering night club. Provided Security for co workers and mangers. Worked with the Promotion department for the

club

Reason For Leaving:

May we contact this employer for a reference?

No

While in this position, if you were employed under a

different legal name, please list that here:

EDUCATION

High School/GED

Name of school:* Hollywood Hills

Did you graduate?* Yes

City:* Hollywood

Diploma Type:* HIGH SCHOOL

State:* FL Province/Region:

Zip:* 33025

Country:* United States

Associates

Name of school:

Major: Criminal Justice Adm

Address:

Degree Type: BACHELORS

Did you graduate? Yes

City: Phoenix

State: AZ Province:

Zip: Country:

Undergraduate

Name of school: University of Phoenix

Major: Criminal Justice

Address:

Degree Type: ASSOCIATES

City: Phoenix

Did you graduate? Yes

State: AZ Province:

Zip: Country:

List scholastic honors, specialized training and/or apprenticeship details that may be helpful in considering your application. When adding, please provide as much detail as possible about the dates of these activities, locations and skills or experience obtained.

LICENSES/CERTIFICATIONS

Professional Licensure

Please Provide Professional Licenses/Registrations held, Include License Number and Expiration Date.

Туре

State

Number

Date Issued

Expiration Date

If you are applying for a job category that requires licensure, please answer the following question: is your license currently subject to any investigation by a licensing agency?

EMPLOYMENT PREFERENCES

Please indicate your employment preferences below:

Minimum Salary Desired:* 38000

Date Available for Work:* 12/15/14

Are you willing to relocate? Yes

Which shifts are you willing to work? Flexible

Which schedules are you willing to work? Full Time

Please answer all of the following questions.

* No

Do you have any relatives that currently work for Mount Carmel Health System or any of its affiliates?

If yes, please list their name(s):

* No

Have you ever been employed by Mount Carmel Health System or any other facility sponsored by Mount Carmel Health System?

If yes, enter the name and address of member/facility and dates of employment: Name:

Address:

Dates of employment:

WORK AUTHORIZATION/ELIGIBILITY

Please answer all of the following questions.

Are you 18 years of age or older? * Yes

* Yes Are you legally able to remain and work in the United States without Sponsorship?

Other than a minor traffic violation, have you ever pled guilty to or been convicted of a crime? * No

Consideration will be given to the nature, timing and severity of the crime.

If yes, give the Offense, the dates plead guilty or convicted, and the Name and Location of the court that convicted you.

Have you ever been sanctioned by the Office of inspector General of the Department of Health and * No Human Services (HHS/OIG) or the Government Services Administration (GSA) or excluded or suspended from participation in any federal or state health care program?

Have you ever been found to have engaged in substantlated abuse or neglect of children or adults under the laws of any state of the United States?

If yes, please list the States, dates, and explain the findings.

REFERENCES

* No

Please give three professional references (DO NOT list relatives or personal references). All fields required.

Name*	Name of Company*	Phone Number*	Email Address*	Relationship*	Years Known*
Jennifer Maxwell	Trans Systems	954 999 2108	JLBroday@Bellsouth.Net	Friend	18
Mario Ver- Valderamma	Coral Springs Police Dept.	954 600 8154	Camali02@bellsouth.net	Former Co worker	12
Roger Nye	G4S Secure	614 668 6087	Eric.Jenkins.mba@gmail.com	Former Enrollment counselor	6

RESUME

To copy and paste your resume:

1. Highlight the text on the resume you want to copy.

2. Press 'Ctrl C' to copy (Hold down the Ctrl key and press C).

3. Place the cursor in the RESUME box below.

4. Press 'Ctrl V' to paste the information.

Cover Letter

Resume

Columbus, Oh 43228

Home:

HYPERLINK "mailto:

Objective

A challenging and rewarding career in the Security industry utilizing past education, security experience and training with the opportunity for professional growth **EMPLOYMENT**

G4S Secure Solutions USA Inc. June 2000 - Present

An Upscale Security Officer (USO) providing unarmed security protection services at various community, commercial gatehouses, and commercial properties.

* Contracted Security officer 2000-2004

* Contracted Site Supervisor 2004-2006 and 2009-present.

- * Enforced G4S Secure Solutions USA Inc. policies and procedures, State Security Statues, and Post Orders.
- * Train new Officers for site specific duties.
- * In charge of site scheduling and pay roll.
- * Interact with diverse employee and customer groups as to promote harmonious relationships and success.
- * Provides timely reports to upper management.
- * Maintain accident/incident reports and operation of CCTV system.

Baja Beach Club May 1999-June 2000 Door Greeter

- * Checked Id's of patrons entering night club
- * Provided Security for co workers and mangers
- * Worked with the Promotion department for the club

Wyndham Resort and Spa November 1997-May 1999 Prep Cook

- * Prepares all food Items to order, following standard recipes and procedures within specified time limits
- * Handle food in a manner that is consistent with local health department guidelines
- * Stocks/restocks items on line
- * Understands and complies with food safety and temperature standards.
- * Clean and sanitize production equipment, work surfaces and kitchen according to cleaning schedules and procedures.

EDUCATION

* University of Phoenix

Bachelor of Science In Criminal Justice Administration/Management March 2013

* University of Phoenix

Associate of Arts in Criminal Justice December 2010

Knowledge and Skills:

- * Security Management
- * Security Audits
- * Physical Security
- * Ethics In Security
- * Corporate Security
- * Microsoft Office
- * Windows Operating Systems
- * Ability to work with diverse groups of people in a professional manner
- * Management/Leadership
- Information System Security Awareness Training

ACHIEVEMENTS and CERTIFICATIONS

- * Received 10-year service certificate from G4S Secure Solutions for longevity
- * Adult First aid and CPR Certified 2014

READ AND SIGN

Read the following carefully before signing.

- (X) * I CERTIFY that the information contained in this application is correct to the best of my knowledge. I UNDERSTAND I am applying for employment with Mount Carmel Health System. I understand that any false statements made as part of the application will be sufficient cause for dismissal. I also grant permission for the authorities of this institution to investigate my references and release said institution, as well as my former employers, from any and all liability resulting from such investigation. I further understand that the application does not constitute an employment contract and termination at will, by either me or Mount Carmel Health System, could occur during the employment relationship.
- (X) * I CONSENT to any and all medical and physical examinations including Substance and Alcohol tests as a condition of employment. I UNDERSTAND that as a condition of employment and continuing employment, if hired, I will, at least annually, obtain influenza vaccinations and/or immunizations if required by my Regional Health Ministry, unless I qualify for an exemption

permitted under organizational policy or unless mandatory vaccinations and/or immunizations are prohibited under applicable State law.

- (X) * I GRANT PERMISSION to Mount Carmel Health System to Investigate any and all healthcare fraud and abuse charges and convictions. I agree to release the organization from any and all liability resulting from such investigation. I understand that omission or misrepresentation of convictions for healthcare fraud and abuse, on my behalf, will be sufficient cause for cancellation of consideration for employment or dismissal from the organization if I have been employed.
- (X) * I UNDERSTAND that unless prohibited by applicable state or federal law, Mount Carmel Health System will conduct a preemployment background check including criminal history, education verification, reference checks, license verification and driving records (if required for the position).
- (X) * I UNDERSTAND and AGREE that this application for employment and any of the investigations conducted regarding my application may be shared with other members of Mount Carmel Health System and/or affiliates for other employment opportunities.
- (X) * I AGREE to comply with Mount Carmel Health System rules, regulations and policies and ACKNOWLEDGE that these rules, regulations and policies may be changed, interpreted, withdrawn, or supplemented anytime and without prior notice to me. I understand that any violation may result in disciplinary action including termination of my employment.
- (X) * I AGREE to furnish proof of identity and employment eligibility to work in the U.S within 72 hours of commencing employment.
- (X) * I UNDERSTAND that if I am employed I will be subject to any applicable introductory period established by the Regional Health Ministry at which I am hired.

Mount Carmel Health System is a member of CHE Trinity Inc. and an Equal Opportunity Employer (EEO).

My typed name below shall have the same force and effect as my written signature.

Candidate's/Applicant's Signature: Dennis Dewitt

Date: November 25, 2014



A MEMBER OF TRINITY HEALTH

POSITION DESCRIPTION

POSITION TITLE: Armed Safety & Security Officer	DEPARTMENT: Safety & Security
JOB CODE: M4850	REPORTS TO: Armed Supervisor of Safety & Security
DATE ISSUED: 2/1/2017	SUPERVISES: N/A
DATE REVISED: 2/1/2017	MATRIX REPORTING RELATIONSHIPS: N/A

Mount Carmel Mission Statement and Guiding Behaviors

Mission: We serve together in Trinity Health, in the spirit of the Gospel, to heal body, mind and spirit, to improve the health of our communities and to steward the resources entrusted to us.

The Guiding Behaviors set the expectation for how we work together in living our Mission and Core Values. They are:

- We support each other in serving our patients and communities.
- We communicate openly, honestly, respectfully and directly.
- We are fully present.
- We are all accountable.
- We trust and assume goodness in intentions.
- We are continuous learners.

Job Summary

- In accordance with the Mission and Guiding Behaviors; the Safety & Security Officer is to provide protective services to all persons and property across the Mount Carmel Health System.
- Ensure a safe environment for all associates, physicians, patients, and visitors in compliance with various regulatory standards to include, JC, OSHA, ect.
- Provide a quality service consistant with the values of Mount Carmel Health System for our associates, physicians, patients and visitors.

Job Qualifications (Knowledge, Skills, and Abilities)

- Education: High school graduate or GED required.
- Licensure / Certification: Receipt of Ohio Peace Officer Training Academy certificate of completion prior to being assigned a shift as an Armed Safety and Security Officer for Mount Carmel
- Experience: Three to five years experience in security, law enforcement or military disciplines or equivalent training which might include criminal justice, homeland security, or law enforcement academy is preferred.
- Effective Communication Skills
- Valid driver's license with good driving record maintained
- Customer service oriented able to function in high stress situations with personal restraint, integrity, and control.
- Basic computer skills that commensurate with the job.
- Ability to communicate effectively and appropriately with diverse populations.
- Ability to write, read, and communicate effectively in the English language.

Essential Responsibilities

- Exhibits each of the Mount Carmel Service Excellence Behavior Standards holding self and others accountable and role modeling excellence for all to see. For example: demonstrates friendliness and courtesy, effective communication creates a professional environment and provides first class service.
- Meets population specific and all other competencies according to department requirements.
- Promotes a Culture of Safety by adhering to policy, procedures and plans that are in place to prevent workplace injury, violence or adverse outcome to associates and patients.
- Relationship-based Care: Creates a caring and healing environment that keeps the patient
 and family at the center of care throughout their experience at Mount Carmel following the
 principles of our interdisciplinary care delivery system.
- (For patient care providers) Provides nursing care, ensures an environment of patient safety, promotes evidence-based practice and quality initiatives and exhibits professionalism in nursing practice within the model of the ANCC Magnet Recognition Program®.
- Maintain a safe and secure environment through job knowledge, skills and engagement.
 Intervene as appropriate in any safety & security observed issues.
- Enforces all governmental regulations, standards, policies associated with Mount Carmel Health System and Safety & Security policies, (i.e. smoking policy).
- Communicate safety and security discrepancies to the appropriate parties for mitigation.
- Ensure department goals & objectives are reached/maintained during assigned shift(s).
- Responsible for assuring that the Safety, Life Safety, security, and Emergency Management, and the JC standards are followed as it relates to the position.
- Responsible for completing and documenting assigned tasks, such as fire drill and safety tours on time.
- Ensure accurate documentation during assigned shift (i.e. security reports, safety incidents, activity logs).
- Ensure consistent delivery of professional, friendly, and courteous service.
- Comply with the organization and department dress code.
- Conduct initial and follow-up investigations, if warranted or directed, ensuring documentation of investigative steps.
- Proactive patrolling of the campus by foot, segway, or vehicle as assigned.
- Respond to all "STAT" calls expeditiously and safely.

- Be familiar with all hospital emergency codes and appropriate responses
- Responsible for completing assigned tasks/duties on time (i.e. fire drills and safety tours).
- Provide on-the-spot in-service training to staff where knowledge related discrepancies are noted.
- Demonstrate sound judgment, decision skills, and prioritizing responses to emergency situations.
- Ability to perform duties in an independent manner.
- Custodial responsibility for patient valuables and maintaining lost and found by following the proper protocols.

Other Job Responsibilities

- Inspects panic alarms, AED's, and call boxes as assigned.
- Provides escorts for associates, patients, visitors and students (where located) in the hospital areas and areas contiguous to the hospital areas.
- Issue parking citations and enforce the parking policy.
- Provide helipad duties during helicopter landings and departures
- Assist in the collection of ICES data as directed
- Monitoring of cameras and access control responsibilities as assigned
- Citizen arrest duties only in accordance with applicable laws and statutes
- Assist motorist with vehicle assistance as appropriate (i.e. jump start)
- Traffic enforcement keeping emergency entrances and approaches clear of non-emergency vehicle traffic
- Respond to safety incidents/visitor injuries as appropriate, ensuring medical is summoned as appropriate.
- During emergent events direct media to the proper area/contact
- Perform other assigned duties as directed by Management.
- Use proper radio procedures and monitors on-going activity
- Be familiar with geographic location and facility layout
- Immediately report and respond appropriately to Salient events, communicating the event to your supervisor.
- Provide for security per policy for VIPs
- Chemical spill clean up as assigned.
- Responsible for compliance with Organizational Integrity through raising questions and promptly reporting actual or potential wrongdoing.
- All other duties as assigned.

EQUIPMENT: This section requires a response of Yes or No from drop down box.

Radiation: No Electrical: Yes Mechanical: No

KEY TO FREQUENCY CODES for Physical Requirement Sections: This section requires a numerical response from drop

down box.

1 = Up to 33% of the time 3 = Over 66% of the time 2 = From 33% - 66% of the time 4 = Not Applicable

PHYSICAL REQUIREMENTS

Sitting: 3 Balancing: 3

Standing:3Reaching Overhead:1Walking:3Grasping:3Ability to be Mobile:3Keyboarding:: 3Bending:2Pinching:3Kneeling/Crawling:1Twisting:2

Stooping: 1 Climbing: 1

Turning/Pivoting: 2 Pulling: 2

Working Above Shoulder Level: 4

Pushing: 2 Maximum Weight: Equal to or greater than 35 lbs

Lifting: 3 Maximum Weight: Equal to or greater than 35 lbs

POTENTIAL EXPOSURE: This section requires a response of Yes or No from drop down box.

Blood / Body Fluid Contact: Yes Humidity: No Temperature: No Air-borne Pathogen: Yes Chemicals (Fumes / Burns): No Dust: No

Radiation: No Vibrations: No Noise: No

Personal Protective Equipment: This section requires a response of Yes or No from drop down box.

Gloves: Yes Shoes: No Goggles: Yes Aprons: No

Masks: Yes Head Covering: No Gowns: Yes

Emotional / Psychological Factors: This section requires a response of Yes or No from drop down box.

Trauma: Yes Grief: Yes Death: Yes Public Contact: Yes Deadlines: Yes

This job description is intended to describe the general content of and requirements for the performance of this job. It is not to be considered an exhaustive statement of duties, responsibilities, or requirements.

Reviewed and Approved by: <u>Drew Evans</u>

Title: Manager System Safety and Security

Date: 3/15/2017 Compensation Rep: Jim Kousaie

Title: Sr. Compensation Consultant

Date: 3/15/2017

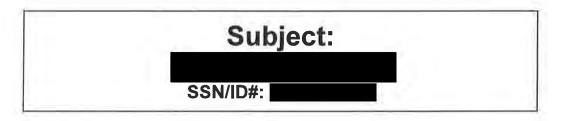
Case Status: ⊠ - Review

Service	Description	Status
Subject Data		0
Sex Offenders	Subject Name: - National	0
Sex Offenders	Subject Name: State: Ohio	0
Sex Offenders	Subject Name: State: Florida	0
Sex Offenders	Subject Name: State: Arizona	0
County Criminal	Felony, Misdemeanor and Other Offenses - Franklin, Ohio	0
County Criminal	Felony, Misdemeanor and Other Offenses - Maricopa, Arizona	0
County Criminal	Felony, Misdemeanor and Other Offenses - Broward, Florida	0
County Criminal	Felony, Misdemeanor and Other Offenses - Union, Ohio	0
Federal Criminal	Felony, Misdemeanor and Other Offenses - Franklin, OH; Union, OH	0
Federal Criminal	Felony, Misdemeanor and Other Offenses - Maricopa, AZ	0
Federal Criminal	Felony, Misdemeanor and Other Offenses - Broward, FL	0
Driving History	Ohio	
Prior Employment	G4s Secure Solutions	X
Prior Employment	G4s Secure Solutions	X
Prior Employment	Baja Beach Club	X
Prior Employment	Wyndham Resort And Spa	X
Education	Hollywood Hills	0
Education	University of Phoenix	0
National Criminal Database	Subject Name:	0
OIG & GSA Excluded Parties	OIG & GSA Excluded Parties	0
SanctionsBase	Certiphi SanctionsBase	0

X = Review \triangle = Pending \triangle = Pending Possible Key: = Pass

NOTICE: Please be advised that Certiphi Screening's "Pass/Review" ratings are exclusively based on objective standards of interpreting background information legally obtained under The Fair Credit Reporting Act (15 U.S.C. section 1681). Such "Pass/Review" assessments should not be inferred nor understood as legally binding indications, recommendations or consumer rating assessments by Certiphi Screening. Any and all interpretive procedures utilized in characterizing what constitutes all "Pass/Review" ratings are established individually by each client of Certiphi Screening and are merely included in said report for that client's specific requirements. Certiphi Screening does not make any employment or contracting decisions for its clients based on background information in accordance with section 1681m of the FCRA.

Due Diligence Investigation Service Entry/Support Positions - Standard Level



Client: Mount Carmel Health System - Human

Resources

Client Code: 200-200

Requester: Dorene Allen / 72504.655500

Report #: 4478997

Request Date: 01/19/2015 Delivery Date: 01/21/2015

Personal & Confidential: This report is to only be used in strict adherence to the terms and conditions set forth in our Agreement. © Certiphi Screening, Inc., 2015. All rights reserved. Certiphi Screening, Inc. is a subsidiary company of Vertical Screen, Inc. Direct any questions to Certiphi Screening, Inc., P.O. Box 541, Southampton, PA 18966 USA. Phone: (800) 803-7860; Fax: (888) 260-1380.

Subject Data

Pass

Name:

Date of Birth:

01/22/1978

Social Security /ID#:

SSN/ID# Validation

State Issued: Date Issued:

01/01/1978-12/31/1979

DOB Scan: Death Index: Valid SSN/ID#: Clear Clear Yes

Current Address:

638 Carpenter Ridge Columbus, OH 43228 Franklin County United States

Other Addresses:

COLUMBUS, OH 43205

Franklin County United States

Hollywood, FL 33025 Broward County United States

Marysville, OH 43040 Union County United States

Phoenix, AZ 85086 Maricopa County United States

Comments: None

Sex Offender Registry

Pass

Source Searched:

National Sex Offender Registry

Date of Search: Subject Covered: 01/19/2015

Date of Birth: Search Results:

01/22/1978 No Records Found

Comments:

None

Sex Offender Registry

Pass

Source Searched:

Ohio's Sex Offender Registration and Notification System (SORN)

Date of Search: Subject Covered: 01/20/2015

Date of Birth: Search Results:

01/22/1978 No Records Found

Comments: None

Sex Offender Registry

Pass

Source Searched:

Florida Sex Offenders/Predators Registry

Date of Search: Subject Covered:

01/20/2015

Date of Birth:

01/22/1978

Search Results: No Records Found

Comments: None

Sex Offender Registry

Pass

Source Searched: Date of Search:

Arizona Sex Offender InfoCenter

ate of Search: 01/20/2015

Subject Covered: Date of Birth:

01/22/1978

Search Results:

No Records Found

Comments: None

County Criminal

Pass

Source Searched: Records Covered:

Franklin County Common Pleas and County Seat Municipal Court

Felony, Misdemeanor and Other Offenses

01/20/2015

Date of Search: Subject Covered: Search Results:

No records found

Comments: None

County Criminal

Pass

Source Searched: Records Covered: Date of Search: Maricopa County Superior Court & County Seat Justice Court

Felony, Misdemeanor and Other Offenses

01/20/2015

Subject Covered: Search Results:

No records found

Comments: None

County Criminal

Pass

Source Searched: Records Covered: Date of Search: Broward County Circuit & County Courts Felony, Misdemeanor and Other Offenses

01/20/2015

Subject Covered: Search Results: Comments:

No records found

None

County Criminal

Pass

Source Searched: Records Covered:

Union County Common Pleas and County Seat Municipal Court Felony, Misdemeanor and Other Offenses

Date of Search:

01/19/2015

Subject Covered: Search Results:

No records found

Comments:

None

Federal Criminal

Pass

Source Searched:

USDC - Southern District of OH

Records Covered: Date of Search:

Felony, Misdemeanor and Other Offenses

Date of Search: Subject Covered: 01/19/2015

Search Results:

No records found

Comments:

None

Federal Criminal

Pass

Source Searched:

USDC - District of AZ

Records Covered:

Felony, Misdemeanor and Other Offenses

Date of Search: Subject Covered:

01/19/2015

Search Results: Comments:

No records found

None

Federal Criminal

Pass

Source Searched:

USDC - Southern District of FL

Records Covered:

Felony, Misdemeanor and Other Offenses

Date of Search:

01/19/2015

Subject Covered: Search Results:

Comments:

No records found

None

Driving History

Pass

Source Searched:

Ohio Bureau of Motor Vehicles

Date of Search: License Number: 01/19/2015

License Type: License Class:

PERSONAL OPERATOR

License Status: Issue Date: Expiration Date:

Valid 01/22/2014 01/22/2018

Endorsements: Restrictions:

None CORRECTIVE LENSES

OH Total Current Points:

This state did not return a current, active point total

Activity History:

None

Comments:

None

Supporting Documents:

MVR Report

Prior Employment

Review

Employer: Location:

G4s Secure Solutions information was not available

Position/Title:

Site Supervisor

Title Reported by Subject:

Site Supervisor

Employment/Contract Dates:
Dates Reported by Subject:

06/05/2000 to present 09/00/2006 to present

Reason For Leaving: Eligible for Rehire/Contract:

Information was not available. Information was not available.

Source: The Work Number for Everyone

Date of Search: 01/19/2015

Comments: Please note that the dates of employment provided by

this employer differ from what was reported by the

subject.

Prior Employment

Review

Employer: G4s Secure Solutions

Location: Information was not available.

Position/Title: Site Supervisor

Title Reported by Subject: Security Officer/site Supervisor

Employment/Contract Dates: 06/05/2000 to present 06/00/2000 to 09/00/2006

Reason For Leaving: Information was not available. Eligible for Rehire/Contract: Information was not available.

Source: The Work Number for Everyone

Date of Search: 01/20/2015

Comments: Please note that the dates of employment provided by

this employer differ from what was reported by the

subject.

Prior Employment

Review

Employer: Baja Beach Club

Note: The subject has requested that we do not contact this

employer.

Prior Employment

Review

Employer: Wyndham Resort And Spa

Note: This employer was not contacted because the subject's

employment with this firm falls outside of the time frame specified in your profile, or because we already contacted the prerequisite number of employers specified in your

profile.

Education History

Pass

School:

Hollywood Hills High School

Location: Years Attended:

Years Reported by Subject:

Degree:

Degree Reported by Subject:

DegreeScan:

Credit Hours Obtained:

Major:

Major Reported by Subject:

Source: Comments: Information was not available

Graduated 06/00/1997 00/00/0000 - 00/00/0000 High School Diploma

HIĞH SCHOOL

Clear

Information was not available Information was not available

None reported

DebbieInformation was not available, Records Retention

None

Education History

Pass

School: Location:

Years Attended:
Years Reported by Subject:

Degree:

Degree Reported by Subject: DegreeScan:

Credit Hours Obtained:

Major:

Major Reported by Subject: Source:

Comments:

University Of Phoenix

Information was not available 10/27/2008 to 12/31/2010 00/00/0000 - 00/00/0000

Associates of Arts in Criminal Justice ASSOCIATES

Clear

Information was not available

Criminal Justice Criminal Justice

The National Student Clearinghouse

Please note that the subject was also awarded a Bachelor

of Science in Criminal Justice Administration and

Management on 03/31/2013.

National Criminal Database

Pass

Source Searched: Date of Search:

Subject Covered:

Search Results: Comments: National Criminal Database

01/19/2015

No records found

ments: None

OIG & GSA Excluded Parties

Pass

Source Searched:

OIG & GSA Excluded Parties

Date of Search:

01/20/2015

Subject Covered: Search Results:

No records found

Comments:

None

Note: This search covers the HHS Office of Inspector General's (OIG) List of Excluded Individuals/Entities (LEIE), and the General Service Administration (GSA) - Excluded Parties List (EPLS) and System for Award Management (SAM). These lists include individuals and entities excluded from federally-funded health care programs, and parties debarred,

suspended, proposed for debarment, or declared ineligible by agencies or by the General Accounting Office.

Certiphi SanctionsBase ™

Pass

Source Searched:

Certiphi SanctionsBase ™

Date of Search:

01/19/2015

Subject Covered: Search Results:

No records found

Comments:

None

Note: The Certiphi SanctionsBase is a proprietary database of sanctions, disciplinary and administrative actions taken by various federal and state healthcare regulatory authorities. The database currently contains information from the FDA, NIH, GSA, OFAC as well as hundreds of other federal and state-level licensing and regulatory bodies. Please advise if you would like more detailed information on the exact contents of Certiphi's SanctionsBase.

> **End of Report Copy of Credit Report Attached**

	TRANSU	INIOI	1 ID	REPORT					
<for></for>									<time> 13:34CT</time>
<subject> WITT, DENNIS <current address=""></current></subject>	OLUMBUS OH.			MATCH		<ssn></ssn>		1/78	E RPTD>
	YSVILLE OH. OLUMBUS OH.			<pos]< td=""><td>TION></td><td>•</td><td></td><td>10/0</td><td>б</td></pos]<>	TION>	•		10/0	б
G4S SECURE SOLUTIONS				SUPER	RVISOF	•	8/13	6/0	n
645 SECURE SOLUTIONS							5/11	6700	
S P E C I A L M E **** 0019 INQUIRIES									
ID REPORT SERVICED B TRANSUNION 2 BALDWIN PLACE, P.		, CHE	STER	, PA. 1	9022		8(00-888	3-4213
END OF TRANSUNION RE	DODE								



www.SkillSurvey.com | (610) 947 - 6300

SKILLSURVEY 360° FEEDBACK REPORT®

Candidate:

Candidate IP Address: 129.42.208.183

User: Dorene Allen

Date: Monday, January 26, 2015

Report History:

Report Re-finalized: January 26, 2015 - 10:22AM Report Generated: January 20, 2015 - 12:43PM

ABOUT SKILLSURVEY:

SkillSurvey is the leading provider of online reference assessment solutions that increase quality of hire and improve recruiting efficiency. Using SkillSurvey, organizations improve the quantity and quality of information they collect regarding a candidate's past work performance, providing better information to recruiters and hiring managers as they make decisions on new hires. SkillSurvey also significantly reduces time and money spent on reference checking. This breakthrough, patent-pending approach to reference assessments is based on over 25 years of research in job competency modeling. More information is available at www.SkillSurvey.com.

Note:

SkillSurvey Pre-Hire 360 on:

Mount Carmel

Candidate Position: Safety and Security Officer

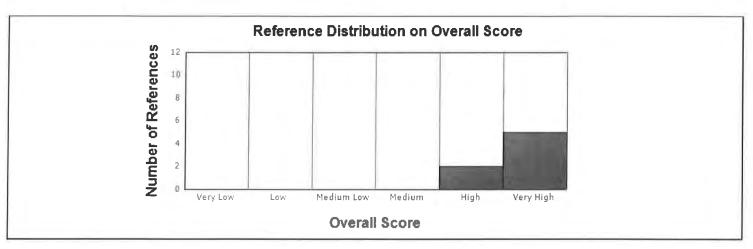
Security Officer Position Survey



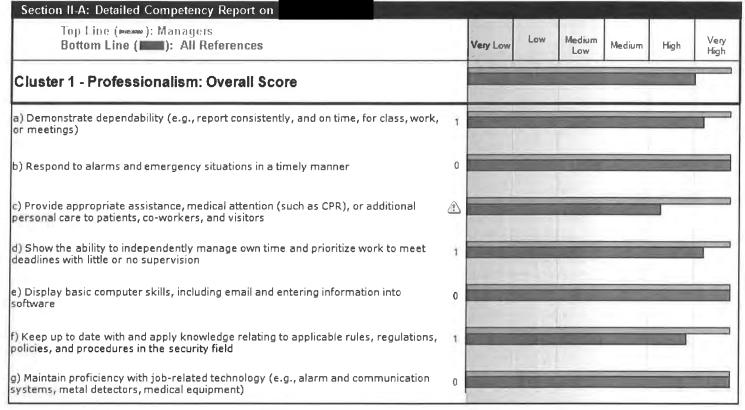
Overall Score

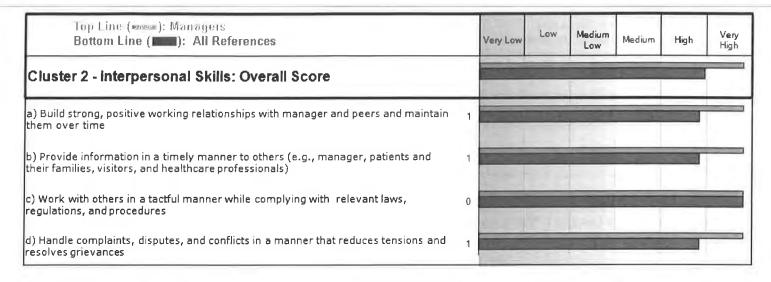
SkillSurvey has assessed over 1,900 Security Guards and Loss Prevention candidates. benchmarked against a recent sample of these individuals.

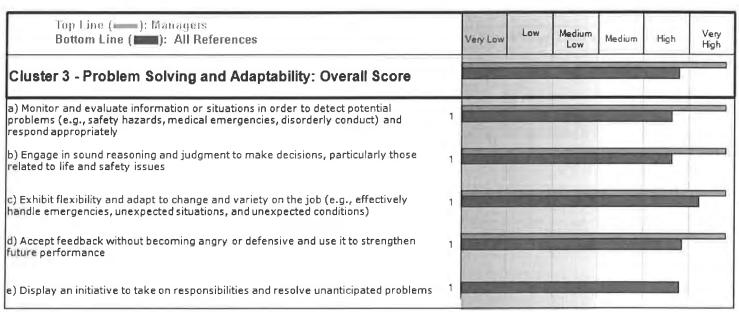


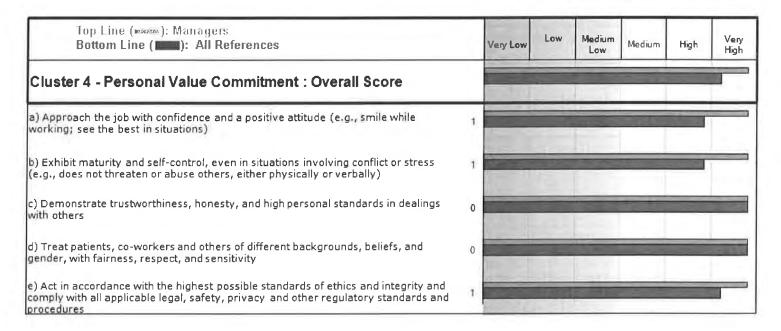


Note: Page to the bottom of this report for interpretation of the yellow caution image.









Top Line (****): Managers Bottom Line (****): All References	V	ery Low	Low	Medium Low	Medium	High	Very High
Cluster 5 - Alignment with Patient Satisfaction [HCAHPS]: Overall Score							
a) Provide information in a timely manner to others (e.g., manager, patients and their families, visitors, and healthcare professionals)	1			Name of			
b) Treat patients, co-workers and others of different backgrounds, beliefs, and gender, with fairness, respect, and sensitivity	0						

Section II-C - Additional Feedback on

1. Responses to the question, "Were you involved in the decision to hire this person at your company?"

Yes: 4/7 (57%) No: 3/7 (43%)

2. Responses to the question, "Would you work with this person again?"

Yes: 7/7 (100%) No: 0/7 (0%)

Section III: Verbatim Comments on

NOTE: Individual comments separated by horizontal lines

Strengths:

- 1 Job knowledge 2 Works well with others 3 Dependability
- Communicates well with a diverse multicultural community. Able to adapt well in any environment. Takes charge in the absence of supervisors.
- Communication Training Discipline
- Dennis has always been dependable, punctual and professional.
- · Extremely trustworthy and dependable Willing to educate himself Passionate about security and law enforcement
- People skills as well as upper management
- Very trustworthy and motivated. Extreemly honest and reliable.

Could Improve:

- 1 Appearance. Does not always proper uniform 2 Radio procedures.
- Not using his full potential at work due to limited resources. Needs to be challenged more. Needs to be more proficient as a first responder.
- Continue to work on leadership qualities Continue to strive to better self professionally Further Education
- N/A

- -Development on management level problem solving -Teaching peers concepts -Finding professional development opportunities
- Dennis is a very reliable employee and has a lot of integrity.
- Focus on details of task completion. Cross and Dot.

Section IV: Custom Question Results

No Custom Questions Enabled

Section V: Reference Information on

Recruiter Entered Candidate January 19, 2015

Candidate Submitted References January 19, 2015

Report Finalized January 20, 2015

Candidate Response Time 0.02 Calendar Days 0.02 Business Days



Reference Response Time* 0.04 Calendar Days 0.04 Business Days



Reference Response Rate: 100% # of References Entered: 7 # of Responses: 7

Section VI: Reference Detail for

Managers

Reference Name:

Mr. Roger Nye

G4S

Completed?

01/19/2015 (0.00 business day(s), 0.00

calendar day(s))

Reference Industry:

Relationship to Candidate:

Manager

Reference Company:

Candidate Job Title:

Reference Current Job

Strategic Account Manager

Title:

Reference Job Title:

Area Supervisor

Dates:

09/18/2006 To 01/01/2015 (8 years, 4

months)

Reference Address:

Columbus, OH 43068 USA

Reference Phone#:

W: 614-560-9872

Reference Email:

Roger.Nye@usa.g4s.com

Reference IP Address:

70.194.206.137

Does Reference/Referee want to be informed of professional development opportunities? Yes

Reference Name:

Mr. Lorren Burnett

Completed?

01/19/2015 (0.02 business day(s), 0.02

calendar day(s))

Reference Industry:

Relationship to Candidate: Manager

Dates:

Reference Company:

Candidate Job Title: G4S

Reference Job Title:

Area Manager

03/01/2014 To 01/19/2015 (0 years, 11

months)

Reference Address:

Reynoldsburg, OH 43068 USA

Reference Phone#:

W: 614-322-5100

Reference Email:

Lorren.Burnett@usa.g4s.com

Reference IP Address:

66.148.229.146

Does Reference/Referee want to be informed of professional development opportunities? Yes

Non-Managers

Reference Name:

Mr. Eric Jenkins

Completed?



^{*} Median number of days

SkillSurvey Pre-Hire 360

01/19/2015 (0.04 business day(s), 0.04

calendar day(s))

Reference Industry:

Relationship to Candidate: Peer (or Colleague)

Reference Current

Reference Company: University of Phoenix Ohio Health

Candidate Job Title:

Company:

Reference Current Job Title:

Physician Practice Manager

Reference Job Title:

Enrollment counselor Dates:

10/20/2008 To 12/20/2010 (2 years, 2 months)

Reference Address:

Grove City, OH 43123 USA

Reference Phone#:

W: 614-668-6087

Reference Email:

Eric.Jenkins@OhioHealth.com

Reference IP Address:

165.171.240.50

Does Reference/Referee want to be informed of professional development opportunities? No

Reference Name:

Mr. Ted Damon

Completed?

01/20/2015 (0.95 business day(s), 0.95 calendar day(s))

Reference Industry:

Relationship to Candidate:

Coworker

Reference Company:

G4S

Candidate Job Title:

Reference Current Company:

All American Windows

Reference Current Job Title:

Service technician

Reference Job Title:

Security officer

Dates:

03/18/2002 To 04/18/2005 (3 years, 1

month)

Reference Address:

Ft. Lauderdale, FL 33309 USA

Reference Phone#:

W: 954-709-9618 Ted82nd@yahoo.com

Reference Email: Reference IP Address:

166.172.188.195

Does Reference/Referee want to be informed of professional development opportunities? No

Reference Name:

Mr. Mario Vera-Valderamma

Mr. Mario Vara-Valderrama

Completed?

01/20/2015 (1.04 business day(s),

1.04 calendar day(s))

Reference Industry: Reference Company:

G4S

Relationship to Candidate: Coworker Candidate Job Title:

Reference Current

The City of Coral Springs/ Coral

Reference Current Job

Law Enforcement Officer

Company:

Springs Police De

Title: Dates:

06/01/2004 To 09/15/2006 (2 years,

4 months)

Reference Address:

Reference Job Title:

Coral Springs, FL 33065 USA

Reference Phone#:

W: 954-600-8154

Site Supervisor

Reference Email:

Mohican5524@gmail.com

Reference IP Address:

99.3.150.238

Does Reference/Referee want to be informed of professional development opportunities? No

Reference Name:

Mr. Glen Hager

Completed?

01/20/2015 (0.98 business day(s), 0.98

calendar day(s))

Reference Industry: Reference Company: Relationship to Candidate: Client (or Customer) Candidate Job Title:

Reference Job Title:

IBM Manager

Dates:

08/28/2009 To 01/19/2015 (5 years, 5

months)

Reference Address: Reference Phone#:

Columbus, OH 43228 USA

W: 859-509-2343

Reference Email:

Glen@us.ibm.com

centurion94u@yahoo.com

Page 6 of 7

Reference IP Address: 184.91.37.229

Does Reference/Referee want to be informed of professional development opportunities? No

Reference Name:

Mr. Brian Beall

Completed?

01/20/2015 (0.01 business day(s), 0.01

calendar day(s))

Reference Industry:

Relationship to Candidate: Coworker

Reference Company:

Fluor

Candidate Job Title:

Reference Job Title:

Mail Clerk

Dates:

12/14/2009 To 01/20/2015 (5 years, 1

month)

Reference Address:

Columbus, OH 43228 USA

Reference Phone#: Reference Email:

W: 614-308-6714 BBeall@us.ibm.com

Reference IP Address:

129.42.208.184

Does Reference/Referee want to be informed of professional development opportunities? No

🛆 A caution image indicates that there was a rating difference of 3 or more points between the References for a particular behavior. This indicates that there was a difference of opinion (or perception) among the References (e.g., for the same behavior, Reference #1 rated the Candidate a "7," Reference #2 rated the Candidate a "6," Reference #3 rated the Candidate a "6," and Reference #4 rated the Candidate a "4." The difference between the rating of Reference #1 compared to that of Reference #4 was a total of 3 points; thus the caution image.) Analysis of a large sample of Candidates indicates that the appearance of a caution image next to a behavior occurs approximately 8% of the time. We do not recommend that you tell the Candidate that there was a difference in opinion between their References; however, the caution image does serve as a prompt to encourage you to engage in further dialogue with the Candidate on that particular work behavior.

If, however, you observe a caution image next to every or most all behaviors, this usually means that a particular Reference rated the Candidate quite differently than the other References on most all behaviors (that is, rating the Candidate mostly very low, or mostly very high, in comparison to the other References). Analysis of a large sample of Candidates reveals that this occurs approximately 0.45% or less than one-half of 1% of the time. As stated previously, we do not recommend that you tell the Candidate that there was a difference in opinion between their References; however, the appearance of many caution images serves as a prompt to encourage you to engage in further dialogue with the Candidate, such as a conversation around whether there were any issues with the Candidate's job performance. If you do not uncover any performance-related issues, and the SkillSurvey results appear to be inconsistent with all the other materials that you have gathered on the Candidate, you may wish to call all of the Candidate's References in the unlikely event that one of the References had reversed the 1-7 scale when they rated the Candidate (e.g., a Reference may have thought that a "1" meant that the Candidate always exhibited the competency behavior, even though the instructions given to each Reference indicated that a "7" means the Candidate always exhibited the competency behavior). That said, it is common for reference feedback to vary according to the method used (letter, phone, in person, online), and degree of confidentiality afforded to the Reference, with more candid feedback occurring when there is greater confidentiality.

Regardless, SkillSurvey reports should be interpreted in light of other information that you have available on the individual. These reports should never be used as the sole basis for making a hiring, developmental, or promotional decision.

How to interpret the Red text for an IP Address:

An IP Address usually represents a unique computer that belongs to an individual. A bold red color text for an IP address on the report indicates that the same IP Address was used more than once and that there could be a problem with the authenticity of the References that a Candidate has provided. The following scenarios would trigger the bold red color text:

- If the Candidate IP Address is in red text, this means that the Candidate's IP address also matches the IP Address of one or more of the provided References
- If the Candidate IP address is not in red text, but one or more the References have a matching IP address in red text

We cannot guarantee that the above situations definitely mean that the references are not authentic. There is a possibility that Candidates and References can have the same IP address for legitimate reasons. For example, this may happen when some organizations have a corporate security policy where all outgoing traffic to the Internet is set to the same IP Address.

In instances where the Candidate and References do not work for the same organization, there is an increased probability that it's an issue with authenticity.

Mount Carmel Health System

Competency-Based Orientation and introductory Period Evaluation

Safety & Security

Associate Name:	ID Number:	Job Title: Security Officer	_X_ New Hire Transfer Additional job code
			Additional job code

Core Competencies	M			Compe more th				on		
Based upon job description, performance standards, and regulatory/accrediting standards.	Return	Observation of daily work	Post-last	Mock Event/ Simulation	QI Monitors/ Audits	Peer Review	Case Study	Discussion Group	Date	Competency Assessed by: (signature and credentials)
Effective in patrol techniques, communications use of cameras-monitoring/recording, escorts, door openings, assist calls. Knowledge of location of Security sensitive areas.	N	×				×			10-17-16	Cuparia
Enforces policies & procedures	W	X				K			61118	'D/v.
Completes accurate incident report documentation/investigation and follow-ups as appropriate	1	X				K			6171	0.N:
Completes accurate activity logs	1	×_		-		><			6011	
Ability to apply clinical restraints and assistance	X	-	1	Y		X.			1.17	V
Ability to work independently	X	V		1					4/7	V.
Completes timely fire drills and critiques	×		-	X		X		J)	62/7-	N. D.W.
Understands ILSM protocols	X							1	6-1	IL ON.
Ability to turn off Med Gas per policy	X			-		×	1.	-	6.17	-A JA
Workplace Violence policy knowledge	1				_		V	X	617	W Q.N.
Ability to process visitors after-hours or as required	V	Y				1		14.2	6-17	IF THE
Ability to lock and unlock facility (includes Lockdown plan)	X	V				×	1		6-17-	IN DA
Management of Aggressive Behavior and de- escalation techniques	V	x		X					6-17	15 p.S.
Understands Safe Medical Device Act responsibilities		,						X	4.15	-D D.N
Helicopter operations- Safety duties	V	V				X	151		619-	15 12 2
Discernment of sentinel events-notification protocols	N	-							1-1	1-15 12. N.
Knowledge of Emergency Codes and security response (i.e. Code Red, Code Adam, Code Orange, etc).	×	¥		×		×			1-12-	v- 0. N.
Follows the department uniform and dress code	X								1017	or aN.
Disseminates pertinent info (pass on book, memo, reports, BOLO)	X	X				K			6-17	or 0.d
Understands Forensic responsibilities	V			V		X			1-17-	1 0.0
Understands role and actions- VIP/Media event	Ý			1			150		40%	Tr Dis
Enforces Tobacco Free policy	X	¥				X		0	677	-15 D.N
Officer can articulate use of force and demonstrate take downs and the use of defensive weapons: ASP	1				, ,	1	. 6			
& Pepper Spray and law enforcement restraints: (i.e. handcuffs)	70	6	3	50	ha	el		12	-	D.h.
Officer demonstrates the ability to co-operate with other agencies, departments, and staff as appropriate	X	¥				d			617	r p.J.
Officer has a basic understanding of the National Patient Safety Goals.	X	-17						X	679-11	0:00
Officer demonstrates proper telephone etiquette.	V	Y.		2.5		X	(012	I WAS

Officer demonstrates the proper radio communications-understands RF interference	X	x		×		8-17-1	Scarlan-
Officer is knowledgeable of all security alarms and	1	x		X		10-11-11	A
responds appropriately (panic, infant, etc).	X	~		10		10.11.0	N.D.
Officer conducts proper patient valuables receiving and returning	X	×		×		10-111	D.P.
Morgue procedures (MCSA only)	V	K		135		1	1 0.01.
Traffic ingress/egress control- normal and emergency	1			1		VII	7 10 010
(l.e. emergency room areas)	X					11/19	10.01.
The officer has demonstrated the proper use of Fire Extinguisher and knows where and what K type extinguishers are used for.	X					141	O.N.
Officer knows the Emergency Procedures for handling Hazardous Materials (chemical, asbestos, etc) and security response.	×			×		69	B P.N.
Officer understands their role in the incident command structure (HICS)	X				V	21	100
Understanding of response to elevator malfunction	X	54	-	+	1	V m	0
Proper PPE use- infectious, Chemical, Noise, PAPR	-	-	-	1	1	1	, O.N.
etc (i.e. universal precautions- chemical protection)	N	. X				Y M	1. 11.
	1	1		-		1000	VVI
MRI Safety	X					17.70	M. M.
Role in Bomb Threat- search techniques/staging	X				X	44 IV	D.M.
Knowledge of Burn Permit process	13					14/3/2	(D.N.
Understands Property Search policy and role	K	Y			0	- ANIX	P.N.
Suicide precautions/assessment	X	3			1	1.43-1	D.M.
Proper lifting/body mechanics Pediatric; (I year – 12 years)	12	N				4.1	D-N
Needs to involve parents if possible: Provide privacy as appropriate. Allow child to exercise some control. Speaks at eye level maintaining eye contact Uses direct approach with child, giving one direction at a time. Allows choice when possible.	x	¥				617	bor.
	-				-	-	
Adolescent: (13-17 years) Needs to recognize that this age group: Needs to be called by name or preferred name. Provide privacy/modesty Allows choice when possible, and encourages verbalization of concerns and fears. Tells patients behaviors that are permitted. Watches for body language and cue for feelings. Speaks directly to patient in simple medical terms. Concerns and fears.	X	×				6	N.
Seriatric: (65+)							
 Needs to establish that the patient is wearing glasses, hearing aids, or may have memory loss and recognizes the tools that are needed for effective communications during interviews and investigations. Does not shout at patients, speak slowly and distinctly. 	X	X				67	
Does not shout at patients, speak slowly and						•	0.v

'ya

Adult (18-64 years) Calls patient by preferred name. Allows choices when possible Provides for privacy/modesty Respects patient right to make informed decisions. Assists in relinquishing valuables Watches body language as cue for feelings. Interviews patient in a calm, reassuring manner concerning lost articles. Assists in controlling confused patient.	X,	×	21	n on
	Repeats instructions several times. Discuss one Item at a time. Assist in transferring patient under direction of a Registered Nurse. Provide privacy/modesty	X	×	6-17	Super

*

4





Ohio Peace Officer Training Commission

THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that

Private Security Firearms Requalification Program has completed the Ohio Conducted by

AimHi Private Security Academy

Awarded On August 02, 2020

Ohio Peace Officer Training Commission Dwight A Holcomb, Executive Director

School Commander

644827 A PSR20-304 Ohio Peace Officer Training Commission Vernon P. Stanforth, Champerson

Attorney General

REQUALIFICATION DUE BY 9/4/2021

This certificate alone does not authorize you to work as a security guard or private investigator. For licensing requirements contact the Ohio Department of Public Safety/Private Investigator Security Guard Services or visit http://pisgs.ohio.gov/

2017-18 Staff Annual Performance Review

MCHS_Safety and Security Officer_M2412

Organization: Security MCSA (Evans, Drew (265153) (Inherited)) (inactive)

Manager: Nelson, David A (271344) Evaluated By: Nelson, David A (271344) Location: MCHS - Mount Carmel St. Ann's

07/01/2017 - 06/30/2018

Overall

Manager Overall Evaluation

Calculated Rating: 3.25

Rating:

Fully Met

Comment:

Acknowledgement

Manager

Entered by:

Nelson, David A (271344)

Date:

08/18/2018

Status:

Acknowledge Review without Comments

Comment:

Employee

Entered by:

(On Leave) (

Date:

08/18/2018

Status:

Acknowledge Review without Comments

Comment:

Goals

Be considered for promotion within the next year since there are supervisor positions opening up soon

Due Date:

05/31/2018

Status:

Completed

Completion Date:

06/30/2018

Category:

2. Engaged Colleagues

Weight:

25

Manager Evaluation

Employee Evaluation

Rating:

Fully Meets

Rating:

Comment:

fully meets this goal and has

Comment:

interviewed for open supervisors positions in

the system.

Additional Manager Evaluation

To be armed since I have the certification.

Due Date:

03/31/2018

Status:

Completed

Completion Date:

06/30/2018

Category:

3. Operational Excellence

Manager E		Employee Evaluation
Rating:	Partially Meets	Rating:
Comment:	Due to number of times class was taken this goal is to be looked at in the future.	Comment:
Additional I	Manager Evaluation	
To contin	ue to help others to the best of my ability	and do the job that I am required of at all times.
Due Date:	05/31/2018 Status: Completed	Completion Date: 06/30/2018
Category:	2. Engaged Colleagues	
Weight:	25	
Manager Ev	valuation	Employee Evaluation
Rating:	Fully Meets	Rating:
Comment:	meets all requirements of a Safety Security Officer and is trying to help be a role model for newer officers in the department.	Comment:
Additional N	Appagor Evaluation	
		nities of advancement
To take al	Il necessary training in order for opportur 03/31/2018 Status: Completed	nities of advancement Completion Date: 06/30/2018
To take al Due Date: Category:	Il necessary training in order for opportur	
To take al Due Date: Category: Weight:	Il necessary training in order for opportur 03/31/2018 Status: Completed 2. Engaged Colleagues 25	
To take al Due Date: Category: Weight: Manager Ev	Il necessary training in order for opportur 03/31/2018 Status: Completed 2. Engaged Colleagues 25	Completion Date: 06/30/2018
To take all Due Date: Category: Weight: Manager Even	Il necessary training in order for opportur 03/31/2018 Status: Completed 2. Engaged Colleagues 25 valuation	Completion Date: 06/30/2018 Employee Evaluation
To take all Due Date: Category: Weight: Manager Ev Rating: Comment:	Il necessary training in order for opportur 03/31/2018 Status: Completed 2. Engaged Colleagues 25 valuation Fully Meets does try to take additional training by going to IRTB in New Mexico but needs to look at additional training options such as	Completion Date: 06/30/2018 Employee Evaluation Rating:
To take all Due Date: Category: Weight: Manager Eventating: Comment: Additional Measure	Il necessary training in order for opportur 03/31/2018 Status: Completed 2. Engaged Colleagues 25 valuation Fully Meets does try to take additional training by going to IRTB in New Mexico but needs to look at additional training options such as FEMA courses and other online courses. Manager Evaluation	Completion Date: 06/30/2018 Employee Evaluation Rating:
To take all Due Date: Category: Weight: Manager Eventing: Comment: Additional Manager	Il necessary training in order for opportur 03/31/2018 Status: Completed 2. Engaged Colleagues 25 valuation Fully Meets does try to take additional training by going to IRTB in New Mexico but needs to look at additional training options such as FEMA courses and other online courses. Idenager Evaluation	Completion Date: 06/30/2018 Employee Evaluation Rating: Comment:
To take all Due Date: Category: Weight: Manager Eventaring: Comment: Additional Metalogical Metalogica	Il necessary training in order for opportur 03/31/2018 Status: Completed 2. Engaged Colleagues 25 valuation Fully Meets does try to take additional training by going to IRTB in New Mexico but needs to look at additional training options such as FEMA courses and other online courses. Idenager Evaluation	Completion Date: 06/30/2018 Employee Evaluation Rating:
To take all Due Date: Category: Weight: Manager Ev Rating: Comment:	Il necessary training in order for opportur 03/31/2018 Status: Completed 2. Engaged Colleagues 25 valuation Fully Meets does try to take additional training by going to IRTB in New Mexico but needs to look at additional training options such as FEMA courses and other online courses. Idenager Evaluation	Completion Date: 06/30/2018 Employee Evaluation Rating: Comment:

Reverence

Weight:

25

We honor the sacredness and dignity of every person.

- I connect with compassion and courtesy
- I respect every person.

• I smile, ackno	d names, introduce myself, my role wledge others, open doors, make my facial expressions and body la	eye contact, and say please	and thank you.	
Manager Evalu	ation	Employee Evalu	ation	
Rating:	Exceeded	Rating:	Exceeded	
Commitment to	o Those Who are Poor			
We stand with	and serve those who are poor, esp	pecially those most vulnerable).	
 I escort patier 	help those in need. its/family to their location. others are suffering or struggling a	and reach out to comfort and	assist them.	
Manager Evalu	ation	Employee Evalu	ation	
Rating:	Exceeded	Rating:	Exceeded	
Justice				
We foster right	relationships to promote the comm	non good, including sustainab	ility of Earth.	
 I avoid judging 	moment matter. intain healthy and trusting relatior g others because of differences or oid interrupting and multitasking.			
Manager Evalu	ation	Employee Evalu	ation	
Rating:	Exceeded	Rating:	Exceeded	
	eritage and hold ourselves accou		l and natural resources ent	rusted to our care.
I support otheI own every pr	y day with an owner's mind and a rs in fulfilling our Mission. oblem and seek to find a resolution care and invest in my own resilier	on.		
Manager Evalua	ation	Employee Evalu	ation	
Rating:	Exceeded	Rating:	Exceeded	
Integrity				
We are faithful t	to who we say we are.			
I put people atI practice grati	on for our Mission and Core Value the center of all I do by being pre tude. ibility for my role as a team memb	sent and attentive.		
Manager Evalua	ation	Employee Evalu	ation	
Rating:	Exceeded	Rating:	Exceeded	
Section Su	mmary			
Manager Evalu	ation	Employee Eva	aluation	
Rating:	Exceeded	Rating:	Exceeded	

Comment: Comment:

Manager Role Specific Accountabilities of the Job Description

Colleague demonstrates the essential functions, knowledge and skills in the job description, including other duties and competencies as assigned.

Manager Evaluation

Rating:

Fully Met

Response:

He meets essential functions and knowledge of the job description.

Additional Manager Evaluation

In consideration and review of the colleague's job description, describe and give specific examples of what essential functions of the job the colleague is meeting or exceeding. What does the colleague do well?

Manager Evaluation

Rating:

Fully Met

Response:

does a good job of trying to help out newer officers get to know the job.

Additional Manager Evaluation

In consideration and review of the colleague's job description, describe and give specific examples of any essential functions of the job where the colleague is partially meeting or not meeting. Identify any areas for improvement.

Manager Evaluation

Rating:

Fully Met

Response:

performs a proficient level for the Safety Security Officer position.

Additional Manager Evaluation

Section Summary

Manager Evaluation

Rating:

Fully Met

Colleague Role Specific Accountabilities of the Job Description

Colleague demonstrates the essential functions, knowledge and skills in the job description, including other duties and competencies as assigned.

Manager Evaluation

Rating: Fully Meets

Response: Fully functions in the Security Officer duties and competencies.

Additional Manager Evaluation

Employee Evaluation

Rating: Fully Meets

Response: Response:

2018-19 Staff Annual Performance Review

MCHS_Armed Safety and Security Officer_M4850

Manager: Nelson, David A (271344) Evaluated By: Nelson, David A (271344) Organization: Security MCSA+ (Nelson, David A (271344))

Location: MCHS - Mount Carmel St. Ann's

07/01/2018 - 06/30/2019

Overall			
Manager Overall E	Evaluation		
Calculated Rating:	3.4		
Rating:	Fully Met		
Acknowledgen	nent		
Manager			
Entered by:	Nelson, David A (271344)	Date:	08/26/2019
Status:	Acknowledge Review with Comments		
Comment:	is a great team member and has r	nade great	strides this year. Keep up the good work!
Employee			
Entered by:	(On Leave) (Date:	08/26/2019
Status:	Acknowledge Review without Comments		
Comment:			

Goals

Continue to provide stewardship and kindness when needed. Also to continue to find ways to improve as an officer. Learn from other officers.

Due Date:

05/30/2019

Status:

Completed

Completion Date:

05/30/2019

Category:

1. People Centered Care

Weight:

25

Manager Evaluation

Employee Evaluation

Rating:

Fully Meets

Rating:

Fully Meets

Comment:

has done a great job this past review period. He has maintained his OPOTA certification and has improved with his patient/

visitor interactions during stressful situations.

Comment:

I feel that as I continue to work here, I fully meet this goal, as I try to be kind to all patients and visitors, regardless of what the

situation is

Continue to take additional training classes besides the ones that are required. I would like to go back out to New Mexico for the Suicide bomb training course. I plan on going to the range at least once or twice a month as well.

Due Date:

05/30/2019

Status:

Completed

Completion Date:

05/30/2019

Category: 3. Operational Excellence

Weight: 25

Manager Evaluation

Rating: Exceeds

Comment:

has pursued additional training with additional training through DHS and has a seminar scheduled. He also worked very had to improve his shooting skills this past year.

Continue practicing those skills regularly.

Employee Evaluation

Rating: Fully Meets

Comment: I have done all the required training for the year. I would like to go with other officers back to New Mexico for the suicide bomb

training class. I will continue any and all educational opportunities that I am able to

achieve.

To be considered as a FTO and train new officers that are hired for the shift they are assigned to work

Due Date:

05/30/2019

Status:

Completed

Completion Date:

05/30/2019

Category:

6. Effective Stewardship

Weight:

25

Manager Evaluation

Rating: Exceeds

Comment:

has continued interest in becoming an FTO. Dennis's skills have improved to the level that the supervisors have considered

that request and will have Dennis start FTO training.

Employee Evaluation

Rating:

Fully Meets

Comment:

I would still like to be considered for this position as I feel I have grown and shown

leadership skills as time goes on

To hopefully be considered for supervisor position one day

Due Date:

05/30/2019

Status:

Completed

Completion Date:

05/30/2019

Category:

2. Engaged Colleagues

Weight:

25

Manager Evaluation

Rating:

Fully Meets

Comment:

is going in the right direction to be considered for future supervisor positions. He need to continue practicing control during stressful situations and also continue pursuing additional Environment of Care

training.

Employee Evaluation

Rating:

Fully Meets

Comment:

I applied for a supervisor position however,

was not chosen. Will apply for other

supervisor positions as they become open

Section Summary

Manager Evaluation

Employee Evaluation

Rating:

Exceeds

Rating:

Fully Meets

Core Values

Colleague demonstrates the Core Values of Trinity Health on a daily basis through his/her behavior and interaction with others, internally and externally, to achieve the goals and priorities of the organization. The Trinity Health Core Values are: Reverence, Commitment to Those Who Are Poor, Justice, Stewardship, and Integrity.

Manager E	valuation	Employee E	valuation
Rating:	Exceeded	Rating:	Exceeded
Response:	continues to improve with his interactions with others maintain professionalism and control. Continue practicing in those areas.	Response:	I do the best I can always when on duty. Regardless of the situation I feel the need to help the person the best I can.
Sectio	n Summary		
Manager E	valuation	Employee E	Evaluation
Rating:	Exceeded	Rating:	Exceeded
Role Spe	cific Job Duties		

Colleague demonstrates the essential functions, knowledge and skills in the job description, including other duties and competencies as assigned.

Manager Ev	aluation	Employee Ev	valuation
Rating:	Fully Met	Rating:	Exceeded
Response:	is very knowledgeable of his position. At times assumes the lead when it comes to decision making but must also allow his peers to make those decisions at times. The at times gets too involved in the clinical side and needs to stay within his security role.	Response:	As this is my fourth year, I feel that I have grown a lot within the system and continue to do so. I help new co workers out as much as I can. I am very flexible with my schedule and always will be. I always reach out to my superiors if there is an issue that I am unable to handle myself.
Section	Summary		
lanager Eva	aluation	Employee E	Evaluation
ating:	Fully Met	Rating:	Exceeded

¥			

Staff Annual Performance Review 2016 -

17

MCHS_Safety and Security Officer_M2412

Manager: Nelson, David A (271344) Evaluated By: Nelson, David A (271344) Organization: Security MCSA (Evans, Drew (265153) (Inherited)) (inactive)

Location: MCHS - Mount Carmel St. Ann's

07/01/2016 - 06/30/2017

-		0.0
	MAI	roll
N 2	VE	

Manager Overall Evaluation

Calculated Rating: 2.42

Rating:

Partially Met

Comment:

Acknowledgement

Manager

Entered by:

Nelson, David A (271344)

Date:

08/29/2017

Status:

Acknowledge Review without Comments

Comment:

Employee

Entered by:

(On Leave) (

Date:

08/28/2017

Status:

Acknowledge Review without Comments

Comment:

Goals

To continue to do the job to the best of my ability and show compassion when needed

Due Date:

03/31/2018

Status:

Completed

Completion Date:

06/30/2017

Category:

1. People Centered Care

Weight:

50

Manager Evaluation

Rating:

Partially Meets

Comment:

continues to work on his managing critical incident skills. needs to assure that these situations are appropriately handled to assure a safe

outcome for all involved.

Employee Evaluation

Rating:

Fully Meets

Comment:

Throughout the year I have continued to learn from other officers and learned a lot from their feedback as far as how to handle situations. The officers on my shift have been a great help to me and we work great

together as a core group.

Additional Manager Evaluation

To see what can be done for advancement opportunities

Due Date:

03/31/2018

Status:

Completed

Completion Date: 06/30/2017

Category:

2. Engaged Colleagues

Weight:

Comment:

50

Manager Evaluation

Rating: **Partially Meets**

is working on becoming more

independent when certain situation arise but there are occasions that others need to step in to assure the situations are handled appropriately. has had several coachings this past review period to work on

these issues.

Additional Manager Evaluation

Employee Evaluation

Rating:

Fully Meets

Comment:

I continue to learn new things daily and I continue to work better in many aspects as

time goes on

Section Summary

Manager Evaluation

Partially Meets

Employee Evaluation

Rating:

Fully Meets

Comment:

I have learned how to handle things differently than when I first started. My ability for this job continues to improve with the training that I

have received.

Core Values

Reverence

Rating:

Comment:

We honor the sacredness and dignity of every person.

- · I connect with compassion and courtesy
- I respect every person.
- I use preferred names, introduce myself, my role, and what I am doing.
- I smile, acknowledge others, open doors, make eye contact, and say please and thank you.
- I am aware of my facial expressions and body language.

Manager Evaluation

Employee Evaluation

Rating:

Fully Met

Rating:

Exceeded

Comment:

is very personable and is well liked by Comment:

his peers. He continues to work on his "teamwork" skills and body language during

certain situations.

Regardless of the situation I do the best I can to respect everyone and I treat everyone the

same

Additional Manager Evaluation

Commitment to Those Who are Poor

We stand with and serve those who are poor, especially those most vulnerable.

- · I reach out to help those in need.
- · I escort patients/family to their location.
- · I notice when others are suffering or struggling and reach out to comfort and assist them.

Manager Evaluation

Employee Evaluation

Rating:

Exceeded

Rating:

Exceeded

Comment:

is always willing to help anyone that is in need. Always assisting patients and staff

Comment:

I ask patients or visitors if they need anything if staff isn't around if a call light goes off.

as needed.

Additional Manager Evaluation

Justice

We foster right relationships to promote the common good, including sustainability of Earth.

- I make every moment matter.
- I build and maintain healthy and trusting relationships.
- I avoid judging others because of differences or circumstances.
- I listen and avoid interrupting and multitasking.

Manager Evaluation

Employee Evaluation

Rating:

Fully Met

Rating:

Exceeded

Comment:

generally is a good listener but on occasion needs to step back and observe and let the other officer take the lead on the situations without interrupting.

Comment:

Every situation is different and I have learned to adjust and properly handle each call that

we receive

Additional Manager Evaluation

Stewardship

We honor our heritage and hold ourselves accountable for the human, financial and natural resources entrusted to our care.

- I engage every day with an owner's mind and a servant's heart.
- I support others in fulfilling our Mission.
- I own every problem and seek to find a resolution.
- I practice self-care and invest in my own resilience.

Manager Evaluation

Employee Evaluation

Rating:

Fully Met

crisis situations.

Rating:

Exceeded

Comment:

has good core values he just needs to continue to work on his behavior during

Comment:

I do the best to my ability and make sure that

safety comes first.

Additional Manager Evaluation

Integrity

We are faithful to who we say we are.

- I am a champion for our Mission and Core Values.
- I put people at the center of all I do by being present and attentive.
- I practice gratitude.
- I take responsibility for my role as a team member.

Manager Evaluation

Employee Evaluation

Rating:

Exceeded

Rating:

Exceeded

Comment:

has the upmost integrity. He takes all responsibility for his actions and truly tries to address concerns as addressed by his

Comment:

I am always polite towards patients and visitors and listen to their concerns or needs

supervisor.

Additional Manager Evaluation

Manager Eva	aluation	Employee I	Evaluation
Rating:	Fully Met	Rating:	Exceeded
Role Spec	ific Accountabilities of the Job D	escription	
	ue demonstrates the essent description, including others.		
Manager Eva	aluation	Employee Ev	valuation
Rating:	Partially Met		
Response:	knows the competencies and how to do all tasks. continues to work on certain problem solving skills addressed by his supervisor and how to handle those situations appropriately and safely. has made some progress this year.	Response:	I do the job to the best of my ability and continue to show compassion when neede
Additional Ma	anager Evaluation		
Section	Summary		
lanager Eva	lluation		
Rating:	Partially Met		



From:

Drew M. Evans

Sent:

Sunday, November 22, 2015 10:37 PM

To:

Brittany R. Wurm

Cc:

Subject:

Amanda M. McCullouch; Michael Angeline

auron 1052

FW: Lewis Center Security

Aaron Ragland who was just hired for PT Lewis Center would like to move to FT at Lewis Center.

who is casual at MCSA would like to move to Lewis Center FT. Should I to a PCF or a IRF for this?

Also please take down all Lewis Center job postings for Security other than 1 PT spot. We are still actively trying to fill that.

From: Drew M. Evans

Sent: Sunday, November 22, 2015 10:01 PM
To: Brittany R. Wurm (<u>Brittany.Wurm@mchs.com</u>)
Cc: Michael Angeline; Amanda M. McCullouch

Subject: Lewis Center Security

I just talked to Caleb Durant and Lloyd Graham using the talking points provided by Communications about the Lewis Center campus. Both have decided to remain at MCSA and not transfer to Lewis Center. Can you please cancel the transfer.

Drew Evans

System Manager Safety, Security, Parking Services Mount Carmel Health System 500 S. Cleveland Ave. Westerville, OH 43081 (614)898-4149 aevans2@mchs.com

Mount Carmel Human Resources Non-Management Performance Appraisal Form

REQUIREMENTS]	in.	-
Demonstrates training with new equipment.	-	Yes or I	WO T	
2. Demonstrates training/education regarding new or revised documentation for severe.	me, policies/procedures, and quality	Yes	5	CANE.
 Demonstrates knowledge and Integration of bloodborne pathogen regulations eating). 	s/TB Into practice (Complies with TB	Yes	346	SE SO
 Demonstrates knowledge and integration of 7 safety practices (medical equiproparedness, life safety, hezardous muterial, safety including back existry), and focumented in HealthStream. 		Yes	S SUBAN	Pr. 3
 Demonstrates knowledge and skill in caring for population specific patients (Competency Evaluation Form and leap with education records in department). 		Yes		OURC
 Demonstrates knowledge of other regulatory practices as appropriate to area equired HIPAA education. 	/department practice. Has completed	Yes	3	~
. Demonstrates knowledge and securate documentation of time worked in the	suto/nated timekeeping system.	Yes		
. Other job specific requirements,		Yes		
nd his period of engancy. It is very much appreciated that Dennie is always accessfully completed his 90 day evaluation.	eys systianie in assisting with depo	runent needs v	nen ging open shift	. Dennis has
			Avi. ba	
	271244 Meneger ID	Date	8/17/2016	<u>⊃(•€1)</u>
Associate's Comments sociate's Signature widing Behaviors Score 3 wills and Knowledge Competencies Score #DIV/OI dividuals Goats for past 12 months) #DIV/OI			6/17/15	
Associate's Comments speciate's Signature Widing Behaviore Score Widing Behaviore Score Widing Annie Knowledge Competencies Score Widing Behaviore Score Widing Behavior	Meneger ID 4040316 Associate ID	. 6		
uiding Behaviore Score 3 kills and Knowledge Competencies Score (#DIV/0) dividuals Goats (for past 12 months) #DIV/0)	Meneger ID 4040316 Associate ID	. 6		

Mount Carmel Human Resources Non-Management Performance Appraisal Form

First Kama	Last Name Associate ID #:	90	Day
Please DOCUMENT	INDIVIDUAL GOALS: (for PAST 12 months) Indust Goals support Department, Business Unit and System Goals and provide RATINGS for your Individual Goals for the past year in the space	Rating Senio: 3 = aminostri peal 2 = seure programs to 1 = tracide to mules p peal Lis secures are securit	regrand book
provided below.			Rating
Individual Goal		Self	Manager
I would also to continu	re learning the policies and procedures Mt. Carmel has in place.		
Individual Goal	ming from the other officers on how to handle certain altustions as well as making		
sure I get all the vital is	information in key eliustions.		
individual Gost			
Continue to learn the is	layout of the hospital in order for me to get to an area in case of emergent situations.		
Individual Goal			
Individuel Goal Take all required trainli	ng courses.		
Individual Goal			
			- Interest

Mount Carmel Health System

Competency-Based Orientation and introductory Period Evaluation

Safety & Security

		76	DAY
Associate Name:	ID Number:	Job Title: Security Officer	X_New Hire Transfer Additional job code

Core Competencies	N	lethoc (ma		Component				on		
Based upon job description, performance standards, and regulatory/accrediting standards.	Return	Observation of daily work	Post-test	Mock Event/	QI Monitors/ Audits	Peer Review	Cese Study	Discussion Group	Date	Competency Assessed by: (signature and credentials)
Effective in patrol techniques, communications use of carneras-monitoring/recording, escorts, door openings, assist calls. Knowledge of location of Security sensitive areas.	V	×				×			6-11-8	Del con in
Enforces policies & procedures	V	X	-			X			11/18	'N/O'.
Completes accurate incident report documentation/investigation and follow-ups as appropriate	1	K				K			6111	0.N:
Completes accurate activity logs	1	K.				×			1.110	4. 11.
Ability to apply clinical restraints and assistance	X			V		X			1.11-1	10.6.
Ability to work independently	X	W							6/2	12.4.
Completes timely fire drills and critiques	4			X		X			6-17	11 000
Understands ILSM protocols	X								1	IN ON.
Ability to turn off Med Gas per policy	X					×			12.17	A DA
Workplace Violence policy knowledge	Z	1					V	X	2-12-	IN O.N.
Ability to process visitors after-hours or as required	V	4				1			10-17	IN DW
Ability to lock and unlock facility (includes Lockdown plan)	X	V				×			6-17	ON
Management of Aggressive Behavior and de- escalation techniques	V	x	П	X					6-17	15 D.S.
Understands Safe Medical Device Act responsibilities	0	,						X	4.12	-U D.N
Helicopter operations- Safety duties	V	V				X			611	15 h. d.
Discernment of sentinel events-notification protocols	K								4-17	-15 D.N.
Knowledge of Emergency Codes and security response (i.e. Code Red, Code Adam, Code Orange, etc).	×	X		×		x			1-12-	- 0-al-
Follows the department uniform and dress code	X								1-12	or all.
Disseminates pertinent info (pass on book, memo, reports, BOLO)	X	X				K	Ħ		6-17	or D.d
Understands Forensic responsibilities	V			y.		X		1	17	I n.J
Understands role and actions- VIP/Media event	V	1.0							407	المن الم
Enforces Tobacco Free policy	7	4		-		×			477	Ur D.N.
Officer can articulate use of force and demonstrate "take downs" and the use of defensive weapons: ASP	~					1				. 1
& Pepper Spray and law enforcement restraints: (i.e. handcuffs)	70	6	-	50	had	W			-	D.M.
Officer demonstrates the ability to co-operate with other agencies, departments, and staff as appropriate	X	X				d			617.	- p.J.
Officer has a basic understanding of the National Patient Safety Goals.	X							X	29-11	0.1
Officer demonstrates proper telephone etiquette.	V	V	ц,д)			X			6120	PAL

Officer demonstrates the proper radio communications-understands RF interference	X	K			X		\$-17-	No. IN
Officer is knowledgeable of all security alarms and	-	+		-			1. 10	1
responds appropriately (panic, infant, etc).	X	K			Ox		10.11.1	1.1.
Officer conducts proper patient valuables receiving	1	1.0			1		. 10	1
and returning	X	- ×			1		11/11	1. 12.01
Morgue procedures (MCSA only)	X	K			35		Thur	10.
Traffic ingress/egress control- normal and emergency						711	The state of	7
(i.e. emergency room areas)	X						1017	10
The officer has demonstrated the proper use of Fire							0	1
Extinguisher and knows where and what K type	1.7	1	1 1		1 1	1	11/11	K 2
extinguishers are used for.	X							0.
Officer knows the Emergency Procedures for								1
handling Hazardous Materials (chemical, asbestos,	X		1 m	1	X		Is an	13. 0
etc) and security response.							1071	10
Officer understands their role in the incident	11					Y	1011	1 0
command structure (HICS)	X					10	1 month	1 //-
Understanding of response to elevator malfunction	X	Y	-		7	Y	1	, 0.
Proper PPE use- Infectious, Chemical, Noise, PAPR		.,				1	17 .41	(0
etc (i.e. universal precautions- chemical protection)	5	·X	E. 1.				10	11.1
MRI Safety	X						100 Y	0.
Role in Bomb Threat- search techniques/staging						×	4211	10.
Knowledge of Burn Permit process	3				6.1	1	13/715	10.1
Understands Property Search policy and role	V	Y				o	YEY!	10.K
Suicide precautions/assessment	V	1				-	1-15-1	10.1
Proper lifting/body mechanics Pediatric; (I year – 12 years)	12	K					4.1	1.
 Allow child to exercise some control. Speaks at eye level maintaining eye contact Uses direct approach with child, giving one direction at a time. Allows choice when possible. 	×	¥					617	DV
Adolescent: (13-17 years)		-		-		_	1	
Needs to recognize that this age group: Needs to be called by name or preferred name. Provide privacy/modesty Allows choice when possible, and encourages verbalization of concerns and fears. Tells patients behaviors that are permitted. Watches for body language and cue for feelings. Speaks directly to patient in simple medical terms.	X	X					61	
 Concerns and fears. Geriatric: (65+) Needs to establish that the patient is wearing glasses, hearing aids, or may have memory loss and recognizes the tools that are needed for effective communications during interviews and investigations. Does not shout at patients, speak slowly and distinctly. Does not rush patient, gives them time to process information. 	X	X					W	0.N

 Repeats instructions several times. Discuss one item at a time. Assist in transferring patient under direction of a Registered Nurse. Provide privacy/modesty 	x	×	6-11	Supe
Adult (18-64 years) Calls patient by preferred name. Allows choices when possible Provides for privacy/modesty Respects patient right to make informed decisions. Assists in relinquishing valuables Watches body language as cue for feelings. Interviews patient in a calm, reassuring manner concerning lost articles. Assists in controlling confused patient.	X,	¥	21	715 N

New Employee Information Form (Used for information/EEOC/insurance reporting purposes only)

MCSA 2-9-15 Bryan

First Name	Middle Name	Last Name	* +	
Social Security No.		Hire Date (per offer letter)		
Street Address		Apt or P.O. Box		
City:	Columbus	State	OH	
County	Franklin	Zip Code	43228	
Country	United States	Email Address		
Home Phone Number (### - ### - ####)	2/2	Cell Phone Number (### - ### - ####)		
Other Phone Number (### - ### - ####)		Birthdate (MM/DD/YYYY)	01/22/1978	
Gender Male	Marital Status		O Pierrand	
	● Single	Married	O Divorced	
Female ()	○ Separated	○ Widowed	O Common-Law	
	O Head of Household			
Highest Education:	Bachelor's Degree			
Military Status: Military Status is used to track	No Military Service	O Active Reserve		
hase employees who are considered a veteran.	O Inactive Reserve	O Retired Military	•	
	O Veteran of the Vietnam Era	O Other Protected	Veteran	
	O Veteran (VA Ineligible)	O Vietnam & Other Protected Vet		
	O Pre-Vietnam-Era Veteran	O Not a Vietnam-	Era Veteran	
Ŧ 1	O Post-Vietnam-Era Veteran	O Vietnam-Era Ve	teran	

Trinity Health is an Equal Opportunity Employer. Please visit the Trinity Health Intranet home page (Nexus) for more information and a link to Trinity Health's Policy concerning Equal Employment Opportunity, Workforce Diversity and non-retaliation in the workplace.

Signed online

- Primary: You may select more than one otheric group; however, for EEO reporting purposes, only one group may be selected as	will not be used in the determination of hiring decisions, eligibility for promotion, transfer or tenure,					
primary.	OAmerica	n Indian/Alask		O Black/African Am	erican OAsian	
Ethnic Group	OHawaiia	n/Other Pacific	Islander	O White/Caucasian	O Hispanic/Latino	
- Secondary: (if applicable)		n Indian/Alaska n/Other Pacific		Black/African Am White/Caucasian		
Primary Emergency Contact Information:		TO BIOLITE BORNE	ISIBIIGCI	Willite/Caucasian	O Hispanic/Latino	
Name	Morgan Dick	kerson				
Address	110 Clinton					
	City Mt. Vei	mon	State C	Dh	Zip Code 43050	
Relationship	O Spous	e C) Mother	○ Father	O Daughter	
	OSister	C) Brother	○ Son	Other	
Phone Numbers	Home_740-	501-8730	Busine	\$\$	Other	
Secondary Emergency Contact Information:						
Name						
Address	650 Acacia E	rive	T			
	City Marysvi	ille	State C	h	Zip Code 43040	
Relationship	O Spouse	• C) Mother	○ Father	○ Daughter	
	○ Sister	•) Brother	○ Son	Other	

TRINITY HEALTH CONFIDENTIALITY AND NETWORK ACCESS AGREEMENT

The following rules for Confidentiality and Network Access apply to all non-public patient and business information (Confidential Information) of Trinity Health, its Ministry Organizations (MO), and other related organizations, referred to herein as the Unified Enterprise Ministry (UEM). The rules also apply to the non-public and business information of joint ventures, or of other entitles and persons collaborating with the UEM, to which the user has access. As a condition of being permitted to have access to Confidential Information relevant to my job function or role I agree to the following rules:

1. Permitted and required access, use and disclosure:

- I will access, use or disclose Confidential Patient Information (PHI) only for legitimate purposes
 of diagnosis, treatment, obtaining payment for patient care, or performing other health care
 operations functions permitted by HIPAA and I will only access, use or disclose the minimum
 necessary amount of information needed to carry out my job responsibilities.
- I will access, use or disclose Confidential Business Information only for legitimate business purposes of the UEM.
- I will protect all Confidential Information to which I have access, or which I otherwise acquire, from loss, misuse, alteration or unauthorized disclosure, modification or access including:
 - making sure that paper records are not left unattended in areas where unauthorized people may view them;
 - using password protection, screensavers, automatic time-outs or other appropriate security measures to ensure that no unauthorized person may access Confidential information from my workstation or other device;
 - o appropriately disposing of Confidential Information in a manner that will prevent a breach of confidentiality and never discarding paper documents or other materials containing Confidential Information in the trash unless they have been shredded
 - o safeguarding and protecting portable electronic devices containing Confidential Information including laptops, smartphones, PDAs, CDs, and USB thumb drives.
- I will disclose Confidential Information only to individuals who have a need to know to fulfill their
 job responsibilities and business obligations.
- I will comply with the UEM's access and security procedures, and any other policies and
 procedures that reasonably apply to my use of the computer systems and/or my access to
 Information on or related to the computer systems including off-site (remote) access using
 portable electronic devices.

2. Prohibited access; use and disclosure:

- I will not access, use or disclose Confidential Information in electronic, paper or oral forms for personal reasons, or for any purpose not permitted by UEM policy, including information about co-workers, family members, friends, neighbors, celebrities, or myself. I will follow the required procedures at UEM Ministry Organizations to gain access to my own PHI in medical and other records.
- I will not use another persons login ID, password, other security device or other information that enables access to the UEM's computer systems or applications, nor will I share my own with any other person.
- If my employment or association the UEM ends, I will not subsequently access, use or disclose any UEM Confidential Information and will promptly return any security devices and other UEM property.
- I will not engage in any personal use of the UEM's computer systems that inhibits or interferes
 with the productivity of employees or others associated with the UEM's operations or business,
 or that is intended for personal gain;
- I will not engage in the transmission of information which is disparaging to others based on race, national origin, sex, sexual orientation, age, disability or religion, or which is otherwise offensive, inappropriate or in violation of the mission, values, policies or procedures of the UEM;

TRINITY HEALTH CONFIDENTIALITY AND NETWORK ACCESS AGREEMENT

I will not utilize the UEM network to access Internet sites that contain content that is inconsistent
with the mission, values and policies of the UEM.

3. Accountability and sanctions:

- I will immediately notify the UEM Security Official or Privacy Official if I believe that there has been improper/unauthorized access to the UEM network or improper use or disclosure of confidential information in electronic, paper or oral forms.
- I understand that the UEM will monitor my access to, and my activity within, the UEM's computer system, and I have no rightful expectation of privacy regarding such access or activity.
- I understand that if I violate any of the requirements of this agreement, I may be subject to disciplinary action, my access may be suspended or terminated and/or I may be liable for breach of contract and subject to substantial civil damages and/or criminal penalties.
- If I lose my security device I will report the loss to the UEM Resolution Center immediately and I may be charged for its replacement.

4. Software use:

- I understand that my use of the software on the UEM's network is governed by the terms of separate license agreements between the UEM and the vendors of that software.
- I agree to use such software only to provide services to benefit the UEM.
- I will not attempt to download, copy or install the software on any other computer.
- I will not make any change to any of the UEM's systems without the UEM's prior express written approval.

5. Network:

- I understand that access to the UEM's network is "as is", with no warranties and all warranties are disclaimed by the UEM.
- The UEM may suspend or discontinue access to protect the network or to accommodate necessary down time. In an emergency or unplanned situation the UEM may suspend or terminate access without advance warning.
- The UEM may terminate this agreement, user access and use of Confidential Information at any time for any reason or no reason.
- 6. Employer acceptance of responsibility for an Individual with access to Confidential Information: (Applies to physicians/physician practices; other individual or facility providers; a vendor that is not a business associate; payers; any other unaffiliated organization).
 - I accept responsibility for all actions and/or omissions by my employees and/or agents
 - I agree to notify the UEM Resolution Center within 5 business days if any of my employees or agents who have access to the UEM systems or applications no longer need or are eligible for access due to leaving my practice/company, changing their job duties or for any other reason.
 - I agree to report any actual or suspected privacy or security violations made by my employees and/or agents to the UEM Privacy Official or Security Official.
 - I understand that the UEM may terminate my employee and/or agent's access.

TRINITY HEALTH CONFIDENTIALITY AND NETWORK ACCESS AGREEMENT

SIGNATURE PAGE RELATIONSHIP TO THE TRINITY HEALTH UNIFIED ENTERPRISE MINISTRY (UEM)

I am a: (Please check all that apply to you) Direct relationships with the UEM	
Associate (employee) at UEM (MO Name)	
Physician Credentialed on (MO Name) Medical Staff:	12 TAN 191
Volunteer at UEM (MO Name):	
Temporary/Contractor at a UEM Facility from: (name of agency)	
Student at UEM Facility from: (name of educational organization)	
Employed by or Associated with a UEM Credentialed Medical Staff Me	
Medical Staff Member's Employee or Temp Staff (name of practice)	
Medical Staff Member's Vendor's Employee (name of vendor)	
Vendor Providing Goods or Services to UEM	191 -1
Employee/Temp Staff of UEM's clinical services vendor: (name of vendor)	don)
Employee/Temp Staff of UEM's business services vendor: (name of vendor)	
Employee/Temp Staff of UEM's IT services vendor: (name of vendor)_	
UEM's Joint Venture or a Facility Managed by UEM	
Employee of a UEM Joint Venture (name of joint venture). Employee of a Hospital/Other Facility Managed by UEM (name of facility Managed by UEM).	IAA-
Credentialed Physician on Medical Staff of Hospital/Other Facility Man	ny):
Employee or Temp Staff of a Credentlaled Physician on the Medical	
UEM (name of physician's practice)	Starr of a Hosoital/Other Facility Managed by
Other	
Unaffiliated (non-credentialed) Physician/Other Provider: (name of practical provider)	rtice):
Employee of an Unaffiliated Physician or Facility: (name of practice or t	
Employee of a Payer: (name of payer)	
Researcher (Research study name);	
Other (name of employer)	
USER SIGNATURE If there are any items in this agreement that I do not understand I will contact person for clarification. My signature below acknowledges th agreement and realize it is a condition of my employment or association wi that I have received a copy of the Confidentiality and Network Access Agree	at I have read, understand and accept this ith the Trinity Health UEM. I also acknowledge
Print Name	
	1/23/2015
	1/20/2010
Signature of individual to be given access	Date
EMPLOYER SIGNATURE	
(Required when user is an employee or agent of: a physician/physician vendor that is <u>not</u> a business associate; any other organization unaffiliated	
My signature below acknowledges that I have read, understand and eccesponsor of the user who has signed this agreement above.	ept my responsibilities as the employer or the
Print Name	
Signature of employer of the individual to be given access	Date
After completing this form, please FAX to	
	3
Trinity Health Privacy Office Final 093008 UEM Version	

Print

TRINITY HEALTH DISCLOSURE OF INTEREST FORM

Please Print

Name:		- •
Title:	Safety and Security Officer	*
Organization/Department:	Security MCSA	
The purpose of this form is to considered in light of your podefined in the attached policy	osition within or relationship to	liations you or a family member may have that, when o Trinity Health, may potentially create a conflict of interest, as
state that I or a member of m	ny family have the following a naidered in conjunction with i	offict of Interest policy, a copy of which is attached, I hereby affiliations or interests and have taken part in the following my position or relationship to Trinity Health, might possibly
and its subsidiaries.	IP WITH TRINITY HEALTH any business arrangements	l: you or a family member have with Trinity Health, its affiliates
N/A		
2. RELATIONSHIP EXTERN Please describe any employn relationship with Trinity Healt etc.) N/A	ment or other relationship(s)	you have with any organization that has a business or other ng consulting activities, governance/directorship appointments,
N/A		
interest (example: holding a p products or services to/from 1	position as an officer, director	nily member participate which might constitute a conflict of ror consultant to a business entity providing or receiving aries.)
N/A		ti e.
	t, that occur at any time after	es, or any affiliations, interest or transactions which might r signing this Disclosure of Interest Form, I will report the new
51 W. 1011 (3) W. 1011		Approved By:
Employee Name		Manager/Supervisor Name
Signature		Signature
Safety and Security Officer Position		Position
1/23/2015		Date
Date		Date



Mount Carmel Policy and Procedures Acknowledgement of Receipt

I acknowledge that I have been made aware that the Mount Carmel Health System and Mount Carmel Medical Group Policies and Procedures Manual may be located on the company intranet site. I acknowledge that I may access the Policies and Procedures Manual by accessing the Mount Carmel's *Insight* page under the "MC Info" tab and then under "Policies and Procedures". I understand that it is my responsibility to read and comply with the policies contained in the Policies and Procedures Manual and any revisions made to it. I recognize as a condition of my employment, to comply with all provisions in the Policies and Procedures Manual and other policies. I understand that no representative of Mount Carmel has the authority to make an agreement contrary to the provisions of this manual.

I recognize that this manual does not constitute a contract of employment. I understand that at any time, for any reason, I can terminate my employment relationship and that Mount Carmel has the same right regarding my employment status. I agree to take any lawful medical substance abuse, or other examination required by Mount Carmel as a condition of my employment, and I understand that my employment can be terminated for refusing to take such lawful examination.

COLLEAGUE SIGNATURE	
TODAY'S DATE 1/28/15	
SOCIAL SECURITY NUMBER	
PRIMARY WORK SITE	
Mount Carmel East	
Mount Carmel West	
Mount Carmel St. Ann's Mount Carmel New Albany	
Mount Carmel Grove City	
Corporate Service Center	
Other (please indicate)	

Standards of Conduct Acknowledgment and Certification

I acknowledge that I have received a copy of Mount Carmel Health System Standards of Conduct. I agree to read the Standards of Conduct and discuss any questions I have with my supervisor, a higher-level manager, or other individuals responsible for my relationship with the organization

I agree to abide by these Standards of Conduct during the course of my employment, medical staff appointment or other business relationship with Mount Carmel. I understand that I will be held accountable for my actions and behaviors inconsistent with the Standards of Conduct. Violations could result in disciplinary action, up to and including termination of employment, suspension of medical staff privileges, or termination of business relationships, as applicable with Mount Carmel's and Trinity Health's policies.

Department:	Safety + Security	
Organization:	MCSA	the second second
Colleague Signatu	re:	



Job Description Acknowledgement Receipt

I have received and read a copy of my current job description and understand its contents.

Printed Name

1/a8/15
Date



Interview Result Form Submitted By CHAD E TAYLOR (ID #: 273267) On 2015-01-16 13:09:00.0

HR Generalist RACHEL	W BARB		
Applicant Name		Date Interviewed	11/26/2014
Internal or External Candidate?	External	Job Code	M2412
Position Interviewed For	Security Officer	Cost Center Number	M1080000
Department	Safety and Security	Cost Center Location	MCSA
Job Preview/Shadowing	No		
Candidate Selected	Yes		
Start Date	01/26/2015	Requisition Number	2765
Employee Will Be	Casual	Certification/Licensure	No
Hours Per Week	0	Certificate/License #	
Work Shift Hours	Any	Exp. Date	

Grant Funded? No

Fingerprinting Required? Yes

Manager Comments Please extend an offer to for Casual Security Officer at MCSA.

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	For Human l	Resources Use Only	
Rehire	No	Lab & Physical Date Time	01/28/2015 3:00
Sign-On Bonus Amount		Lab & Physical Location	CSC
Payout over	Years		
Starting Hourly Rate (\$)	14.80	Years of Experience	10+
Orientation Date Self-Study	02/09/2015	Referred By	
Position Accepted	Yes	Reason	
People Service Comments	PCN 168422		
Signature JENNIF	ER K FOSTER	Date	01/26/2015 11:12:36





Jennifer K. Foster

From:

Bryan.Skoog@mchs.com

Sent:

Thursday, January 22, 2015 3:38 PM

To:

Thursday, January 22, 2013 3.30

Cc: Subject: HRdata; Bryan P. Skoog Mount Carmel Next Steps

January 22, 2015



Columbus, OH 43228

Dear

On behalf of Mount Carmel, I am pleased to confirm our offer for the Contingent, Safety and Security Officer position in the Security MCSA department at Mount Carmel Health. As discussed, your base salary will be \$14.80 per hour. Your manager is Chad Taylor, whose phone number is (614) 898-4125.

As mentioned on the telephone, your lab and physical appointment time is **January 28, 2015** at **3:00pm** in Associate Health Services at Mount Carmel Corporate Services Center (6150 East Broad Street, Columbus, Ohio 43213). Please arrive to your lab and physical 15 minutes prior to your scheduled appointment time. Upon arrival, you will need to show photo identification (i.e.: driver's license, passport, school ID). Your physical includes a drug urinalysis (offer of employment is contingent upon successfully passing the drug urinalysis, physical, references and background check). Please allow 1 hour for this appointment.

You will be receiving a link via e-mail that will ask for you to complete AND print your new hire paperwork online. Immediately following your lab and physical, Associate Health Services/Human Resources representative will review your completed new-hire paperwork with you. Please be prepared to provide documentation that will verify your identity and authorization to work: two forms of ID (one needs to be a photo ID – see the "List of Acceptable Documents" on the I-9 form included in your new hire packet). After your new associate meeting you will have your photo taken for your Mount Carmel associate ID badge. You will receive your ID badge at System Orientation.

Your first day of employment will be on **February 9, 2015**. System Orientation will be held on this day so you need to report to the Siegel Center Auditorium located in Mount Carmel East Hospital (5975 East Broad Street, Columbus, Ohio 43213). Registration will begin at **8:00am** with orientation beginning promptly at **8:30am** and concluding at **4:30pm**. Appropriate attire is business casual. A continental breakfast and lunch will be provided. If you have not received your work schedule by the Wednesday before your system orientation date, please contact your manager at the above phone number.

Note: Patient safety is the number one priority at Mount Carmel. In order to continue to deliver the safest patient care while ensuring associates safety, all Mount Carmel associates will be required to have the influenza vaccine. Mount Carmel, in collaboration with Trinity Health, has chosen to make the influenza vaccination a condition of employment. Mount Carmel is also tobacco and smoke-free campus. If you have questions regarding these requirements, please contact your Human Resources or Associate Health Services office.

I am delighted that you have accepted a position at Mount Carmel. If you have any questions, do not hesitate to call me at 614-546-4531. Welcome!

Sincerely,

Bryan Skoog

Human Resources Generalist Cc:file

This letter is intended to confirm the rate of pay and other pertinent employment information. The letter does not constitute an employment contract, nor is it intended to be an employment agreement. We reserve our right to exercise an employment at will philosophy.



Position Applied For

Position: Safety and Security Officer Facility: Mount Carmel St. Ann's Department: Security MCSA Schedule: Contingent

Reg Num: 2765

Application for Employment

We consider applicants for all positions without regard to race, color, religion, creed, national origin, age, disability, sexual orientation, marital status, or any other legally protected status.

Instructions to Applicant

- 1. You must fully and accurately complete the Application for Employment. Incomplete applications will not be considered. Mount Carmel Health System may use the information given in the application to investigate the applicant's previous employment and background.
- 2. If you are hired, proof of citizenship or immigration status will be required to verify your lawful right to work in the United States.

* Required Information

November 25, 2014

SOURCE TRACKING

How did you find out about this position?* Job Board

Specific Source:* Indeed.com

PERSONAL INFORMATION

Prefix: Mr.

First Name:*

Last Name:*

Suffix:

Address:*

City:* Columbus

State:* OH

Province/Region:

Zip:* 43228

Country:* United States

Home/Other Phone:

Work Phone:

Cell Phone:

Best way to No Preference contact:*

Email Address:*

WORK HISTORY

List all work experience below beginning with your current (or most recent) position.

Are you currently employed?* Yes

Name of Company:* G4S secure solutions

Street: 1418 Brice Road

City:* Reynoldsburg

State:* OH

Job Duties and Responsibilities:*

43068

routine patrols. Interact with upper management on a daily basis. Reason For Leaving:*

In charge of 4 onsite officers, site payroll and

scheduling, Monitor CCTV cameras, conduct

Zip: Pr

Province/Region:

Country: United States

Employer's Phone:* 614-322-5100

Job Title:* Site Supervisor

Employed From:* 09 2006

Employed To:*

Ending (or Current) 31200

Salary:*

Supervisor's Name:* Roger Nye

Employment Status: Full Time

Still there

May we contact this employer for a reference?*

Yes

While in this position, if you were employed under a different legal name, please list that here:

Name of Company: G4S Secure Solutions

Street: 6499 N. Powerline Road

City: Ft. Lauderdale

State: FL

Zip: 33309

Province/Region:

Country: United States

Employer's Phone: 954-771-5006

Job Title: Security officer/Site Supervisor

Employed From: 06 2000

Employed To: 09 2006

Ending Salary: 2440

Supervisor's Name: Ed Presuttl

Employment Status: Full Time

Job Duties and Responsibilities:

Train new Officers for site specific duties. In charge of site scheduling and pay roll. Provides timely reports to upper management. * Maintain accident/incident reports and operation of CCTV

system.

Reason For Leaving:

Moved to Ohio

May we contact this employer for a reference?

Yes

While in this position, if you were employed under a

different legal name, please list that here:

Name of Company: Baja Beach Club

Street: 3339 N. Federal Highway

City: Ft. Lauderdale

State: FL

Zip: 33309

Province/Region:

Country: United States

Employer's Phone:

Job Title: Door Greeter

Employed From: 05 1999

Employed To: 06 2000

Ending Salary: 16640

Supervisor's Name: Shane Land

Employment Status: Full Time

Job Duties and Responsibilities:

Checked Id's of patrons entering night club. Provided Security for co workers and mangers. Worked with the Promotion department for the

club

Reason For Leaving:

May we contact this employer for a reference?

No

While in this position, if you were employed under a

different legal name, please list that here:

Job Application Page 3 of 6

EDUCATION

High School/GED

Name of school:* Hollywood Hills

Did you graduate?* Yes

City:* Hollywood

Diploma Type:* HIGH SCHOOL

State:* FL Province/Region:

Zip:* 33025

Country:* United States

Associates

Name of school:

Major: Criminal Justice Adm

Address:

Degree Type: BACHELORS

Did you graduate? Yes

City: Phoenix

State: AZ Province:

Zip: Country:

Undergraduate

Name of school: University of Phoenix

Major: Criminal Justice

Address:

Degree Type: ASSOCIATES

City: Phoenix

Did you graduate? Yes

State: AZ Province:

Zlp: Country:

List scholastic honors, specialized training and/or apprenticeship details that may be helpful in considering your application. When adding, please provide as much detail as possible about the dates of these activities, locations and skills or experience obtained.

LICENSES/CERTIFICATIONS

Professional Licensure

Please Provide Professional Licenses/Registrations held. Include License Number and Expiration Date.

Туре

State

Number

Date Issued

Expiration Date

If you are applying for a job category that requires licensure, please answer the following question: Is your license currently subject to any investigation by a licensing agency?

EMPLOYMENT PREFERENCES

Please indicate your employment preferences below:

Minimum Salary Desired:* 38000

Date Available for Work:* 12/15/14

Are you willing to relocate? Yes

Which shifts are you willing to work? Flexible

Which schedules are you willing to work? Full Time

Please answer all of the following questions.

* No

Do you have any relatives that currently work for Mount Carmel Health System or any of its affiliates?

If yes, please list their name(s):

* No

Have you ever been employed by Mount Carmel Health System or any other facility sponsored by Mount Carmel Health System?

If yes, enter the name and address of member/facility and dates of employment:

Name: Address

Dates of employment:

WORK AUTHORIZATION/ELIGIBILITY

Please answer all of the following questions.

* Yes	Are you 18 years of age or old	ier?
-------	--------------------------------	------

Are you legally able to remain and work in the United States without Sponsorship? * Yes

Other than a minor traffic violation, have you ever pled guilty to or been convicted of a crime? * No

Consideration will be given to the nature, timing and severity of the crime.

If yes, give the Offense, the dates plead guilty or convicted, and the Name and Location of the court that convicted you.

* No Have you ever been sanctioned by the Office of Inspector General of the Department of Health and

Human Services (HHS/OIG) or the Government Services Administration (GSA) or excluded or suspended from participation in any federal or state health care program?

* No Have you ever been found to have engaged in substantiated abuse or neglect of children or adults under the laws of any state of the United States?

If yes, please list the States, dates, and explain the findings.

REFERENCES

Please give three professional references (DO NOT list relatives or personal references). All fields required.

Name*	Name of Company*	Phone Number*	Email Address*	Relationship*	Years Known*
Jennifer Maxwell	Trans Systems	954 999 2108	JLBroday@Bellsouth.Net	Friend	18
Mario Ver- Valderamma	Coral Springs Police Dept.	954 600 8154	Camali02@bellsouth.net	Former Co worker	12
Roger Nye	G4S Secure	614 668 6087	Eric.Jenkins.mba@gmail.com	Former Enrollment counselor	6

RESUME

To copy and paste your resume:

- 1. Highlight the text on the resume you want to copy.
- Press 'Ctrl C' to copy (Hold down the Ctrl key and press C).
 Place the cursor in the RESUME box below.
- 4. Press 'Ctrl V' to paste the information.

Cover Letter

Columbus, Oh 43228

HYPERLINK "malito:

Objective

A challenging and rewarding career in the Security industry utilizing past education, security experience and training with the opportunity for professional growth **EMPLOYMENT**

G4S Secure Solutions USA Inc. June 2000 - Present

An Upscale Security Officer (USO) providing unarmed security protection services at various community, commercial gatehouses, and commercial properties.

* Contracted Security officer 2000-2004

* Contracted Site Supervisor 2004-2006 and 2009-present.

Job Application Page 5 of 6

- * Enforced G4S Secure Solutions USA Inc. policies and procedures, State Security Statues, and Post Orders.
- * Train new Officers for site specific duties.
- * In charge of site scheduling and pay roll.
- * Interact with diverse employee and customer groups as to promote harmonious relationships and success.
- * Provides timely reports to upper management.
- * Maintain accident/incident reports and operation of CCTV system.

Baja Beach Club May 1999-June 2000 Door Greeter

- * Checked Id's of patrons entering night club
- * Provided Security for co workers and mangers
- * Worked with the Promotion department for the club

Wyndham Resort and Spa November 1997-May 1999 Prep Cook

- * Prepares all food items to order, following standard recipes and procedures within specified time limits
- * Handle food in a manner that is consistent with local health department guidelines
- * Stocks/restocks items on line
- * Understands and complies with food safety and temperature standards.
- * Clean and sanitize production equipment, work surfaces and kitchen according to cleaning schedules and procedures.

EDUCATION

* University of Phoenix

Bachelor of Science in Criminal Justice Administration/Management March 2013

* University of Phoenix

Associate of Arts in Criminal Justice December 2010

Knowledge and Skills:

- * Security Management
- Security Audits
- * Physical Security
- Ethics In Security
- Corporate Security
- * Microsoft Office
- * Windows Operating Systems
- * Ability to work with diverse groups of people in a professional manner
- * Management/Leadership
- * Information System Security Awareness Training

ACHIEVEMENTS and CERTIFICATIONS

- * Received 10-year service certificate from G4S Secure Solutions for longevity
- * Adult First aid and CPR Certified 2014

READ AND SIGN

Read the following carefully before signing.

- (X) * I CERTIFY that the information contained in this application is correct to the best of my knowledge. I UNDERSTAND I am applying for employment with Mount Carmel Health System. I understand that any false statements made as part of the application will be sufficient cause for dismissal. I also grant permission for the authorities of this institution to investigate my references and release said institution, as well as my former employers, from any and all liability resulting from such investigation. I further understand that the application does not constitute an employment contract and termination at will, by either me or Mount Carmel Health System, could occur during the employment relationship.
- (X) * I CONSENT to any and all medical and physical examinations including Substance and Alcohol tests as a condition of employment. I UNDERSTAND that as a condition of employment and continuing employment, if hired, I will, at least annually, obtain influenza vaccinations and/or immunizations if required by my Regional Health Ministry, unless I qualify for an exemption

permitted under organizational policy or unless mandatory vaccinations and/or immunizations are prohibited under applicable State law.,

- (X) * I GRANT PERMISSION to Mount Carmel Health System to investigate any and all healthcare fraud and abuse charges and convictions. I agree to release the organization from any and all liability resulting from such investigation. I understand that omission or misrepresentation of convictions for healthcare fraud and abuse, on my behalf, will be sufficient cause for cancellation of consideration for employment or dismissal from the organization if I have been employed.
- (X) * I UNDERSTAND that unless prohibited by applicable state or federal law, Mount Carmel Health System will conduct a preemployment background check including criminal history, education verification, reference checks, license verification and driving records (if required for the position).
- (X) * I UNDERSTAND and AGREE that this application for employment and any of the investigations conducted regarding my application may be shared with other members of Mount Carmel Health System and/or affiliates for other employment opportunities.
- (X) * I AGREE to comply with Mount Carmel Health System rules, regulations and policies and ACKNOWLEDGE that these rules, regulations and policies may be changed, interpreted, withdrawn, or supplemented anytime and without prior notice to me. I understand that any violation may result in disciplinary action including termination of my employment.
- (X) * I AGREE to furnish proof of identity and employment eligibility to work In the U.S within 72 hours of commencing employment.
- (X) * I UNDERSTAND that if I am employed I will be subject to any applicable introductory period established by the Regional Health Ministry at which I am hired.

Mount Carmel Health System is a member of CHE Trinity Inc. and an Equal Opportunity Employer (EEO).

My typed name below shall have the same force and effect as my written signature.

Candidate's/Applicant's Signature:

Date: November 25, 2014

START OF DRIVING RECORD

OHIO Driver	Record - XXXXX	Or	der Date: 01/1	9/2015	
			Bill Co		
Host Used:	Online		Referen	ce:11307706	
License:				361	
rićense:					ENTERED
Name:			Report	Clear:YES	_
Address:					JAN 26 2014
City, St:				DV.	
As of:				ВУ	Jennifer Foster
G			OB :		AGE:
Sex : Eyes:	Weight: Height:		ob : ss Date: 01/22	/2014	NOD!
Hair:	nergue,		xp Date: 01/22		
				STATUS: VALI	D
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END OF DRIVING RECORD

Job Description
Orientation
Lospital Orientation
Licenses
Job Orientation





A MEMBER OF TRINITY HEALTH

POSITION DESCRIPTION

POSITION TITLE: Safety & Security Officer	DEPARTMENT: Safety & Security	
JOB CODE: 2412	REPORTS TO: Supervisor of Safety & Security	
DATE ISSUED: 10/9/97	SUPERVISES: N/A	
DATE REVISED: 02/10/11, 4/8/12	MATRIX REPORTING RELATIONSHIPS:	

Mount Carmel Mission Statement and Guiding Behaviors

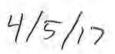
Mission: We serve together in Trinity Health, in the spirit of the Gospel, to heal body, mind and spirit, to improve the health of our communities and to steward the resources entrusted to us.

The Guiding Behaviors set the expectation for how we work together in living our Mission and Core Values. They are:

- We support each other in serving our patients and communities.
- We communicate openly, honestly, respectfully and directly.
- We are fully present.
- We are all accountable.
- We trust and assume goodness in intentions.
- We are continuous learners.

Job Summary

- In accordance with the Mission and Guiding Behaviors; the Safety & Security Officer is to provide protective services to all persons and property across the Mount Carmel Health System.
- Ensure a safe environment for all associates, physicians, patients, and visitors in compliance with various regulatory standards to include, JC, OSHA, ect.
- Provide a quality service consistant with the values of Mount Carmel Health System for our associates, physicians, patients and visitors.



Job Qualifications (Knowledge, Skills, and Abilities)

- Education: High school graduate or GED required.
- Licensure / Certification: OPOTC Certification in Private Security preferred
- IAHSS Certification preferred.
- Experience: Three to five years experience in security, law enforcement or military disciplines or equivalent training which might include criminal justice, homeland security, or law enforcement academy is preferred.
- Effective Communication Skills
- Valid driver's license with good driving record maintained
- Customer service oriented able to function in high stress situations with personal restraint, integrity, and control.
- Basic computer skills that commensurate with the job.
- Ability to communicate effectively and appropriately with diverse populations.
- Ability to write, read, and communicate effectively in the English language.

Essential Responsibilities

- Exhibits each of the Mount Carmel Service Excellence Behavior Standards holding self and
 others accountable and role modeling excellence for all to see. For example: demonstrates
 friendliness and courtesy, effective communication creates a professional environment and
 provides first class service.
- Meets population specific and all other competencies according to department requirements.
- Promotes a Culture of Safety by adhering to policy, procedures and plans that are in place to prevent workplace injury, violence or adverse outcome to associates and patients.
- Relationship-based Care: Creates a caring and healing environment that keeps the patient
 and family at the center of care throughout their experience at Mount Carmel following the
 principles of our interdisciplinary care delivery system.
- (For patient care providers) Provides nursing care, ensures an environment of patient safety, promotes evidence-based practice and quality initiatives and exhibits professionalism in nursing practice within the model of the ANCC Magnet Recognition Program®.
- Maintain a safe and secure environment through job knowledge, skills and engagement.
 Intervene as appropriate in any safety & security observed issues.
- Enforces all governmental regulations, standards, policies associated with Mount Carmel Health System and Safety & Security policies, (i.e. smoking policy).
- Communicate safety and security discrepancies to the appropriate parties for mitigation.
- Ensure department goals & objectives are reached/maintained during assigned shift(s).
- Responsible for assuring that the Safety, Life Safety, security, and Emergency Management, and the JC standards are followed as it relates to the position.
- Responsible for completing and documenting assigned tasks, such as fire drill and safety tours on time.
- Ensure accurate documentation during assigned shift (i.e. security reports, safety incidents, activity logs).
- Ensure consistent delivery of professional, friendly, and courteous service.
- Comply with the organization and department dress code.
- Conduct initial and follow-up investigations, if warranted or directed, ensuring documentation of investigative steps.
- Proactive patrolling of the campus by foot, segway, or vehicle as assigned.
- Respond to all "STAT" calls expeditiously and safely.
- Be familiar with all hospital emergency codes and appropriate responses

- Responsible for completing assigned tasks/duties on time (i.e. fire drills and safety tours).
- Provide on-the-spot in-service training to staff where knowledge related discrepancies are noted.
- Demonstrate sound judgment, decision skills, and prioritizing responses to emergency situations.
- · Ability to perform duties in an independent manner.
- Custodial responsibility for patient valuables and maintaining lost and found by following the proper protocols.

Other Job Responsibilities

- Inspects panic alarms, AED's, and call boxes as assigned.
- Provides escorts for associates, patients, visitors and students (where located) in the hospital areas and areas contiguous to the hospital areas.
- Issue parking citations and enforce the parking policy.
- Provide helipad duties during helicopter landings and departures
- Assist in the collection of ICES data as directed
- Monitoring of cameras and access control responsibilities as assigned
- Citizen arrest duties only in accordance with applicable laws and statutes
- Assist motorist with vehicle assistance as appropriate (i.e. jump start)
- Traffic enforcement keeping emergency entrances and approaches clear of non-emergency vehicle traffic
- Respond to safety incidents/visitor injuries as appropriate, ensuring medical is summoned as appropriate.
- During emergent events direct media to the proper area/contact
- Perform other assigned duties as directed by Management.
- Use proper radio procedures and monitors on-going activity
- Be familiar with geographic location and facility layout
- Immediately report and respond appropriately to Salient events, communicating the event to your supervisor.
- Provide for security per policy for VIPs
- Chemical spill clean up as assigned.
- Responsible for compliance with Organizational Integrity through raising questions and promptly reporting actual or potential wrongdoing.
- All other duties as assigned.

EQUIPMENT: This section requires a response of Yes or No from drop down box.

Radiation: No

Electrical: Yes

Chemical: Yes

Mechanical: No_

KEY TO FREQUENCY CODES for Physical Requirement Sections: This section requires a numerical response from drop

down box.

1 = Up to 33% of the time

3 = Over 66% of the time

2 = From 33% - 66% of the time

4 = Not Applicable

PHYSICAL REQUIREMENTS

Sitting: 3

Standing: 3

Walking: 3

Ability to be Mobile: 3 Bending: 2

Kneeling/Crawling: 1 Stooping: 1

Turning/Pivoting: 2

Working Above Shoulder Level: 4

Balancing: 3

Reaching Overhead: 1

Grasping: 3 Keyboarding : 3

Pinching: 3 Twisting: 2 Climbing: 1

Pulling: 2

Pushing: 2 Lifting: 3

Maximum Weight: Equal to or greater than 35 lbs Maximum Weight: Equal to or greater than 35 lbs

POTENTIAL EXPOSURE: This section requires a response of Yes or No from drop down box.

Blood / Body Fluid Contact: Yes Humidity: No Temperature: No Air-borne Pathogen: Yes Chemicals (Fumes / Burns): No Dust: No

Radiation: No Vibrations: No Noise: No

Personal Protective Equipment: This section requires a response of Yes or No from drop down box.

Gloves: Yes Shoes: No Goggles: Yes Aprons: No

Masks: Yes Head Covering: No Gowns: Yes

Emotional / Psychological Factors: This section requires a response of Yes or No from drop down box.

Trauma: Yes Grief: Yes Death: Yes Public Contact: Yes Deadlines: Yes

This job description is intended to describe the general content of and requirements for the performance of this job. It is not to be considered an exhaustive statement of duties, responsibilities, or requirements.

Reviewed and Approved by:

Chris Browning

Title:

Senior Vice President, System Human Affairs

Date:

4/8/12 Kim Berno

Compensation Rep: Title:

Sr. Compensation Analyst

Date:

4/8/12

MOUNT CARMEL HEALTH SYSTEM Job Description

Job Title: Safety & Security Officer Job Code: 2412 (367)

New Job: ☐Update: ☒ (Check one)

Date written: 10/9/97 (Original date - mo./day/yr.)

Revision Date (s): 01/02/08

Department: Safety & Security

Job Summary

In accordance with the mission of Mount Carmel Health System.

- To provide protective services to all persons and property located on hospital property across the Mount Carmel health System.
- Provide superior quality and outstanding service to our associates, physicians, patients and visitors.

Job Qualifications (Knowledge, Skills, and Abilities)

High school graduate or GED preferred

- Minimum three years experience in security, law enforcement or military disciplines or equivalent training which might include criminal justice, homeland security, military schools or law enforcement academy is preferred.
- OPOTC Certification in Private Security preferred
- Valid Ohio State driver's license with good driving record maintained
- Good written and verbal skills-Ability to interact professionally
- Must be able to meet the physical and mental elements of the job description
- Customer service oriented-Able to function in high stress situations with personal restraint and control
- Basic computer skills that commensurate with the job
- IAHSS Certification preferred

Job Relationships

Reports to:

Supervisor of Safety & Security

Supervises:

N/A

Job Responsibilities

Essential Responsibilities:

- Maintain a safe and secure environment through job knowledge, skills and engagement. Intervene as appropriate in any safety & security observed issues.
- Enforces all governmental regulations, standards, policies associated with healthcare safety & security (i.e. smoking policy).
- Communicate safety and security discrepancies to the appropriate parties for mitigation.
- Ensure department goals & objectives are reached/maintained during assigned shift(s).
- Responsible for assuring that the Safety, Life Safety, security, and Emergency Management JCAHO standards are followed as it relates to your position.
- Responsible for completing assigned tasks, such as fire drill and safety tours on time. Providing on the spot in-services to staff where staff knowledge related discrepancies are noted.
- Ensure accurate documentation during assigned shift (i.e. security reports, safety incidents, activity logs).

- Ensure consistent delivery of professional, friendly, and courteous service.
- Ensure compliance with all department and Mount Carmel Health policies/procedures, as well as any
 established organization and department dress code.
- Conduct follow-up investigations, if warranted or directed, ensuring documentation of investigative steps.
- Be visible and proactive in patrolling and alternate your routes as appropriate.
- Respond to all "STAT" calls expeditiously and safely.
- Be familiar with all hospital emergency codes and responses to those codes
- Responsible for completing assigned tasks/duties on time (i.e. fire drills and safety tours).
- Provide on-the-spot in-service training to staff where knowledge related discrepancies are noted.
- Demonstrate sound judgment, decision skills, and prioritizing responses to emergency situations.
- Ability to perform duties in an independent manner.
- Exhibits each of the Mount Carmel Service Excellence Behavior Standards, role modeling excellence for all to see. For example, demonstrates friendliness and courtesy, effective communication, creates a professional environment and provides first class service.

Other Job Responsibilities:

- Inspects fire and other safety equipment
- Provides escorts for associates, patients, visitors and students (where located) in the hospital areas and areas contiguous to the hospital areas.
- Issue parking citations and enforce the parking policy.
- Provide helipad duties during helicopter landings and departures
- Assist in the collection of ICES data as directed
- Security custodial responsibility of patient valuables and responsible for maintaining lost and found by following the proper protocols.
- Monitoring of cameras and access control responsibilities as assigned
- Citizen arrest duties only in accordance with applicable laws and statutes
- Assist motorist with vehicle assistance as appropriate (i.e. jump start)
- Traffic enforcement keeping emergency entrances and approaches clear of non-emergency vehicle traffic
- Respond to safety incidents/visitor injuries as appropriate, ensuring medical is summoned as appropriate.
- During emergent events direct media to the proper area/contact
- Perform other assigned duties as directed by Management.
- Use proper radio procedures and monitors on-going activity
- Be familiar with geographic location and facility layout
- Immediately report and respond appropriately to Salient events, communicating the event to your supervisor.
- Provide for security per policy for VIPs
- Responsible for compliance with Organizational Integrity through raising questions and promptly reporting actual or potential wrongdoing.
- Participates in and coordinates with organizational process to collect and evaluate information about hazards and safety practices that are used to identify safety management issues. Adheres to established policies and procedures, which may include wearing of personal protective equipment.
- Participates in and fosters a performance improvement approach that includes both intradepartmental and interdepartmental activities.

<u>Potential Exposures</u> Indicate if the position is exposed to the definite risk of bodily injury via: (<u>Click to check all that apply</u>)

Exposure to Infectious Disease	Chemicals	
Electrical Equipment	Mechanical Equipment	X
Burns	Radiation Equipment	T S
Blood Contact	OtherEnter Other Exposures	H
NONE		

<u>Population Specific Criteria</u>: These criteria should be checked to assure that the individual performing this job demonstrates competencies on the unit/in the department, appropriate to the population of patients served.

(Click to check all that apply):

Neonate (<1 month)	Adolescent (13 – 17 years)	
Infant (1 month – 1 year)	☐ Adult (18 – 64 years)	
Pediatric (1 – 12 years)	☐ Elderly/Geriatric (65+years)	
N/A		

<u>Equipment Used</u> List any equipment used to perform functions of the position. This would include equipment requiring physical exertion (such as a vacuum cleaner), in addition to technical/clinical equipment that would require training for use.

- Duty Uniform
- Use of hand-held radio (walkie-talkie)
- Use of handcuffs (not as a substitute for clinical restraints)
- Use of chemical spray
- Use of ASP Baton
- CCTV
- Patrol Vehicle
- Badging system w/access control
- Keys

Physical Demands/Requirements:

Demand/Requirement Frequency Key:

2) Up to 33% of the time	
4) Over 66% of the time	
	4) Over 66% of the time

Demand	Frequency Level	Comments/Specific Abilities (i.e. wt)
1. Mobility		
Standing	4	
Walking	3	
Sitting	3	
Bending/knees	2	
Bending/waist	2	
Kneeling	2	
Climbing	1	
Reaching	2	
2. Strength		
Lifting	3	Physically agile and able to lift, push or pull up to 50 lbs.
Carrying	2	up to do lbs.
Pushing	2	1
Pulling	2	
3. Dexterity		
Gross motor skills (handing/grasping)	4	
Fine motor skills	3	
Fingering/feeling	3	
4. Visual		
Acuity, near	3	
Acuity, far	3	
Depth perception	3	
Color differentiation	3	
Peripheral	3	
5. Hearing		
Normal conversation	4	
Faint sounds	2	
Other		
6. Other		
Strength/Capability	2	Capable of physically restraining as appropriate
7. Personal Protective Equipment		
List all equipment required (i.e.:	3	Standard PPE precautions (gloves, eye
Respirator (facial hair restrictions), gloves,	100	shield)- less frequency for use of respirator
neadgear, lead apron, etc.)		, in a quantity for all of 100 pilator

Emotional/Psychological Factors: List all that are appropriate. (i.e.: trauma, grief, death, public contact, deadlines, concentration, etc.) Trauma cases, death, family member grief, influx of patients due to community emergencies, public contact, high demand, security situations that may arise.

Reviewed and Approved by:

Prepared by:	Michael L. Angeline	Date: _4/14/09	
Reviewed by:	Michael L. Angeline	Date: _4/14/09	
Approved by:	(Manager/Director) John Heisler	Date: 4/17/09	
Reviewed by:	(Sr Vice President) Kim Berno (Compensation)	Date: 4/17/09	

This job description is intended to describe the general content of and requirements for the performance of this job. It is not to be considered an exhaustive statement of duties, responsibilities, or requirements

Licenses



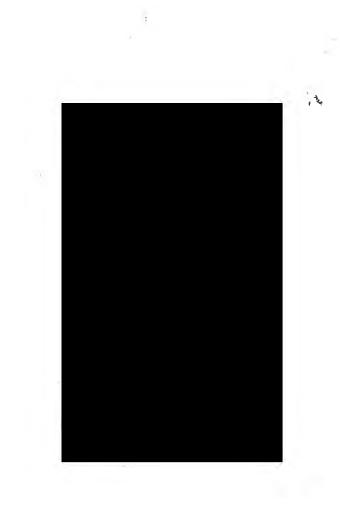
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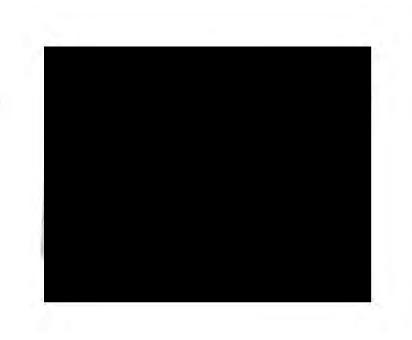
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Orientation

	r 9mm +P 124 Grain ammunition on I understand that this is the only duty ammunition
	duty and must carry in my duty weapon and
magazines at all ti	nes.
Issued By	e2 . cd
1/2	111-0.10
Jany Mu	10-8-19

I () have received the following issued uniforms from the Security	V
Department at Mount Carmel St. Ann's Hospital.	,
2-Pair of uniform pants	
2 1-Set of MCH collar insignia	
(3) 1- Badge	
(4) 2-Uniform Long sleeve shirts	
(5) 1-Glove Holder	
6 1-Key Holder	
1-Handcuff case	
8 1-Radio Holder	
1-Silver whistle chain	
(10) 1-Set of belt keepers	
1-Duty Belt	
(12) 1-Office key	
(13) 1-Set of handcuffs w/key	
(14) 1-Tie bar/Tie	
1- Duty Coat w/ liner	
1- Kenwood Portable radio/Charger	<i>?()</i>

Upon termination of employment, I understand that the above issued property must be turned into the Security Supervisor.

Printed Name:	
Signe	
Date: 2/24/15	
Issued By:	

Certificate of Training

Presented to



For the successful completion of Hazwoper Awareness Level Training. The training meets the OSHA requirements (29 CFR 1910.120 (q)).

Presented by Mount Carmel Health System Safety and Security August 17, 2015

Mueral

Michael L. Angeline, Director Safety & Security Mount Carmel Health System





Healthcare Provider



This card certifies that the above individual has successfully completed the cognitive and skills evaluations in accordance with the curiers (CPR and AED) Program.

January 22, 2016

Issue Date

January 2018

Recommended Renewal Date

Training Mount Carmel Health System OH03247

Columbus, OH 43213 614-234-3780

Course Locatio Mount Carmel Corporate Service Center Inst. ID#

9140271751 Kim McGee Name

Holder

Signati

MOUNT CARMEL HEALTH SAFETY AND SECURITY Policy

SUBJECT: Use of Force



PURPOSE

To provide guidelines for Security Officers in using force to control hostile persons and to provide guidelines for the use of defensive weapons.

POLICY

Security Officers must be prepared to perform assigned duties at all times. When using force to control a subject or to overcome resistance, the force must be based on the actions and behavior of the subject and be reasonable for the situation. The level of force used must be balanced against the likelihood of injury to the subject and/or officer.

The Safety and Security Department will use the USE OF FORCE CONTINUUM as a guide when dealing with an uncooperative subject. The USE OF FORCE CONTINUUM is a general guideline to be used in subject control and officer defense. Since confrontation is dynamic and is often unpredictable, an officer may be forced to escalate, de-escalate, or go from minimum to maximum use of force without resorting to each intermediate step. The Department's Use of Force Continuum is designed to aid and assist officers in the decision-making process.

Use of Force continuum and training in defensive weapons will take place within the first 90 days of employment for Safety & Security Officers and annual thereafter. Competencies/methodology of training will be tracked. Safety & Security will provide training on OC repellent, ASP Expandable Baton, and Defensive Tactics annually. In addition, Security Officers will have initial 20-hour security firearms training authorized by the State of Ohio and annual re-qualifications thereafter.



USE OF FORCE CONTINUUM

Largail Que

- Physical Presence of the Officer
- 2. Issuance of Verbal and Physical Directions or Commands
 - a. To direct subject
 - b. To inform bystanders
 - c. To create a voice stunning value
 - d. To calm subject
- 3. Empty Hand Control
 - a. Soft
 - 1. Assistance from other officers
 - 2. Escort Position

Level Two

- b. Hard Defensive Tactics
 - 1. Joint Manipulations or pressure points, takedowns,
 - 2. Handcuffing

Level Three

Use of Non-Lethal Defensive Weapons

A. OC Repellent-Chemical

1. The OC repellent is a liquid or foam irritant. It requires direct application to the subject's face to be effective.

2. The application of the agent should be made ideally from a range of 6-12 feet. This distance also provides safety for the officer. If the agent is applied at a closer range it may affect the officer. When spraying the subject, the spray should be directed at the eyes for maximum effect. If the subject is wearing glasses spray at the top of the glasses and allow the agent to splash into the eyes. The agent should take full effect in 2-5 seconds.

3. Officers using the agent should not touch their face until they have had the opportunity to wash their hands with soap and water.

After spraying a person, afford that person an opportunity to wash the contaminated areas and remove any saturated clothing. The most effective antidote is a large amount of air. The subject should be taken to the Emergency Department to be checked.

If the agent is used in an enclosed area, such as a small room or vehicle, open all windows and allow the area to ventilate.

4. The OC agent should only be used when a physical confrontation is occurring or is about to occur.

B. Canine (K9)

If a perpetrator becomes violent and physically assaulting by way of non-deadly measures, K9s can be deployed to get the perpetrator(s) under control to prevent bodily harm/physical assault.

C. Expandable Baton

- 1. The expandable baton is to be primarily used as a defensive weapon. Striking a person with the baton is justified when an officer is:
 - a. Protecting him/herself or another from assault
 - b. Attempting to stop an individual's aggression or to overcome resistance or violent behavior where lessor means of physical force are ineffective.
- 2. The primary target areas for applying non-lethal force with the baton are the large muscle groups or bones. Light strikes to these areas will cause pain and minor bruising, although such a strike can potentially disable an assailant and bring the attack to an abrupt halt.
- 3. It is important to avoid striking the head, temple, throat, and the back of the neck. Even light strikes or pressure these areas could inflict serious or possibly fatal injuries.
- 4. If an officer strikes a person with the baton that person will be taken to the Emergency department to be checked.

Level- Five

Lethal/Deadly Force

Firearms

Select officers/ supervisors carry firearms and the use of firearms on a person is considered lethal and deadly force. The use of deadly force will be in accordance with Ohio State Laws (ORC) - and will only be used on a perpetrator for the protection of life from substantial risk of death or serious bodily injury to self or others. Officers/supervisors that carry firearms have gone through the OPOTA Security Firearms training program and have met proficiency/competency and will re-qualify on an annual basis. Armed security must make sound judgment when using fire arms in the above circumstances, but be cognizant to their action as it relates to the potential of bullets hitting and wounding innocent bystanders. Firearms should not be discharged on moving vehicles unless it is a situation that is life-threatening. Only authorized department firearms will be used.

SPECIAL PROVISIONS

Anytime that an officer uses the OC repellant, K9, baton, handcuffs, or firearm on any individual an Incident Report will be completed by the Officer's Supervisor/In Charge Officer. Local Law Enforcement Agency will also be contacted for possible charges on subject that OC repellant, K9, handcuffs, baton, firearm was used on. This report will be forwarded to the Regional System Manager of the Safety and Security Department. All Use of Force Incidents will be investigated by the Defensive Tactics Instructors.

Reviewed 09-2011 Revised 12/2012 Reviewed 08/2014 Reviewed 08/2016 Revised 11/2016, 12/2016 Firearms effective: 2/1/17

DEFINITIONS:

- 1. Active Resistance Behavior that consists of non-threatening physical opposition to being controlled.
- Assaultive Behavior Aggressive physical opposition directed towards the officer or others by a subject. Assaultive behavior can be either an actual attack, or threat of attack conveyed through body language and assaultive verbalization.
- 3. Controlling Force Usually the minimal amount of physical force needed to control a subject who will not submit to verbal commands. Generally, this level of force involves the application of pain without injury. Controls techniques are used to encouraged a subject to go in a desired direction, and usually are applied to subjects that are either passively or actively resisting the officer's attempt to control them.
- Deadly/Lethal Force Any force which carries a substantial risk that it will proximately result in the death or serious bodily injury of any person.
- Reasonable Belief That belief by an officer, acting on personal knowledge of facts and circumstances which are reasonably trustworthy, that would justify a person of average caution to believe that a crime has been or is being committed. Similar to the probable cause standard.
- Reasonable Force Force that will likely lead to a safe control of the subject. If a lesser force would likely lead to safe control the lesser force should be used.
- Serious Physical Injury Injuries being inflicted or about to be inflected which could cause the death of any person.



SUBJECT: Use of Firearms by Security Personnel

PURPOSE

Policy to ensure the effective deployment, handling, and use of assigned or designated firearms by private Mount Carmel Armed Safety and Security Officers/Supervisors and are within legal parameters for the State of Ohio as well as in-line with the organization's mission, core values and guiding behaviors adhering to all safety rules and organizational policies, which includes the Mount Carmel Safety & Security Use of Force continuum. Firearms are deadly force weapons and would never be used unless there is an immediate threat to life or great bodily injury based on justification of deadly force as outline in the Ohio Revised Code (ORC). No Armed Safety and Security Officer/Supervisor will ever use a firearm without legal justification and the appropriate training and competency. Mount Carmel Armed Safety and Security Officers/Supervisors are authorized to carry firearms as representatives of Mount Carmel Health System while on Mount Carmel owned property, having proprietary jurisdiction.

POLICY

The Safety and Security Department will maintain assigned or designated firearms in clean and working order while conducting duties at Mount Carmel owned facilities. All Armed Officers/Supervisors are expected to have the appropriate training as well as updated annual renewal for competency based on established criteria from the Ohio Peace Training Academy (OPOTA) and authorized vendors. Armed Officers/Supervisors are expected to be familiar with local laws, ordinances and policies regarding the carrying and use of firearms. Mount Carmel is not liable for use of firearm "outside course and scope of employment." Firearms protocol is as follows:

- Use of deadly force based on Use of Force Continuum and immediate threat to life or great bodily harm. Firearm use by Armed Officers/Supervisors to neutralize this kind of threat or action to protect life.
- Armed Officers/Supervisors will be alert to their surroundings and fully aware of any actions that may injure or kill innocent bystanders in the event of firearm use. Using restraint if necessary based on their professional judgement and self-defense expectations.
- Armed Officers/Supervisors will not discharge their weapon when lessor means of force is justified.
- 4. The firearm would never be un-holstered during the performance of duties or used absence of a threat to life or great bodily harm. Other exceptions: clearing, loading, cleaning, storing or training situation.

2/4/19

- All firearms will be loaded and cleared in a designated clearing barrel.
- 6. Firearms in transport off property will be in accordance with Ohio Revised Code- ordinances and law.
- 7. Warning shots shall never be fired and firearms will never be pointed at someone unjustifiably. Horseplay will NOT be tolerated. Professionalism at all times.
- Supervisor, Manager, Director or designee will be notified as soon as
 possible of any discharge (intentional or accidental) incident as well as unholstering in an encounter situation. A Security Incident Report will be
 documented.
- 9. In the event of an intentional or accidental discharge resulting in injuries or death- Medical personnel will be summoned immediately as well as local jurisdictional law enforcement. Emphasis on safety and preservation of potential crime scene.
- 10. Only authorized firearms and equipment (web gear- safety holster, ammo pouch, etc.) will be used. Armed officers are expected to have this with appropriate ammo on duty and will be inspected for compliance prior to each shift by Supervisor or In-Charge. Officers are required to be uniformed- exception, System Manager
- 11. Firearms will be under the control of the Officers/Supervisors assigned to while on duty at all times or properly secured. Never unattended.
- 12. Armed Officers/Supervisors will carry three loaded magazines with one of the three inserted in the firearm with round in the chamber while on-duty. Level Three holsters are the only holsters authorized.
- 13. Armed Officers/Supervisors will not loan their assigned firearms to any other officer or person and will always be cognizant of their surroundings protecting the holstered firearm at all times.
- 14. Designated Officers/Supervisors will report fit for duty with designated firearms or obtain from the on-site safe in the designated security office. If not fit for duty (evidence of non-compliance, alcohol/drug use, etc.). The officer will be removed from duty and the firearm secured.
- Officers/Supervisors will report any OTHER related firearm incidents to their supervisor or in-charge as well as the Nursing Supervisor immediately.
- Officers/Supervisors will be in possession of appropriate PPE while carrying firearms and use as appropriate (i.e. protective vests, and hearing and eye protection for training).

- 17. There may be certain times when Armed Officers/Supervisors will be asked by management to surrender their firearm/ammo due to circumstances (i.e. certain meetings/functions, other training not related to firearms, administrative hearings/internal investigations/disciplinary, etc.). In these cases supervisory/management will ensure proper unloading and clearing of the firearm and securing on site- property receipt issued.
- 18. Armed Officers/Supervisors will make all required training and competencies.
- 19. Armed Officers/Supervisors responding to Psychiatric Behavioral Unit (3W MCW) will ensure firearms are stored in designated cabinet before entering the resident area.
- Armed Officers/Supervisors will report to their Supervisor any potential conflict that arises in carrying said firearm (criminal charges, convictions, domestic violence, mental health changes, etc.)
- Non-conformance with organizational policies and state law regarding firearm use will result in disciplinary actions up to termination of employment.

FIREARM DEPLOYMENT REVIEW BOARD

A Firearm Deployment Review Board will convene within 72 hours of ANY firearm deployment on a person(s). Reports will be made available to the review board and use of firearms may result in administrative leave and if warranted-counseling. The incident review board will consist of the following:

- System Director of Safety & Security
- System Manager of Safety & Security
- Officer's immediate supervisor
- Senior Vice President of Human Resources or designee
- Legal Counsel
- Director of Regulatory and Risk Management or designee
- Potentially a Law Enforcement Rep (if investigated and appropriate)
- Certified Firearms trainer as appropriate

The Firearm Deployment Review Board will convene no less than four (4) members and will critique and carefully examine the event for justification. Looking at the following as a minimum:

- Was the deployment appropriate within laws and policies
- Thought process- Use of Force continuum was a lessor means justified
- Policy adherence
- Through examination of circumstances leading up to the event, during event and post event
- Code Silver protocols

Training arrent and is additional guidance needed

Upon completion of the review board- findings and recommendations will be placed in writing. This will be shared with the affected Officer/Supervisor as well as any warranted disciplinary action up to and including termination based on the review.

Michael L. Angeline

Date: 1/13/17

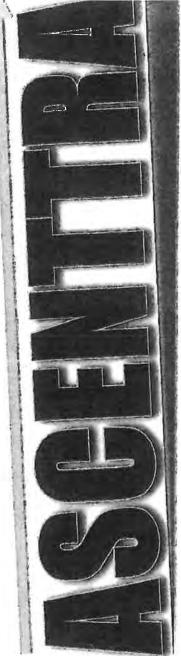
Michael L. Angeline, Director Mount Carmel Safety & Security Developed 12/2016 have been issued 52 rounds of Federal Premium 124 Grain HST HP 9 mm ammunition on $\frac{3/4/19}{1}$. I understand that this is the only duty ammunition I may use while on duty and must carry in my duty weapon and magazines at all times.

Issued By

Issued By

1.1





Certificate of Attendance

Hospital Incident Command System Course Has successfully attended the 4 Hour

November 19, 2018

Tulul J. Low

Lead Instructor



FEMA

This Certificate of Achievement is to acknowledge that

professional development and completion of the independent study course: has reaffirmed a dedication to serve in times of crisis through continued National Response Framework, An Introduction IS-00800.b

Issued this 12th Day of February, 2016



Tony Russell Western Superintendent
Emergency Management Institute

0.3 IACET CEU









FEMA

This Certificate of Achievement is to acknowledge that

professional development and completion of the independent study course: has reaffirmed a dedication to serve in times of crisis through continued **Applying ICS to Healthcare Organizations** ICS-200 for Health Care/Hospitals IS-00200.hca

Issued this 9th Day of February, 2016



Superintendent
Emergency Manager

Tony Russell

Emergency Management Institute

0.3 IACET CEU



HEMA

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Workplace Violence Awareness Training 2017

Issued this 18th Day of September, 2017



Tony Russell Con Superintendent
Emergency Management Institute



FEMA

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professional development and completion of the independent study course: has reaffirmed a dedication to serve in times of crisis through continued

IS-00100.c
Introduction to Incident Command System, ICS-100

Issued this 21st Day of July, 2018



Superintendent

Emergency Manage

Tony Russell

Emergency Management Institute

0.2 IACET CEU



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professional development and completion of the independent study course; has reaffirmed a dedication to serve in times of crisis through continued

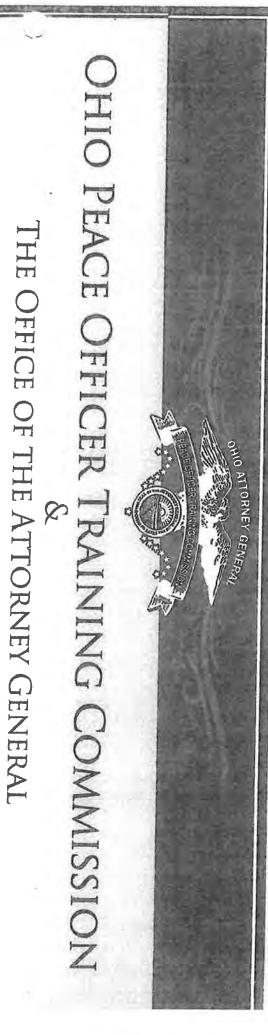
An Introduction to the National Incident Management Sys IS-00700.b

Issued this 25th Day of July, 2018



Tony Russell (Let V)
Superintendent
Emergency Management Institute

0.4 IACET CEU



This is to certify that

Private Security Firearms Training Program has completed the Ohio

Conducted by AimHi Private Security Academy

March 04, 2018 Awarded or

Attorney Genera Mike DeWine

Ohio Peace Officer Training Commission Vernon P. Stanforth, Otairperson

REQUALIFICATION DUE BY 09/04/19 634734 A PSB18-102



Mary E. Davis, Executive Director raining Commission

School Continander

This certificate alone does not authorize you to work as a security guard or private investigator. For licensing requirements, contact the Ohio Department of Public Safety/Private Investigator Security Guard Services or visit http://pisgs.ohio.gov/

MOUNT CARMEL HEALTH SYSTEM

CONFIDENTIALITY AND NETWORK ACCESS AGREEMENT

SIGNATURE PAGE RELATIONSHIP TO MOUNT CARMEL HEALTH SYSTEM/TRINITY HEALTH

I am a: (Please check all that apply to you)

Direct missisculains with Mount Current Health System

X Colleague at Mount Carmel Health System

Physician Credentialed on Mount Carmel Health System Medical Staff
Volunteer at a Mount Carmel Health System Facility
Temporary/Contractor at a Mount Carmel Health System/Facility (name of agency)
Student at Mount Carmel Health System: (name of educational organization)

Employed by at Associated with a Mount Cornel Health System Credentialed Medical Staff Member

Medical Staff Members' Employee or Temp Staff (name of practice)
Medical Staff Member's Vendor's Employee (name of vendor)

Vendor Providing Goods or Services to Mount Connel Health System.

Employee/Temp Staff of Mount Carmel Health System's clinical services vendor:(name of vendor)
Employee/Temp Staff of Mount Carmel Health System's business services vendor:(name of vendor)
Employee/Temp Staff of Mount Carmel Health System's IT services vendor:(name of vendor)

Mount Count Health System's Joint Venture or a Facility Managed by Mount Council Health System

Employee of a Mount Carmel Health System's Joint Venture (name of joint venture)

Employee of a hospital/Other Facility Managed by Mount Carmel Health System (name of facility)

Credentialed Physician on Medical Staff of a Hospital/Other Facility Managed by Mount Carmel Health System: (name of facility)

Employee or Temp Staff of a Credentialed Physician on the Medical Staff of a Hospital/Other Facility Managed by Mount Carmel Health System: (name of physician's practice)

Other

Unaffiliated (non-credentialed) Physician Other Provider: (name of practice)
Employee of an Unaffiliated Physician or Facility: (name of practice or facility)
Employee or Payer: (name of payer)
Researcher: (research study name)
Other: (name of employer)

USER If there are any items in this agreement that I do not understand I will ask my Mount Carmel Health System supervisor or other appropriate Mount Carmel Health System contact person for clarification. My signature acknowledges that I have read, understand and accept this agreement and realize it is a condition of my employment or association with Mount Carmel Health System Trinity Health. I also acknowledge that I have received a copy of the Confidentiality and Network Access Agreement.

Colleague Name:
Colleague Signature:

Date: 2017-09-18 23:09:36.157

Signature of individual to be given access(if checked any line other than employee of Mount Carmel Health System above)

EMPLOYER SIGNATURE: (Required when user is an employee or agent of: a physician physician practice; other individual or facility provider, a vendor that is not a business associate; any other organization unaffiliated with Mount Cannel Health or Trinity Health. My signature below acknowledges that I have read, understand and accept

Form Version 1.1



FEMA

This Certificate of Achievement is to acknowledge that

professional development and completion of the independent study course: has reaffirmed a dedication to serve in times of crisis through continued Introduction to the Incident Command System (ICS 100) for Healthcare/Hospitals IS-00100.hcb

Issued this 8th Day of February, 2016



Tony Russell
Superintendent
Emergency Management Institute

0.3 IACET CEU



FEMA

This Certificate of Achievement is to acknowledge that

professional development and completion of the independent study course: has reaffirmed a dedication to serve in times of crisis through continued Applying ICS to Healthcare Organizations ICS-200 for Health Care/Hospitals IS-00200.hca

Issued this 9th Day of February, 2016



Tony Russell Superintendent Emergency Management Institute



FEMA

This Certificate of Achievement is to acknowledge that

professional development and completion of the independent study course: has reaffirmed a dedication to serve in times of crisis through continued IS-00700.a

IS-00700.a

National Incident Management System (NIMS)

An Introduction

Issued this 12th Day of February, 2016



Tony Russell Control Superintendent Emergency Management Institute



FEMA

This Certificate of Achievement is to acknowledge that

professional development and completion of the independent study course: has reaffirmed a dedication to serve in times of crisis through continued

IS-00800.b
National Response Framework, An Introduction

Issued this 12th Day of February, 2016



Tony Russell (Superintendent Emergency Management Institute

0.3 IACET CEU

Evaluation/Salety Test/Competency Amards Application/Translers

avaluation/salety test/competency

Ellemon



MOUNT CARMEL HEALTH SYSTEM SAFETY AND SECURITY SECURITY OFFICER ORIENTATION

Orientee:
Primary Preceptor: Coles Durant
Secondary Preceptor: Penency Resonant
Start Date: 2/24/2015
Completion Date: 3/10/15
Reviewed By: January

* Return to manager when completed *

INTRODUCTION AND OVERVIEW OF THE MOUNT CARMEL HEALTH SYSTEM

SYSTEM MISSION STATEMENT

Mount Carmel Health System
is a community of committed persons
working to extend God's ministry of health.
We seek out and respond to the health needs
of our communities.
We serve and care for all people
with fairness, respect and compassion.

As a member of the Holy Cross Health System
we dedicate ourselves to
Fidelity, Excellence, Empowerment and Stewardship
by living the values of
Dignity of Persons, Service to Others,
Social Justice for All.

Faithful to the spirit of the
Congregation of the Sisters of the Holy Cross
both the Holy Cross Health System
and the Mount Carmel Health System
exist to witness Christ's love through excellence in the
delivery of health services
motivated by respect for those we serve.
While stewarding our resources, we foster a climate
that empowers those who serve with us.

INTRODUCTION AND OVERVIEW OF THE MOUNT CARMEL HEALTH SYSTEM SAFETY AND SECURITY DEPARTMENT

Mission Statement

Safety and Security is a team of dedicated individuals working together to provide a safe and secure environment by providing high quality life safety, personal and property protection services.

We achieve timely, cost effective results through the collective knowledge, talents, and skills of Associates working together for the benefit of those we serve.

Simply stated, we:

- ☆ work as a team,
- ☆ strive for excellence,
- ☆ are on time,
- ☆ are within budget,
- ☆ enjoy our work and each other.

REQUIREMENTS

- Annual TB Test See Employee Health Services
- Annual Safety Education Training
- Completion of a Private Security Officer Course or Basic Peace Officer
- Completion of Healthcare Security and Safety Training Course
- Good written and verbal skills
- Computer Skills Windows 95 and Microsoft Office 97
 Demonstrates the Use of the Mouse
 Demonstrates the use of the Keyboard
 Demonstrates the use of the Registrar

SECURITY OFFICER ORIENTATION WEEKLY PROGRESS

Week One:	Day one: System Orientation			
	Day two: Introduction to Employees			
	Review Job Description			
	Review Supervisor/Take Char	rge		
	Responsibilities			
	Department Goals and Object	ives		
	Organizational Chart			
	Campus Tour			
	Work Schedule/Post Assignm	ents/Overtime		
	Meals and Breaks			
	PLT/DIS/LOA's			
	Clocking In/Absenteeism/Tare	diness		
	Dress Code			
	Day three: Department Resources and M	anuals		
	Review H.R. Policies and Pro-	cedures		
	Emergency Operations Manua	ıls		
Week Two:	Safety Management			
Week Three	Security Management and Emergency Preparedness			
and Four:	Management			
Week Five and	Hazardous Materials Management			
Six:				
Week Seven	Life Safety Management			
and Eight:				

GENERAL ORIENTATION CHECKLIST

ITEM	RESPONSIBLE PERSON	TIME FRAME	DATE	
			COMPLETED	
Home Address &	Employee	Day 1	1/1/00/	
Telephone No.			2 23 (18 0.00.	
Uniforms/Equipment	Supervisor	Day 1	8/25/15 011.	
Shift Assignment	Supervisor	Day 1	2/2016 PX	
E-Mail Address	Supervisor	Week 1	2/2/18/1	
Review Progressive	Supervisor	Week 1	10/1	
Counseling Policy			125/15	
Confidentiality Policy	Supervisor	Week 1	2/2/16/	
JCAHO/Life	Supervisor	Week 3	0100	
Safety/OSHA			12/18/	
Regulations			0(13)	
Hospital Paging System	Supervisor	Week 1	12/11/m	
Complaints against	Supervisor	Week 1	1-1-11-1	
Security Officers			1126/68	
Department Policies	Supervisor	Week 1	N	
and Procedures	_)/2V),	
Department	Supervisor	Week 1	X/V/W	
Forms/Pass-On Log	_		0/1/15	
Productivity Data	Supervisor	Week 1	2/26/50	

SECURITY OFFICER

		Pertinent mation		ms With stance	Performs Independently		
	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Ereceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials	
SAFETY MANAGEMENT							
Describes AMA Patients	3/1	0503/1	Jink 3/5	3/5			
Demonstrates Camera Center Operations	3/1	c573/1	JAR 3/5				
Describes Correction of Hazardous	7/1	3/1		3/5			
Conditions	3/1	2503/1	Jag2 3/5	3/5			
Demonstrates Detainment/Restraint	2/1	3/1	3 Mil	3/5			
of Patients	3/1	6503/	315	3/5			
Describes Elevator Locations &			SAZ	5/15			
Operations	3/1	2503/1	5~2 3/5	3/5			
Demonstrates Heliport		01 0/11		, 1			
Lighting/Traffic Control	24	()4 yr	3/8	DN36			
Describes and Demonstrates			3				
Infectious Control/Universal		CSV.	315) h		
Precautions	3/1	3/1		3/5			
Conducts Safety Inspections	3/1	C503/1	JMZ3/5	3/5			
Completes Evaluation Form	3/8	003/4	3/8	00 316			
SECURITY MANAGEMENT				0.,1			
Demonstrates 10 codes / Two-Way		4	3MR		- 4		
Radio Communications	3/1	C3V3/1	3/5	3/5			
Describes Areas Unauthorized	3/1	CJV3/1	JMR 3/5	3/5			
Demonstrates Vehicle Operations	3/1	0373/1	3/8	DN 3/0	/		
Demonstrates Bureau of Motor		4-17.	-10	21	/		
Vehicles (BMV)	3/1	23/3/1	3/8	DN 118			
Demonstrates writing Departmental				3,3	,		
Forms / Pass-On Book	3/1	CJ03/1	3/8	0 N 18			
Demonstrates and describes Door		-		01311			
Lock / Unlock Schedules	3/1	3	3/8	No 18			
Demonstrates Identification /		1957 .		0/1/1			
Package Checks	3/1	C3 73/1	3/8	1) N / 14			
Demonstrates and describes		ISD.	JM17 3/5				
Visitation Policy	3/1	3/1	315	3/5			

SECURITY OFFICER

	1-1-1-1 TO 1 TO 1 TO 1 TO 1 TO 1 TO 1 TO	Pertinent mation	A STATE OF THE PARTY OF THE PAR	ms With	Performs Independently	
	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials
Demonstrates Numerical Keypads / Codes / Use of	3/1	CJP 3/1	3m 3/5	3/5		
Demonstrates Lost and Found	3/1	CSD3/1	JA18 3/5	3/5).
Describes Matrix System / Card Access	3/1	c373/1	630 3-10-15	DV 311		
Demonstrates Money / Protective Escorts	3/1	CJO	5~12 3/5	3/5		
Demonstrates and describes Off Property Duties / Alarms	2/1	CJ 3/1	JM R 315	3/15		
Demonstrates and describes Parking Enforcement	3/1	CJP 3/8	3/8	1		
Demonstrates and describes Patient Valuables Policy / Procedure	3/1	CJP3/1	C3P 3.10.15	-	-	
Demonstrates Patrols / Interior / Exterior / Emergency Room	3/1	CJ 2/1	B/8	0198		
Demonstrates PPCT and ASP Training	10	Bos	Scheck	2/10	AT- 6	-
Describes Removal of Belligerent / Combative Visitors, Patients, or Associates	3/1	CSP 3/1	3/8	prot		
Demonstrates Safety / Security Vehicle Procedures	3/1	65P3/1	3/8	0131		
Demonstrates Signing on Computers / Work Orders	3/8	ph 311	3/2	an 3/9		
LIFE SAFETY MANAGEMENT			1			
Conducts Construction Safety Inspection	3/10	C3D 3-10-15	3/16	3-10-15		
Completes Construction Safety Evolution Form	3/10	2-10-15	3/10	3-10-15		
Describes Electrical Safety +	3/10	652-10-15	3/10	C50 3-10-15	1	
Conducts Fire Drills	3/10	2-10-15	3/10	2373-10-15		
Completes Drill Evaluation Form	3/10	3-10-15	3/10	050 3-10-15		

	Reviews Pertinent Information		Performs With Assistance		Performs Independently	
	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials
Describes Fire Hazards	3/1	CJV3/1	01218	BK		
Describes types of Fire Extinguishers	3/1	CJO3/1	po 36/	3/8		
Describes types of fires	3/1	0303/1	DN34	3/8		
Describes Fire Response Team	2/1	CJD3/1	02 3/	318		
Demonstrates inspection of Fire Extinguishers & Locations	3/1	CJP3/1	DN 318	3/8		
Describes locations of Fire System Pull-Boxes	311	CJP 3/1	8134	3/8		
Describes locations of Halon Systems				- Ju		
Describes location of Mechanical Rooms & Airhandlers	3/1	CJP3/1	DN 3/8	3/8		
Describes Simplex Fire Alarm System	3/1	C303/1	DN 38	18		
Describes Safety and Security Fire Plan	3/1	CDP3/1	N314	3/8		
Demonstrates Safety / Security Intervention Regarding Patients	3/1	C503/1	OH 34	348	9	
HARARDOUS MATERIALS MANAGEMENT			\ <i>y</i>			
Demonstrates and describe Hazmat		(-5)				
Suit / Location	3/1	C3D 3/4	3/8	JN316		
Describes MSDS Manuals	3/1	0031 t	3/0	(1)21		
Demonstrates use of MSDS	3/1	ON AL	3/8-	1000		
Describes Mercury &		Mail	2/0	100/		
Chemotherapy Spills	3/1	8 N311	318	64,218		
Describes Personal Protective Equipment	3/1	0 13V	3/8	- an		



THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that

Private Security Firearms Requalification Program has completed the Ohio Conducted by

AimHi Private Security Academy

Awarded On August 02, 2020

Ohio Peace Officer Training Commission Dwight A Holcomb, Executive Director

School Commander

Ohio Peace Officer Training Commission Vernon P. Stanforth, Champerson

Attorney General

REQUALIFICATION DUE BY 9/4/2021 644827 A PSR20-304

This certificate alone does not authorize you to work as a security guard or private investigator. For licensing requirements contact the Ohio Department of Public Safety/Private Investigator Security Guard Services or visit http://pisgs.ohio.gov/



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ON TRAUMA

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Highest Standards, Better Outcomes



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Private Security Firearms Requalification Program Conducted by AimHi Private Security Academy has completed the Ohio

August 02, 2020 Awarded On

Attorney General 04

Vernon P.Stanforth, Chainnerson Ohio Peace Officer Training Commission

644827 A PSR20-304

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MOUNT CARMEL POLICY/PROCEDURE

SUBJECT: Authorized Access to Medication Storage Areas

Appendix A

Orientation Checklist

Medication Storage Areas - Access by Non-Licensed Personnel

Employee's Name:	Employee ID Number:	
Position: SECURITY OFFICER	Dept: SAFETY SECURITY Date:	4/21/20

- € Access to medication storage areas is restricted to authorized personnel.
- € Access to medication storage areas by non-licensed support services personnel is based on the need for the individual to perform their assigned task.
- € Authorization for non-licensed personnel to access a medication storage area is identified by job classification and department specific job description with competencies related to the specific role(s).
 - **Environmental Services**
 - Facility Operations/Engineering/Management
 - Security
- € Support services personnel that are <u>not</u> authorized access may only access a secure medication storage area in the presence of an authorized individual. (e.g. nurse, pharmacy)
- € Medications must be stored in a secure environment.
- € Medication storage areas (patient servers, medication carts, medication rooms, medication refrigerators, etc.) must be secured at all times.
- € Medications in patient care areas that are not actively staffed must be locked.
- € Medication storage areas must be clean and provide sanitary conditions for medication storage and preparation.
- € Medications and medication related supplies may not be placed by the sink or drain.
- € Contact the area supervisor or the pharmacy if work in a medication storage area may interfere with medication security or integrity (e.g. if medications need to be moved).
- € Report any suspected employee impairment, diversion or theft of medications, syringes, needles or any supplies to the area supervisor or pharmacy.

Preceptor's Name: Jeremy Reisi	ogC (print)
Preceptor's Signature:	Date: 4/21/20
Employees Name: I acknowledge that I nave read and underst	and my responsibilities related associated
Employees Signatur	and my responsibilities related accessing medication storage areas

MOUNT CARMEL POLICY/PROCEDURE

SUBJECT: Authorized Access to Medication Storage Areas

Appendix B

Medication Storage Areas - Access by Non-Licensed Personnel Competency

1	Medic	cation storag	ge areas can be access	sed by any hospital employee.
	a.	True	 False	any mospital chiployee.
_				
2.	If you	have a job t	o do in a secure medi	ication storage area you;
	a.	May access	s the area to do the jo	b without authorization
	b.	May access	s the area if authorize	ed by your job description
	c. (đ.)	May access B and C	the area under the s	supervisor of an authorized nurse or pharmacy staff
3.	Medica medica	ation carts, ration storage	medication rooms, mo e areas. b. False	edication refrigerators, freezers and warmers are all
4.	ciosea.	rou snoula	e medication cart con; ; art to a secure area	ntaining medications is in the hallway on a unit that is
				pervisor or pharmacy
	c.	Leave the ca	art alone because the	e unit may reopen soon
	d.	None of the	above	and may respen soon
5.	a. b.	Clean it up a Not report t	a; and continue working his because you don'i	t know who used them
	3	Immediately	his because it is not your report the finding to	our responsibility your supervisor

BASIC LIFE SUPPORT

BLS Provider



has successfully completed the cognitive and skills evaluations in accordance with the curriculum of the American Heart Association Basic Life Support (CPR and AED) Program.

Issue Date

1/14/2020

Training Center Name

Mount Carmel Health System

Training Center ID

OH03247

Training Center Address

6150 E. Broad St Columbus OH 43213 USA

Training Center Phone Number

614-234-5570

Recommended Renewal Date

01/2022

Instructor Name

Voice Assisted Manikin

Instructor ID

10190824478

eCard Code

205509544759

QR Code



To view or verify authenticity, students and employers should scan this QR code with their mobile device or go to www.heart.org/cpr/mycards.

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BASIC LIFE SUPPORT

BLS Provider



has successfully completed the cognitive and skills evaluations in accordance with the curriculum of the American Heart Association Basic Life Support (CPR and AED) Program.

Issue Date

1/31/2018

Training Center Name

Mount Carmel West Hospital

Training Center ID

OH03247

Training Center Address

6150 E. Broad St Columbus OH 43213 USA

Training Center Phone Number

614-234-5570

Recommended Renewal Date

01/2020

Instructor Name

Mouna wardeh

Instructor ID

03112364628

eCard Code

185502236400

QR Code



To view or verify authenticity, students and employers should scan this QR code with their mobile device or go to www.heart.org/cpr/mycards.

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Certificate of Completion

This Certifies That

Has Successfully Completed The

Prevention of and Response to Suicide Bombing Incidents Course

Under the United States Department of Homeland Security (DHS) Federal Emergency Management Agency (FEMA) Developed by New Mexico Tech (NMT) Energetic Materials Research and Testing Center (EMRTC) Homeland Security National Training Program Cooperative Agreement

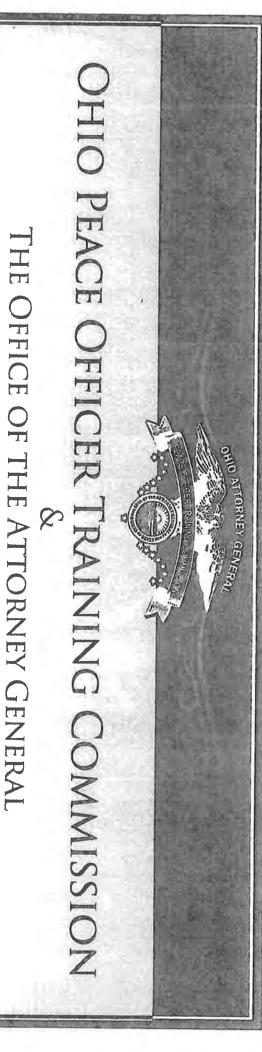
Recipient Has Been Awarded 3.4 Continuing Education Units (34 Contact Hours)

09/23/2019 - 09/27/2019

NM180347

Joel Haley, Associate Director of Training

38.85



This is to certify that

Private Security Firearms Requalification Program has completed the Ohio

Conducted by

AimHi Private Security Academy Awarded on

July 28, 2019

Ohio Peace Officer Training Commission

Vernon P. Stanforth, Chaipperson

Dave Nost Attorney General

Ohio Peace Officer Jeffrey K. Scott, Executive Director Commission

School Commander

REQUALIFICATION DUE BY 09/04/20 640918 A PSR19-290

This certificate alone does not authorize you to work as a security guard or private investigator. For licensing requirements, contact the Ohio Department of Public Safety/Private Investigator Security Guard Services or visit http://pisgs.ohio.gov/

Name:

Campus:

Date:

HANDCUFFING TEST

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
 - D.) ALL OF THE ABOVE
 - E) BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?

A.)TRUE

- **B)**FALSE
- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - C) SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?
 - A.) TRUE
 - B) FALSE

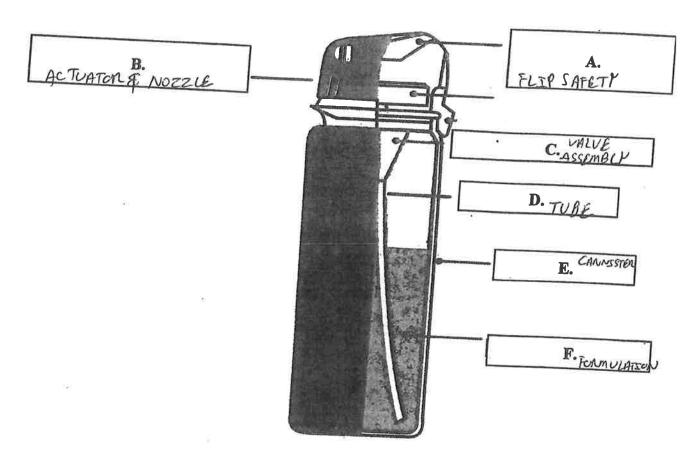
OC Test Mount Carmel Health System Safety and Security



- 1.) What does OC stand for?
 - Orange Crush A.
 - Ocean Crust
 - Oleoresin Capsicum
- What is the average expiration date on an OC canister? 2.)
 - 1-2 years
 - B 3-4 years
 - 4-5 years
- How often should you check your OC spray for adequate spray strength? 3.)
 - 60 days B.
 - 90 days
- 4.) How long of a burst should you use on a threat?
 - 1-2 seconds
 - 2-4 seconds B.
 - C. Empty the entire can
- What is Oleoresin Capsicum commonly known as? **5.**)
 - Mace
 - Pepper Spray
- When deploying OC, what area of the body should you deploy the OC **6.**) A.
 - Arms
 - Chest
 - Face and eyes
- After using OC on a subject, what should you immediately do with the 7.)
 - Leave lying on the ground.
 - (\mathbf{R}) Remove from contaminated area
 - C. Spray again

8.)	Wh	nat is the second step in the decontamination process?
	A .	Spray them again
	В.	Tell them to stop crying like a baby
	(C)	Offer verbal rapport to the subject
9.)	Wh	at is the third step of the decontamination process? Expose subject to fresh air Throw the subject a bottle of water
	(A)	Expose subject to fresh air
		Throw the subject a bottle of water
	C.	Stand there and record them with your cellphone
10.)	XX/b.	at is the best way to flush the eyes?
10.,	A.	Using milk
	R.	Rubbing eyes continually
		Water
		water
11.)	Wha	at type of agent is OC?
	A.	Glue
	B.	Cleaning Fluid
	(C.)	Inflammatory
		**
12.)	Wha	t is the main ingredient of OC?
	A.	Water
	A. B	Cayenne Pepper
	C.	Powder
10 \		
13.)		CMS (Center for Medicaid/Medicare System) guidelines allow for
	OC to	o be used on a PATIENT?
	A	Yes
		No
	C.	Only if they deserve it.
14.)	List t	he nomenclature of a canister of OC
	A.	FLIP TOP
		24 44 data 201
	В.	ACUATOR & NOZZLE
	C.	1/41 v.6 0500 0 v.V
	C.	VALVE ASSEMBLY
	D.	TUBE
	E.	CANNISTER
	F.	FORMU LATION

, y





Box 1794 Appleton, Wi 54912 (920) 735-6242 · Fax (920) 735-8245 asp-use.com

ASP Basic Certification (ABC) EXPANDABLE BATON TRAINING

Information Sheet

Initial Certification	(Please Print)	mormation Sneet	
First Name Home Address City Mount VEANON State OH Province USA E-mail Address Employing Agency MOUNT CARLINEL Agency Address SOD SOUTH CLEVELAND A-VE CITY LISTEN VILLE Agency Telephone (3.60) 89.8 4005 E-mail Address Bernall Address State OH Province USA Zip 21.081 Agency Telephone (3.60) 89.8 4005 E-mail Address Duty Status: XI Full Duty I Restricted Duty Has your agency adopted or authorized the use of the ASP Baton? YES How many officers are in your agency? 300 Helphi S') Weight 330 Age 43 Date of Birth 1/20/29 Helphi S') Weight 330 Age 43 Date of Birth 1/20/29 Do you have any knee, back or health problems? NO Are you on any medication? 4DDELA-LL DOUWS STATEN Person to be notified in case of emargency: Name Phone Relationship WIFE Alternate (Initial Complete		Date 4/2/21
Home Address City Mount VERNON State OH Province USA E-mail Address Employing Agency Mount CARMEL Agency Address SCO SOUTH CARMEL Agency Address SCO SOUTH CARMEL Agency Address SCO SOUTH CARMEL Agency Telephone (3%) 898 405 E-mail Address Duty Status: Pill Duty Prestricted Duty Has your agency adopted or authorized the use of the ASP Baton? YES How many officers are in your agency? 3C Height STO Weight 330 Age 43 Date of Birth 1/20/29 Have you been exercising? YES Do you have any knee, back or health problems? NO Are you on any medication? 45 DERALL NOLLIVE STATEN Person to be notified in case of emargency: Name Phone Relationsmip VIPE Alternate (□ Recertification	
Telephone E-mail Address Employing Agency MUMAT CARMEL Agency Address SCO SCOTH CLEVELAND AVE City LISTER VILLE Agency Telephone (380) 898 405 E-mail Address Duty Status: PFull Duty Prestricted Duty Has your agency adopted or authorized the use of the ASP Baton? YES How many officers are in your agency? CHEIR 200 Age 43 Date of Birth 1/22/79 Helght 5') Weight 230 Age 43 Date of Birth 1/22/79 Have you been exercising? YES Do you have any knee, back or health problems? NO Are you on any medication? ADDELALL, ROSUMSSTATEN Person to be notified in case of emargency: Name Phone Phone Alternate (Last Name	
Employing Agency Mount CARMIEL Agency Address 500 SOUTH CLEVELAND AVE City LESTEN VIUL Agency Telephone (380) 898 4005 E-mail Address Duty Status: Agency Telephone (380) 898 4005 E-mail Address Duty Status: Agency Telephone (380) 898 4005 E-mail Address Duty Status: Agency Telephone (380) 898 4005 E-mail Address Duty Status: Agency Telephone (380) 898 4005 E-mail Address Duty Status: Agency Telephone (380) 898 4005 E-mail Address Duty Status: Agency Telephone (380) 898 4005 E-mail Address Duty Status: Agency Telephone (380) 898 4005 E-mail Address Duty Status: Agency Telephone (380) 898 4005 E-mail Address How many officers are in your agency? Weight 530 Age 43 Date of Birth 1/25/79 Do you have any knee, back or health problems? NO Are you on any medication? ADDERALL ROUVASTATEN Person to be notified in case of amargency: Name Phone Phone Phone Alternate () Release from Liability and Assumption of Risk Agreement 1) Intanding that this Agreement be legally binding upon me, my here, executors, administrators, and assigns, I hereby walve, release, and a sastgne, of and from any and all claims, demands, rights and causes of action of whatsoever lind and nature, arising from, and by reason of and it known and unknown, foreseen and unforces hybride and mental health; (b) I have no reason to believe that I am not hunar; (d) I have read and fully understand the terms and conditions of this Agreement links for hymy inherent in my participation in this residenting.			
Employing Agency MOUNT CARVINE Agency Address 500 SOUTH CARVINE Agency Address 500 SOUTH CARVINE Agency Telephone (360) 898 4005		State OH Province () 54	100 TO 100 TO 100
Employing Agency MOUAT CARMEL Agency Address SOD SOUTH CLEVELAND AUG City LESTEN VILLE State DH Province USA Zip 230M Agency Telephone (360) 898 4005 E-mail Address Duty Status: IX Full Duty Restricted Duty Has your agency adopted or authorized the use of the ASP Baton? YES How many officers are in your agency? 30 Helght 17 Weight 330 Age 43 Date of Birth 1/23/29 Helght 17 Weight 330 Age 43 Date of Birth 1/23/29 Are you on any medication? 40 DERALL NOUVESTATION Person to be notified in case of emergency: Name Phone Release from Liability and Assumption of Rick Agreement 1) Intending that this Agreement be legally binding upon me, my helrs, executors, administrators, and assigns, I hereby waive, release, and a segingly of and from any and all claims demands, rights and causes of account of whatsoever kind and nature, alseng from, and by reason of SP Expendable Bation certification training activities. 2) In signing this Release, Lessert that (a) I am presently in good physical and mental health; (b) I have no reason to believe that I am not in the rights of an early understand the torms and conditions of this Agreement all risk of injury Inherent in my participation in this training; (d) I have read and fully understand the terms and confidence assume all risk of injury Inherent in my participation in this training; (d) I have read and fully understand the terms and confidence on this Agreement in my participation in this training; (d) I have read and fully understand the terms and confidence on the Agreement in my participation in this training.	1 glebilotie	I TOVINGE DIN	7-11-250
City LESTEN VELLS. State OH Province USA Zip 4305 E-mail Address Duty Status: Agency Telephone (360) 898 4005 E-mail Address Duty Status: Agency adopted or authorized the use of the ASP Baton? YES How many officers are in your agency? 20 Helght 57 Weight 230 Age 43 Date of Birth 1/22/29 Helght 57 Weight 230 Age 43 Date of Birth 1/22/29 Are you on any medication? 4 DELALL, ROSWASTATEN Person to be notified in case of emergency: Name Phone Release from Liebility and Assumption of Rick Agreement 1) Intending that this Agreement be legally binding upon me, my heirs, executors, administrators, and assigns, of and from any and all claims, demands, rights and oassumption of Rick Agreement 1) Intending that this Agreement be legally binding upon me, my heirs, executors, administrators, and assigns, of and from any and all claims, demands, rights and oasses of action of whatsoever find and manual minor many and all claims and unforeseen physical and mental injuries and consequence from a fairner, and by reason of a highling that the Release, I essent that (a) I am presently in good physical and mental health; (b) I have no reason to believe that I am not in that relation of an interest in my participation in this relation that in a present in the relation of the Agreement in my participation in this treation.	Employing Assessment	10000	
Agency Telephone (380) 898 4005	Agency Address		
Agency Telephone (380) 898 4005	City UKSEC MUSES 500 SOUTH C	LEVELAND AUE	
Duty Status: Full Duty Restricted Duty Has your agency adopted or authorized the use of the ASP Baton? YES How many officers are in your agency? Pleight	THE TELL	2.40.4	
Duty Status: Full Duty	Agency relephone (380) 898 40	5 E-mail Address	Zip_4308/
How many officers are in your agency? Height 57 Weight 230 Age 43 Date of Birth 1/22/9 Heave you been exercising? Heave you been exercising? Heave you on any knee, back or health problems? Are you on any medication? 4000000000000000000000000000000000000			
Height 57 Weight 230 Age 43 Date of Birth 1/20/79 Have you been exercising? YES Do you have any knee, back or health problems? NO Are you on any medication? 4 DENAUL, NOTUVASTATION Person to be notified in case of emergency: Name Phone Relationship VIVE Alternate (Has your scanning Utty Restricte	d Duty	
Height 57 Weight 230 Age 43 Date of Birth 1/20/79 Have you been exercising? YES Do you have any knee, back or health problems? NO Are you on any medication? 4 DENAUL, NOTUVASTATION Person to be notified in case of emergency: Name Phone Relationship VIVE Alternate (How many effects adopted or authorized to	ne use of the ASP Baton? YES	
Do you have any knee, back or health problems? NO Are you on any medication? ADDERALL DOSUVASTATEN Person to be notified in case of emergency: Name Phone Relationship VIVE Alternate (Helph (1)	20	
Do you have any knee, back or health problems? NO Are you on any medication? ADDERALL DOSUVASTATED Person to be notified in case of emergency: Name Phone Relationship VIVE Alternate (Have you have Weight 230	Age 43 Date of Right 1/55	100
Person to be notified in case of emergency: Name Phone Phone Relationship WAIVER Release from Liability and Assumption of Risk Agreement 1) Intending that this Agreement be legally binding upon me, my heirs, executors, administrators, and assigns, I hereby waive, release, and assigns, of and from any and all claims, demands, rights and causes of action of whatsoever kind and nature, arising from, and by reason of ASP Expandable Baton certification training activities. 2) In signing this Release, I assert that (a) I am presently in good physical and mental health; (b) I have no reason to believe that I am not in clinar; (d) I have read and fully understand the terms and conditions of this Agreement.			18
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ASP Basic Certification

WRITTEN EXAMINATION

- 1. A defensive tactic is evaluated by it's ability to:
 - (a) Control v Injure
 - b. Maim v Destroy
 - c. Threaten v Control
 - d. React v Act
 - e. Demonstrate the Officers skill
- The primary striking surface of an open ASP Baton is the:
 - a. Cap
 - b. Center of the shaft
 - (£) Last 3" of the baton
 - d. First joint
 - e. Handle
- 3. The hand using the service firearm is the:
 - a. Weak hand
 - b. Contact hand
 - (a) Weapon hand
 - d. Reaction hand
 - e. Support hand
- 4. The ASP baton should not be opened:
 - a. To the sky
 - b. To the ground
 - c. During a strike
 - 7 To the side
 - e. Towards the threat
- 5. The two baton modes are:
 - a. Open and Closed
 - b. Interview and Combat
 - c. Weapon and Reaction
 - d. Concealed and Loaded
 - e. Ready and Extended
- 6. Which is not an ASP target area:
 - a. Center mass of the arms
 - b. Center mass of the legs
 - c. Center mass of the body
 - Groin or Sternum
 - e. The Weapon Delivery System
- Targeting specific points violates which training principle:
 - a. Forgiving techniques
 - b. Fine motor skills
 - c. Spaced practice
 - d. Static training
 - e. Complex techniques

- 8. The ASP baton is always carried:
 - a. On the right side
 - b. In the front
 - c. On the reaction side
 - TID down
 - e. Left side
- 9. The Reaction Strike is primarily a:
 - a. Strong strike
 - b. Closed strike
 - (c) Clearance strike
 - d. Offensive strike
 - e. Initial strike
- 10. The most frequently used ASP strike is the:
 - a. Reaction strike
 - Weapon strike
 - c. Straight strike
 - d. Clearance strike
 - e. Reverse strike
- When performing an Open Straight Strike, the Reaction Hand is:
 - a. Palm up on the shaft
 - b. Maintaining distance
 - c. Guarding the face
 - (d.) Palm down gripping the shaft
 - e. Executing a downward block
- 12. If the baton opens too easily:
 - a. Make the retaining clip smaller
 - b. Replace the o-ring
 - (c) Widen the retaining clip
 - d. Remove the retaining clip
 - e. Lubricate the baton
- 13. The most common problem in opening the baton is:
 - a. Grip of the baton
 - b. Loose o-ring
 - Broken retaining clip
 - d Operator error
 - Loose handle cap
- 14. Special Circumstances include:
 - a. Age
 - b. Size
 - (c) Weapon proximity
 - d. Skill level
 - e. Mutiple Officers

15. ASP Weapon Side Strikes are intended to be
performed at a:
(a). 45 degree angle
b. 180 degree angle
c. Horizontal angle
d. 90 degree angle
e. Vertical angle
16. When striking the ASP Baton is gripped with:
The index tinger and thursh
THE SECTION OF THE SE
C. Two fingers and the thumb Full hand grip
e. Both hande
17. Officer/Subject factors include:
Special knowledge
b. Imminent danger
C. Injury or exhaustion
Size
e. Officer on the ground
18. If the subject compiles, the Officer does not advance/strike
(a) True
b. False
19. The ASP Baton is designed to be
a. An offensive weapon
b. A comealong device
(c) A defensive weapon
d. A deadly force option
e. A restraining device
20. The principle goal of any arrest or physical confrontation is:
Establishing control
b. Superior Officer skill
c. Subject safety
d. Documentation
e. Punishment
Graded By: MUN WENDS
ASP Written Exam: Pare
7111 (1·99-7 Fall
Instructor: (MUTayor) B-41764
Date: 4/2/2/
11010

Baton Basic Certification

TECHNIQUE PROFICIENCY CHECKLIST

1) Check:	Pass: V	raii:
2) Redirection:	Pass: V	Fail:
3) Closed Mode Weapon Strike	Pass:	Fail:
4) Closed Mode Reaction Strike	Pass:	Fail:
5) Closed Mode Straight Strike	Pass:/	Fail:
6) Opening the Baton	Pass:	Fail:
7) Open Mode Weapon Strike	Pass:	Fail:
8) Open Mode Reaction Strike	Pass:	Fail:
9) Open Mode Straight Strike	Pass:	Fail:
10) Closing the Baton	Pass:	Fall:
TECHNIQUE PROFICIENCY	PASS:	FAIL:
	j	
COUNSELED:	<i>f</i> 1	→ 3:
CERTIFICATION APPROVED:	CERTIFICATION DE	NIED:
INSTRUCTOR: MAN THY IN	1 B-41764	2
DATE: 4/2/2		

DT Training Scenarios

- 1. Patient Wanding Patient arrives at the hospital via private transport. Patient checks in stating " I do not wish to live anymore" and is immediately taken to the triage area for further evaluation. Patient is carrying a small bag and has on street clothes. Charge RN contacts Safety and Security regarding wanding the patient due to the statements made by the patient. Verbalize response and next steps prior to intervention with patient.
- 2. Code Violet Security is called STAT to ER for verbally aggressive patient. While responding to STAT call, Security hears "Code Violet – ER #9" paged overhead. Security arrives to find staff attempting to hold patient down in bed. Patient is making verbal threats while trying to bite, spit, kick, and punch at staff who are attempting to control patient. Verbalize response to code violet and further information needed before scenario resumes.
- 3. Restraint Security is responding to call for service on in-patient unit. Not much information is given prior to responding. Upon arrival Security witnesses several staff members attempting to keep confused patient in bed. Patient is flailing his arms and legs attempting to "escape" from the hospital. Patient recognizes Security as law enforcement and begins to focus on officers. Patient is begging Security to take him with them because he is not safe around nursing staff. Verbalize response and de-escalation efforts needed before scenario resumes. Obtain additional information as needed.

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PASS / FAIL

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PASS / FAIL

4. Pink Slip – Security responding to disturbance in ER. Upon arrival Security intercepts patient attempting to leave the hospital. Staff is stating that the patient cannot leave. What is the response by Security at that exact moment? Patient becomes verbally aggressive with Security stating "you cannot hold me!" Verbalize efforts to get the patient back to his room and information needed to make appropriate decisions during the incident. What factors are important to consider? Resume scenario...

5. Suspicious Person – Security receives a call from a visitor stating that they have observed a vehicle on campus that appears to be occupied sitting at the edge of property near connex boxes that contain contractor tools and equipment. This box has already been broken into previously and several thousands of dollars in equipment was stolen. Describe steps taken when dispatched and actions on-scene. Start scenario...

6. Domestic Situation – Security responding to a disturbance in Maternity unit. Upon arrival security speaks with RN who advises that she has heard yelling and screaming coming from inside the room. She further advises that the only people inside the room are the patient and the father of the baby. Security responds to the room and finds patient in tears stating that she has been physically assaulted by the male party. Male party states that is not leaving his baby! Start scenario...

7. Elopement – Security receives frantic call from ER staff stating that the patient in ER #9 is running out the squad bay doors. Security responds and sees patient attempting to run off property. Describe steps taken and ask for any additional information needed at that time. Security catches up to patient just before he leaves property but are unable to stop and hold at that point. Describe next steps needed at that time. Begin scenario....

PASS / FAIL

8. Security is advised of a juvenile patient who arrived at the hospital due to an overdose. Patient took multiple prescription pills as an attempt to end her life. She had made comments that she does not wish to live anymore and wants the pain to go away. Patient's parents show up to the hospital and demand to be reunited with their daughter immediately. Mom makes the statement that she has not given MCHS consent to treat her daughter and will not be cooperating with staff requests. Urine test completed by daughter with mother inside the bathroom. Results of urine show that urine has been diluted with water and mother states that MCHS will never get an accurate urine sample from the patient. Physician responds to the room and advises that discharge of the patient is dependent on blood lab results. Parents consent to the blood draw which shows serious medical concerns and patient is pink slipped for medical conditions and is being transferred to Nationwide Children's Hospital for further evaluation. Mother makes the statement that she will not allow the hospital to put her daughter in a purple gown because she knows what it represents...GO!

PASS / FAIL

- 9. GSW Security is sitting post in ER lobby when GSW arrives via private vehicle. Two individuals carry the GSW into the ER lobby and drop him near the entrance. Both individuals flee the ER to their vehicle (Late model Infinity SUV, black with orange wheels with orange Infinity logo on each side). Patient has been shot in the chest. Gather additional information and advise response. Action...
 - PASS / FAIL
- 10. Property Search/Overdose Security called to in-patient room for suspicion of patient using drugs in the room. Upon arrival security speaks with physician who advises that she has spoken with the patient on two occasions today. The first time he was alert and oriented and even energetic. The second time he appeared lethargic and completely out of it, he was having trouble finishing sentences without falling asleep. None of the medications he is receiving would cause the change in behavior. The patient also has a history of IV drug abuse and admitted to using drugs 3 days prior to admission into the hospital. He is there for an abscess that is infected on his arm that he needs to receive surgery for. Please provide steps needed to perform search and explain how these are communicated to the patient. Also state any notifications that are made and any witnesses to the search. Begin...

11. Discharged Patient – Security called to ER because discharged patient is refusing to leave the room. Patient states that he is not ready to leave because staff and the doctor has not addressed his concerns. Patient is being passive aggressive with staff and stating that he will not leave until he has had an opportunity to speak with the doctor about his care. Ask any additional questions as appropriate and determine your strategy for his removal from the room. Scenario resumes when ready...

12. Criminal Trespass – Security called to suspicious visitor who was found sleeping in an empty patient room by staff on the unit. Security speaks with visitor upon arrival, but visitor refuses to identify himself to security. He further states that he is homeless, and he needs to be seen because he is having suicidal thoughts. Officer evaluates the situation and determines course of action...Play scenario

PASS/ FAIL

Patient checks in to ER for psychiatric evaluation. Case Management and doctor both evaluate patient and determine that he is not suicidal. Patient is discharged from the ER but again refusing to leave...resume scenario PASS/FAIL



A MEMBER OF 🐼 TRINITY HEALTH

Safety and Security Defensive Tactics / OC Repellant / ASP Baton Competency Form

Students Name (print):		
I.D. Number;		
Date: 4/2/2		
Campus: ST. ANN'S		
1. Escort Position	(5)	
2 Poles Pr	Pass	Fail
2. Balance Displacement		
a. At the shoulder	6	
b. Friction on the back	Pass	Fail
c. At the hip	rass	Fail
2 Hands on	Pass	Fail
3. Handcuffing		
a. Standing/Prone Position	(Bana)	
b. Removing Handcuffs	Page	Fail Fail
4. Armbars/Wristlocks	. 400	rail
a. Transport Wristlock	Pass	Fail
b. Transport Wristlock Takedown to Handcuffs	Pass	ran Fail
o. Galaight Affil par	Page	Fail
d. Straight Arm bar Takedown to Handcuffs	Pass	Fail
5. Weapon Retention Drills		
a. Holstered	0	
b. Un-holstered	(Pass	Fail
c. Stripping Weapon from Subject	Pass	Fail
	Pass	Fail
6. Oleoresin Capsicum (OC)		
a. Nomenclature	1	
b. Spray Patterns	(Pass)	Fail
i. Balance/Movement/Verbal Commands/Control	600	
SPIDOWII	Pass	Fail
iii. Side to Side	Pass	Fail
iv. Circular	Pass)	Fail
c. Decon Process	Pass)	Fail

Fail

7. ASP Baton a. Balance/Movement/Verbalization/Technique/Targeting Pass Fail b. Ready Position ass Fail c. Closed Mode Weapon Strike Pass Fail d. Closed Mode Reaction Strike dss' Fail e. Closed Mode Straight Strike 288 Fail f. Closed Mode Weapon/Reaction/Straight Strike 288 Fail g. Opening the ASP Baton Pass Fail h. Open Mode Weapon Strike ass Fail i. Open Mode Reaction Strike ass Fail j. Open Mode Straight Strike Pass Fail k. Open Mode Weapon/Reaction/Straight Strike Pass Fail I. Closing the ASP Baton/Transitioning to baton holster Pass Fail m. Emergency Open Strike/Closing baton/holster Pass Fail **If an Officer cannot close their baton, a recommendation needs to be forwarded to their Supervisor that an ASP Talon baton be issued to that Officer** 8. Scenario Based Training a. Patient Wanding Fail b. Code Violet Fail c. Patient Restraint Fail d. Combative Patient Restraint Pass Fail e. Pink Slip Patient ass Fail f. Suspicious Person(s) Pass Fail g. Domestic Dispute Pass Fail h. Elopement Pass Fail i. Juvenile Patient Elopement via Parent/Guardian Pass Fail j. GSW Patient Pass Fail k. Property Search Fail I. Discharged Patient Refusing to Leave Fail m. Criminal Trespass Fail **Grading Scale:** Passing = performs w/out prompting

Failed = needs prompting / repeated instruction, or cannot perform task

Student Signature and ID Numb

Instructors Signature and ID Number:

Instructors Signature and ID Number:



A MEMBER OF 🚳 TRINITY HEALTH

Safety and Security Defensive Tactics / OC Repellant / ASP Baton Competency Form

Students Name (print):		
I.D. Number:		
Date: 3/6/20		
Campus: ST. ANN'S		
*		
1. Escort Position	Pass	Fail
2. Balance Displacement		
a. At the shoulder	Page	Fail
b. Friction on the back	Pass	Fail
c. At the hip	Pass	Fail
3. Handcuffing		
a. Standing/Prone Position	Pass	Fail
b. Removing Handcuffs	Pass	Fail
4. Armbars/Wristlocks		
a. Transport Wristlock	Pass	Fail
b. Transport Wristlock Takedown to Handcuffs	Pass	Fail
c. Straight Arm bar	Pass	Fail
d. Straight Arm bar Takedown to Handcuffs	Pass	Fail
5. Weapon Retention Drills		
a. Holstered	Pass	Fail
b. Un-holstered	Pass	Fail
c. Stripping Weapon from Subject	Pass	Fail
6. Oleoresin Capsicum (OC)		
a. Nomenclature	Pass	Fail
b. Spray Patterns		
i. Balance/Movement/Verbal Commands/Control	Pass	Fail
ii. Up/Down	Pass	Fail
iii. Side to Side	Pass	Fail
iv. Circular	Pass	Fail
c. Decon Process	Pass	Fail

7. ASP Baton

	~		
a.	- and the verificity verbalization, recillique, rargeting	Pass	Fail
b.	Ready Position	Pass	Fail
C.	Closed Mode Weapon Strike		
d	Closed Mode Reaction Strike	Pass	Fail
۵.	Closed Made Reaction Strike	Pass	Fail
e.	Closed Mode Straight Strike	Pass	Fail
T.	Closed Mode Weapon/Reaction/Straight Strike	Pass	Fail
g.	Opening the ASP Baton	Pass	Fail
h.	Open Mode Weapon Strike		
i.	Open Mode Reaction Strike	Pass	Fail
ï		Pass	Fail
j.	Open Mode Straight Strike	Pass	Fail
k.	Open Mode Weapon/Reaction/Straight Strike	Pass	Fail
I.	Closing the ASP Baton/Transitioning to baton holster	Pass	Fail
m.	Emergency Open Strike/Closing baton/holster		
	carry and an analysis of the state of the st	Pass	Fail

If an Officer cannot close their baton, a recommendation needs to be forwarded to their Supervisor that an ASP Talon baton be issued to that Officer

8.	Scenario	Based	Training
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a.	Patient Wanding	(Page)	Fail
	Code Violet	033	_
	Patient Restraint	Pass	Fail
d.	Combative Patient Restraint	Pass	Fail Fail
		Pass	Fail
f.	Suspicious Person(s)	Pass	Fail
	Domestic Dispute	Pass	Fail
	Elopement	Pass	Fail
i.	Juvenile Patient Elopement via Parent/Guardian	Pass	Fail
j.	GSW Patient	Pass	Fail
	Property Search	Pass	Fail
I.	Discharged Patient Refusing to Leave	Pass	Fail
m.	Criminal Trespass	Page	Fail

Grading Scale: Passing = performs w/out prompting

Failed = needs prompting / repeated instruction, or cannot perform task

Student Signature and ID Numb

Instructors Signature and ID Number:

Med Taylor # 273267

Instructors Signature and ID Number:_

Name:
Campus: 57. ANNV
Date: 3/6/20

HANDCUFFING TEST



- A.) ON A VIOLENT PATIENT
- B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
- C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
- D.) ALL OF THE ABOVE
- E.) BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?

A.)TRUE B)FALSE

- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - © SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?

A.) TRUE B.) FALSE



Box 1794 · Appleton, WI 54912 · (920) 735-6242 · Fax (920) 735-6245 · asp-usa.com

ASP Basic Certification (ABC) EXPANDABLE BATON TRAINING

Information Sheet

(Please Print)		Date 3/6/a0
☐ Initial Certification	□ Recertification	
First Name		
Home Address	Last Name	
City MG VERLNON	OLA all	
Telephone	State OH Province OSA	Zip 43050
	E-mail Address	31
Employing Agency MOUNT CHRMEL	CT 0.	150
Agency Address Soc S. CLEVEL	THON'S	
Agency Telephone (350) 898 400	State OH Province USA	Zip_43081
195110) 1010phone (1982) B 78 400	E-mail Address DENNIS . DENI	TT & mchs. com
Has your agency adopted or authorized the How many officers are in your agency? _ Height <u>5 ' 7</u> Weight <u>0 3 5</u> Have you been exercising? Yとら		2/78
Do you have any knee, back or health pro	oblama? AVV	
Are you on any medication? AND LICHLE	obiems?_//C	
THE	-, IUSDVASTATIN	
Person to be notified in case of emergen	NOV!	
Name		
Phone	Alternate ()	
Relationship	, stornate ()_	
riefly describe any health problems:		
•		Injury Check: 1A 2
	WAIVER	
Relea	ase from Liability and Assumption of Risk Agreement	
1) Intending that this Agreement by the state of		
rever discharge Armament Systems and S	binding upon me, my heirs, executors, administrators, an	d assigns, I hereby waive, release, ar
Proced	John Topicosinades, Hells.	EXECUTORS Administrators successes
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ASP Basic Certification

WRITTEN EXAMINATION

- 1. A defensive tactic is evaluated by it's ability to:
 - (a.) Control v Injure
 - b. Maim v Destroy
 - C. Threaten v Control
 - d. React v Act
 - Demonstrate the Officers skill
- 2. The primary striking surface of an open ASP Baton is the:
 - a. Cap
 - b. Center of the shaft
 - C Last 3" of the baton
 - d. First joint
 - Handle
- 3. The hand using the service firearm is the:
 - a. Weak hand
 - b. Contact hand
 - (C.) Weapon hand
 - Reaction hand
 - Support hand
- 4. The ASP baton should not be opened:
 - a. To the sky
 - b. To the ground
 - During a strike
 - ä. To the side
 - e. Towards the threat
- 5. The two baton modes are:
 - Open and Closed
 - Interview and Combat
 - Weapon and Reaction c.
 - Concealed and Loaded
 - Ready and Extended
- Which is not an ASP target area:
 - Center mass of the arms
 - b. Center mass of the legs
 - Center mass of the body
 - **Groin or Sternum**
 - e. The Weapon Delivery System
- 7. Targeting specific points violates which training principle:
 - a Forgiving techniques
 - b. Fine motor skills
 - Spaced practice
 - Static training
 - Complex techniques

- 8. The ASP baton is always carried:
 - On the right side
 - In the front
 - On the reaction side
 - Tip down **(d)**
 - Left side e.
- 9. The Reaction Strike is primarlly a:
 - a. Strong strike
 - **Closed strike**
 - Clearance strike
 - d. Offensive strike
 - Initial strike
- 10. The most frequently used ASP strike is the:
 - Reaction strike
 - Weapon strike
 - Straight strike
 - Clearance strike
 - Reverse strike
- 11. When performing an Open Straight Strike, the Reaction Hand is:
 - Palm up on the shaft
 - b. Maintaining distance
 - Guarding the face
 - Palm down gripping the shaft
 - **Executing a downward block**
- 12. If the baton opens too easily:
 - Make the retaining clip smaller
 - b. Replace the o-ring
 - Widen the retaining clip
 - Remove the retaining clip
 - Lubricate the baton
- 13. The most common problem in opening the baton is:
 - a. Grip of the baton
 - Loose o-ring
 - Broken retaining clip
 - Operator error
 - Loose handle cap
- 14. Special Circumstances include:
 - a. Age
 - b. Size
 - Weapon proximity
 - Skill level
 - **Mutiple Officers**

a) 45 degree angle b. 180 degree angle c. Horizontal angle d. 90 degree angle e. Vertical angle 16. When striking the ASP Baton is gripped with: a. The index finger and thumb b. A loose flexible grip c. Two fingers and the thumb full hand grip e. Both hands 17. Officer/Subject factors include: a. Special knowledge b. imminent danger c. Injury or exhaustion d) Size e. Officer on the ground 18. If the subject complies, the Officer doesn't not advance/strike a) True b. False 19. The ASP Baton is designed to be a. An offensive weapon b. A comealong device c) A defensive weapon d. A deadly force option e. A restraining device 20. The principle goal of any arrest or physical confrontation is: a) Establishing control b. Superior Officer skill c. Subject safety d. Documentation e. Punishment Graded By: SCOLD DAY ASP Written Exams Pass S Fail_ Instructor: ASP Written Exams Pass S Fail_ Instructor:		ieu at a.
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Date: 3/6/20	~/	. 1.
1. 1.	Date:3/	6/20
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15. ASP Weapon Side Strikes are intended to be performed at a:

Baton Basic Certification

TECHNIQUE PROFICIENCY CHECKLIST

1	.) Cneck:	Pass: _v_	Faii:
2) Redirection:	Pass: 🗹	Fail:
3) Closed Mode Weapon Strike	Pass: 📈	Fail:
4) Closed Mode Reaction Strike	Pass:	Fail:
5) Closed Mode Straight Strike	Pass:	Fail:
6) Opening the Baton	Pass:	Fail:
7) Open Mode Weapon Strike	Pass: 🗸	Fail:
8) Open Mode Reaction Strike	Pass: 🗸	Fail:
9) Open Mode Straight Strike	Pass: 🗸	Fail:
10	0) Closing the Baton	Pass:	Fail:
TECHI	NIQUE PROFICIENCY	PASS:	FAIL:
COUN	NSELED:		
CERT	ILICATION ADDOORS /	7 CERTIFICATION S	SEAUED.
CERTI	IFICATION APPROVED	CERTIFICATION	DENIED:
INSTR	RUCTOR: ////////////////////////////////////	MU 4B-1	11764
DATE	211/20	A T	

ST. ANN'S

OC Test Mount Carmel Health System Safety and Security



- What does OC stand for? 1.) **Orange Crush Ocean Crust** Oleoresin Capsicum What is the average expiration date on an OC canister? 2.) 1-2 years 3-4 years B 4-5 years How often should you check your OC spray for adequate spray strength? 3.) A. 30 days 60 days B. 90 days **(C)** How long of a burst should you use on a threat? 4.) 1-2 seconds B. 2-4 seconds C. Empty the entire can What is Oleoresin Capsicum commonly known as? 5.) Mace Pepper Spray Gas When deploying OC, what area of the body should you deploy the OC **6.**) towards? A. Arms Chest Face and eyes
- 7.) After using OC on a subject, what should you immediately do with the subject?
 - A. Leave lying on the ground.
 - B Remove from contaminated area
 - C. Spray again

#: A # # #	8.)	What is the second step in the decontamination process. A. Spray them again B. Tell them to stop crying like a baby C. Offer verbal rapport to the subject	2
	9.)	What is the third step of the decontamination process? Expose subject to fresh air B. Throw the subject a bottle of water C. Stand there and record them with your cellphone	
£	10.)	What is the best way to flush the eyes? A. Using milk B. Rubbing eyes continually C. Water	
	11.)	What type of agent is OC? A. Glue B. Cleaning Fluid C. Inflammatory	iałi
	12.)	What is the main ingredient of OC? A Water Cayenne Pepper C. Powder	
5	13.)	Does CMS (Center for Medicaid/Medicare System) guidelines allow for OC to be used on a PATIENT? A. Yes B. No C. Only if they deserve it.	
*	14.)	List the nomenclature of a canister of OC	
		A. FLIP TOP	
		B. ACUATOR/ NCZEC	
		C. VALVE ASSEMBLY	
0		D. TUBE	
		E. CANISTON	
		F. FORMULATION	

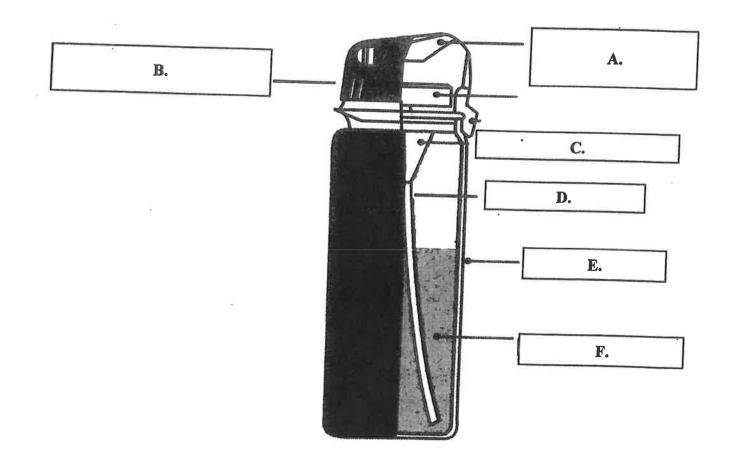
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Mount Carmel Health System Competency Assessment Safety & Security

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		SAFETY & SECURITY
		ISTILLIA SECULETI
☐ High Risk ☐ Low Volum	me 🗆 Problem Prone 🗀 New E	quipment/Service
	CARING COMPONENTS	
emonstrates service excellence be	ehavior	
	KNOWLEDGE AND SKILL COMP	ONENTS:
BILITY TO EXPLAIN THE USE OF	F FORCE CONTINUUM	
BILITY TO PERFORM BALANCE	DISPLACEMENT AT THE SHOULDE	R
BILITY TO PERFORM BALANCE	DISPLACEMENT ON THE BACK	
BILITY TO PERFORM BALANCE	DISPLACEMENT AT THE HIP	
BILITY TO PERFORM A TRANSP	ORT WRIST LOCK TO BOTH THE R	IGHT AND LEFT SIDE
BILITY TO PERFROM A TRANSP	ORT WRIST LOCK TAKEDOWN INT	O HANDCUFFING
ILITY TO PERFORM A STRAIG	HT ARM BAR TO BOTH THE RIGHT	AND LEFT SIDE
ILITY TO PERFORM A STRAIGI	HT ARM BAR TAKEDOWN INTO HAN	IDCUFFING
ILITY TO USE HANDCUFFS IN	THE STANDING METHOD	
ILITY TO USE HANDCUFFS FR	OM THE KNEELING POSITION	
ILITY TO REMOVE HANDCUFF	S	
ILITY TO UNDERSTAND WHEN	TO PLACE HANDCUFFS ON SUBJE	СТ
ILITY TO PERFORM WEAPON I	RETENTION FROM THE HOLSTER	
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ILITY TO PERFORM WEAPON S	STRIP FROM SUBJECT IN SHOOTIN	IG POSITION
ILITY TO PERFORM THE USE (OF STRAIGHT BATON FROM THE FI	FLD INTERVIEW STANCE
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ILITY TO PERFORM THE USE O	OF STRAIGHT BATON USING THE F	ORWARD CUTTING STRIKE
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ILITY TO CLOSE THE BATON F	ROM THE KNEELING POSITION	- A
ILITY TO OPEN AND USE THE I	BATON FROM THE CRISIS POSITION	N
ILITY TO EXPLAIN WHEN TO U	SE BATON AND WHEN NOT TO USE	BATON
ILITY TO EXPLAIN WHAT O.C. S	STANDS FOR	
LITY TO EXPLAIN WHEN TO U	SE O.C.	
LITY TO EXPLAIN WHEN NOT	O USE O.C.	
LITY TO EXPLAIN WHETHER T	O USE O.C. ON A PATIENT OR NOT	
LTY TO EXPLAIN THE EFFECT	S OF O.C. ON A SUBJECT	
LITY TO EXPLAIN THE DECON	TAMINATION PROCEDURES	
LITY TO VERBALLY DE-ESCAL	ATE (CIT TRAINING/AGGRESSIVE B	BEHAVIOR TRAINING)
LITY TO APPLY RESTRAINTS	VI-1	
LITY TO POSITION PATIENT OF	N THE BED/CART	
LITY TO DUACE THE CONNECTI	NG STRAP AROUND THE BED FRA	ME
KLES LOCKING	COLORED CUFF ON THE PROPER I	LIMB (BLUE FOR WRISTS/RED FOR
ALLO, LUCKING)		
LITY TO PASS DT TRAINING	BETWEEN THE RESTRAINT AND PA	TIENTS WRIST/ANKLE
LITY TO PASS DT TRAINING SO	LENARIOS ANNIJALLY	

METHO	D OF COMPETENCY VALIDATION:	
Return Demonstration	☐ QI Monitors/Audits	
□ Observation of Daily Work	□ Peer Review	
Post Test	□ Case Study	
□ Mock Event/Simulation	□ Discussion Group	
Competency Validated By: (Signature and credenting	als) Mad Taylor	Date 3/6/20
Developmental Needs identified: (See Perform	nance Evaluation for related goals)	
Associate Signature Date	interactor (b) digitature	Date
Evidence Based References/Resources (if appli	cable):	

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Mount Carmel Health System Competency Assessment Safety & Security Safety & Security Officer

	Safety & Security Safety & Security Office	
Associate Name:	ID Number:	Job Title:
	.B Harrison.	
		Safter & security affice,
☐ High Risk ☐ Low Volume		quipment/Service
	CARING COMPONENTS:	
Demonstrates service excellence beha		
Title ations in matural to the in-	KNOWLEDGE AND SKILL COMPO	ONENTS:
Knowledge of location of Security sens	ications use of cameras-monitoring itive areas.	recording, escorts, door openings, assist calls.
Enforces policies & procedures	and a second	
Completes accurate incident report do	cumentation/investigation and follow	r-ups as appropriate
Completes accurate activity logs		
Ability to apply clinical restraints and as	ssistance	
Ability to work independently		
Completes timely fire drills and critique	\$	
Understands ILSM protocols		
Ability to turn off Med Gas per policy		
Workplace Violence policy knowledge	on englished	
Ability to process visitors after-hours or Ability to lock and unlock facility (includ		
Management of Aggressive Behavior a		
Understands Safe Medical Device Act	responsibilities	
Helicopter operations- Safety duties	esponsibilities	
Discernment of sentinel events-notifical	ion protocols	
Knowledge of Emergency Codes and s		do Adam Codo Orongo eta)
Follows the department uniform and dre	ecunty response (i.e. code Red, Co	de Adam, Code Orange, etc).
Disseminates pertinent info (pass on bo		
Understands Forensic responsibilities	ion, meme, reporte, bolo	
Understands role and actions- VIP/Med	ia event	
		se of defensive weapons: ASP & Pepper Spray
and law enforcement restraints: (i.e. ha	ndcuffs)	of defending weapons. Not all opportoplay
Officer demonstrates the ability to co-or		ents, and staff as appropriate
Officer has a basic understanding of the	National Patient Safety Goals.	
Officer demonstrates proper telephone		
Officer demonstrates the proper radio of	ommunications-understands RF inte	erference
Officer is knowledgeable of all security a	alarms and responds appropriately (panic, infant, etc).
Officer conducts proper patient valuable	s receiving and returning	
Morgue procedures (MCSA only)		
Traffic ingress/egress control- normal ar	nd emergency (i.e. emergency room	areas)
The officer has demonstrated the prope used for.	r use of Fire Extinguisher and knows	s where and what K type extinguishers are
Officer knows the Emergency Procedure response.	es for handling Hazardous Materials	(chemical, asbestos, etc) and security
Officer understands their role in the incid	dent command structure (HICS)	
Understanding of response to elevator r		W
Proper PPE use- Infectious, Chemical, I		autions- chemical protection)
MRI Safety	,	and morning protection;
Role in Bomb Threat- search techniques	s/staging	
Knowledge of Burn Permit process	ж. ж.	

Under	stands Property Search policy and role	
	e precautions/assessment	
Prope	lifting/body mechanics	
Pediat	ric; (I year – 12 years)	
	to involve parents if possible:	
•	Provide privacy as appropriate.	
•	Allow child to exercise some control.	
	Speaks at eye level maintaining eye contact	et en
Alleure	Uses direct approach with child, giving one	direction at a time.
Adolos	choice when possible.	
Moods	cent: (13-17 years)	
Necus	to recognize that this age group:	
	Needs to be called by name or preferred no	ame.
	Provide privacy/modesty	
	Allows choice when possible, and encourage	ges verbalization of concerns and fears.
	Tells patients behaviors that are permitted.	
	Watches for body language and cue for fee	lings.
	Speaks directly to patient in simple medica Concerns and fears.	terms.
	Concerns and lears.	
Geriatri	c: (65±)	
Genati		A Alexander Alexander Company (Company)
	tools that are needed for effective communi-	g glasses, hearing aids, or may have memory loss and recognizes the
	tools that are needed for effective communic Does not shout at patients, speak slowly an	cations during interviews and investigations.
	Does not rush patient, gives them time to pr	a distinctly.
	Repeats instructions several times.	ocess information.
	Discuss one item at a time.	
	Assist in transferring patient under direction	of a Pagistared Nurse
	Provide privacy/modesty	or a Registered Nurse.
Adult (1	8-64 years)	
	Calls patient by preferred name.	
	Allows choices when possible	
	Provides for privacy/modesty	
	Respects patient right to make informed dec	inione
	Assists in relinquishing valuables	Sions.
	Watches body language as cue for feelings.	
	Interviews patient in a calm, reassuring man	
	Assists in controlling confused actions	ier concerning lost articles.
Knowled	Assists in controlling confused patient.	12.20
Able to a	ge of Automated External Defibrillator (AED)	-location and use
tole to a	ct appropriately in an emergent or sentinel t	COMPETENCY VALIDATION:
Dotur	Demonstration	
		□ QI Monitors/Audits
CObser	ation of Daily Work	☐ Peer Review
Post T	est	☐ Case Study
Mock E	Event/Simulation	☐ Discussion Group
`ompote	nov Velidete d Dur en	1 1 2/-1
	ncy Validated By: (Signature and credentials)	Evaluation for related goals) As Manager Signature from Date 3/12/26
evelopi	nental Needs identified: (See Performance I	Evaluation for related goals)
		1 11
ssociate	e Signati	Manager Signature Many Date 3//2/26
vidence	Based References/Resources (if applicable):	Jane Stranger
	bacca reservinces/resources (il applicable).	

Mount Carmel Health System
Competency Assessment
Safety & Security
DEFENSIVE TACTICS/HANDCUFFING/STRAIGHT BATON/O.C. REPELLANT/DE-ESCALATION/RESTRAINTS

Associate Name:	ID Number:	Job Title:
		energy of comment
		SAFETY & SECURITY
☐ High Risk ☐ Low Volume	☐ Problem Prone ☐ New E	quipment/Service Process Change
	CARING COMPONENTS	
Demonstrates service excellence behavi		
ADULTY TO EVEL AND THE VICE	NOWLEDGE AND SKILL COMP	ONENTS:
ABILITY TO EXPLAIN THE USE OF FO	RCE CONTINUUM	
ABILITY TO PERFORM BALANCE DISP ABILITY TO PERFORM BALANCE DISP	LACEMENT AT THE HIP	
ABILITY TO PERFORM BALANCE DISP	LACEMENT AT THE SHOULDER	
ABILITY TO PERFORM A TRANSPORT	WRIST LOCK TO BOTH THE BI	CHT AND LEFT CIDE
ABILITY TO PERFORM A STRAIGHT A	RM BAR TO BOTH THE RIGHT A	AND LEFT SIDE
ABILITY TO USE HANDCUFFS IN THE	STANDING METHOD	THE LEFT SIDE
ABILITY TO USE HANDCUFFS FROM T	HE KNEELING POSITION	
ABILITY TO REMOVE HANDCUFFS		
ABILITY TO UNDERSTAND WHEN TO I	PLACE HANDCUFFS ON SUBJE	СТ
ABILITY TO PERFORM SEPERATION F	ROM SUBJECT GRABBING	
ABILITY TO PERFORM PEELING OF THE ABILITY TO PERFORM SEPERATION F	HE HAND(S) OF SUBJECT DURI	NG A GRAB
ABILITY TO PERFORM PEELING OF FI	NOTE OF THE PARTY	NIA PRO LINE
ABILITY TO PERFORM A SCARF POSIT	TION ON SUBJECT	NGER JAB
ABILITY TO PERFORM A SIT OUT MAN	FIVER DIRING THE SCAPE	
ABILITY TO PERFORM A MOUNT POST	TION ON A SUBJECT	
ABILITY TO MAINTAIN CONTROL OF S	UBJECT WHILE IN THE MOUNT	ED POSITION
ABILITY TO ESCAPE A MOUNT POSITION	ON FROM A SUBJECT	LD I COITION
ABILITY TO PERFORM A GUARD POSIT	TION ON A SUBJECT	
ABILITY TO ESCAPE A GUARD POSITION	ON FROM A SUBJECT	
ABILITY TO PERFORM WEAPON RETE	NTION FROM THE HOLSTER	
ABILITY TO PERFORM WEAPON RETE	NTION FROM SHOOTING POSIT	TION
ABILITY TO PERFORM WEAPON STRIP	PAICHT BATCH FROM THE	POSITION
ABILITY TO PERFORM THE USE OF ST ABILITY TO PERFORM THE USE OF ST	RAIGHT BATON FROM THE FIE	LD INTERVIEW STANCE
ABILITY TO PERFORM THE USE OF ST	RAIGHT BATON USING THE EC	PWARD FLUID SHOCKMANE STRIKE
ABILITY TO PERFORM THE USE OF ST	RAIGHT BATON LISING THE EO	DIMARD CUTTING STRIKE
ABILITY TO PERFORM THE USE OF ST	RAIGHT BATON USING THE BA	CKHAND STRIKE
ABILITY TO CLOSE THE BATON FROM	THE STANDING POSITION	THE STATE OF THE S
ABILITY TO CLOSE THE BATON FROM	THE KNEELING POSITION	
ABILITY TO OPEN AND USE THE BATO	N FROM THE CRISIS POSITION	
ABILITY TO EXPLAIN WHEN TO USE ST	RAIGHT BATON AND WHEN NO	OT TO USE STRAIGHT BATON
ABILITY TO EXPLAIN WHAT O.C. STANI ABILITY TO EXPLAIN WHEN TO USE O.	DS FOR	
ABILITY TO EXPLAIN WHEN NOT TO US	SE O C	
ABILITY TO EXPLAIN WHETHER TO US	FOC ON A PATIENT OF NOT	
ABILTY TO EXPLAIN THE EFFECTS OF	O.C. ON A SUBJECT	
ABILITY TO EXPLAIN THE DECONTAMIN	NATION PROCEDURES	
ABILITY TO VERBALLY DE-ESCALATE (CIT TRAINING/AGGRESSIVE BE	HAVIOR TRAINING)
ABILITY TO APPLY RESTRAINTS		
ABILITY TO POSITION PATIENT ON THE	BED/CART	

ABILITY TO LOOP THE CONNECTING STRA	AP AROUND THE BED FRAME				
ABILITY TO PLACE THE PROPER COLORED CUFF ON THE PROPER LIMB (BLUE FOR WRISTS/RED FOR					
ANKLES, LOCKING)					
	THE RESTRAINT AND PATIENTS WRIST/ANKLE				
ABILITY TO PLACE PATIENT INTO POSEY \					
ABILITY TO SECURE POSEY VEST STRAPS		1			
ABILITY TO PASS DT TRAINING SCENARIO					
 Able to act appropriately in an emergent or 	sentinel type of event				
	,				
METHO	D OF COMPETENCY VALIDATION:				
Return Demonstration	☐ QI Monitors/Audits				
□ Observation of Daily Work	Peer Review				
	☐ Case Study				
X Post Test	Discussion Group				
Mock Event/Simulation /	A processor or out				
1					
Compotonov Volidated Bus (Simulation and	200019				
Competency Validated By: (Signature and credential					
Developmental Needs identified: (See Perform	rance Evaluation for related goals)				
Associate Signature Date	Instructor(s) Signature Date				
Evidence Based References/Resources (if applic	11.5				

Defensive Tactics / Impact Weapon Competency Form

STUDENTS NAME:	INSTRUCTORS:	
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JOINT LOCKS

BALANCE DISPLACEMENT TECHNIQUE			
 Starts from Escort Position Removes hand from Triceps and places it on rear waist of suspect. Presses hand forward and downward displacing balance. 	(SO) (SO) (SO) (SO) (SO) (SO) (SO) (SO)	A A A	F F F
 Starts from Escort Position Places hand in the middle of suspect's back and presses forward Moves hand in random manner, forcing steps in desired direction 	600	A A A	F F
lotion at the Shoulder's			_
Starts from the Escort Position Continually moves suspect's arm in a random manner	900	A A A	F F F
RANSPORT WRIST LOCK			
Elbow tucked between arm and body Forearm elevation	(3/0) (a)	A 'A A	F F F
	a. Starts from Escort Position D. Removes hand from Triceps and places it on rear waist of suspect. D. Presses hand forward and downward, displacing balance. D. Suspect steps in desired direction In the Back) D. Starts from Escort Position D. Places hand in the middle of suspect's back and presses forward. Moves hand in random manner, forcing steps in desired direction Interpretation Interpre	a. Starts from Escort Position Removes hand from Triceps and places it on rear waist of suspect S. Presses hand forward and downward, displacing balance Suspect steps in desired direction The Back Starts from Escort Position Places hand in the middle of suspect's back and presses forward Moves hand in random manner, forcing steps in desired direction Starts from the Escort Position Continually moves suspect's arm in a random manner Suspect is off balance and moves in desired direction RANSPORT WRIST LOCK Elbow tucked between arm and body Forearm elevation Wrist hyperextension	A Starts from Escort Position Removes hand from Triceps and places it on rear waist of suspect A A E. Presses hand forward and downward, displacing balance A A Suspect steps in desired direction The Back) Starts from Escort Position Places hand in the middle of suspect's back and presses forward A A Moves hand in random manner, forcing steps in desired direction A Moves hand in random manner, forcing steps in desired direction Starts from the Escort Position Continually moves suspect's arm in a random manner Suspect is off balance and moves in desired direction RANSPORT WRIST LOCK Elbow tucked between arm and body Forearm elevation Wrist hyperextension

 3. STRAIGHT ARM BAR i. Decentralize the center of gravity j. Maintain control over subject's arm k. Maintained balance while lowering center for takedown l. To the ground m. Control for handcuffing procedure 	(A)	A A A A	F F F F
Comments:			
HANDCUFFING			
 4. STANDING METHOD a. Approach is from rear b. Simultaneous Control at application, thumb lock/cuff push c. Position maintained with the flip under technique d. Second cuff applied without loss of control Comments:	9000	A A A	F F F
 5. TAKEDOWN FROM KNEELING POSITION e. All slack is removed from cuffed hand f. Decentralized towards the 2.5 position g. Iron wrist lock is applied simultaneously with decentralized pull h. Straight arm applied after proning the target i. Second cuff applied without loss of control 	66666	A A A A	F F F
6. REMOVING HANDCUFFS			_
 a. Officer Instructs suspect he is going to be de-cuffed b. Suspect is told to leave uncuffed hand on his hip c. Open handcuff closed immediately and put in weak hand d. Officer steps to rear 45 degrees while holding cuff at arms length e. Second cuff is removed 	କ୍ରିକ୍ରକ୍ରକ	AAAAA	F F F

Defensive Counter Maneuvers

7. GRABBING

- a. Separation
- b. Verbal Commands
- c. Peeling the hand(s)
 - 1. Outside/In
 - 2. Inside/Out



Comments:

8. FINGER POKES

- a. Separation
- b. Verbal Commands
- c. Peeling the fingers/hands
- d. Second Responding Officer Action

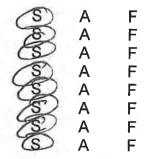


Comments:____

Ground Techniques

9. Scarf Position (Left/Right)

- a. From the side/cross mount position
- b. Perform a sit out maneuver
- c. Right leg ends at 10 o'clock position
- d. Keep hips off of the ground
- e. Left foot is at 8 o'clock position
- f. Right arm around subjects neck/head
- g. Left arm and hand secures subjects arm
- h. Pin your chest to subjects chest



Comments:____

10. Mounted Position

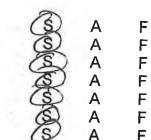
a.	Kne	es	slide	up
	-			•

- b, Feet are used to feel where hips
- c. Moving to control positions



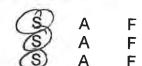
Mounted Position – subject sits back

- a. Protect Face
- b. Reach Up and Grab
- c. Pull Subject to you/ pull yourself to subject
- d. Two arm body lock (bear hug)
- e. Slide down toward waist
- f. Place foot flat on floor
- g. Stomp foot and turn subject



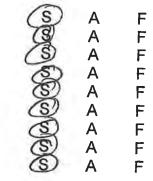
Mounted Position – subject traps your arms

- a. Bridge-Arch-Push and turn
- b. Work your way out the back door
- c. Protect Head



Mounted Position - escape

- a. Table Theory
- b. Keep them off your chest
- c. Protect your air
- d. Elbows to thighs/ squirm forward
- e. Protect your head
- f. Buck your hips
- g. Trap leg and arm
- h. Opposite foot flat on the floor
- i. Stomp foot and push



Guard Position(subject on top)

- a. Wrap legs around waist or feet flat on floor
- b. Sit up on forearm
- c. Free arm grabs elbow
- d. Roll subject toward forearm side
- e. Techniques for large person



11. Weapon Retention Drills(Holstered)

- a. subject grabs holstered weapon
- b. weapon hand on subject's hand
- c. spin body toward weapon side
- d. maintain control of subject's hand/wrist
- e. Practice subject front/back/side position



Weapon Retention Drills(un-holstered)

- a. lunge forward toward subject
- a. push weapon toward subject
- c. pull weapon toward officer
- d. create distance



Weapon Stripping Drills

- a. hand grabs slide of weapon pushing off target
- b. other hand grabs other side of slide
- c. step towards subject utilizing strength
- d. hands push weapon barrel upward toward subject
- e. step back to create space
- f. pull weapon toward officer



0			
Comments:			

Grading Scale:

S = Satisfactory (performs w/out prompting)

A = Acceptable (performs with minimal prompting)

F = Failed (needs prompting / repeated instruction, or can not perform task)

....



Box 1794 · Appleton, WI 54912 · (920) 735-6242 · Fax (920) 735-6245 · asp-usa.com

ASP Basic Certification (ABC) EXPANDABLE BATON TRAINING

Information Sheet

☐ Initial Certification ☐ Recertification	
First Name Last Name	
Home Address_	
City MT. VERNON State OH Province USA Zin C	43050
Telephone E-mail Address_	73030
Employing Agency MT, CARMEL ST. ANIU'S	
Agency Address 500 5 CLEVELAND AVE	
City L/F \ 160 VTI 16	112001
Agency Telephone (380) 898 4005 E-mail Address	4308-1
Duty Status:	
Has your agency adopted or authorized the use of the ASP Baton?	
How many officers are in your agency? _>C'	
Height 517. Weight 230 Age 41 Date of Birth 1/22/78	
Have you been exercising? 1'65	
Do you have any knee, back or health problems? <u>NO</u> Are you on any medication? <u>NOSUVASTATEN</u>	
Are you on any medication? TOSUVASTRITIO	
Person to be notified in case of emergency:	
Name .	
Phone Alternate ()	
Relationship FIGNCE	
Briefly describe any health problems:	PlA 11
injury official.	Many (SO)
WAIVER	
Release from Liability and Assumption of Risk Agreement	
Intending that this Agreement be legally binding upon me, my heirs, executors, administrators, and assigns, I hereby to orever discharge Armament Systems and Procedures, INC, and all of their country.	waive, release, ar
and assigns, of and from any and all claims, demands, rights and govern degrees, representatives, heirs, executors, adminis	trators, successo
	n, and by reason
Ill ASP Expandable Baton certification training activities.	me during any ar
2) In signing this Release, I assert that (a) I am presently in good physical and mental health; (b) I have no reason to belice the pood physical and mental health; (c) I am fully aware of, and do acknowledge and assume all risk of injury inherent in my participate the property of the Agreement.	eve that I am not
eminar; (d) I have read and fully understand the terms and conditions of this Agreement.	ation in this trainin
This program is competency based. Mere participation does not automatically assure successful complete	ion.
Pic an	
9110	
8/2/19	

Baton Basic Certification WRITTEN EXAMINATION

For each question below, circle the option that is the most correct.

8. The ASP Baton is always carried:

On the Reaction Side

a) On the right side

In the front

Tip down

On the left side

Strong strike Closed strike

9. The Reaction Strike is primarily a:

1. A defensive tactic is evaluated by

Threaten v Control

Demonstrate the officer's

its ability to:

(a) Control v Injure

b) Maim v Destroy

React v Act

skill

c)

d)

15. ASP Weapon Side Strikes are

(a) 45 degree angle

b)

intended to be performed at a:

180 degree angle Horizontal angle

90 degree angle

16. When striking, the ASP Baton is gripped

Vertical angle

2. The pr	rimary striking surface of an	b)	Closed strike	wit	h:
	ASP Baton is the:	D		а	
	Сар	d)			f and an analysis of the second
	Center of the shaft	е)	Initial strike		Two fingers and the thumb Full hand grip
	Last 3" of the baton	10 The	most frequently used ASP	_) Both hands
•	First joint		e is the:) Don Haires
e)	Handle	a)	Reaction Strike	17. Sp	ecial circumstances do not
2 The be	and uning the convice firearm is	ð			lude:
3. The na	and using the service firearm is	9) Special knowledge
	Weak Hand	d)	Clearance Strike	t) Imminent danger
b)	Contact Hand	e)	Reverse Strike	_) Injury or exhaustion
	Weapon Hand	·			Size
d)	Reaction Hand		n performing an Open Straight	ě	Officer on the ground
e)	Support Hand	Strik	e, the Reaction Hand is:		s a sala atalan an anno aibilitha
-		a)			fety is the ultimate responsibility
	SP Baton should not be	p)			the:
opene	od:	<u>(2)</u>			a) Student b) Training partner
a)	To the sky	a			b) Training partner c) Course coordinator
b)	To the ground		shaft		
(ع	During a strike	е)	Executing a downward block	•	Instructor Administrative officer
	To the side	40 1645	- bates exercited another	•	Administrative officer
е)	Towards the threat		e baton opens too easily: Make the retaining clip	19 Th	e ASP Baton is designed to be:
	TO K OFFICE ALL DEVICE WHEN	a)	smaller	10. 111	a) An offensive weapon
-	wo baton modes are:	b)	— 1 11 2		a) A comealong device
(d)	Open and Closed				A defensive weapon
	Interview and Combat Weapon and Reaction	©		_	A deadly force option
c)	Concealed and Loaded	e)			e) A restraining device
e)	Ready and Extended	•,			
θ,	neady and Extended	13. The	most common problem in		e principle goal of any arrest or
6 Which	n is not an ASP Target area:	ope	ning the baton is:	р <u>h</u>	ysical confrontation is:
a)		a)	<u> </u>	Ę	a) Establishing control
b)		b)		= 1	b) Superior officer skill
c)	Center mass of the body	င့်	Broken retaining clip		c) Subject safety
ത്	Groin or sternum	4	Operator error		d) Documentation
e)	The Weapon Delivery	e			e) Punishment
	System				
100	·		cer-Subject Factors do not		
	eting specific points violates		ude:		
	n training principle:	а	_ Z		
	Forgiving techniques	Þ			
b)	Fine motor skills	6			
c)		q			
d)		Θ	Multiple officers		
e)	Complex techniques				
	P		n is worth five (5) Roints.		
				/	1
	· T	he minimun	acceptable score s 80% (10	correcty.	1 1 /
			/ /// /	1 //	
			/ /// - /	1	
			1 11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/	7 N.	11.
EINIAI G	SCORE: 101/0	GRADED	BY: \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	100	
FINAL	SCORE		0.00	-	1
ASP MI	RITTEN EXAM:	ACCEPTA	ABLE NO	T'ACCEP/	ABLE
AUI WI	1111 1214 270 (10)	-		C	
COUNS	SELED //	0 11			
	1000	62	On-	_	ATE W/2/2016
INSTRU	JCTOR	- Care			ATE OF GOLF
	-	6			
		6,0			

Baton Basic Certification TECHNIQUE PROFICIENCY CHECKLIST

The following checklist is designed to assist you and the ASP Instructor in evaluating your performance of ASP Techniques. Those components of the technique that are acceptable are checked.

1) Check Balance Movement Verbalization Technique Target	6) Opening the Baton Balance Movement Verbalization Technique Target
2) Redirection Balance Movement Verbalization Technique Target	7) Open Mode Weapon Strike Balance Movement Verbalization Technique Angle Target
3) Closed Mode Weapon Strike Balance Movement Verbalization Technique Angle Target	8) Open Mode Reaction Strike Balance Movement Verbalization Technique Target
4) Closed Mode Reaction Strike Balance Movement Verbalization Technique Angle Target	9) Open Mode Straight Strike Balance Movement Verbalization Technique Target
5) Closed Mode Straight Strike Balance Movement Verbalization Technique Target	10) Closing the Baton Balance Movement Technique
· A chec · Three · Each i	k mark indicates an acceptable observed action. of the components must be acceptable for a passing score. echnique must have a passing score for certification. nimum passing score is 100% (10 techniques).

WRITTEN EXAMINATION

TECHNIQUE PROFICIENCY CHECKLIST

COMMENTS:

JUNE 2009



Name: ST. ANN'S
Date: 8/2/19

HANDCUFFING TEST

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
 - D.) ALL OF THE ABOVE
 - (E.) BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?

A.)TRUE B.)FALSE

- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - C.) SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?
 - A.) TRUE B. FALSE

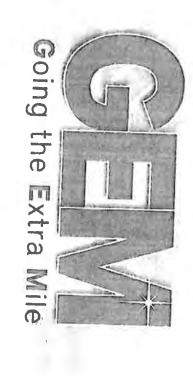
OC Test Mount Carmel Health System Safety and Security

07 Publi

- 1.) What does OC stand for?
 - A. Orange Crush
 - B. Ocean Crust
 - C.) Oleoresin Capsicum
- 2.) What is the average expiration date on an OC canister?
 - A. 1-2 years
 - /B) 3-4 years
 - C. 4-5 years
- 3.) How often should you check your OC spray for adequate spray strength?
 - A. 30 days
 - B. 60 days
 - (C) 90 days
- 4.) How long of a burst should you use on a threat?
 - A.) 1-2 seconds
 - B. 2-4 seconds
 - C. Empty the entire can
- 5.) What is Oleoresin Capsicum commonly known as?
 - A. Mace
 - B) Pepper Spray
 - C. Gas
- 6.) When deploying OC, what area of the body should you deploy the OC towards?
 - A. Arms
 - B. Chest
 - C.) Face and eyes
- 7.) After using OC on a subject, what should you immediately do with the subject?
 - A. Leave lying on the ground.
 - B. Remove from contaminated area
 - C. Spray again

*		
344	8.)	What is the second step in the decontamination process?
	•	A. Spray them again
0 4		B. Tell them to stop crying like a baby
		Offer verbal rapport to the subject
1		
2.0	9.)	What is the third step of the decontamination process?
		A. Expose subject to fresh air
		B. Throw the subject a bottle of water
		C. Stand there and record them with your cellphone
180	10.)	What is the best way to flush the eyes?
		A. Using milk
		B. Rubbing eyes continually
		© Water
	11.)	What type of agent is OC?
		A. Glue
		B. Cleaning Fluid
		C. Inflammatory
	12.)	What is the main ingredient of OC?
	ŕ	A. Water
		B. Cayenne Pepper
		C. Powder
	13.)	Does CMS (Center for Medicaid/Medicare System) guidelines allow for
		OC to be used on a PATIENT?
		A. Yes
		(B) No
		C. Only if they deserve it.
36 T	2.5	

e g



This certificate is presented to

for living our Mission, Guiding Behaviors and Core Values!

Unker Kim Pas, President



Box 1794 · Appleton, WI 54912 · (920) 735-6242 · Fax (920) 735-6245 · asp-usa.com

ASP Basic Certification (ABC) EXPANDABLE BATON TRAINING

Information Sheet

(Please Print)		-1.	Date 3/2/18
☐ Initial Certification	Recertification Recentification Recentification	n	
First Name	Last Nam		
Home Address	Last Naiii	е_	
City MT. VERNON	State 0 H	Province USA	Zip_43050
Telephone	E-mail Add		21p13030
, ,			
Employing Agency MOUNT CI	ARMED ST. ANN'S		
Agency Address 500 S. C	LEVELAND AVE		
City WESTERVALLE		Province UJA	Zip 43081
Agency Telephone (614) 89	8 4005 E-mail Add	ress_	
Duty Status: Full Duty F			
Has your agency adopted or auth	orized the use of the ASP Bato	on? <u>PES</u>	
How many officers are in your age			7.4
	230 Age 40	Date of Birth 1/02	78
Have you been exercising?	res		
Do you have any knee, back or he	ealth problems?_NO		
Are you on any medication? ADD	ETAIL RUSUVASTAT:	IN	
Name Phone Relationship GINLFNIE		ernate ()_	
Briefly describe any health proble	ms:		Injury Check:
	WAIVE	R	
	Release from Liability and Assum	-	
forever discharge Armament Systems and assigns, of and from any and all cla any and all known and unknown, foresee all ASP Expandable Baton certification tra	be legally binding upon me, my heirs and Procedures, INC, and all of their ims, demands, rights and causes of an and unforeseen physical and menaining activities. It that (a) I am presently in good physically aware of, and do acknowledge	e, executors, administrators, an agents, representatives, heirs, action of whatsoever kind and tal injuries and consequences ical and mental health; (b) I ha and assume all risk of injury inless, executively.	I nature, arising from, and by reason of thereof, suffered by me during any and tive no reason to believe that I am not in
	ncy based. Mere participation do		successful completion.
3/2/18			
Date	71 V. 30 TO	Signed	

Mount Carmel Health System Competency Assessment

DEFENSIVE TACTICS/HANDC	Safety & Security UFFING/STRAIGHT BATON/O.C. REP	ELLANT/DE-ESCALATION/RESTRAINTS
Associate Name:	ID Number:	Job Title:
		SAFETY & SECURITY OFFI
☐ High Risk ☐ Low Volum	no [Duality D	
Voluit	ne Problem Prone New Equence CARING COMPONENTS:	uipment/Service
Demonstrates service excellence be	havior	
	KNOW! EDGE AND OK!! I COME	NENTS:
ABILITY TO EXPLAIN THE USE OF	FORCE CONTINUE IN	
ABILITY TO PERFORM BALANCE I	DISPLACEMENT AT THE HIP	
ABILITY TO PERFORM BALANCE I	DISPLACEMENT ON THE BACK DISPLACEMENT AT THE SHOULDER	
ADICITIO PERFURINA IRANSDI	DET MIDIET LOCK TO DOTH THE	
		HT AND LEFT SIDE
		D LEFT SIDE
ADILITY TO USE HANDCUFFS FRO	M THE KNEELING POCITION	
ADJETT TO REWOVE HANDELIEES		
ABILITY TO UNDERSTAND WHEN	TO PLACE HANDCUFFS ON SUBJECT	
O I LIVI ONIVI SEPERATII	IN LUCIM CHID IFOT OB ABOUT	
CEREURINI PETING OF	E THE HAMPION OF OUR IECE	A GRAB
ABILITY TO PERFORM A SCARF PO	F FINGER(S)/HAND(S) DURING A FING	GER JAB
DULLI I TO PERFORM A SIT OUT M	MANELINED DUDING THE COARS	
CILIT I O FERFORINA MOTINI DI	OSITION ON A CUID IFOT	
ADILITY TO MAINTAIN CONTROL O	E SUBJECT WHILE IN THE MOUNTER	POSITION
		POSITION
POLLIT TO PERFORM A GUARN DO	COLD IN A CUE	
TOTAL TO ESCAPE A GILARD DOS	TION FROM A OUR ISSE	
PULL TO PERFORM WEADON DE	TENTION EDOM THE	
DIELECTION OF A DEL	- I LNI I CAN COMO CONTRACTOR	DN
BILITY TO PERFORM THE USE OF	STRAIGHT BATON FROM THE FIELD	INTERVIEW STANCE
BILITY TO PERFORM THE USE OF	STRAIGHT DATON FROM THE READ	Y STANCE
BILITY TO PERFORM THE USE OF	STRAIGHT BATON FRON THE READ STRAIGHT BATON USING THE FORV STRAIGHT BATON USING THE FORV	VARD FLUID SHOCKWAVE STRIKE
BILITY TO PERFORM THE USE OF	STRAIGHT BATCH HOING THE FORV	VARD CUTTING STRIKE
		HAND STRIKE
CLUSE THE BATON FRO	M THE KNEET INO DOOLTION	
PILIT TO OPEN AND USE THE RA	TON EDOM THE OBJOIC BOOK	
SILITI TO EXPENSIVE VIDENTIAL	STRAIGHT BATON AND MULTIN	TO USE STRAIGHT RATION
BILITY TO EXPLAIN WHAT O.C. STA	ANDS FOR	TO SEE CITAIGHT BATON
BILITY TO EXPLAIN WHEN TO USE BILITY TO EXPLAIN WHEN NOT TO	O.C.	
BILITY TO EXPLAIN WHETHER TO U	USE O.C.	
TELL TO EXPLAIN THE FEFFE IS	DE O C ON A CURIEDE	
PICT TO EXPLAIN THE DECONTAI	MINIATION PROCEDURES	
VERBALLY DE-ESCALAT	E (CIT TRAINING/AGGRESSIVE BEHA	N/I
		AVIOR TRAINING)
BILITY TO POSITION PATIENT ON T	HE BED/CART	

ABILITY TO LOOP THE CONNECTING STRAP ARO		
THE PROPER COLORED CUFF	ON THE BED FRAME ON THE PROPER LIMB (BLUE FOR V	VDICTO/DED FOR
ABILITY TO PASS ONE FINGER BETWEEN THE RE	STRAINT AND PATIENTS MIDISTIANIA	1 F
TO LACE PATIENT INTO POSEY VEST		LE.
ABILITY TO SECURE POSEY VEST STRAPS TO TH	F BED FRAME	
ABILITY TO PASS DT TRAINING SCENARIOS ANNI	IALLY	
Able to act appropriately in an emergent or sentine	I type of ayant	
METHOD OF CO	MARCHENOVICE	
Potus Dome I	OMPETENCY VALIDATION:	
Return Demonstration	□ QI Monitors/Audits	
□ Observation of Daily Work	☐ QI Monitors/Audits	
Return Demonstration	☐ QI Monitors/Audits	
□ Observation of Daily Work □ Post Test	☐ QI Monitors/Audits	
□ Observation of Daily Work ☑ Post Test ☑ Mock Event/Simulation Competency Validated By: (Signature and credentials)	☐ QI Monitors/Audits ☐ Peer Review ☐ Case Study ☐ Discussion Group	02 mar 12
□ Observation of Daily Work □ Post Test ■ Mock Event/Simulation Competency Validated By: (Signature and credentials)	☐ QI Monitors/Audits ☐ Peer Review ☐ Case Study ☐ Discussion Group	OZ MARIZ
□ Observation of Daily Work □ Post Test □ Mock Event/Simulation	☐ QI Monitors/Audits ☐ Peer Review ☐ Case Study ☐ Discussion Group	OZ MARIE Date

-0

Name: ST, ANN'S
Date: 3/2/18

HANDCUFFING TEST

wol.

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
 - D.) ALL OF THE ABOVE
 - (E.) BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?

A.)TRUE B.)FALSE

- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - (C.) SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?
 - A.) TRUE
 - B) FALSE

15. ASP Weapon Side Strikes are

a) 45 degree angle

intended to be performed at a:

180 degree angle

Horizontal angle

90 degree angle

16. When striking, the ASP Baton is gripped

A loose flexible grip

The index finger and thumb

Two fingers and the thumb

Vertical angle

Full hand grip

Both hands

17. Special circumstances do not

with:

b)

Baton Basic Certification WRITTEN EXAMINATION

For each question below, circle the option that is the most correct.

On the Reaction Side

8. The ASP Baton is always carried:

On the right side

On the left side

The Reaction Strike is primarily a:
 a) Strong strike

Closed strike

Initial strike

10. The most frequently used ASP

Reaction Strike

Weapon Strike

strike is the:

Clearance strike

Offensive strike

In the front

Tip down

1. A defensive tactic is evaluated by

Control v Injure

Maim v Destroy

2. The primary striking surface of an open ASP Baton is the:

Center of the shaft

Last 3" of the baton

3. The hand using the service firearm is

First joint

Handle

React v Act

Threaten v Control

Demonstrate the officer's

its ability to:

a) Cap

b)

c)

d)

9

e)

	1110.			C)	Straight Strike		a)	Special knowledge
	a)	Weak Hand		d)	Clearance Strike		.b)	imminent danger
	<u>b</u>)	Contact Hand		e)	Reverse Strike		c)	Injury or exhaustion
	6	Weapon Hand		•			_	Size
	d)	Reaction Hand	11	When	performing an Open Straight		(4)	
	e)	Support Hand		Chrilen	the Deserted Line at the		9)	Officer on the ground
	٠,	Copport Fland		Strike,	the Reaction Hand is:			
	The A	100 D-4 11		a)	Palm up on the shaft	18.	Safet	y is the ultimate responsibility
4.		ASP Baton should not be		b)	Maintaining distance		of the	· •:
	open			(بو	Guarding the face		a)	Student
	a)	To the sky		(III)	Paim down gripping the		b)	Training partner
	b)	To the ground		0	shaft			Course coordinator
	c)	During a strike		e)	Executing a downward block			
	AD)	To the side		٠,	Executing a downward block		Ø	Instructor
	e)	Towards the threat	40	14 AL - 1			(e)	Administrative officer
	6)	towards the threat	12.	it the t	paton opens too easily:			
_	-	e Vales exception		a)	Make the retaining clip	19.	The A	ASP Baton is designed to be:
5.		wo baton modes are:			smaller		a)	An offensive weapon
	(a)	Open and Closed		b)	Replace the o-ring		b)	A comealong device
	(d	Interview and Combat		(a)	Widen the retaining clip		-	
	c)	Weapon and Reaction		9)	Remove the retaining clip		@	A defensive weapon
	d)	Concealed and Loaded					d)	A deadly force option
	e)			e)	Lubricate the baton		e)	A restraining device
	θ)	Ready and Extended						
_			13.	The m	ost common problem in	20.	The p	rinciple goal of any arrest or
6.	Which	is not an ASP Target area:		openin	g the baton is:		physic	cal confrontation is:
	a)	Center mass of the arms		a)	Grip of the baton		(a)	Establishing control
	b)	Center mass of the legs			Loose o-ring			
	c)				Broken retaining clip		b)	Superior officer skill
		Groin or sternum					c)	Subject safety
	e)	The Weapon Delivery			Operator error		d)	Documentation
	٠,			е)	Loose handle cap		e)	Punishment
		System						
_	_		14.	Officer	Subject Factors do not			
7.	Targe	ting specific points violates	i	include	:			
	Which	training principle:		a)	Age			
	(a)	Forgiving techniques			Size			
	b)	Fine motor skills			Weapon proximity			
	c)	Spaced practice						
	d)				Skill level			
		Static training		e)	Multiple officers			
	e)	Complex techniques						
			Fack access					
		-	cacn quesi	ion is	worth five (5) points.			
			The minim	um aa	ceptable score is 80% (16			
			ine mimm	um uc	cepiable score is 60% (10	correct).		
		X-1						
		01			. /	15		1
		1331				2/1		1
FINI	A1 Q	CORE: DOL	GRADE	ח חי	. A 0.1 -1	16.4	M	100
1 11 47	AL O	JOHE.	GRADE	וטטו	720,00	1	02	/6
ACE	MID	ITTEN EXAM			- 1-			-
ASF	WH	ITTEN EXAM:	ACCEP	IABL	E NOT	ACCEP	TABI	LE
			1	-	\			
COL	JNSE	LED \	1					
		111	1		1			
INS.	TRUC	CTOR	-5			г	ATE	OZ MARREH 18
		0		-			//\ I [LIC INCAMICALLI 18

Baton Basic Certification TECHNIQUE PROFICIENCY CHECKLIST

The following checklist is designed to assist you and the ASP Instructor in evaluating your performance of ASP Techniques. Those components of the technique that are acceptable are checked.

1)	Check Balance Movement Verbalization Technique Target	6) Opening the Baton Balance Movement Verbalization Technique Target
2)	Redirection Balance Movement Verbalization Technique Target	7) Open Mode Weapon Strike Balance Movement Verbalization Technique Angle Target
3)	Closed Mode Weapon Strike Balance Movement Verbalization Technique Angle Target	8) Open Mode Reaction Strike Balance Movement Verbalization Technique Target
4)	Closed Mode Reaction Strike Balance Movement Verbalization Technique Angle Target	9) Open Mode Straight Strike Balance Movement Verbalization Technique Target
5)	Closed Mode Straight Strike Balance Movement Verbalization Technique Target	10) Closing the Baton Balance Movement Technique
	A check mark indicates an acc Three of the components must Each technique must have a p The minimum passing score is	be acceptable for a passing score. assing score for certification.
TECH	NIQUE PROFICIENCY: ACCEPTABLE	NOT ACCEPTABLE

DATE DL MARLIE

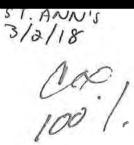
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WRITTEN EXAMINATION	100 !
TECHNIQUE PROFICIENCY CHECKLIST	

COMMENTS:

JUNE 2009

OC Test **Mount Carmel Health System** Safety and Security



- 1.) What does OC stand for? A. **Orange Crush** B. Ocean Crust (C) Oleoresin Capsicum 2.) What is the average expiration date on an OC canister? 1-2 years 3-4 years 4-5 years 3.) How often should you check your OC spray for adequate spray strength? 30 days 60 days 90 days 4.) How long of a burst should you use on a threat? 1-2 seconds B. 2-4 seconds C. Empty the entire can 5.) What is Oleoresin Capsicum commonly known as? Mace **Pepper Spray** Gas **6.**) When deploying OC, what area of the body should you deploy the OC towards? Arms A. Chest B. Face and eyes 7.) After using OC on a subject, what should you immediately do with the
 - subject?
 - Leave lying on the ground.
 - Remove from contaminated area
 - Spray again

Terror	8.)	What is the second step in the decontamination process?	
2.5		A. Spray them again	
		B. Tell them to stop crying like a baby	
		C. Offer verbal rapport to the subject	
	9.)	What is the third step of the decontamination process?	
		(A) Expose subject to fresh air B. Throw the subject a bottle of water	
		C. Stand there and record them with your cellphone	
5945	10.)	What is the best way to flush the eyes?	
		A. Using milk	
		B. Rubbing eyes continually	
		C. Water	
	11.)	What type of agent is OC?	
		A. Glue	
		B. Cleaning Fluid	
		C. Inflammatory	
	12.)	What is the main ingredient of OC?	
		A. Water	
		B. Cayenne Pepper	
		C. Powder	
	13.)	Does CMS (Center for Medicaid/Medicare System) guidelines	allow for
		OC to be used on a PATIENT?	
		A. Yes	
		B No	
		C. Only if they deserve it.	
		¥	
		B.	
		4	
		· es	

Derensive Tactics / Impact Weapon Competency Form



STUDENTS NAME: INSTRUCTORS: COX / TAY LOR

JOINT LOCKS

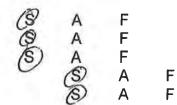
1.	BALANCE DISPLACEMENT TECHNIQUE			
(At the hip)				
	Starts from Escort Position	(5)	Α	F
b.	Removes hand from Triceps and places it on rear waist of suspenses hand forward and downward displacing balance	ct S	A	F
	The state of the s	7\$2	A	F
a.	Suspect steps in desired direction	(8)	Α	F
Comments:				
(Friction on	the Back)			
a.	Starts from Escort Position	(5)	Δ	F
b.	Places hand in the middle of suspect's back and presses forward	8	A	F
C.	Moves hand in random manner, forcing steps in desired direction	(8)	Α	F
Comments:				
(Random Mo	otion at the Shoulder)			
	Starts from the Escort Position	B	Δ	F
b.	Continually moves suspect's arm in a random manner		A A A	F
c.	Suspect is off balance and moves in desired direction	(S)	A	F
Comments: _				
2. TF	RANSPORT WRIST LOCK			
	Elbow tucked between arm and body	(3)	Δ	E
f.	Forearm elevation	8	A	F
	Wrist hyperextension	8	A	F
	To the ground	40	A	F
Comments: _		-		

මමමමම	A A A A	F F F F
ଉତ୍ତତ୍ତ	A A A	F F F
<u>මගිනමම</u>	A A A A	F F F
@888B	A A A A	F F F F
	6	AAAA AAAAA AAAAA AAAAA

Defensive Counter Maneuvers

7. GRABBING

- a. Separation
- b. Verbal Commands
- c. Peeling the hand(s)
 - 1. Outside/In
 - 2. Inside/Out



Comments:

8. FINGER POKES

- a. Separation
- b. Verbal Commands
- c. Peeling the fingers/hands
- d. Second Responding Officer Action

A F

Comments:

Ground Techniques

9. Scarf Position (Left/Right)

- a. From the side/cross mount position
- b. Perform a sit out maneuver
- c. Right leg ends at 10 o'clock position
- d. Keep hips off of the ground
- e. Left foot is at 8 o'clock position
- f. Right arm around subjects neck/head
- g. Left arm and hand secures subjects arm
- h. Pin your chest to subjects chest



Comments:

10. Mounted Position

a. Knees slide up b, Feet are used to feel where hips c. Moving to control positions	ଷ୍ଟିଷ୍ଟ	A A A	F F
Mounted Position – subject sits bac	ck		
 a. Protect Face b. Reach Up and Grab c. Pull Subject to you/ pull yourself to subject d. Two arm body lock (bear hug) e. Slide down toward waist f. Place foot flat on floor g. Stomp foot and turn subject 	ଉଷ୍ୟକ୍ଷକ୍ଷର	A A A A A A	F F F F F
Mounted Position – subject traps yo	ur arı	ms	
a. Bridge-Arch-Push and turnb. Work your way out the back doorc. Protect Head	888	A A A	F F
Mounted Position – escape			
a. Table Theory b. Keep them off your chest c. Protect your air d. Elbows to thighs/ squirm forward e. Protect your head f. Buck your hips g. Trap leg and arm h. Opposite foot flat on the floor i. Stomp foot and push	କ୍ରିଜିକ୍ରିକ୍ରିକ୍ରିକ୍ର	A A A A A A A A	FFFFFFFF
Buard Position(subject on top)			
 a. Wrap legs around waist or feet flat on floor b. Sit up on forearm c. Free arm grabs elbow d. Roll subject toward forearm side e. Techniques for large person 	00000000000000000000000000000000000000	A A A A	F F F F

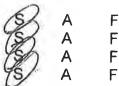
11. Weapon Retention Drills (Holstered)

- a. subject grabs holstered weapon
- b. weapon hand on subject's hand
- c. spin body toward weapon side
- d. maintain control of subject's hand/wrist
- e. Practice subject front/back/side position



Weapon Retention Drills(un-holstered)

- a. lunge forward toward subject
- a. push weapon toward subject
- c. pull weapon toward officer
- d. create distance



Weapon Stripping Drills

- a. hand grabs slide of weapon pushing off target
- b. other hand grabs other side of slide
- c. step towards subject utilizing strength
- d. hands push weapon barrel upward toward subject
- e. step back to create space
- f. pull weapon toward officer



Comments:	

Grading Scale:

S = Satisfactory (performs w/out prompting)

A = Acceptable (performs with minimal prompting)

F = Failed (needs prompting / repeated instruction, or can not perform task)



Box 1794 · Appleton, WI 54912 · (920) 735-6242 · Fax (920) 735-6245 · asp-usa.com

ASP Basic Certification (ABC)

EXPANDABLE BATON TRAINING

Information Sheet

(Please Print)		Date 3/24/17
☐ Initial Certification	☐ Recertification	
First Name		
Home Address	Last Name _	
City MT WERNON	State 0 H Province	N. N
Telephone	E-mail Address	Zip 43050
Employing Agency MOUNT CARMEL S	ANN'S	
Agency Address 508 SOUTH CLEVEL	PAID AVE	
Agency Telephone (CHL) COG keep	State Cil D	2.5 8 6 6 6 6
Agency Telephone (614) 898 400 5	E-mail Address	Zip_43081
Duty Status: Full Duty Restricted Has your agency adopted or authorized the How many officers are in your agency? Height Weight Weight Would have you been exercising? YES Do you have any knee, back or health prob Are you on any medication? ADVENAL 10 Person to be notified in case of emergency Name Phone Relationship CINCERTEND	Duty use of the ASP Baton? YES Age 39 Date of Birth 1/2 ems? NO m6	2/28
	Wanana.	
Rolone	WAIVER	
 Intending that this Agreement be legally bit forever discharge Armament Systems and Procedure and assigns, of and from any and all claims, demand any and all known and unknown, foreseen and unfore all ASP Expandable Baton certification training activities. 	seen physical and mental injuries and consequents. In presently in good physical and mental health; (b)	leirs, executors, administrators, successors and nature, arising from, and by reason o ces thereof, suffered by me during any and
	Mere participation does not automatically ass	
3/24/17		
Date		

OC Test Mount Carmel Health System Safety and Security

1.)	What does OC stand for?	
	A. Orange Crush	
	R. Ocean Crust	
	C) Oleoresin Capsicum	
2.)	Wilhout in All	
2.,	What is the average expiration date on an OC canister?	
	1-2 years	
	B 3-4 years	
	C. 4-5 years	
3.)	How often should you check your OC spray for adequate spray A. 30 days	
	A. 30 days	strength?
	B. 60 days	
	(C) 90 days	
4.)	How long of a burst should you use on a threat?	
	A 1-2 seconds	
	B. 2-4 seconds	
)	C. Empty the entire can	
5.)	What is Oleansin Com.	
/	What is Oleoresin Capsicum commonly known as? A. Mace	
	Pepper Spray	
	C. Gas	
	o. Gus	
6.)	When deploying OC, what area of the body should you deploy the towards?	
	towards?	ie OC
	A. Arms	
	B. Chest	
	C Face and eyes	
7.)	After using OC on a sub	
	After using OC on a subject, what should you immediately do wisubject?	th the
	A. Leave lying on the ground.	
	Remove from contaminated area	
	C. Spray again	

0.	****					
8.)						
	A.	Spray them again				
	B.	Tell them to stop crying like a baby				
		Offer verbal rapport to the subject				
9.)	What	t is the third step of the decontamination process?				
	(A)	Expose subject to fresh air				
	В.	Throw the subject a bottle of water				
	C.	Stand there and record them with your cellphone				
10.)	What	is the best way to flush the eyes?				
	A.	Using milk				
	B.	Rubbing eyes continually				
	(C)	Water				
11.)	What	type of agent is OC?				
	A.	Glue				
	B.	Cleaning Fluid				
	(C,)	Inflammatory				
12.)	What	is the main in suralizat of OCB				
12.)	AN HHI	is the main ingredient of OC? Water				
	6					
	©	Cayenne Pepper Powder				
	C.	rowder				
13.)	Does	CMS (Center for Medicaid/Medicare System) guidelines allow for				
	OC to	be used on a PATIENT?				
	A.	Yes				
	(B)	No				
	C.	Only if they deserve it.				

ž = - ×

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NAME: DATE: <u>3/24/17</u>

100%

HANDCUFFING TEST

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
 - D.) ALL OF THE ABOVE
 - (E) BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?

A.)TRUE B)FALSE

- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?



Defensive Tactics / Impact Weapon Competency Form

STUDENTS NAME:		INSTRUCTORS:	
		INSTRUCTORS:	

JOINT LOCKS

18

1.	BALANCE DISPLACEMENT TECHNIQUE			
(At the hip)				
a.	Starts from Escort Position	(3)	Α	F
b.	Starts from Escort Position Removes hand from Triceps and places it on rear waist of suspec Presses hand forward and downward, displacing balance	t/S)	A	F
C.	Presses hand forward and downward, displacing balance	(5)	Α	F
d.	Suspect steps in desired direction	8	Α	F
Comments:				
	the Back)			
	Starts from Escort Position	(S)	Α	F
b.	Places hand in the middle of suspect's back and presses forward	75	A	F
C.	Moves hand in random manner, forcing steps in desired direction	S	Α	F
Comments:				
Random M	otion at the Shoulder)			
a.	Starts from the Escort Position	8	Δ	F
	Continually moves suspect's arm in a random manner	(5)	Δ	F
C.	Suspect is off balance and moves in desired direction	(5)	A A A	F
Comments:				
2. T	RANSPORT WRIST LOCK			
	Elbow tucked between arm and body	(5)	Δ	F
	Forearm elevation	6	Δ	F
g.	Wrist hyperextension	8	A A	F
	To the ground	(5)	A	Ē
comments:		9	, ,	- 1

 i. Decentralize the center of gravity j. Maintain control over subject's arm k. Maintained balance while lowering center for takedown l. To the ground m. Control for handcuffing procedure 	ලම මමම	A A A A	F F F F
Comments:			
HANDCUFFING			
 4. STANDING METHOD a. Approach is from rear b. Simultaneous Control at application, thumb lock/cuff push c. Position maintained with the flip under technique d. Second cuff applied without loss of control 	@@@@	A A A	F F F
Comments:			
 5. TAKEDOWN FROM KNEELING POSITION e. All slack is removed from cuffed hand f. Decentralized towards the 2.5 position g. Iron wrist lock is applied simultaneously with decentralized pull h. Straight arm applied after proning the target i. Second cuff applied without loss of control 	@@@@@@	A A A A	F F F
Comments:	_		-
 6. REMOVING HANDCUFFS a. Officer Instructs suspect he is going to be de-cuffed b. Suspect is told to leave uncuffed hand on his hip c. Open handcuff closed immediately and put in weak hand d. Officer steps to rear 45 degrees while holding cuff at arms length e. Second cuff is removed 	लिक्षिलिक	A A A A	F F F

Defensive Counter Maneuvers

7. GRABBING

- a. Separation
- b. Verbal Commands
- c. Peeling the hand(s)
 - 1. Outside/In
 - 2. Inside/Out



A F A F

F

F

Comments:

8. FINGER POKES

- a. Separation
- b. Verbal Commands .
- c. Peeling the fingers/hands
- d. Second Responding Officer Action

.

. F

. :

Comments:____

Ground Techniques

9. Scarf Position (Left/Right)

- a. From the side/cross mount position
- b. Perform a sit out maneuver
- c. Right leg ends at 10 o'clock position
- d. Keep hips off of the ground
- e. Left foot is at 8 o'clock position
- f. Right arm around subjects neck/head
- g. Left arm and hand secures subjects arm
- h. Pin your chest to subjects chest

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7

À F

A 1

F

Comments:____

10. Mounted Position

a. Knees slide up b, Feet are used to feel where hips c. Moving to control positions	S	A A	F F
Mounted Position – subject sits ba	ack		
 a. Protect Face b. Reach Up and Grab c. Pull Subject to you/ pull yourself to subject d. Two arm body lock (bear hug) e. Slide down toward waist f. Place foot flat on floor g. Stomp foot and turn subject 	ම් ග ගම් මිති	4 4 4 8 8 4 A	FFFFFF
Mounted Position – subject traps y			
a. Bridge-Arch-Push and turnb. Work your way out the back doorc. Protect Head	888	A A A	F F
Mounted Position – escape			
a. Table Theory b. Keep them off your chest c. Protect your air d. Elbows to thighs/ squirm forward e. Protect your head f. Buck your hips g. Trap leg and arm h. Opposite foot-flat on the floor i. Stomp foot and push	(ବ୍ର <u>କ୍ର ଜଣ </u>	A A A A A A A A	
Buard Position(subject on top)			
 a. Wrap legs around waist or feet flat on floor b. Sit up on forearm c. Free arm grabs elbow d. Roll subject toward forearm side e. Techniques for large person 	SSSS	A A A	FFFF

11. Weapon Retention Drills(Holstered)

- a. subject grabs holstered weapon
- b. weapon hand on subject's hand
- c. spin body toward weapon side
- d. maintain control of subject's hand/wrist
- e. Practice subject front/back/side position





Weapon Retention Drills(un-holstered)

- a. lunge forward toward subject
- a. push weapon toward subject
- c. pull weapon toward officer
- d. create distance



Weapon Stripping Drills

- a. hand grabs slide of weapon pushing off target
- b. other hand grabs other side of slide
- c. step towards subject utilizing strength
- d. hands push weapon barrel upward toward subject
- e. step back to create space
- f. pull weapon toward officer



Comments:

Grading Scale:

S = Satisfactory (performs w/out prompting)

A = Acceptable (performs with minimal prompting)

F = Failed (needs prompting / repeated instruction, or can not perform task)

Baton Basic Certification WRITTEN EXAMINATION

For each question below, circle the option that is the most correct.

8. The ASP Baton is niways carried:

On the right side in the front

On the left side

Tip down

On the Reaction Side

15. ASP Weapon Side Strikes are intended to be performed at a:

45 degree angle

180 degree angle

Horizontal angle

90 degree angle

A defensive tactic is evaluated by its ability to:
 Control v injure
 Maim v Destroy

Threaten v Control

Demonstrate the officer's

React v Act

	-/	-140				е)	vertical angle
		6klil		Reaction Strike is primarily a:			***
			'a)	Strong strike	16.	Whe	n striking, the ASP Baton is grippe
2	. The p	orimary striking surface of an	(b)	Closed strike		with:	
	open	ASP Baton is the:	(c)	Clearance strike		a)	The index finger and thumb
	a)	Cap	d)	Offensive strike		b)	A loose flexible grip
	b)	Center of the shaft	e)	Initial strike		cì	Two fingers and the thumb
	(0)	Last 3" of the baton	٠,	ninai siins		ක	Full hand grip
	9	First joint	10 The	nost frequently used ASP		w.	
	e)	Handle				e)	Both hands
	0,	TIETION		is the:			
	The b		(1)	Reaction Strike	17.	Spec	ial circumstances do not
٥.		nand using the service firearm is	(B)	Weapon Strike		Inclu	
	the:	*** * * * *	/ C)	Straight Strike		a)	Special knowledge
	a)	Weak Hand	d)	Clearance Strike		b)	Imminent danger
	<u>þ)</u>	Contact Hand	(e)	Reverse Strike		_ci	injury or exhaustlerf
	©	Weapon Hand				(a)	Size
	d)	Reaction Hand	11. When	performing an Open Straight		e)	Officer on the ground
	e)	Support Hand	Strike	, the Reaction Hand is:		٠,	emeer on the greens
	•	••	a)	Palm up on the shaft	1.0	Safet	y is the ultimate responsibility
4.	The A	ASP Baton should not be	b)	Maintaining distance	10.	of the	
	opene		c)	Guarding the face		-,	
	a)	To the sky				a)	Student
		To the second	# (d)	Palm down gripping the		b)	
	p)	To the ground		shaft		رع	
	(يو	During a strike	· e)	Executing a downward block		(a)	Instructor
	(d))	To the side	Aur			e)	Administrative officer
	ej	Towards the threat	12.* If the	baton opens too easily:		•	
			(a	Make the retaining clip	19.	The A	ASP Baton is designed to be:
5.	The to	wo baton modes are:	12	smaller		a)	
	(a)	Open and Closed	b)	Replace the o-ring		b)	
	6	Interview and Combat	E	Widen the retaining clip		6	
	c)	Weapon and Reaction	d)	Remove the retaining clip		씱	
	d)	Concealed and Loaded	e)	Lubricate the baton		e)	
	e)	Ready and Extended	٠, ٥/	Lobilcate the battin		Θ)	A restraining device
	٠,	rioddy and Exionodd	12 Thom	nest common problem in		TL	
6	Mhich	n is not an ASP Target area:	13, ,1119 11	nost common problem in	20.	ine p	rinciple goal of any arrest or
υ.		Contract ASP Target area:		ng the baton is:			cal confrontation is:
	a)	Center mass of the arms	a)	Grip of the baton		(a)	Establishing control
		Center mass of the legs	b)	Loose o-ring		b)	Superior officer skill
		Center mass of the body	(2)	Broken retaining clip		c)	Subject safety
	(4)	Groin or sternum	@	Operator error		d)	Documentation
	e)	The Weapon Delivery	e)	Loose handle cap		e)	•
		System	•	-		-,	
		-	14. Office	r-Subject Factors do not			
7.	Targe	ting specific points violates	Includ				
		training principle:		Age			
		Forgiving techniques	- b)				
				Weapon proximity			25
			1	Skill level			
		Static training	0				
	-		e)	Multiple officers			
	e)	Complex techniques					0.4
							-
							**

ASP WRITTEN EXAM: ACCEPTABLE NOT ACCEPTABLE

INSTRUCTOR

DATE ZY NAR TO

The minimum acceptable score is 80% (16 correct).

· Each question is worth five (5) points.

Baton Basic Certification TECHNIQUE PROFICIENCY CHECKLIST

The following checklist is designed to assist you and the ASP Instructor in evaluating your performance of ASP Techniques. Those components of the technique that are acceptable are checked.

	,	The first first and the
1)	Check Balance Movement Verbalization Technique Target	6) Opening the Baton Balance Movement Verbalization Technique Target
2)	Redirection Balance Movement Verbalization Technique Target	7) Open Mode Weapon Strike Balance Movement Verbalization Technique Angle Target
3)	Closed Mode Weapon Strike Balance Movement Verbalization Technique Angle Target	8) Open Mode Reaction Strike Balance Movement Verbalization Technique Target
4)	Closed Mode Reaction Strike Balance Movement Verbalization Technique Angle Target	9) Open Mode Straight Strike Balance Movement Verbalization Technique Target
5)	Closed Mode Straight Strike Balance Movement Verbalization Technique Target	10) Closing the Baton Balance Movement Technique
	Three of the componen Each technique must he The minimum passing;	an acceptable observed action. Is must be acceptable for a passing score. ave a passing score for certification. score is 100% (10 techniques). NOT ACCEPTABLE
	HNIQUE PROFICIENCY: ACCEPTABLE	NOT AGOLF TABLE
200	177	7 1 1 2 4 6 1

WRITTEN EXAMINATION	100%
TECHNIQUE PROFICIENCY CHECKLIST	×

COMMENTS:

44		INSTRUCTOR		
Certification Approved	☐ Certification Denied	INSTRUCTOR LAND	AIC	

Mount Carmel Health System **Competency Assessment** Safety & Security DEFENSIVE TACTICS/HANDCUFFING/STRAIGHT BATON/O.C. REPELLANT/DE-ESCALATION/RESTRAINTS Associate Name: ID Number: Job Title: SAFETY & SECURSTY ☐ High Risk ☐ Low Volume ☐ Problem Prone ☐ New Equipment/Service ☐ Process Change CARING COMPONENTS: Demonstrates service excellence behavior KNOWLEDGE AND SKILL COMPONENTS: ABILITY TO EXPLAIN THE USE OF FORCE CONTINUUM ABILITY TO PERFORM BALANCE DISPLACEMENT AT THE HIP ABILITY TO PERFORM BALANCE DISPLACEMENT ON THE BACK ABILITY TO PERFORM BALANCE DISPLACEMENT AT THE SHOULDER ABILITY TO PERFORM A TRANSPORT WRIST LOCK TO BOTH THE RIGHT AND LEFT SIDE ABILITY TO PERFORM A STRAIGHT ARM BAR TO BOTH THE RIGHT AND LEFT SIDE ABILITY TO USE HANDCUFFS IN THE STANDING METHOD ABILITY TO USE HANDCUFFS FROM THE KNEELING POSITION ABILITY TO REMOVE HANDCUFFS ABILITY TO UNDERSTAND WHEN TO PLACE HANDCUFFS ON SUBJECT ABILITY TO PERFORM SEPERATION FROM SUBJECT GRABBING & ABILITY TO PERFORM PEELING OF THE HAND(S) OF SUBJECT DURING A GRAB ABILITY TO PERFORM SEPERATION FROM A FINGER JAB ABILITY TO PERFORM PEELING OF FINGER(S)/HAND(S) DURING A FINGER JAB ABILITY TO PERFORM A SCARF POSITION ON SUBJECT ABILITY TO PERFORM A SIT OUT MANEUVER DURING THE SCARF ABILITY TO PERFORM A MOUNT POSITION ON A SUBJECT ABILITY TO MAINTAIN CONTROL OF SUBJECT WHILE IN THE MOUNTED POSITION ABILITY TO ESCAPE A MOUNT POSITION FROM A SUBJECT ABILITY TO PERFORM A GUARD POSITION ON A SUBJECT ABILITY TO ESCAPE A GUARD POSITION FROM A SUBJECT ABILITY TO PERFORM WEAPON RETENTION FROM THE HOLSTER ABILITY TO PERFORM WEAPON RETENTION FROM SHOOTING POSITION ABILITY TO PERFORM WEAPON STRIP FROM SUBJECT IN SHOOTING POSITION ABILITY TO PERFORM THE USE OF STRAIGHT BATON FROM THE FIELD INTERVIEW STANCE ABILITY TO PERFORM THE USE OF STRAIGHT BATON FRON THE READY STANCE ABILITY TO PERFORM THE USE OF STRAIGHT BATON USING THE FORWARD FLUID SHOCKWAVE STRIKE

ABILITY TO PERFORM THE USE OF STRAIGHT BATON USING THE FORWARD FLUID SHOCKWAVE STRABILITY TO PERFORM THE USE OF STRAIGHT BATON USING THE FORWARD CUTTING STRIKE ABILITY TO PERFORM THE USE OF STRAIGHT BATON USING THE BACKHAND STRIKE ABILITY TO CLOSE THE BATON FROM THE STANDING POSITION ABILITY TO CLOSE THE BATON FROM THE KNEELING POSITION ABILITY TO OPEN AND USE THE BATON FROM THE CRISIS POSITION ABILITY TO EXPLAIN WHEN TO USE STRAIGHT BATON AND WHEN NOT TO USE STRAIGHT BATON ABILITY TO EXPLAIN WHEN TO USE O.C. ABILITY TO EXPLAIN WHEN NOT TO USE O.C. ABILITY TO EXPLAIN WHEN NOT TO USE O.C. ON A PATIENT OR NOT ABILITY TO EXPLAIN WHETHER TO USE O.C. ON A SUBJECT ABILITY TO EXPLAIN THE EFFECTS OF O.C. ON A SUBJECT ABILITY TO EXPLAIN THE DECONTAMINATION PROCEDURES ABILITY TO VERBALLY DE-ESCALATE (CIT TRAINING/AGGRESSIVE BEHAVIOR TRAINING) ABILITY TO APPLY RESTRAINTS

ABILITY TO LOOP THE CONNECTING STRAP AROUND					
ABILITY TO PLACE THE PROPER COLORED CUFF ON	THE PROPER LIMB (BLUE FOR WRISTS/RED FOR				
ANKLES, LOCKING)					
ABILITY TO PASS ONE FINGER BETWEEN THE REST	RAINT AND PATIENTS WRIST/ANKLE				
ABILITY TO PLACE PATIENT INTO POSEY VEST					
ABILITY TO SECURE POSEY VEST STRAPS TO THE B					
ABILITY TO PASS DT TRAINING SCENARIOS ANNUAL Able to act appropriately in an emergent or sentinel type					
METHOD OF COMPETENCY VALIDATION:					
Return Demonstration	□ QI Monitors/Audits				
☐ Observation of Daily Work	Peer Review				
PPost Test	☐ Case Study				
SyMock Event/Simulation	Discussion Group				
Competency Validated By: (Signature and credentials)	Date 24 MARY				
Developmental Needs identified: (See Performance Evaluation for related goals)					
Associate Signat Date 3/d 4/17	Instructor(s) Signature Date				
Evidence Based References/Resources (if applicable):					

- U H

FY2016 COLLEAGUE ANNUAL PERFORMANCE REVIEW



COLLEAGUE INFORMATION:

Colleague ID: Colleague:

Location: M00003
Job Code: M2412

Review Period: 05-01-2015 to 05-01-2016

Due Date: 05-01-2016 Manager: David Nelson

Department: Emergency Dept Svcs-LewCtr
Job Title: Safety and Security Officer

Empl Record: 0

GUIDING BEHAVIORS:

The Guiding Behaviors flow directly from Trinity Health and Mount Carmel's Mission and help us to focus on and connect with the Mission. The Guiding Behaviors set the expectation for how we work together in living our Mission and Core Values. Note: Supporting remarks must be entered for any ratings other than 3.

- * We support each other in serving our patients and communities.
- * We communicate openly, honestly, respectfully and directly.
- * We are fully present
- * We are all accountable
- * We trust and assume goodness in intentions
- * We are continuous learners

Manager Rating: 4.0

Manager Comment: Dennis strives to do the best that he can everyday and excels at the Guiding Behaviors. He is always present, accountable and is a continuous learner. Dennis is well liked among his peers and hospital

Employee Rating: 3.0
Employee Comment:

ESSENTIAL JOB RESPONSIBILITIES:

In addition to Service Excellence(which applies to all Mount Carmel Associates) how does the Associate meet the expectations of the 3-5 most important Essential Responsibilities from their job description? If an Essential Responsibility is met, a score of 2 is applicable. Note: Supporting remarks must be entered for any ratings other than 3.

Essential Job Responsibility:

Manager Rating: 4.0

Manager Comment: Dennis is always friendly and very courteous. He strives to maintain a professional appearance, demeanor and first class service.

Employee Rating: 3.0 Employee Comment:

1. Essential Job Responsibility:

Definition: Maintain a safe and secure environment through job knowledge, skills and engagement. Intervene as appropriate in any safety and security observed issues.

Manager Rating: 3.0

Manager Comment: Dennis continues to learn his role and seeks out his supervisor's feedback when unsure.

Dennis is very good about making recommendations to assist with job processes.

Employee Rating: 3.0 **Employee Comment:**

Essential Job Responsibility:

Definition: Meets population specific and all other competencies according to department requirements. (Ongoing department competencies).

Manager Rating: 4.0

Manager Comment: Dennis has attended and maintained all initial, yearly and monthly competencies.

Employee Rating: 3.0 **Employee Comment:**

3. Essential Job Responsibility:

Definition: Responsible for assuring that the Safety, Life Safety, Security, Emergency Management, and JC standards are followed as it relates to the position.

Manager Rating: 3.0

Manager Comment: Dennis continues to learn JC standards and life safety processes.

Employee Rating: 3.0 **Employee Comment:**

4. Essential Job Responsibility:

Definition: Responsible for completing and documenting assigned tasks, such as fire drills and safety tours on time and ensures accurate documentation during assigned shift (i.e. security reports, safety incidents, and activity logs).

Manager Rating: 4.0

Manager Comment: Dennis always makes sure that his paperwork is completed accurately and turned in on time. He assists in monitoring the other officers stats and enters them into the database.

Employee Rating: 3.0 **Employee Comment:**

5. Essential Job Responsibility:

Definition: Demonstrates sound judgment, decision skills, and prioritizing responses to all calls including emergency situations. (Defensive Tactics Competencies)

Manager Rating: 3.0

Manager Comment: Dennis continues to improve in his response to emergent situations. He has adjusted well to "slowing down" to assure a positive outcome.

Employee Rating: 3.0

Employee Comment: Have learned a lot over the last 11 months and have listened to the advise from other officers and supervisors.

INDIVIDUAL PERFORMANCE GOALS (for PAST 12 Months)

Over the past 12 months, Associates and their Managers identified 3-5 individual Goals to set clear expectations about how the associate will contribute to department, business unit and system goals.

- * Individual Goals are Specific, Measureable, Action-Oriented, Realistic and TimepBound(SMART).
- * The Desired Outcome is the measure for what the associate is to achieve.

Note: Supporting remarks must be entered for any ratings other than 3.

1. Individual Performance Goal: To learn the policies and procedures that Mt. Carmel has in place

Manager Rating: 3.0

Manager Comment: Dennis continues to learn proper procedures and protocols.

Employee Rating: 3.0 **Employee Comment:**

2. Individual Performance Goal: Continue to learn from other officers on how to handle situations as well as making sure to get all vital information

Manager Rating: 3.0

Manager Comment: Dennis has made great strides in handling situations and learning the role of Safety &

Security Officer. Employee Rating: 2.0

Employee Comment: I know there were some occasions where I would rush into a situation instead of taking my time. However, with talking with other officers as well as supervisors, I took their advice and continued to learn from them, so I can learn to do the job to the best of my ability.

3. Individual Performance Goal: Continue to learn the layout of the hospital, in order for me to get to an area in case of an emergency situations.

Manager Rating: 4.0

Manager Comment: Dennis learned the facility well

Employee Rating: 3.0 **Employee Comment:**

4. Individual Performance Goal: Take all required courses

Manager Rating: 4.0

Manager Comment: Dennis continues to seek out educational opportunities.

Employee Rating: 3.0 **Employee Comment:**

5. Individual Performance Goal:

Manager Rating: 0.0 Manager Comment; Employee Rating: 0.0 **Employee Comment:**

INDIVIDUAL PERFORMANCE GOALS (for NEXT 12 Months)

Associate and Manager identify 3-5 Individual Performance Goals to set clear expectations about how the associate will contribute to department, business unit, and system goals.

- * List 3-5 individual Goals that are Specific, Measurable, Action-Oriented, Realistic and Time-Bound (SMART)
- * The Desired Outcome is the measure for what the associate is to achieve.
- * Individual Goals for the upcoming year need to be documented on this evaluation form.
- 1. Individual Performance Goal: Continue to learn policies and procedures.
- 2. Individual Performance Goal: Take more courses and obtain certificates
- 3. Individual Performance Goal: To be able to get promoted if possible by the end of the year
- 4. Individual Performance Goal: Continue to be a team player and work well with everyone in the hospital. To provide the security that is needed for staff, patients and visitors.
- 5. Individual Performance Goal: Continue to make improvements as an officer and take time learning things instead of trying to rush.

COLLEAGUE COMMENTS (After Self-Evaluation)

Colleague Comments: I would like to take more training classes such as hazmat training as well as aggression behavior classes if any so I can learn how to handle situations when they arise. I am open to learn any new courses that will help me be successful in my position.

REVIEW SUMMARY:

	Colleague Scores	Manager Scores
Guiding Behaviors	3.0	4.0
Job Responsibilities	3.0	3.5
Past 12 Months Goals	2.75	3.5
Overall Performance Score		3.67

PERFORMANCE REVIEW MEETING WAS HELD ON: 02-16-2016

SIGNATURE

The Colleague signature also serves to acknowledge that the Associate has reviewed a copy of their current job description.

Manager: David Nelson 02-16-2016

Colleague: 02-16-2016

MANAGER AND COLLEAGUE COMMENTS (After Completion of Colleague Annual Review)

Manager Comments: has already started self educational opportunities. Less is an asset to the Safety & Security Department. Keep up the good work!

Colleague Comments:

MOUNT CARMEL HEALTH SYSTEM CONFIDENTIALITY AND NETWORK ACCESS AGREEMENT

SIGNATURE PAGE RELATIONSHIP TO MOUNT CARMEL HEALTH SYSTEM/TRINITY HEALTH

I am a: (Please check all that apply to you)

Direct relationships with Mount Carmel Health System

X Colleague at Mount Carmel Health System

Physician Credentialed on Mount Carmel Health System Medical Staff

Volunteer at a Mount Carmel Health System Facility

Temporary/Contractor at a Mount Carmel Health System/Facility:(name of agency)

Student at Mount Carmel Health System: (name of educational organization)

Employed by or Associated with a Mount Carmel Health System Credentialed Medical Staff Member

Medical Staff Members' Employee or Temp Staff: (name of practice)

Medical Staff Member's Vendor's Employee:(name of vendor)

Vendor Providing Goods or Services to Mount Carmel Health System

Employee/Temp Staff of Mount Carmel Health System's clincal services vendor:(name of vendor)

Employee/Temp Staff of Mount Carmel Health System's business services vendor:(name of vendor)

Employee/Temp Staff of Mount Carmel Health System's IT services vendor:(name of vendor)

Mount Carmel Health System's Joint Venture or a Facility Managed by Mount Carmel Health System

Employee of a Mount Carmel Health System's Joint Venture: (name of joint venture)

Employee of a hospital/Other Facility Managed by Mount Carmel Health System:(name of facility)

Credentialed Physician on Medical Staff of a Hospital/Other Facility Managed by Mount Carmel Health System:(name of facility)

Employee or Temp Staff of a Credentialed Physician on the Medical Staff of a Hospital/Other Facility Managed by Mount Carmel Health System:(name of physician's practice)

Other

Unaffiliated (non-credentialed) Physician/Other Provider:(name of practice)

Employee of an Unaffiliated Physician or Facility: (name of practice or facility)

Employee or Payer:(name of payer)

Researcher: (research study name)

Other: (name of employer)

USER If there are any items in this agreement that I do not understand I will ask my Mount Carmel Health System supervisor or other appropriate Mount Carmel Health System contact person for clarification. My signature acknowledges that I have read, understand and accept this agreement and realize it is a condition of my employment or association with Mount Carmel Health System/Trinity Health. I also acknowledge that I have received a copy of the Confidentiality and Network Access Agreement.

Colleague Name:

Colleague Signature:

Date: 2016-01-05 22:48:38.577

Signature of individual to be given access(if checked any line other than employee of Mount Carmel Health System above)

EMPLOYER SIGNATURE: (Required when user is an employee or agent of: a physician/physician practice; other individual or facility provider, a vendor that is not a business associate; any other organization unaffiliated with Mount Carmel Health or Trinity Health. My signature below acknowledges that I have read, understand and accept

MOUNT CARMEL HEALTH SYSTEM CONFIDENTIALITY AND NETWORK ACCESS AGREEMENT

The following rules for Confidentiality and Network Access apply to all non-public patient and business information (Confidential Information) of Mount Carmel Health System, Trinity Health, and related organizations. The rules also apply to the non-public and business information of joint ventures, or of other entities and persons collaborating with Mount Carmel Health System and Trinity Health, to which the user has access. As a condition of being permitted to have access to Confidential Information relevant to my job function or role I agree to the following rules:

1. Permitted and required access, use and disclosure:

- I will access, use or disclose Confidential Patient Information (PHI) only for legitimate purposes of diagnosis, treatment, obtaining payment for patient care, or performing other health care operations functions permitted by HIPAA and I will only access, use or disclose the minimum necessary amount of information needed to carry out my job responsibilities.
- I will access, use or disclose Confidential Business Information only for legitimate business purposes of Mount Carmel Health System or Trinity Health.
- I will protect all Confidential Information to which I have access, or which I otherwise acquire, from loss, misuse, alteration or unauthorized disclosure, modification or access including:
 - o making sure that paper records are not left unattended in areas where unauthorized people may view them;
 - using password protection, screensavers, automatic time-outs or other appropriate security measures to ensure that no unauthorized person may access Confidential information from my workstation or other device;
 - appropriately disposing of Confidential Information in a manner that will prevent a breach of confidentiality and never discarding paper documents or other materials containing Confidential Information in the trash unless they have been shredded
 - safeguarding and protecting portable electronic devices containing Confidential Information including laptops, smartphones, PDAs, CDs, and USB thumb drives.
- I will disclose Confidential Information only to individuals, who have a need to know to fulfill their job responsibilities and business obligations.
- I will comply with Mount Carmel Health System/Trinity Health's access and security procedures, and any
 other policies and procedures that reasonably apply to my use of the computer systems and/or my access to
 information on or related to the computer systems including off-site (remote) access using portable
 electronic devices.

2. Prohibited access, use and disclosure:

- I will not access, use or disclose Confidential Information in electronic, paper or oral forms for personal reasons, or for any purpose not permitted by Mount Carmel Health System/Trinity Health policy, including information about co-workers, family members, friends, neighbors, celebrities, or myself. I will follow the required procedures at Mount Carmel Health System to gain access to my own PHI in medical and other records.
- I will not use another person's, login ID, password, other security device or other information that enables
 access to Mount Carmel Health System/ Trinity Health's computer systems or applications nor will I share
 my own with any other person.
- If my employment or association with Mount Carmel Health System/Trinity Health ends, I will not
 subsequently access, use or disclose any Mount Carmel Health System/Trinity Health Confidential
 Information and will promptly return any security devices and other Mount Carmel Health System/ Trinity
 Health property.
- I will not engage in any personal use of Mount Carmel Health System's computer systems that inhibits or
 interferes with the productivity of employees or others associated with Mount Carmel Health
 System/Trinity Health's operations or business, or that is intended for personal gain;
- I will not engage in the transmission of information which is disparaging to others based on race, national
 origin, sex, sexual orientation, age, disability or religion, or which is otherwise offensive, inappropriate or
 in violation of the mission, values, policies or procedures of Mount Carmel Health System/ Trinity Health;

Trinity Health- Mount Carmel Final 06152009

MOUNT CARMEL HEALTH SYSTEM CONFIDENTIALITY AND NETWORK ACCESS AGREEMENT

I will not utilize the Mount Carmel Health System/Trinity Health network to access Internet sites that contain content that is inconsistent with the mission, values and policies of Mount Carmel Health System/Trinity Health.

3. Accountability and sanctions:

- I will immediately notify the Mount Carmel Health System/Trinity Health Security Official or Privacy Official if I believe that there has been improper/unauthorized access to the Mount Carmel Health System/Trinity Health network or improper use or disclosure of confidential information in electronic, paper or oral forms.
- I understand that Mount Carmel Health System/Trinity Health will monitor my access to, and my activity within, Mount Carmel Health System's/Trinity Health's computer system, and I have no rightful expectation of privacy regarding such access or activity.
- I understand that if I violate any of the requirements of this agreement, I may be subject to disciplinary
 action, my access may be suspended or terminated and/or I may be liable for breach of contract and subject
 to substantial civil damages and/or criminal penalties.
- If I lose my security device I will report the loss to Mount Carmel Health System Information Resources
 Customer Support immediately and I may be charged for its replacement.

4. Software use:

- I understand that my use of the software on Mount Carmel Health System/Trinity Health's network is governed by the terms of separate license agreements between Trinity Health and the vendors of that software.
- I agree to use such software only to provide services to benefit Mount Carmel Health System/Trinity Health.
- I will not attempt to download copy or install the software on any other computer.
- I will not make any change to any of Mount Carmel Health System/Trinity Health's systems without Mount Carmel Health System's/ Trinity Health's prior express written approval.

5. Network:

- I understand that access to Mount Carmel Health System's/Trinity Health's network is "as is", with no warranties and all warranties are disclaimed by Trinity Health.
- Mount Carmel Health System/Trinity Health may suspend or discontinue access to protect the network or to accommodate necessary down time. In an emergency or unplanned situation Mount Carmel Health System/Trinity Health may suspend or terminate access with out advance warning.
- Mount Carmel Health System/Trinity Health may terminate this agreement, user access and use of Confidential Information at any time for any reason or no reason.

6. Employer acceptance of responsibility for an individual with access to Confidential Information: (Applies to physicians/physician practices; other individual or facility providers; a vendor that is not a business associate; payers; any other unaffiliated organization).

- I accept responsibility for all actions and/or omissions by my employees and/or agents
- I agree to notify the Mount Carmel Health System Information Resources Customer Support within 5
 business days if any of my employees or agents who have access to Mount Carmel Health System's/Trinity
 Health systems or applications no longer need or are eligible for access due to leaving my
 practice/company, changing their job duties or for any other reason.
- I agree to report any actual or suspected privacy or security violations made by my employees and/or
 agents to the Mount Carmel Health System/Trinity Health Privacy Official or Security Official.
- I understand that Mount Carmel Health System/Trinity Health may terminate my employee and/or agent's
 access.

Trinity Health- Mount Carmel Final 06152009

MOUNT CARMEL HEALTH SYSTEM MEMBER OF TRINITY HEALTH

DISCLOSURE/CONFLICT OF INTEREST STATEMENT

The purpose of this form is to disclose any interest of affiliations you or a family member may have that may create a conflict of interest, based upon your position at Mount Carmel

l hereby state that I, or a member of my family have the following affiliations or interest that might possibly constitute a conflict of interest:

- 1. Business Relationship with Mount Carmel: Please identify and describe any business arrangements you or a family member have with Mount Carmel, its affiliates and its subsidiaries.
- Relationships External to Mount Carmel: Please describe any employment or other relationship(s) you have with an organization that has a business or other relationip with Mount Carmel or its subsidiaries (including consulting activities, governance/directorship appointment, etc).
- Outside Activities: Please identify any outside activities in which you or a family member participate which might constitute a conflict of interest (example: holding a position as an officer, director or consultant to a business entity providing or receiving products or services to/from Mount Carmel).

I agree to immediately inform Mount Carmel Human Resources/Medical Staff Office/Supervisor as appropriate, of any changes in my personal or family member's circumstance relative to conflict of interest which may occur prior to completion of my next annual disclosure statement.

I understand that if I terminate my employment or association with Mount Carmel that I will not share any business information that I had access to and acknowledge that legal action may result if I do so.

I understand that the contents of this document will be treated as confidential information accessible only to Mount Carmel's governing board as necessary to determine the existence of a conflict of interest on my part or on the part of a member of my family.

INTEGRITY AND COMPLIANCE PROGRAM/CODE OF CONDUCT

I am aware of and undertand that it is my responsibility to follow the Mount Carmel Code of Conduct in regard to the Integrity and Compliance Program. I further understand that if I engage in conduct that violates these policies, I will be subject to discipline up to and including termination. I understand that the Mount Carmel Code of Conduct is available to me at

http://netit.co.trinity-health.org/organizationalintegrity/codeofconduct_/codeofconduct/CodeOfConduct.pdf

ACKNOWLEDGEMENT RECEIPT

I have reviewed, read and understand the attached documents. I further acknowledge that I have received a copy of these documents: Confidentiality/Network Access Agreement; Conflict of Interest Statment; Current Job Description; and Integrity and Compliance Program/Code of Conduct Statement

Colleague: Colleague ID:

Date Signed: 2016-01-05 22:48:38.577

Mount Carmel Health System
Competency Assessment
Safety & Security
DEFENSIVE TACTICS/HANDCUFFING/STRAIGHT BATON/O.C. REPELLANT/DE-ESCALATION/RESTRAINTS

Associate Name:	ID Number:	Job Title:
		SAFETY & SECURSTY
		Smer q sweeth
☐ High Risk ☐ Low Volum	ne 🗌 Problem Prone 🔲 New E	quipment/Service
	CARING COMPONENTS	
emonstrates service excellence be	havior	
	KNOWLEDGE AND SKILL COMP	ONENTS:
BILITY TO EXPLAIN THE USE OF		
BILITY TO PERFORM BALANCE [DISPLACEMENT AT THE HIP	
BILITY TO PERFORM BALANCE [
	DISPLACEMENT AT THE SHOULDE	
	ORT WRIST LOCK TO BOTH THE R	
	IT ARM BAR TO BOTH THE RIGHT A	AND LEFT SIDE
BILITY TO USE HANDCUFFS IN T		
BILITY TO USE HANDCUFFS FRO		
BILITY TO REMOVE HANDCUFFS		
BILITY TO UNDERSTAND WHEN	TO PLACE HANDCUFFS ON SUBJE	ECT
BILITY TO PERFORM SEPERATION	ON FROM SUBJECT GRABBING	
BILITY TO PERFORM PEELING O	F THE HAND(S) OF SUBJECT DUR	ING A GRAB
BILITY TO PERFORM SEPERATION	ON FROM A FINGER JAB	
BILITY TO PERFORM PEELING O	F FINGER(S)/HAND(S) DURING A F	FINGER JAB
BILITY TO PERFORM A SCARF P	OSITION ON SUBJECT	
BILITY TO PERFORM A SIT OUT	MANEUVER DURING THE SCARF	
BILITY TO PERFORM A MOUNT F	OSITION ON A SUBJECT	
BILITY TO MAINTAIN CONTROL O	OF SUBJECT WHILE IN THE MOUNT	FED POSITION
BILITY TO PERFORM THE USE O	F STRAIGHT BATON FROM THE FI	ELD INTERVIEW STANCE
BILITY TO PERFORM THE USE O	F STRAIGHT BATON FRON THE RE	EADY STANCE
BILITY TO PERFORM THE USE O	F STRAIGHT BATON USING THE F	ORWARD FLUID SHOCKWAVE STRIKE
BILITY TO PERFORM THE USE O	F STRAIGHT BATON USING THE F	ORWARD CUTTING STRIKE
BILITY TO PERFORM THE USE O	F STRAIGHT BATON USING THE B	ACKHAND STRIKE
BILITY TO CLOSE THE BATON FF	ROM THE STANDING POSITION	
BILITY TO CLOSE THE BATON FF	ROM THE KNEELING POSITION	
BILITY TO OPEN AND USE THE B	SATON FROM THE CRISIS POSITION	N
BILITY TO EXPLAIN WHEN TO US	SE STRAIGHT BATON AND WHEN N	IOT TO USE STRAIGHT BATON
BILITY TO EXPLAIN WHAT O.C. S	TANDS FOR	
BILITY TO EXPLAIN WHEN TO US	SE O.C.	
BILITY TO EXPLAIN WHEN NOT T	O USE O.C.	
BILITY TO EXPLAIN WHETHER TO	O USE O.C. ON A PATIENT OR NOT	
SILTY TO EXPLAIN THE EFFECTS	OF O.C. ON A SUBJECT	
BILITY TO EXPLAIN THE DECONT	AMINATION PROCEDURES	
BILITY TO EXPLAIN THE NOMENO	CLATURE OF THE PRO V2 DEVICE	
BILITY TO EXPLAIN THE USE OF	PRO V2 DEVICE IN REGARDS TO U	JSE OF FORCE CONTINUUM
BILITY TO PERFORM THE USE OF		
	ATE (CIT TRAINING/AGGRESSIVE E	BEHAVIOR TRAINING)
BILITY TO APPLY RESTRAINTS		•
BILITY TO POSITION PATIENT ON	THE BED/CART	
	NG STRAP AROUND THE BED FRA	ME
		LIMB (BLUE FOR WRISTS/RED FOR
NKLES, LOCKING)		

Able to act appropriately in an emergent or sentinel type of event METHOD OF COMPETENCY VALIDATION: Return Demonstration		
ABILITY TO PLACE PATIENT INTO POSEY VEST ABILITY TO SECURE POSEY VEST STRAPS TO THE BED FRAME ABILITY TO PASS DT TRAINING SCENARIOS ANNUALLY Able to act appropriately in an emergent or sentinel type of event METHOD OF COMPETENCY VALIDATION: Return Demonstration Observation of Daily Work Peer Review Case Study Discussion Group Competency Validated By: (Signature and credentials) Developmental Needs identified: (See Performance Evaluation for related goals) Associate Signature Date 7/2 1/16 Instructor(s) Signature Date 07/100		~
ABILITY TO SECURE POSEY VEST STRAPS TO THE BED FRAME ABILITY TO PASS DT TRAINING SCENARIOS ANNUALLY Able to act appropriately in an emergent or sentinel type of event METHOD OF COMPETENCY VALIDATION: OReturn Demonstration Observation of Daily Work O	ABILITY TO PASS ONE FINGER BETWEEN THE RESTR	AINT AND PATIENTS WRIST/ANKLE
Able to act appropriately in an emergent or sentinel type of event METHOD OF COMPETENCY VALIDATION: Return Demonstration Observation of Daily Work Post Test Competency Validated By: (Signature and credentials) Developmental Needs identified: (See Performance Evaluation for related goals) Associate Signatu Date 7/2 1/16 Instructor(s) Signature Date		
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METHOD OF COMPETENCY VALIDATION: Return Demonstration		
□ Return Demonstration □ Observation of Daily Work □ Peer Review □ Case Study □ Discussion Group □ Date □		
Observation of Daily Work Post Test Case Study Discussion Group Competency Validated By: (Signature and credentials) Developmental Needs identified: (See Performance Evaluation for related goals) Associate Signatu		
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Developmental Needs identified: (See Performance Evaluation for related goals) Date 7/29/16 Instructor(s) Signature Date 2/29/16 Instructor(s) Date 2/29/16	•	
Competency Validated By: (Signature and credentials) Developmental Needs identified: (See Performance Evaluation for related goals) Associate Signature Date 7/29/16 Instructor(s) Signature Date 07/29	1	1
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Developmental Needs identified: (See Performance Evaluation for related goals) Associate Signature Date 7/29/16 Instructor(s) Signature Date	Competency Validated By: (Signature and credentials)	Date orbrale
7	Developmental Needs identified: (See Performance Evalua	ation for related goals)
Evidence Based References/Resources (If applicable):		Instructor(s) Signature Date Orland
FERRICA CO. TO TAMER TO ALTO CONTRACTOR CO.	Evidence Based References/Resources (If applicable):	



Box 1794 · Appleton, WI 54912 · (920) 735-6242 · Fax (920) 735-6245 · asp-usa.com

ASP Basic Certification (ABC) EXPANDABLE BATON TRAINING

Information Sheet

(Please Print)		Date 7/29/16
☐ Initial Certification	⊠-Recertification	
First Name	Last Name _	
Home Address	East Maine	
City MT VERNON	State Old Province	ceZip_ <i>43050</i>
Telephone	E-mail Address	ceZip_ <u>43050</u>
Employing Agency Moving Code as	. Samuel during	
Agency Address 700 G. Aller	PETROES & MEACT H	
Agency Address 7100 GRAPHICS	Chate Oll D	
Agency Telephone (\$\frac{\mathred{9}}{240}\) 953 46	State /// Provinc	ce Zip <u>430 35</u>
<u> </u>	L-man Address	
Duty Status: ☐ Full Duty ☐ Restri	cted Duty	
Has your agency adopted or authorize		
How many officers are in your agency?	3	
Height 57 Weight 225	Age 3 P Date of Bi	rth 1/22/78
Have you been exercising? YES		
Do you have any knee, back or health	problems?	
Are you on any medication? YES L	TIATON . ADDINOU	
Person to be notified in case of emerg Name Phone Relationship <u>Cray Fatendo</u>	Alternate (
Briefly describe any health problems:		Injury Check: 1A 11
		injury Check.
	WAIVER	
	elease from Liability and Assumption of Risk /	
and assigns, of and from any and all claims, do any and all known and unknown, foreseen and all ASP Expandable Baton certification training a 2) In signing this Release, I assert that	emands, rights and causes of action of what emands, rights and causes of action of what unforeseen physical and mental injuries and activities. a) I am presently in good physical and mental water of and do acknowledge and assume a	dministrators, and assigns, I hereby waive, release, an sentatives, heirs, executors, administrators, successor itsoever kind and nature, arising from, and by reason of consequences thereof, suffered by me during any and lall health; (b) I have no reason to believe that I am not its link of injury inherent in my participation in this training
	sed. Mere participation does not automo	atically assure successful completion.
7/29/16		
Date		Signed

15. ASP Weapon Side Strikes are

c)

b)

intended to be performed at a:

a 45 degree angle
b) 180 degree angle

Horizontal angle

90 degree angle

16. When strlking, the ASP Baton is gripped

The index finger and thumb A loose flexible grip

Two fingers and the thumb

Vertical angle

Full hand grip

Baton Basic Certification WRITTEN EXAMINATION

For each question below, circle the option that is the most correct.

8. The ASP Baton is always carried:

a) On the right side

In the front On the Reaction Side

Tip down

On the left side

The Reaction Strike is primarity a:
 a) Strong strike

Closed strike Clearance strike

Initial strike

Offensive strike

1. A defensive tactic is evaluated by

Control v Injure Maim v Destroy Threaten v Control

2. The primary striking surface of an open ASP Baton is the:

Center of the shaft

(c) Last 3" of the baton

Demonstrate the officer's

React v Act

its ability to: (a) Control
(b) Maim

a) Cap

c)

opened: a) To the sky b) To the ground c) During a strike e) To the side e) Towards the threat 5. The two baton modes are: a) Open and Closed b) Interview and Combat c) Weapon and Reaction d) Concealed and Loaded e) Ready and Extended 6. Which is not an ASP Target area: a) Center mass of the legs c) Guarding Palm dow shaft c) Executing Companies Companie	Strike St
3. The hand using the service firearm is the: a) Weak Hand b) Contact Hand c) Weapon Hand d) Reaction Hand e) Support Hand 4. The ASP Baton should not be opened: a) To the sky b) To the ground c) During a strike d) To the side e) Towards the threat 5. The two baton modes are: a) Open and Closed b) Interview and Combat c) Weapon and Reaction d) Concealed and Loaded e) Ready and Extended 6. Which is not an ASP Target area: a) Center mass of the legs c) Center mass of the legs c) Center mass of the body d) Groin or sternum e) The Weapon Delivery System 7. Targeting specific points violates which training principle: a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques Fach question is worth;	Strike St
the: a) Weak Hand b) Contact Hand d) Reaction Hand e) Support Hand d) Reaction Hand e) Support Hand 11. When performin Strike, the Reace a) Palm up of Maintainit copened: a) To the sky b) To the ground c) During a strike d) To the side e) Towards the threat 5. The two baton modes are: a) Open and Closed b) Interview and Combat c) Weapon and Reaction d) Concealed and Loaded e) Ready and Extended 6. Which is not an ASP Target area: a) Center mass of the lengs c) Center mass of the body d) Groin or sternum e) The Weapon Delivery System 7. Targeting specific points violates which training principle: a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques Fach question is worth;	Strike e Strike b) Imminent danger Injury or exhaustion Size g an Open Straight tion Hand is: on the shaft ng distance the face yn gripping the g a downward block g a downward block ns too easily: retaining clip the o-ring e retaining clip the treatining clip the baton a) Special knowledge Imminent danger Injury or exhaustion Size e) Officer on the ground the utilmate responsibility of the: a) Student b) Training partner c) Course coordinator d) Instructor e) Administrative officer a) An offensive weapon b) A comealong device c) A defensive weapon b) A comealong device c) A defensive weapon c) A deadly force option e) A restraining device on problem in on is: physical confrontation is: (a) Establishing control
a) Weak Hand b) Contact Hand c) Weapon Hand d) Reaction Hand e) Support Hand 11. When performing Strike, the Reaction Hand e) Support Hand 11. When performing Strike, the Reaction Hand e) During a strike e) To the sky b) To the ground c) During a strike e) Towards the threat 5. The two baton modes are: a) Open and Closed b) Interview and Combat c) Weapon and Reaction d) Concealed and Loaded e) Ready and Extended 6. Which is not an ASP Target area: a) Center mass of the legs c) The Weapon Delivery System 14. Officer-Subject include: a) Age b) Size c) Weapon in the volates which training principle: a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques **Each question is worth; ### Clearance a) Reverse 11. When performing Strike, the Reacca a) Palm up b) Maintaining c) Guarding Palm dow shaft e) Executing 12. If the baton open a) Make the smaller b) Replace to c) Widen the c) Widen the c) Widen the c) Broken re c) Operator e) Loose or c) Broken re c) Operator e) Loose ha c) Skill level e) Multiple of	e Strike Stri
b) Contact Hand c) Weapon Hand d) Reaction Hand e) Support Hand e) Support Hand 11. When performin Strike, the Reaction Hand e) Support Hand 11. When performin Strike, the Reaction Hand e) During a strike e) To the sky b) To the side e) Towards the threat 12. If the baton operation Hand Hand Hand Hand Hand Hand Hand Han	Strike g an Open Straight tition Hand is: on the shaft ng distance the face ng adownward block g a downward block ns too easily: retaining clip the o-ring the o-ring the retaining clip the baton 20. The principle goal of any arrest or physical confrontation is: e baton (a) Strice on the ground (b) Size e) Officer on the ground (c) Officer on the ground (d) Student (of the: a) Student Training partner c) Course coordinator (d) Instructor Administrative officer (e) A designed to be a) An offensive weapon (f) A deadly force option e) A restraining device (g) A deadly force option e) A restraining device (g) Establishing control
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a) To the sky b) To the ground c) During a strike e) To the side e) To wards the threat 12. If the baton oper a) Make the smaller b) Interview and Combat c) Weapon and Reaction d) Concealed and Loaded e) Ready and Extended 6. Which is not an ASP Target area: a) Center mass of the legs c) Center mass of the body d) Groin or sternum e) The Weapon Delivery System 14. Officer-Subject include: which training principle: a) Forgiving techniques b) Size c) Spaced practice d) Static training e) Complex techniques Fach question is worth;	we gripping the b Training partner Course coordinator Instructor Administrative officer Retaining clip 19. The ASP Baton is designed to be a An offensive weapon b A comealong device a retaining clip (C) A defensive weapon the retaining clip (D) A deadly force option the baton (D) A restraining device (D) A restraining device (D) A restraining device (D) A great and the baton (D) A restraining device (D) A great and the baton (D) A restraining device (D) A great and the baton (D) A restraining device (D) A great and the baton (D) A restraining device (D) A great and the baton (D) A restraining device (D) A great and the baton (D) A restraining device (D) A great and the baton (D) A grea
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a) Make the smaller smaller smaller smaller complex smaller smaller smaller smaller smaller complex smaller smaller smaller smaller complex smaller smaller smaller smaller complex smaller complex smaller sm	retaining clip 19. The ASP Baton is designed to be a) An offensive weapon he o-ring b) A correationg device a retaining clip che retaining clip d) A deadly force option the baton on problem in on is: e baton 19. The ASP Baton is designed to be a particle weapon the correction of the principle goal of any arrest or physical confrontation is: a) Establishing control
5. The two baton modes are: a) Open and Closed b) Interview and Combat c) Weapon and Reaction d) Concealed and Loaded e) Ready and Extended 5. Which is not an ASP Target area: a) Center mass of the arms b) Center mass of the legs c) Center mass of the body d) Groin or sternum e) The Weapon Delivery System 14. Officer-Subject Fine motor skills c) Spaced practice d) Static training e) Complex techniques Fach question is worth j	a) An offensive weapon the o-ring the o-ring the retaining clip the retaining clip the baton a) An offensive weapon A defensive weapon A deadly force option A restraining device on problem in the baton a) An offensive weapon A defensive weapon A deadly force option A restraining device on problem in the baton a) An offensive weapon A remaining device A restraining device on problem in the baton a) Establishing control
c) Weapon and Reaction d) Concealed and Loaded e) Ready and Extended 13. The most comm opening the bate a) Center mass of the arms b) Center mass of the legs c) Center mass of the body Groin or sternum e) The Weapon Delivery System 7. Targeting specific points violates which training principle: a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques Fach question is worth j	the o-ring a retaining clip b A comealong device A defensive weapon A deadly force option A restraining device A deadly force option A restraining device On problem in C The principle goal of any arrest or C physical confrontation is: Be baton C A comealong device A defensive weapon A restraining device On problem in C D. The principle goal of any arrest or C physical confrontation is: (a) Establishing control
c) Weapon and Reaction d) Concealed and Loaded e) Ready and Extended 5. Which is not an ASP Target area: a) Center mass of the legs c) Center mass of the legs c) Center mass of the body Groin or stermum e) The Weapon Delivery System 7. Targeting specific points violates which training principle: a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques Fach question is worth j	e retaining clip the retaining clip the baton on problem in on is: e baton on problem in on is: e baton on the problem in on is: e baton on the problem in on is: e baton on the problem in control on the problem in control on the problem in control A defensive weapon A deadly force option A restraining device on problem in control on problem in control A defensive weapon A deadly force option A restraining device
c) Weapon and Reaction d) Concealed and Loaded e) Ready and Extended 13. The most comm opening the bate a) Center mass of the arms b) Center mass of the legs c) Center mass of the body Groin or sternum e) The Weapon Delivery System 7. Targeting specific points violates which training principle: a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques Fach question is worth j	the retaining clip d) A deadly force option the baton e) A restraining device on problem in 20. The principle goal of any arrest or physical confrontation is: e baton (a) Establishing control
d) Concealed and Loaded e) Ready and Extended 6. Which is not an ASP Target area: a) Center mass of the arms b) Center mass of the legs c) Center mass of the body d) Groin or sternum e) The Weapon Delivery System 14. Officer-Subject finclude: which training principle: a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques Fach question is worth j	the baton e) A restraining device on problem in on is: physical confrontation is: e baton e) A restraining device
e) Ready and Extended 6. Which is not an ASP Target area: a) Center mass of the arms b) Center mass of the legs c) Center mass of the body d) Groin or sternum e) The Weapon Delivery System 14. Officer-Subject if Include: which training principle: a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques 15. The most comm opening the bate a) Grip of the body c) Broken re c) Doperator e) Loose ha stricter-Subject if Include: a) Age b) Size c) Weapon if Skill level c) Static training e) Complex techniques	on problem in 20. The principle goal of any arrest or on is: physical confrontation is: e baton (a) Establishing control
6. Which is not an ASP Target area: a) Center mass of the arms b) Center mass of the legs c) Center mass of the body d) Groin or sternum e) The Weapon Delivery System 7. Targeting specific points violates which training principle: (a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques 13. The most comm opening the bate a) Grip of	on is: physical confrontation is: e baton (a) Establishing control
6. Which is not an ASP Target area: a) Center mass of the arms b) Center mass of the legs c) Center mass of the body d) Groin or sternum e) The Weapon Delivery System 7. Targeting specific points violates which training principle: a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques Fach question is worth;	on is: physical confrontation is: e baton (a) Establishing control
a) Center mass of the arms b) Center mass of the legs c) Center mass of the legs c) Center mass of the body d) Groin or sternum e) The Weapon Delivery System 14. Officer-Subject is include: which training principle: a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques **Each question is worth;	e baton (a) Establishing control
b) Center mass of the legs c) Center mass of the body d) Groin or sternum e) The Weapon Delivery System 14. Officer-Subject if include: which training principle: a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques **Each question is worth;	e baton (a)/ Establishing control
c) Center mass of the body d) Groin or sternum e) The Weapon Delivery System 14. Officer-Subject finclude: which training principle: a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques **Each question is worth;	
d) Groin or sternum e) The Weapon Delivery System 14. Officer-Subject Finclude: which training principle: a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques **Each question is worth;	
System 14. Officer-Subject include: which training principle: a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques **Each question is worth;	etaining clip c) Subject safety
System 14. Officer-Subject include: which training principle: a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques **Each question is worth;	
7. Targeting specific points violates which training principle: a) Forgiving techniques b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques **Each question is worth;	ndle cap e) Punishment
7. Targeting specific points violates which training principle: (a) Forgiving techniques (b) Fine motor skills (c) Spaced practice (d) Static training (e) Complex techniques (f) Each question is worth j	•
7. Targeting specific points violates which training principle: (a) Forgiving techniques (b) Fine motor skills (c) Spaced practice (d) Static training (e) Complex techniques (d) Each question is worth j	Factors do not
which training principle: a) Age Forgiving techniques b) Size b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques **Each question is worth;	
a) Forgiving techniques b) Size b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques Each question is worth j	
b) Fine motor skills c) Spaced practice d) Static training e) Complex techniques * Each question is worth;	
c) Spaced practice d) Static training e) Complex techniques • Each question is worth j	proximity
d) Static training e) Mulliple of e) Complex techniques • Each question is worth j	
e) Complex techniques Each question is worth;	
Each question is worth j	
2	
2	
2	
2	
* The minimum acceptable	five (5) points.
i ne minimum accepiaol	la sague := 900/ (16 saguest)
	e score is auzo lid correcti
	- 200. 2 to 00/0 (10 00// 00y.
	- 355 10 0070 (20 0011009).
NAL SCORE: 100 / GRADED BY:	255.2 10 0070 (20 007, 009).
SP WRITTEN EXAM: ACCEPTABLE	
O. THE LANDER	Cerp
OUNSELED \	
OUNCELLY TO	Cerp
ISTRUCTOR	NOT ACCEPTABLE
NOT HOUT ON	NOT ACCEPTABLE
	Cerp
	NOT ACCEPTABLE
	NOT ACCEPTABLE
	NOT ACCEPTABLE

Baton Basic Certification TECHNIQUE PROFICIENCY CHECKLIST

The following checklist is designed to assist you and the ASP Instructor in evaluating your performance of ASP Techniques. Those components of the technique that are acceptable are checked.

7) Open Mode Weapon Strike Balance Movement Verbalization Technique Angle Target 8) Open Mode Reaction Strike Balance Movement Verbalization
Balance Movement
Technique Target
9) Open Mode Straight Strike Balance Movement Verbalization Technique Target
O) Closing the Baton Balance Movement Technique
stable observed action. e acceptable for a passing score. sing score for certification. 00% (10 techniques). NOT ACCEPTABLE

WRITTEN EXAMINATION

TECHNIQUE PROFICIENCY CHECKLIST

COMMENTS:

HANDCUFFING TEST

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
 - D.) ALL OF THE ABOVE
 - (E) BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?
 - A.)TRUE B.)FALSE
- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - C.) SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?
 - A.) TRUE
 - B) FALSE

OC Test Mount Carmel Health System Safety and Security

1001

1.)	Wh	at does OC stand for?
	A.	Orange Crush
	В.	Ocean Crust
	O	Oleoresin Capsicum
2.)	Wh	at is the average expiration date on an OC canister?
	A.	1-2 years
	B	3-4 years
	Č,	4-5 years
3.)	Hov	often should you check your OC spray for adequate spray strength?
	A.	30 days
	В.	60 days
	©	90 days
4.)	How	long of a burst should you use on a threat?
	A	1-2 seconds
	B.	2-4 seconds
	C.	Empty the entire can
5.)	Wha	t is Oleoresin Capsicum commonly known as?
	A.	Mace
	B	Pepper Spray
	C.	Gas
5.)	Whe	n deploying OC, what area of the body should you deploy the OC
	towa	rds?
	A.	Arms
	₿.	Chest
	(C.)	Face and eyes
7.)	After subje	using OC on a subject, what should you immediately do with the
	A.	Leave lying on the ground.
	(B)	Remove from contaminated area
	Č.	Spray again

8.) What is the second step in the decontamination process?
A. Spray them again
B. Tell them to stop crying like a baby
Offer verbal rapport to the subject
- COAACCUST SURVEY J
9.) What is the third step of the decontamination process?
A Expose subject to fresh air
A Expose subject to fresh air B. Throw the subject a bottle of water
C. Stand there and record them with your cellphone
10.) What is the best way to flush the eyes?
A. Using milk
B. Rubbing eyes continually
(C.) Water
11.) What type of agent is OC?
A. Glue
B. Cleaning Fluid
C Inflammatory
12.) What is the main ingredient of OC?
A Water
(B) Cayenne Pepper
C. Powder
13.) Does CMS (Center for Medicaid/Medicare System) guidelines allow for
OC to be used on a PATIENT?
A. Yes
B No
C. Only if they deserve it.
3 11 1110



フ/&9/*16* Name:

ProV2 User Course Written Test

100%.

- 1) At what Activation Level would the Pro V2 start recording audio and photo/video?
 - a. Upon power-up
 - **6** Level-1
 - c. Level-2
 - d. Level-3
- 2) At what Activation Level would the Laser Spotter come on?
 - a. Upon power-up
 - b) Level-1
 - c. Level-2
 - d. Level-3
- 3) At what Activation Level would the Alerting Siren come on?
 - a. Upon power-up
 - b. Level-1
 - (c.) Level-2
 - d. Level-3
- 4) At what Activation Level would O.C. Pepper Spray be deployed?
 - a. Upon power-up
 - b. Level-1
 - c. Level-2
 - (d) Level-3



- 5) What is the arrow pointing to in the above photo above?
 - a. Strobe Light
 - b. Alerting Siren
 - (c) Digital imager
 - d. Spray port





- What is the arrow pointing to in the photo above?
 - On-Off switch
 - Speaker
 - **Battery release**
 - d. Illuminated sight



- What is the arrow pointing to in the photo above?
 - **a** b. **Ambidextrous Call-button**
 - **Ambidextrous Trigger**
 - C. **USB** port
 - **Arming Switch**
- The left-side LED indicator on the Pro V2 indicates:
 - a. An failed Bluetooth connection
 - **(b)** Spray canister has been used
 - c. Fault error
 - d. Battery needs charging
- How long does it take for the Pro V2 battery to charge completely?
 - a. 30 minutes
 - 60 minutes
 - 90 minutes
 - d. 120 minutes
- 10) What is the range of the Bluetooth capability of the Pro V2
 - a. 5 feet
 - **10** feet
 - 15 feet
 - (d.) 20 feet
- 11) What is the size of the internal memory card for audio/photo/video files
 - 1 GB
 - b. 2 GB
 - **4 GB**
 - 8 GB



12)	Where is the Serial Number located on the Pro V2? Inside the battery/canister compartment b. At the base of the battery c. On the right-side of the ProV2 d. On the left-side of the ProV2
13)	What color is the label on the Practice (Water) Spray canister? White with blue text b. Red with yellow text c. Black with white text d. Blue with green text
14)	Can the O.C. Pepper Spray be activated without the ProV2 being turned on? Yes b. No
15)	On the battery gauge LED lights, what does 2 lights indicate? a. Less than 25% charge 50% charged c. 75% charged d. 100% charged
16)	Does the Pro V2, by itself without Bluetooth connectivity, have the ability to dial the Command Center? a. Yes b. No
17)	How long is the pre-recorded message? a. 5 seconds b. 10 seconds C 15 seconds d. 20 seconds
18)	And the Book of th
19)	At what Activation Level will the Pro V2 automatically call the Command Center? a. Upon power-up b. Level-1 C. Level-2 d. Level-3
20)	How soon after O.C. Pepper Spray is used, should first-aid be rendered? a. When help arrives b. Anytime, but not more than 1 hour c. Immediately d) As soon as practical

perfensive Tactics / Impact Weapon Competency Form

STUDENTS NAME:	INSTRUCTORS: Coo Tomuge

JOINT LOCKS

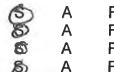
1. BA	LANCE DISPLACEMENT TECHNIQUE			
(At the hip)				
a	Starts from Escort Position	(\$)	Α	F
C	Prosess hand from Triceps and places it on rear waist of suspec	t 🔇	A A	F
d	Suspect stone in desired to	(9	Α	F
4.	Removes hand from Triceps and places it on rear waist of suspect Presses hand forward and downward, displacing balance Suspect steps in desired direction	(S)	Α	F
Comments:				
(Friction on	the Back)			
a.	Starts from Escort Position	A		-
b.	Places hand in the middle of suspect's back and process forward	000	A	۲
C.	Moves hand in random manner, forcing steps in desired direction	88	A	F
	a, see and a cope in aconca anection	(9)	A	Г
Comments:				
(Random M	otion at the Shoulder)			
a.	Starts from the Escort Position	3	^	_
b.	Continually moves suspect's arm in a random manner	6	A	F
C.	Suspect is off balance and moves in desired direction	8	A	F
Comments:		٠		_
2. TRAN	SPORT WRIST LOCK			
е.	Elbow tucked between arm and body	A	Α.	Γ-
T.	Forearm elevation	ବ୍ରବ୍ୟ ବ୍ୟବ୍ୟ	A A A	F
g.	Wrist hyperextension	Ø)	A	F F
	T 4	19)	\boldsymbol{A}	
h. Comments:	To the ground	*	Λ.	F

i j k l. n	AIGHT ARM BAR Decentralize the center of gravity Maintain control over subject's arm Maintained balance while lowering center for takedown To the ground Control for handcuffing procedure	තිමතිමත	A A A A	F F F F
Comments				
HAND	CUFFING			
a b c d	NDING METHOD Approach is from rear Simultaneous Control at application, thumb lock/cuff push Position maintained with the flip under technique Second cuff applied without loss of control	මමමම	A A A	F F F
e. f. g. h.	EDOWN FROM KNEELING POSITION All slack is removed from cuffed hand Decentralized towards the 2.5 position Iron wrist lock is applied simultaneously with decentralized pull Straight arm applied after proning the target Second cuff applied without loss of control	ବ୍ରତିକ୍ରପ୍ର	A A A A	F F F
Comments:				
6. REM a. b.	OVING HANDCUFFS Officer Instructs suspect he is going to be de-cuffed Suspect is told to leave uncuffed hand on his hip Open handcuff closed immediately and put in weak hand Officer steps to rear 45 degrees while holding cuff at arms length	තින් ලින්ම	A A A A	F F F

Defensive Counter Manuevers

7. GRABBING

- a. Seperation
- b. Verbal Commands
- c. Peeling the hand(s)
 - 1. Outside/In
 - 2. Inside/Out



Comments:

8. FINGER POKES

- a. Seperation
- b. Verbal Commands
- c. Peeling the fingers/hands
- d. Second Responding Officer Action

S A F

A F

Comments:____

Ground Techniques

9. Scarf Position (Left/Right)

a. From the side/cross mount position

b. Perform a sit out maneuver

c. Right leg ends at 10 o'clock position

d. Keep hips off of the ground

e. Left foot is at 8 o'clock position

f. Right arm around subjects neck/head

g. Left arm and hand secures subjects arm

h. Pin your chest to subjects chest



Comments:

Mounted Position 10.

a. Knees slide upb, Feet are used to feel where hipsc. Moving to control positions

F F

Comments:			
			_

Grading Scale:

S = Satisfactory (performs w/out prompting)
A = Acceptable (performs with minimal prompting)
F = Failed (needs prompting / repeated instruction, or can not perform task)



Box 1794 · Appleton, WI 54912 · (920) 735-6242 · Fax (920) 735-6245

ASP BASIC CERTIFICATION (ABC) EXPANDABLE BATON TRAINING Information Sheet

(Please Print)		3	Date 8/11/2015
☑ Initial Certification	☐ Recertific	; ation	
First Name	·Last N	* <u></u>	
Home Address	Last N	ame	
City <u>COLUIN BUS</u>	State OH	Province	75- (12 h 2 P
Telephone	State _ OH	Province	Zip <u>43228</u>
Гоюрнопо		1	
Employing Agency MT - CARMEL S	T ANN'S		3.
Agency Address 500 S. CLEVELE		4	- i
City WESTERVILLE		Province	Zip 43081
Agency Telephone (614) 898 400		1 TOVINCE	Zip <u>4308 /</u>
Duty Status: Full Duty Restricted	l Duty		
Has your agency adopted or authorized the	e use of the ASP Ba	iton?	
How many officers are in your agency?		9	
Height 5'7 Weight 235		Date of Birth 1/a	2/28
Have you been exercising?			7 / /
Do you have any knee, back or health prob	lems? NO	4	
Are you on any medication? VITAM IN			
B			
Person to be notified in case of emergency Name	7	9.	
	Alt	romato /	
Relationship CIRLFRIEND			
Briefly describe any health problems:			Injury Check: 1A 1P
meny decemberary meaning problems.			Injury Check: 1A 1P
	WAIVI	FR .	
Release		Imption of Risk Agreement	
 Intending that this Agreement be legally bi rever discharge Armament Systems and Procedure 	es, INC, and all of thei	r agents, representatives, h	eirs, executors, administrators, successors,
nd assigns, of and from any and all claims, demand	ds, rights and causes o	if action of whatsoever kind	and nature, arising from, and by reason of
ly and all known and unknown, foreseen and unfore ASP Expandable Baton certification training activiti	es.	ntal injuries and consequen	ces thereof, suffered by me during any and
2) In signing this Release, I assert that (a) I ar	m presently in good phy	sical and mental health; (b)	I have no reason to believe that I am not in
od physical and mental health; (c) I am fully aware o minar; (d) I have read and fully understand the term	of, and do acknowledge	and assume all risk of injur	y inherent in my participation in this training
		. 3	
This program is competency based.	Mere participation de	ces not automatically assi	ure successful completion.
			-
8/11/15			

ASP BASIC CERTIFICATION WRITTEN EXAMINATION

For each question below, circle the option that is the most correct.

8. The ASP Baton is always carried:

On the right side

On the Reaction Side

In the front

On the left side

9. The Reaction Strike is primarily a: Strong strike

Closed strike

Clearance strike

Offensive strike

Initial strike

The most frequently used ASP

Reaction Strike

Weapon Strike

Straight Strike

Reverse Strike

11. When performing an Open Straight

Maintaining distance

Palm down gripping the

Executing a downward block

Guarding the face

Strike, the Reaction Hand Is: Palm up on the shaft

Clearance Strike

strike is the:

d)

b)

shaft

12. If the baton opens too easily: a) Make the Retaining Clip

Replace the O-ring

Lubricate the baton

Widen the Retaining Clip

Remove the Retaining Clip

smaller

13. The most common problem in

Loose O-ring

Operator error

Grip of the baton

Loose Handle Cap

Broken Retaining Clip

opening the baton is:

(a)

Tip down

15. ASP Weapon Side Strikes are

intended to be performed at a:

45 degree angle

180 degree angle

Horizontal angle

90 degree angle

16. When striking, the ASP Baton is gripped

A loose flexible grip

Full hand grip

Both hands

17. Special circumstances do not

Special knowledge

Injury or exhaustion

Officer on the ground

18. Safety is the ultimate responsibility

Training partner

Course coordinator

Administrative officer

An Olfensive Weapon

A Comealong Device

A Defensive Weapon

A Restraining Device

20. The principle goal of any arrest or

Establishing control

Superior officer skill

physical confrontation is:

Subject safety

Documentation

A Deadly Force Option

Student

Instructor

19. The ASP is designed to be:

Imminent danger

The index finger and thumb

Two fingers and the thumb

Vertical angle

with:

b)

include:

a)

b)

C)

0 Size

e)

of the:

a)

b)

1. A defensive tactic is evaluated by

Control v Injure

Maim v Destroy

2. The primary striking surface of an

Center of the Shaft

Last 3" of the Baton

3. The hand using the service firearm is

open ASP Baton is the:

First Joint

Weak Hand

Contact Hand

Weapon Hand

Reaction Hand

Support Hand

4. The ASP Baton should not be

To the ground

During a strike

e) Towards the threat

Open and Closed

Interview and Combat

Weapon and Reaction

Concealed and Loaded

Center mass of the Arms

Center mass of the Legs

Ready and Extended

6. Which is not an ASP Target area:

Abdominal Area

Groin or Sternum

The Weapon Delivery

To the sky

To the side

5. The two Balon modes are:

Handle

React v Act

Threaten v Control

Demonstrate the officer's

its ability to:

skill

Cap

c)

d)

b)

9

the:

a)

b)

9

opened:

ы

System	e/ Loose Handle Cap	e) Punishment
 7. Targeling specific points violates which training principle: Forgiving Techniques Fine motor skills Spaced practice Static Training Complex techniques 	14. Officer-Subject Factors do not include: a) Age b) Size c) Weapon proximity Skill level e) Multiple officers	*
Each question if worth for FINAL SCORE: 6	ive (5) points. The minimum acceptable	
100	EPTABLE NOT ACC	EPTABLE
INSTRUCTOR TONT (Cox	DATE 11 A.V. 16

ASP BASIC CERTIFICATION TECHNIQUE PROFICIENCY CHECKLIST

The following checklist is designed to assist you and the ASP Instructor in evaluating your performance of ASP Techniques. Those components of the technique that are acceptable are checked.

6) Opening the Baton

1) Check

Movement Verbalization Technique Target	Balance Movement Verbalization Technique Target
2) Re-Direction Balance Movement Verbalization Technique Target	7) Open Mode Weapon Strike Balance Movement Verbalization Technique Angle Target
3) Closed Mode Weapon Strike Balance Movement Verbalization Technique Angle Target	8) Open Mode Reaction Strike Balance Movement Verbalization Technique Target
4) Closed Mode Reaction Strike Balance Movement Verbalization Technique Angle Target	9) Open Mode Straight Strike Balance Movement Verbalization Technique Target
5) Closed Mode Straight Strike Balance Movement Verbalization Technique Target	10) Closing the Baton Balance Movement Technique
 Three of the component. Each technique must ha 	an acceptable observed action. s must be acceptable for a passing score. we a passing score for certification. core is 100% (10 techniques).
TECHNIQUE PROFICIENCY: ACCEPTABLE _	NOT ACCEPTABLE
INSTRUCTOR TONY CON	DATE 11 AUDIS

WRITTEN EXAMINATION

TECHNIQUE PROFICIENCY CHECKLIST

100%

COMMENTS:

Competency Form

STUDENTS NAME:

INSTRUCTORS COX DECKERAJONEO TAYLOR

JOINT LOCKS

1. BA	LANCE DISPLACEMENT TECHNIQUE			
	 Starts from Escort Position Removes hand from Triceps and places it on rear waist of susper Presses hand forward and downward, displacing balance Suspect steps in desired direction 	ct (S)	A A A	F F F
(Friction on	Starts from Escort Position	0		
		S	Α	F
c.	Places hand in the middle of suspect's back and presses forward Moves hand in random manner, forcing steps in desired direction	6	Α	F
-	me to stand in random manner, forcing steps in desired direction	(3)	Α	F
Comments:				
(Random Me	otion at the Shoulder)			
a.	Starts from the Escort Position	A	٨	г
b.	Continually moves suspect's arm in a random manner	(3)	Α	
C.	Suspect is off balance and moves in desired direction	<i>(S)</i>	A A A	F
Comments: _				
2. TRAN	SPORT WRIST LOCK			
	Elbow tucked between arm and body	(3)	۸	_
f.	Forearm elevation	8	Δ	Ł L
	Wrist hyperextension	19	A A	F
	To the ground	45	A	F
Comments: _				

3.	 i. Decentralize the center of gravity. j. Maintain control over subject's arm k. Maintained balance while lowering center for takedown l. To the ground m. Control for handcuffing procedure 	88888	A A A A	F F F F
Comm	ents:			
HAI	<u>NDCUFFING</u>			
4.	 a. Approach is from rear b. Simultaneous Control at application, thumb lock/cuff push c. Position maintained with the flip under technique d. Second cuff applied without loss of control 	S S S S	BARBO	FFFF
Comm	ents:			
5.	e. All slack is removed from cuffed hand f. Decentralized towards the 2.5 position g. Iron wrist lock is applied simultaneously with decentralized pull h. Straight arm applied after proning the target i. Second cuff applied without loss of control	S S S S S	BREEK)	FFFF
Comm	ents:			
6.	 REMOVING HANDCUFFS a. Officer Instructs suspect he is going to be de-cuffed b. Suspect is told to leave uncuffed hand on his hip c. Open handcuff closed immediately and put in weak hand d. Officer steps to rear 45 degrees while holding cuff at arms length e. Second cuff is removed 	S S S S S S	CARRIAN .	#####

Defensive Counter Manuevers

7. GRABBING

- a. Seperation
- b. Verbal Commands
- c. Peeling the hand(s)
 - 1. Outside/In
 - 2. Inside/Out



Comments:____

8. FINGER POKES

a. Seperation

Comments:

- b. Verbal Commands
- c. Peeling the fingers/hands
- d. Second Responding Officer Action



Ground Techniques

9. Scarf Position (Left/Right)

		/)	
a. From the side/cross mount position	S	(A)	F
b. Perform a sit out maneuver	S	TH	F
c. Right leg ends at 10 o'clock position	S	CAD	F
d. Keep hips off of the ground	S	(A)	F
e. Left foot is at 8 o'clock position	S	(13)	F
f. Right arm around subjects neck/head	S	(A)	F
g. Left arm and hand secures subjects arm	S	A	F
h. Pin your chest to subjects chest	S	A	F

Comments:

Mounted Position 10.

- a. Knees slide upb, Feet are used to feel where hipsc. Moving to control positions



Comments:			
() _			
		200	

Grading Scale:

S = Satisfactory (performs w/out prompting)
A = Acceptable (performs with minimal prompting)
F = Failed (needs prompting / repeated instruction, or can not perform task)

Mount Carmel Health System Competency Assessment Safety & Security

Associate Name:	ID Number:	Job Title:	
		56.	
		SECURATE OFFICER	
☐ High Risk ☐ Low Volume	Problem Prone	- Wall and Carlo	
	CARING COMPONENTS:	uipment/Service ☐ Process Change	
emonstrates service excellence beh	CARING COMPONENTS:		
ornoriou ates service excellence ben			
BILITY TO EXPLAIN THE USE OF F	KNOWLEDGE AND SKILL COMPO	NENTS:	
BILITY TO PERFORM BALANCE DI	SDI ACEMENT AT THE LUB		
BILITY TO PERFORM BALANCE DI	SPI ACEMENT ON THE PACK		
DILLIT TO PERFORM BALANCE DI	SDI ACEMENT AT THE CHOIL DED		
DILIT TO PERFORM A TRANSPO	RT WRIST LOCK TO BOTH THE DIC	THE AND LEET OFF	
SILL TO LEIN ONW A STRAIGHT	ARM BAR TO ROTH THE DIGHT AN	ND LEFT SIDE	
SILIT TO USE HANDCUFFS IN TH	E STANDING METHOD	ND LEFT SIDE	
BILLY TO USE HANDCUFFS FROM	A THE KNEELING POSITION		
DILITY TO REMOVE HANDCUFFS:			
BILITY TO UNDERSTAND WHEN T	O PLACE HANDCUFFS ON SUBJEC	T	
PILLIT TO PERFORM SERERATION	V FROM SLIB IECT CDARRING		
SILITY TO PERFORM PEELING OF	THE HAND(S) OF SUBJECT DUBIN	IG A GRAB	
ALL TO LEKLOKIN SEPEKATION	V FROM A FINGED IAD		
SILITY TO PERFORM PEELING OF	FINGER(S)/HAND(S) DURING A FIN	IGER IAR	
WELL TO LEVE OKIN A SCAKE BO	SILION ON SHRIFCT	TOLK OAD	
SILITY TO PERFORM A SIT OUT MA	ANEUVER DURING THE SCAPE		
PILLLE TO PERFORM A MOUNT PO	SITION ON A SUBJECT		
ILLLY TO MAINTAIN CONTROL OF	SUBJECT WHILE IN THE MOUNTE	D POSITION	
THE USE OF	STRAIGHT RATON EDOM THE FIFT	D MITED STATES	
TELL TO LEIN ON THE USE OF	STRAIGHT BATON EDON THE DEV	DV OTALIGE	
TELL TO PERFORM THE USE OF	STRAIGHT RATON LISING THE FOR	DIAMA DE EL LUE CLIC CIO	
LETT TO LETT ON THE USE OF	STRAKSHT BATON HEINIC TUE DAG	CKHAND STRIKE	
LITTED OLOGE THE BATON FRO	MITHE STANDING POSITION		
ILIT TO CLUSE THE RATION FRO	M THE KNEELING POOLTION		
ILLI I TO OPEN AND USE THE RAT	ON FROM THE ODICIO DOCITION		
LITY TO EXPLAIN WHEN TO USE	STRAIGHT BATON AND WHEN NO	T TO USE STRAIGHT BATON	
Er ill VVIIA I O.C. STA	MDS FUR		
LITY TO EXPLAIN WHEN TO USE	O.C.		
LITY TO EXPLAIN WHEN NOT TO	USE O.C.		
LITY TO EXPLAIN WHETHER TO U	JSE O.C. ON A PATIENT OR NOT		
LTY TO EXPLAIN THE DECONTAIN	OF O.C. ON A SUBJECT		
LITY TO EXPLAIN THE DECONTAI	VIINATION PROCEDURES		
LITY TO EXPLAIN THE NOMENCL	TORE OF THE PRO V2 DEVICE		
LITY TO PERFORM THE USE OF F	O V2 DEVICE IN REGARDS TO USI	E OF FORCE CONTINUUM	
LITY TO VERBALLY DE-ESCALATI	E (CIT TRAINING/AGGRESSIVE BEI		
LITY TO APPLY RESTRAINTS	COLUMNING/AGGRESSIVE BEH	HAVIOR TRAINING)	
LITY TO POSITION PATIENT ON T	HE BEDICART		
JTY TO LOOP THE CONNECTING	STRAP AROUND THE BED FRAME		

ABILITY TO PLACE PATIENT INTO POSEY	THE RESTRAINT AND PATIENTS WRIST/ANKLE
ABILITY TO SECURE POSEY VEST STRAD	C TO THE DED ED
THE TAGGET TRAINING SCENARIO	OS ANNITALLY
Able to act appropriately in an emergent of	or sentinel type of event
METUO	
✓ Return Demonstration	D OF COMPETENCY VALIDATION:
Return Demonstration	□ QI Monitors/Audits
□ Observation of Daily Work	☐ QI Monitors/Audits ☐ Peer Review
□ Observation of Daily Work □ Post Test	☐ QI Monitors/Audits ☐ Peer Review ☐ Case Study
Return Demonstration	☐ QI Monitors/Audits ☐ Peer Review
□ Observation of Daily Work □ Post Test	☐ QI Monitors/Audits ☐ Peer Review ☐ Case Study
☐ Observation of Daily Work ☐ Post Test ☐ Mock Event/Simulation	☐ QI Monitors/Audits ☐ Peer Review ☐ Case Study ☑ Discussion Group
☐ Observation of Daily Work ☐ Post Test ☐ Mock Event/Simulation Competency Validated By: (Signature and credential	☐ QI Monitors/Audits ☐ Peer Review ☐ Case Study ☑ Discussion Group
☐ Observation of Daily Work ☐ Post Test ☐ Mock Event/Simulation Competency Validated By: (Signature and credential	☐ QI Monitors/Audits ☐ Peer Review ☐ Case Study ☑ Discussion Group
□ Return Demonstration □ Observation of Daily Work ▼ Post Test ■ Mock Event/Simulation	☐ QI Monitors/Audits ☐ Peer Review ☐ Case Study ☑ Discussion Group

OC Test Mount Carmel Health System Safety and Security

1.) What does OC stand for? A. **Orange Crush** B. Ocean Crust Oleoresin Capsicum (C) What is the average expiration date on an OC canister? 2.) 1-2 years 3-4 years 4-5 years C. How often should you check your OC spray for adequate spray strength? 3.) 30 days A. 60 days 90 days 4.) How long of a burst should you use on a threat? A B. 1-2 seconds 2-4 seconds C. Empty the entire can What is Oleoresin Capsicum commonly known as? 5.) Mace B Pepper Spray C. Gas When deploying OC, what area of the body should you deploy the OC 6.) towards? A. Arms Chest Face and eyes After using OC on a subject, what should you immediately do with the 7.) subject? Leave lying on the ground. B. Remove from contaminated area C. Spray again

8.)	What is the second step in the decontamination process? A. Spray them again	
	- I	
	and the stop crying like a baby	
	C. Offer verbal rapport to the subject	
9.)	What is the third step of the decontamination process?	
	A Expose subject to fresh air	
	C. Stand there and record them with your cellphone	
10.)	What is the best way to flush the eyes?	
	A. Using milk	
	B. Rubbing eyes continually	
	© Water	
11.)	What type of agent is OC?	
,	A. Glue	
	B. Cleaning Fluid	
	© Inflammatory	
12.)	What is the main ingredient of OC?	
	A. Water	
	(B) Cayenne Pepper	
	C. Powder	
13.)	Does CMS (Center for Medicaid/Medicare System) guidelines allow for	
	OC to be used on a PATIENT?	
	A. Yes	
	(\mathbf{B}) $\mathbf{N_0}$	
	C. Only if they deserve it.	
		ž
	· ·	



Name:

ProV2 User Course Written Test

- 1) At what Activation Level would the Pro V2 start recording audio and photo/video?
 - a. Upon power-up
 - **b** Level-1
 - c. Level-2
 - d. Level-3
- 2) At what Activation Level would the Laser Spotter come on?
 - a. Upon power-up
 - b Level-1
 - c. Level-2
 - d. Level-3
- 3) At what Activation Level would the Alerting Siren come on?
 - a. Upon power-up
 - b. Level-1
 - Level-2
 - d. Level-3
- 4) At what Activation Level would O.C. Pepper Spray be deployed?
 - a. Upon power-up
 - b. Level-1
 - c. Level-2
 - (d) Level-3



- 5) What is the arrow pointing to in the above photo above?
 - a. Strobe Light
 - b. Alerting Siren
 - Digital imager
 - d. Spray port





- What is the arrow pointing to in the photo above?
 - On-Off switch
 - Speaker
 - Battery release
 - d. Illuminated sight



- What is the arrow pointing to in the photo above? 7)
 - Ambidextrous Call-button
 - Ambidextrous Trigger
 - c. **USB** port
 - d. **Arming Switch**
- The left-side LED indicator on the Pro V2 indicates:
 - An failed Bluetooth connection
 - Spray canister has been used
 - c. Fault error
 - d. Battery needs charging
- How long does it take for the Pro V2 battery to charge completely?
 - a. 30 minutes
 - b. 60 minutes
 - © 90 minutes
 - d. 120 minutes
- 10) What is the range of the Bluetooth capability of the Pro V2
 - a. 5 feet
 - b. 10 feet
 - 15 feet
 - 20 feet
- 11) What is the size of the internal memory card for audio/photo/video files
 - 1 GB
 - 2 GB
 - 4 GB
 - 8 GB



12) Where is the Serial Number located on the Pro V2?
Inside the battery/canister compartment
b. At the base of the battery
c. On the right-side of the ProV2
d. On the left-side of the ProV2

13) What color is the label on the Practice (Water) Spray canister?
White with blue text
b. Red with yellow text

c. Black with white text

- d. Blue with green text14) Can the O.C. Pepper Spray be activated without the ProV2 being turned on?
 - a. Yes
- 15) On the battery gauge LED lights, what does 2 lights indicate?

 a. Less than 25% charge
 - 6 50% charged
 - c. 75% charged
 - d. 100% charged
- 16) Does the Pro V2, by itself without Bluetooth connectivity, have the ability to dial the Command Center?
 - a Yes b No
- 17) How long is the pre-recorded message?
 - a. 5 seconds
 - b. 10 seconds
 - 15 seconds
 - d. 20 seconds
- 18) How would a Pro V2 user activate Level-2?
 - a. Power-on the Pro V2
 - b. Power-on the Pro V2 and turn the Arming Switch on
 - Power-on the Pro V2, turn the Arming Switch on, and a ½-pull of the trigger
 - d. Power-on the Pro V2, turn the Arming Switch on, and a full-pull of the trigger
- 19) At what Activation Level will the Pro V2 automatically call the Command Center?
 - a. Upon power-up
 - b. Level-1
 - Level-2
 - d. Level-3
- 20) How soon after O.C. Pepper Spray is used, should first-aid be rendered?
 - a. When help arrives
 - b. Anytime, but not more than 1 hour
 - c. Immediately
 - d) As soon as practical

HANDCUFFING TEST

NAME: DATE: 8/11/15

1. WHEN TO USE HANDCUFFS?

A.ON A VIOLENT PATIENT

B. AFTER COMMITTING A FELONY

C. ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, AND PATIENTS.

D. ALL THE ABOVE BOTH B AND C.

2. CMS ALLOW'S YOU TO HANDCUFF PATIENTS?

TRUE OR FALSE

3. WHAT ACTIONS NEEDS TO OCCUR AFTER THE USE OF HANDCUFFS?

A. INCIDENT REPORT AND PEERS

B. LOCAL POLICE, SIR, AND PEERS

C LOCAL POLICE, SUPERVISOR, INCIDENT REPORT, AND PEERS.

4. SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?

TRUE OR FALSE

Mount Carmel Human Resources Non-Management Performance Appraisal Form

First Name	Last Name		Associate ID #:	· Offili
			17.	
Department Safety and Samurity	Dept ID # Job t	itle		
Safety and Security	80000	Secur	ity Officer	
Review Due Date Review Per 1944 1944	iod (start & end dates) 2012 to 6/30/2013		RATING SCALE: 3 = consistently exceeds a 2.5 = occanionally exceeds a	expectations expectations
91116 90 %	104	-	2 = meets expectations 1.5 = occasionally meets expecta 1 = does not meet expecta	pectations
instructions: Associate completes the self- evaluation is important to the evaluation should not hold up the evaluation if the A will then complete the manager-rating and s The completed evaluation form should be self- ducation documents are to be kept in the d	process, and highly en issociate does not com chedule a performance r	review conference	ver, the manager lation. The manager with Associate.	
	IIDING BEHAVI			
OUDING BEHAVIORS				
the Gulding Behaviors flow directly from Trin connect with the Mission. The Guiding Behav and Core Values.	ity Health and Mount Cal lors set the expectation f	rmel's Mission and for how we work to	help us to focus on and gether in living our Mission	
We support each other in serving our p	atlents and communiti	ies		=
We communicate openly, honestly, res We are fully present We are all accountable We trust and assume goodness in intel We are continuous learners	pectfully and directly			
Supporting Examples (Associate C	Ommonto) Com		- Ya	
ennis is very open and honest and strives to		orting Example	s (Manager Comments	Character Count (limit 760 characters
olf Rating #N/A	Mgr Ra	ting 3	Consistently Exceeds	
SKILL AND KN	IOWLEDGE CO	WRETENO		
w does the Associate demonstrate all esser- ponsibility is met, a score of 2 is applicable, ore, you may check Not Applicable (N/A). (N	ual job responsibilities fo	om the Job Descri	ption? If an essential job	
Essential Job Responsibi	lity / Work-Related G	oal: (Service Ex	cellencel	1
RVICE EXCELLENCE: Exhibits each of e modeling excellence for all to see. For nmunication, creates a professional env	f the Mount Carmel Se	ervice Excellence	Behavior Standards,	
Supporting Examples (Associate Co				1
	Зарро	rung Examples	(Manager Comments)	Character Count (limit 760 characters)
Rating #N/A				

Mount Carmel Human Resources Non-Management Performance Appraisal Form

REQUIREMENTS		/
	V.	N.
. Demonstrates training with new equipment.	Yes o	NO
 Demonstrates training/education regarding new or revised documentation forms, policies/procedures, and causes. 	quality	
. Demonstrates knowledge and integration of bloodborne pathogen regulations/TB into practice (Complies wisting).	ith TB	
. Demonstrates knowledge and integration of 7 safety practices (medical equipment, utilities, emergency reparedness, life safety, hazardous material, safety including back safety), and security management, as ocumented in HealthStream.	Yes	
. Demonstrates knowledge and skill in caring for population specific patients (Complete and attach the Population Competency Evaluation Form and keep with education records in department. Enter competency Into lealthStream).	ation o	
Demonstrates knowledge of other regulatory practices as appropriate to area/department practice. Has conquired HIPAA education.	mpleted	
Demonstrates knowledge and accurate documentation of time worked in the automated timekeeping system.		
Other job specific requirements. Il Associates are expected to keep these requirements current. Fallure to do so may result in	Yes Yes n Corrective Action	
Other job specific requirements. Il Associates are expected to keep these requirements current. Fallure to do so may result in Manager's Comments ennis needs to continue to learn the healthcare side of security has has made great strides in the act his sense of ergency. It is very much appreciated that Dennis is always available in assisting with ucessfully completed his 90 day evaluation.	Yes Yes The Corrective Action distributed in the reads of the partment reads of the reads of t	
Other job specific requirements. Il Associates are expected to keep these requirements current. Fallure to do so may result in Manager's Comments ennis needs to continue to learn the healthcare side of security has has made great strides in the act his sense of ergency. It is very much appreciated that Dennis is always available in assisting with ucessfully completed his 90 day evaluation. 271344 Manager ID	Yes Yes n Corrective Action	to focus on monitoring his vo with filling open shifts. Denni
Other job specific requirements. All Associates are expected to keep these requirements current. Fallure to do so may result in Manager's Comments Tennis needs to continue to learn the healthcare side of security has has made great strides in the act and his sense of ergency. It is very much appreciated that Dennis is always available in assisting with uccessfully completed his 90 day evaluation. 271344 Manager ID Associate's Comments	Yes Yes Torrective Action In the needs of the department needs Date	to focus on monitoring his vo with filling open shifts. Denni 8/17/2015
Other job specific requirements. Il Associates are expected to keep these requirements current. Fallure to do so may result in Manager's Comments ennis needs to continue to learn the healthcare side of security has has made great strides in the act had his sense of ergency. It is very much appreciated that Dennis is always available in assisting with ucessfully completed his 90 day evaluation. 271344 Manager ID Associate's Comments	Yes Yes Torrective Action In the needs of the department needs Date	to focus on monitoring his vo with filling open shifts. Denni
pennis needs to continue to learn the healthcare side of security has has made great strides in the act and his sense of ergency. It is very much appreciated that Dennis is always available in assisting with uccessfully completed his 90 day evaluation. 271344 Manager ID Associate's Comments 4040316 Associate's Signature 4040316 Associate ID	Yes Yes Torrective Action Idjustment. He needs In department needs Date	to focus on monitoring his vo with filling open shifts. Denni 8/17/2015
Associate's Comments In an ager's Comments In a service of ergency. It is very much appreciated that Dennis is always available in assisting with uncessfully completed his 90 day evaluation. In an ager's Signature In a service of ergency of ergency. It is very much appreciated that Dennis is always available in assisting with uncessfully completed his 90 day evaluation. In an ager's Signature In a service of ergency of ergency of ergency. It is very much appreciated that Dennis is always available in assisting with uncessfully completed his 90 day evaluation. In a service of ergency of ergen	Yes Yes Torrective Action Idjustment. He needs In department needs Date	to focus on monitoring his vo with filling open shifts. Denni 8/17/2015

Please click link below to be directed to the Annual Mandatory forms.

Mount Carmel Human Resources Non-Management Performance Appraisal Form

First Name Last Name Associate ID #:	0
	40 DAY
INDIVIDUAL GOALS: (for PAST 12 months)	Rating Scale:
Individual Goals support Department, Business Unit and System Goals Please DOCUMENT and provide RATINGS for your Individual Goals for the past year in the space provided below.	3 = achieved goal 2 = some progress towards goal 1 ~ unable to make progress towards goal (.5 scores are acceptable)
Individual Goal	Rating
I would like to continue learning the policies and procedures Mt. Carmel has in place.	Self Manager
Individual Goal	
I want to continue learning from the other officers on how to handle certain situations as well as making sure I get all the vital information in key situations.	
ndividual Goal	
Continue to learn the layout of the hospital in order for me to get to an area in case of emergent situations.	
ndividual Goal	
ake all required training courses.	
ndividual Goal	
	#DIV/01

Mount Carmel Health System Competency-Based Orientation and Introductory Period Evaluation <u>Safety & Security</u>

Associate Name:	LID AL	76	
715500late Name.	ID Number:	Job Title: Security Officer	X_New HireTransferAdditional job code

Core Competencies	n	/lethod	d of	Comp	etenc	y Va	lidati	ion	7	
Based upon job description, performance	4	(ma	y use	more t	han or	e met	hod)			
standards, and regulatory/accrediting standards.	Return	Observation of daily work	Post-test	Mock Event/ Simulation	QI Monitors/ Audits	Peer Review	Case Study	Discussion Group	Date	Competency Assessed by: (signature and
Effective in patrol techniques, communications use of cameras-monitoring/recording, escorts, door openings, assist calls. Knowledge of location of Security sensitive areas.	X	ý.				×			is-11%	Credentials)
Enforces policies & procedures	14	X				×			Ir 17-18	201
Completes accurate incident report documentation/investigation and follow-ups as appropriate	1	X				X			hilis	0.N-
Completes accurate activity logs	1	V				X		1	3110	111
Ability to apply clinical restraints and assistance	X	1		V		K			GVIII	In N
Ability to work independently	X	V				5-			6 151	W.
Completes timely fire drills and critiques	1			X		X			4.17	Hist.
Understands ILSM protocols	X					^			6.11-1	1 10.
Ability to turn off Med Gas per policy	V					×			6-11	DAV.
Workplace Violence policy knowledge	-1				-	^	V	X.	6/1	R DA
Ability to process visitors after-hours or as required	3	1		1		X	×	X	6-11-	O.N.
Ability to lock and unlock facility (includes Lockdown plan)	Y	V			7	X			6-17	() A/
Management of Aggressive Behavior and de- escalation techniques	1	v		X					0-11-1	1 11-10
Understands Safe Medical Device Act responsibilities	7	r		/-	-			X	6/7	I DIN;
Helicopter operations- Safety duties	1	1			-	~		X	617	O.N.
Discernment of sentinel events-notification protocols	3	x				X		1	6171	1 n. N.
Knowledge of Emergency Codes and security	X								6 1%	15 D.N.
response (i.e. Code Red, Code Adam, Code Orange, etc).	×	X	Ш	X		×			,	- 0.1
Follows the department uniform and dress code	X		-	-	-	-	-	-	-17-11	1.W.
Disseminates pertinent info (pass on book, memo, reports, BOLO)	V	V				V		-	017-1	F D.W.
Understands Forensic responsibilities	1	/-	-					6	2/11/	D. d.
Understands role and actions- VIP/Media event	2	-	-	y		X		1	17-1	Drav.
Enforces Tobacco –Free policy	X		-			_		1	2777	5 0.2
Officer can articulate use of force and demonstrate	X	x				×		1	677-	15 10 N
take downs" and the use of defensive weapons: ASP Pepper Spray and law enforcement restraints: (i.e. nandcuffs)	10	60		5C1	had	le	1		-	pal.
Officer demonstrates the ability to co-operate with		11				1				- 10
other agencies, departments, and staff as appropriate	X	y			_ 6	X		1	17.5	- 0.1
Officer has a basic understanding of the National	X						,	x 6	Xgrir	0.0
Officer demonstrates proper telephone etiquette.	V	V				2	-			100

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certificate of Recognition



Awarded to

Ofc.

Ofc. Dewitt is being recognized for his outstanding service during the 2015 Westerville Fourth of July Celebration activities at Saint Ann's Hospital. Ofc. Dewitt helped assure the campus safety and security was maintained providing a safe and successful experience for all. A job well done!

Presented by Mount Carmel St. Ann's Safety & Security **July 2015**

Andrew M. Evans, Manager Safety & Security
Mount Carmel Health System



Michael L. Angeline, Director Safety & Security Mount Carmel Health System

Progressive Counseling Chronologicals Autendance/Pit

Progressive Counseling



Mount Carmel Corrective Action

Mount Carmel and all of us individually are held accountable for our behaviors and actions. Guiding Behaviors are how we work together by: Supporting each other in servicing our patients and communities, Communicating openly, honestly, respectfully, and directly, Being fully present, Being accountable, Trusting and assuming good intentions, and Being continuous learners. In addition to supporting our Mission and Values, the Standards of Conduct also assist us in ensuring that our actions and behaviors are consistent with the legal, ethical, and professional obligations that apply to our health system ministry. Actions and behaviors that are inconsistent with the Standards of Conduct can significantly harm relationships with patients, communities, business partners, and others we rely upon to assist us in delivery of healthcare services.

ID#: Date: <u>03/27/17</u>
Department: Safety & Security
Butter, at Becurity
Current Issue
s Discussions / Corrective Actions
Action
Expectation
traint/deescaluation training on 03/24/17. Officer will maintain us during stressful situations and handle those situations appropriately and within
Yes (see attached if applicable)
quences of Failure to Improve
result in further Corrective Action up to and including
Associate Response
ession

^{*}This is to acknowledge that this Corrective Action Form has been reviewed with me. My signature does not necessarily mean that I agree.

Associate Signal	Date: 3/28/17
'Mount Carmel's appeal process may be utilized under	er certain circumstances with in 7.1
	ortain electristances within / days of this action.
/ 01	ther Signatures
Supervisor / Manager:	Put 3/2 1/2
	Date: 3/2 4/17
Director (if appropriate):	
Director (if appropriate):	Date:
Director (if appropriate): Human Resources:	Date:

~





A MEMBER OF TRINITY HEALTH

POSITION DESCRIPTION

POSITION TITLE: Armed Safety & Security Officer	DEPARTMENT: Safety & Security			
JOB CODE: M4850	REPORTS TO: Armed Supervisor of Safety & Security			
DATE ISSUED: 2/1/2017	SUPERVISES: N/A			
DATE REVISED: 2/1/2017	MATRIX REPORTING RELATIONSHIPS: N/A			

Mount Carmel Mission Statement and Guiding Behaviors

Mission: We serve together in Trinity Health, in the spirit of the Gospel, to heal body, mind and spirit, to improve the health of our communities and to steward the resources entrusted to us.

The Guiding Behaviors set the expectation for how we work together in living our Mission and Core Values. They are:

- We support each other in serving our patients and communities.
- We communicate openly, honestly, respectfully and directly.
- We are fully present.
- We are all accountable.
- We trust and assume goodness in intentions.
- We are continuous learners.

Job Summary

- In accordance with the Mission and Guiding Behaviors; the Safety & Security Officer is to provide protective services to all persons and property across the Mount Carmel Health System.
- Ensure a safe environment for all associates, physicians, patients, and visitors in compliance with various regulatory standards to include, JC, OSHA, ect.
- Provide a quality service consistant with the values of Mount Carmel Health System for our associates, physicians, patients and visitors.

Job Qualifications (Knowledge, Skills, and Abilities)

- · Education: High school graduate or GED required.
- Licensure / Certification: Receipt of Ohio Peace Officer Training Academy certificate of completion prior to being assigned a shift as an Armed Safety and Security Officer for Mount Carmel
- Experience: Three to five years experience in security, law enforcement or military disciplines or equivalent training which might include criminal justice, homeland security, or law enforcement academy is preferred.
- Effective Communication Skills
- Valid driver's license with good driving record maintained
- Customer service oriented able to function in high stress situations with personal restraint, integrity, and control.
- Basic computer skills that commensurate with the job.
- Ability to communicate effectively and appropriately with diverse populations.
- Ability to write, read, and communicate effectively in the English language.

Essential Responsibilities

- Exhibits each of the Mount Carmel Service Excellence Behavior Standards holding self and
 others accountable and role modeling excellence for all to see. For example: demonstrates
 friendliness and courtesy, effective communication creates a professional environment and
 provides first class service.
- Meets population specific and all other competencies according to department requirements.
- Promotes a Culture of Safety by adhering to policy, procedures and plans that are in place to prevent workplace injury, violence or adverse outcome to associates and patients.
- Relationship-based Care: Creates a caring and healing environment that keeps the patient
 and family at the center of care throughout their experience at Mount Carmel following the
 principles of our interdisciplinary care delivery system.
- (For patient care providers) Provides nursing care, ensures an environment of patient safety, promotes evidence-based practice and quality initiatives and exhibits professionalism in nursing practice within the model of the ANCC Magnet Recognition Program®.
- Maintain a safe and secure environment through job knowledge, skills and engagement.
 Intervene as appropriate in any safety & security observed issues.
- Enforces all governmental regulations, standards, policies associated with Mount Carmel Health System and Safety & Security policies, (i.e. smoking policy).
- Communicate safety and security discrepancies to the appropriate parties for mitigation.
- Ensure department goals & objectives are reached/maintained during assigned shift(s).
- Responsible for assuring that the Safety, Life Safety, security, and Emergency Management, and the JC standards are followed as it relates to the position.
- Responsible for completing and documenting assigned tasks, such as fire drill and safety tours on time.
- Ensure accurate documentation during assigned shift (i.e. security reports, safety incidents, activity logs).
- Ensure consistent delivery of professional, friendly, and courteous service.
- Comply with the organization and department dress code.
- Conduct initial and follow-up investigations, if warranted or directed, ensuring documentation
 of investigative steps.
- Proactive patrolling of the campus by foot, segway, or vehicle as assigned.
- Respond to all "STAT" calls expeditiously and safely.

- Be familiar with all hospital emergency codes and appropriate responses
- Responsible for completing assigned tasks/duties on time (i.e. fire drills and safety tours).
- Provide on-the-spot in-service training to staff where knowledge related discrepancies are noted.
- Demonstrate sound judgment, decision skills, and prioritizing responses to emergency situations.
- Ability to perform duties in an independent manner.
- Custodial responsibility for patient valuables and maintaining lost and found by following the proper protocols.

Other Job Responsibilities

- Inspects panic alarms, AED's, and call boxes as assigned.
- Provides escorts for associates, patients, visitors and students (where located) in the hospital areas and areas contiguous to the hospital areas.
- Issue parking citations and enforce the parking policy.
- Provide helipad duties during helicopter landings and departures
- · Assist in the collection of ICES data as directed
- Monitoring of cameras and access control responsibilities as assigned
- Citizen arrest duties only in accordance with applicable laws and statutes
- Assist motorist with vehicle assistance as appropriate (i.e. jump start)
- Traffic enforcement keeping emergency entrances and approaches clear of non-emergency vehicle traffic
- Respond to safety incidents/visitor injuries as appropriate, ensuring medical is summoned as appropriate.
- During emergent events direct media to the proper area/contact
- Perform other assigned duties as directed by Management.
- Use proper radio procedures and monitors on-going activity
- Be familiar with geographic location and facility layout
- Immediately report and respond appropriately to Salient events, communicating the event to your supervisor.
- Provide for security per policy for VIPs
- Chemical spill clean up as assigned.
- Responsible for compliance with Organizational Integrity through raising questions and promptly reporting actual or potential wrongdoing.
- All other duties as assigned.

EQUIPMENT: This section requires a response of Yes or No from drop down box.

Radiation: No Electrical: Yes Mechanical: No Mechanical: No

KEY TO FREQUENCY CODES for Physical Requirement Sections: This section requires a numerical response from drop

down box.

1 = Up to 33% of the time 3 = Over 66% of the time 2 = From 33% - 66% of the time 4 = Not Applicable

PHYSICAL REQUIREMENTS

Sitting: 3 Balancing: 3

Standing:3Reaching Overhead:1Walking:3Grasping:3Ability to be Mobile:3Keyboarding :3Bending:2Pinching:3Kneeling/Crawling:1Twisting:2Stooping:1Climbing:1

Turning/Pivoting: 2 Pulling: 2

Working Above Shoulder Level: 4

Pushing: 2 Maximum Weight: Equal to or greater than 35 lbs
Lifting: 3 Maximum Weight: Equal to or greater than 35 lbs

POTENTIAL EXPOSURE: This section requires a response of Yes or No from drop down box.

Blood / Body Fluid Contact: Yes Humidity: No Temperature: No Air-borne Pathogen: Yes Chemicals (Fumes / Burns): No Dust: No

Radiation: No Vibrations: No Noise: No

Personal Protective Equipment: This section requires a response of Yes or No from drop down box.

Gloves: Yes Shoes: No Goggles: Yes Aprons: No Masks: Yes Head Covering: No Gowns: Yes

Emotional / Psychological Factors: This section requires a response of Yes or No from drop down box.

Trauma: Yes Grief: Yes Death: Yes Public Contact; Yes Deadlines; Yes

This job description is intended to describe the general content of and requirements for the performance of this job. It is not to be considered an exhaustive statement of duties, responsibilities, or requirements.

Reviewed and Approved by: <u>Drew Evans</u>

Title: Manager System Safety and Security

Date: 3/15/2017
Compensation Rep: Jim Kousaie

Title: Sr. Compensation Consultant

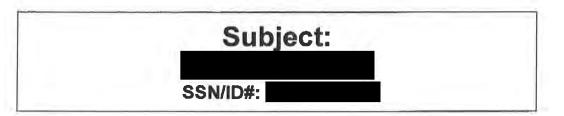
Date: 3/15/2017

Service	Description	Status					
Subject Data							
Sex Offenders	Subject Name:	State: National	•				
Sex Offenders	Subject Name:	Subject Name: State: Illinois					
Sex Offenders	Subject Name: State: Tennessee		•				
County Criminal	Felony & Misd Knox	•					
County Criminal	Felony & Misd Lake						
Federal Criminal	Felony & Misd Knox	0					
Federal Criminal	Felony & Misd Lake	0					
Education		X					
Education	Hospital Corp School	Hospital Corp School					
National Criminal Database	Subject Name:						
OIG & GSA Excluded Parties		OIG & GSA Excluded Parties					
SanctionsBase		Certiphi SanctionsBase					

⊠ = Review \triangle = Pending **⚠** = Pending Possible Key: = Pass

NOTICE: Please be advised that Certiphi Screening's "Pass/Review" ratings are exclusively based on objective standards of interpreting background information legally obtained under The Fair Credit Reporting Act (15 U.S.C. section 1681). Such "Pass/Review" assessments should not be inferred nor understood as legally binding indications, recommendations or consumer rating assessments by Certiphi Screening. Any and all interpretive procedures utilized in characterizing what constitutes all "Pass/Review" ratings are established individually by each client of Certiphi Screening and are merely included in said report for that client's specific requirements. Certiphi Screening does not make any employment or contracting decisions for its clients based on background information in accordance with section 1681m of the FCRA.

Due Diligence Investigation Service Entry/Support Positions - Standard Level



Mount Carmel Health System - Human Client:

Resources

Client Code: 200-200

Requester: Laura Mangia / 72504.655500 Report #: 2410000

Request Date: 10/04/2012

Delivery Date: 10/17/2012

Personal & Confidential: This report is to only be used in strict adherence to the terms and conditions set forth in our Agreement. © Certiphi Screening, Inc., 2012. All rights reserved. Certiphi Screening, Inc. is a subsidiary company of Vertical Screen, Inc. Direct any questions to Certiphi Screening, Inc., P.O. Box 541, Southampton, PA 18966 USA. Phone: (800) 803-7860; Fax: (888) 260-1380.

Subject Data **Pass** Name: Date of Birth: 01/25/1982 Social Security /ID#: SSN/ID# Validation State Issued: Date Issued: 01/01/1987-12/31/1989 DOB Scan: Clear Death Index: Clear Valid SSN/ID#: Yes **Current Address:** Knoxville, TN 37923 Knox County United States Other Addresses: WAUKEGAN, IL 60087 Lake County **United States** Comments: None

Sex Offender Registry

Pass

Source Searched:

National Sex Offender Registry

Date of Search: Subject Covered: 10/05/2012

Date of Birth:

01/25/1982

Search Results:

No Records Found

Comments:

None

Sex Offender Registry

Pass

Source Searched:

Illinois State Police Statewide Sex Offender Registry

Date of Search:

10/05/2012

Subject Covered: Date of Birth:

01/25/1982

Search Results:

No Records Found

Comments:

Sex Offender Registry

Pass

Source Searched:

Tennessee Sexual Offender Registry

Date of Search: Subject Covered: 10/09/2012

Date of Birth:

01/25/1982

Search Results:

No Records Found

Comments:

None

County Criminal

Pass

Source Searched: **Records Covered:** **Knox County Criminal Court** Felony & Misdemeanor

Date of Search:

10/08/2012

Subject Covered: Search Results:

No records found

Comments:

None

County Criminal

Pass

Source Searched: **Records Covered:** Lake County Circuit Court Felony & Misdemeanor

Date of Search:

10/04/2012

Subject Covered: Search Results:

No records found

Comments:

None

Federal Criminal

Pass

Source Searched: Records Covered: **USDC** - Eastern District of TN

Date of Search:

Felony & Misdemeanor. 10/04/2012

Subject Covered:

Search Results: Comments:

No records found

None

Federal Criminal

Pass

Source Searched: **Records Covered:** USDC - Northern District of IL

Date of Search:

Felony & Misdemeanor 10/04/2012

Subject Covered: Search Results:

No records found

Comments:

None

Education History

Review

School:

Location:

not available

Postal Code:37932

Years Attended:

Years Reported by Subject:

00/00/0000 - 00/00/0000 not available

Degree Reported by Subject:

HIGH SCHOOL

DegreeScan:

Clear

Credit Hours Obtained:

not available not available

Major:

None reported

Major Reported by Subject: Comments:

We have received no response to our request for additional information. Please contact us with the requested

information if you would like us to continue our attempts to

complete this verification.

Research History

Date

Phone/Source **Events**

Thurs, 10/4 10:31AM

Number was not provided - looking for new number Unable to locate new number □ additional review

Thurs, 10/4 10:46AM () -

required

Thurs, 10/4 4:07PM ()-

Client/applicant contacted-awaiting reply.

Sat, 10/6

Our office is closed today - additional attempts will be

made the following business day.

Sun, 10/7

Our office is closed today - additional attempts will be

made the following business day.

Thurs, 10/11 9:39AM () -

Unable to complete verification with institution.

Applicant Contact History

Date Phone/Source **Events**

Fri, 10/5 1:05PM Sent email to candidate Mon, 10/8 8:12AM Sent email to candidate Tues, 10/9 10:12AM Sent email to candidate Wed, 10/10 9:10AM Sent email to candidate Fri, 10/12 8:37AM Advised candidate to provide documentation

Mon, 10/15 8:07AM Advised candidate to provide documentation Tues, 10/16 3:30PM Advised candidate to provide documentation Wed, 10/17 7:48AM

Candidate did not respond

Education History

Review

School: Hospital Corp School Location: , Postal Code:

Years Attended: not available

Years Reported by Subject: 00/00/0000 - 00/00/0000

Degree: not available Degree Reported by Subject: No Degree

DegreeScan: Clear

Credit Hours Obtained: not available not available

Major Reported by Subject: None reported Comments: We have received no response to our request for additional

information. Please contact us with the requested

information if you would like us to continue our attempts to

complete this verification.

Research History

Date Phone/Source **Events**

Thurs, 10/4 10:31AM Number was not provided - looking for new number Unable to locate new number

additional review Thurs, 10/4 12:17PM () -

required

Thurs, 10/4 4:19PM () -Client/applicant contacted-awaiting reply. Our office is closed today - additional attempts will be

Sat, 10/6 made the following business day.

Our office is closed today - additional attempts will be

Sun, 10/7 made the following business day.

Thurs, 10/11 9:41AM () -Unable to complete verification with institution.

Applicant Contact History

Date Phone/Source

Sent email to candidate Fri. 10/5 1:09PM Mon. 10/8 8:13AM Sent email to candidate Tues, 10/9 10:12AM Sent email to candidate Wed, 10/10 9:11AM Sent email to candidate

Fri, 10/12 8:38AM Advised candidate to provide documentation Mon, 10/15 8:07AM Advised candidate to provide documentation Tues, 10/16 3:32PM Advised candidate to provide documentation

Wed, 10/17 7:48AM Candidate did not respond National Criminal Database

Pass

Source Searched: Date of Search:

National Criminal Database

Subject Covered: Search Results:

No records found

10/04/2012

Comments:

None

OIG & GSA Excluded Parties

Pass

Source Searched:

OIG & GSA Excluded Parties

Date of Search:

10/04/2012

Subject Covered: Search Results:

No records found

Comments:

None

Note: This search covers the HHS Office of Inspector General's (OIG) List of Excluded Individuals/Entities (LEIE), and the General Service Administration (GSA) - Excluded Parties List (EPLS). These lists include individuals and entities excluded from federally-funded health care programs, and parties debarred, suspended, proposed for debarment, or declared ineligible by agencies or by the General Accounting Office.

Certiphi SanctionsBase ™

Pass

Source Searched:

Certiphi SanctionsBase ™

Date of Search:

10/04/2012

Subject Covered:

Search Results:

No records found

Comments:

None

Note: The Certiphi SanctionsBase is a proprietary database of sanctions, disciplinary and administrative actions taken by various federal and state healthcare regulatory authorities. The database currently contains information from the FDA, NIH, GSA, OFAC as well as hundreds of other federal and state-level licensing and regulatory bodies. Please advise if you would like more detailed information on the exact contents of Certiphi's SanctionsBase.

> **End of Report** Copy of Credit Report Attached

2017-18 Staff Annual Performance Review

MCHS_Phlebotomist_M2301

Manager: Stahl, Shannon R (224219) Evaluated By: Stahl, Shannon R (224219) Organization: Core Lab (Stahl, Shannon R (224219))

Location: MCHS - Mount Carmel West

07/01/2017 - 06/30/2018

0	/e	ral	I
\vee	\sim	ıuı	

Manager Overall Evaluation

Calculated Rating: 3.13

Rating:

Fully Met

Comment:

Acknowledgement

Manager

Stahl, Shannon R (224219)

Date:

08/30/2018

Status:

Acknowledge Review with Comments

Comment:

Entered by:

Employee

Entered by:

(On Leave)

Date:

08/30/2018

Status:

Acknowledge Review without Comments

Comment:

Goals

Blood culture contamination rate: goals is <3%

Individualy graded per month as follows:

Exceeds: <3%

Partially meets: >= 3% Does not meet: >4 %

Due Date:

06/30/2018

Status:

Completed

Completion Date:

06/30/2018

Category:

1. People Centered Care, 3. Operational Excellence, 2. Engaged Colleagues

Weight:

33

Manager Evaluation

Employee Evaluation

Rating:

Exceeds

Rating:

Fully Meets

Comment:

Team goal met.

Comment:

Individual goal met: 1 contamination total!

Additional Manager Evaluation

Sign out board: All shifts will write their number and assignment on the board on 2T daily. Switching to the phone system and away from the pagers, specimen processing must be able to know

and locate phlebotomists with STAT collection requests.

Due Date:	06/30/2018	Status:	Completion	Date:
Category:	6. Effective Stew	vardship, 3. Operational Excel	lence, 2. Engag	ed Colleagues
Weight:	33			
Manager Fr	and and the second		Faralaura F	and and an
Manager Ev Rating:	Fully Meets		Employee Ev	Fully Meets
Comment:	1 dily Mooto		Comment:	rully Meets
	fanager Evaluation	n	Comment.	
	TAT collections 5 minute respo		ne of collect.	STATs should be collected ASAP. Goal
Due Date:	06/30/2018	Status: Completed	Completion	Date: 06/30/2018
Category:	1. People Center	red Care, 3. Operational Excel	lence, 2. Enga	ged Colleagues
Weight:	34			
Manager Ev	valuation		Employee Ev	valuation
	Fully Meets		Rating:	Fully Meets
Comment:	•		Comment:	,
Additional M	lanager Evaluatior	n		
Section	Summary			
/lanager Ev	aluation		Employee E	Evaluation
tating:	Fully Mee	ets	Rating:	Fully Meets
Core Valu	ies			
Reverence				
We honor th	e sacredness and	dignity of every person.		
I respect evI use prefetI smile, ack	rred names, introd nowledge others,	nd courtesy luce myself, my role, and what open doors, make eye contac essions and body language.	_	se and thank you.
Manager Eva	aluation		Employee Ev	aluation
Rating:	Fully Me	et	Rating:	Fully Met

Commitment to Those Who are Poor

We stand with and serve those who are poor, especially those most vulnerable.

- I reach out to help those in need.
- I escort patients/family to their location.

Manager Eva	luation	Employee Eva	luation	
Rating:	Exceeded	Rating:	Fully Met	
ustice				
We foster righ	nt relationships to promote the co	ommon good, including sustaina	ability of Earth.	
• I build and n	y moment matter. naintain healthy and trusting rela ng others because of difference:	•		
• I listen and a	avoid interrupting and multitaskir	ng.		
Manager Eva	luation	Employee Eva	uation	
Rating:	Fully Met	Rating:	Fully Met	
tewardship				
We honor our	heritage and hold ourselves ac	countable for the human, financ	al and natural resources ent	rusted to our ca
· I support oth	ery day with an owner's mind an lers in fulfilling our Mission. problem and seek to find a resol			
I support othI own every I practice sel	ers in fulfilling our Mission. problem and seek to find a resol lf-care and invest in my own resi	lution. ilience.	uation	
I support othI own every	ers in fulfilling our Mission. problem and seek to find a resol lf-care and invest in my own resi	lution.	uation Fully Met	
I support othI own everyI practice selManager Eval	ers in fulfilling our Mission. problem and seek to find a resol lf-care and invest in my own resi uation	lution. ilience. Employee Eva		
• I support oth • I own every • I practice sel Manager Eval Rating:	ers in fulfilling our Mission. problem and seek to find a resol lf-care and invest in my own resi uation	lution. ilience. Employee Eva		
I support oth I own every I practice sel Manager Eval Rating: Itegrity We are faithfu I am a cham	problem and seek to find a resol If-care and invest in my own resi Intuition Fully Met I to who we say we are. pion for our Mission and Core V	lution. ilience. <u>Employee Eva</u> Rating: alues.		
• I support oth • I own every • I practice sel Manager Eval Rating: htegrity We are faithfu • I am a cham • I put people a	problem and seek to find a resol If-care and invest in my own resi uation Fully Met I to who we say we are. pion for our Mission and Core Vat the center of all I do by being	lution. ilience. <u>Employee Eva</u> Rating: alues.		
• I support oth • I own every • I practice sel Manager Eval Rating: htegrity We are faithfu • I am a cham • I put people a • I practice gra	problem and seek to find a resol If-care and invest in my own resi uation Fully Met I to who we say we are. pion for our Mission and Core Vat the center of all I do by being	lution. ilience. Employee Eva Rating: alues. present and attentive.		
• I support oth • I own every • I practice sel Manager Eval Rating: htegrity We are faithfu • I am a cham • I put people a • I practice gra • I take respon	problem and seek to find a resolution and seek to find a resolution Fully Met If to who we say we are. pion for our Mission and Core Veat the center of all I do by being atitude. Insibility for my role as a team me	lution. ilience. Employee Eva Rating: alues. present and attentive.	Fully Met	
• I support oth • I own every • I practice sel Manager Eval Rating: htegrity We are faithfu • I am a cham • I put people a • I practice gra	problem and seek to find a resolution and seek to find a resolution Fully Met If to who we say we are. If to who we say we are. If the center of all I do by being attitude. In the cas a team measure as a team measure.	lution. ilience. Employee Eva Rating: alues. present and attentive.	Fully Met	
• I support oth • I own every • I practice sel Manager Eval Rating: Itegrity We are faithfu • I am a cham • I put people a • I practice gra • I take respon	problem and seek to find a resolution and seek to find a resolution Fully Met If to who we say we are. pion for our Mission and Core Veat the center of all I do by being atitude. Insibility for my role as a team me	ember. Employee Evalues. Employee Evalues. Employee Evalues. Employee Evalues.	Fully Met uation	
• I support oth • I own every • I practice sel Manager Eval Rating: Itegrity We are faithfu • I am a cham • I put people a • I practice gra • I take respon	problem and seek to find a resolution and seek to find a resolution Fully Met If to who we say we are. Proposed to the center of all I do by being stitude. It is as a team metuation Fully Met Fully Met	ember. Employee Evalues. Employee Evalues. Employee Evalues. Employee Evalues.	Fully Met uation	
• I support oth • I own every • I practice sel Manager Eval Rating: Itegrity We are faithfu • I am a cham • I put people a • I practice gra • I take respon Manager Evalu Rating:	problem and seek to find a resolution and seek to find a resolution Fully Met If to who we say we are. pion for our Mission and Core Veat the center of all I do by being atitude. Insibility for my role as a team meduation Fully Met	ember. Employee Evalues. Employee Evalues. Employee Evalues. Employee Evalues.	uation Fully Met	
I support oth I own every I practice sel Manager Eval Rating: I tegrity We are faithfu I am a cham I put people a I practice gra I take respondented Manager Evaluting: Section Section Section Section Rating:	problem and seek to find a resolution and seek to find a resolution Fully Met If to who we say we are. pion for our Mission and Core Veat the center of all I do by being atitude. Insibility for my role as a team meduation Fully Met	lution. ilience. Employee Eva Rating: alues. present and attentive. ember. Employee Eval Rating:	uation Fully Met	

Colleague demonstrates the essential functions, knowledge and skills in the job description, including other duties and competencies as assigned.

Manager Ev	Manager Evaluation						
Rating:	Fully Met						
Response:							
Additional N	Manager Evaluation						

In consideration and review of the colleague's job description, describe and give specific examples of what essential functions of the job the colleague is meeting or exceeding. What does the colleague do well?

Manager Eva	aluation
Rating:	Fully Met
Response:	is a good phlebotomist, needs to work on team work across shifts.
Additional Ma	anager Evaluation

In consideration and review of the colleague's job description, describe and give specific examples of any essential functions of the job where the colleague is partially meeting or not meeting. Identify any areas for improvement.

Rating:	Fully Met
Response:	Teamwork across shifts and tactful/respectful communication
Additional M	anager Evaluation
1 10 0110 1101	
	Summary
	Summary

Colleague demonstrates the essential functions, knowledge and skills in the job description, including other duties and competencies as assigned.

Manager E	Evaluation	Employee B	Evaluation	
Rating:	Fully Meets	Rating:	Fully Meets	
Response:		Response:		
Additional	Manager Evaluation			

2018-19 Staff Annual Performance

Review

MCHS_Phlebotomist_M2301

Organization: Clinical Laboratory Mcgc (Carter, Kayla M T

(4067152))

Manager: Carter, Kayla M T (4067152)

Evaluated By: Carter, Kayla M T (4067152)

Location: MCHS - Mount Carmel Grove City

07/01/2018 - 06/30/2019

Overall

Manager Overall Evaluation

Calculated Rating: 3.3

Rating:

Fully Met

Acknowledgement

Manager

Entered by:

Carter, Kayla M T (4067152)

Date:

06/17/2019

Status:

Acknowledge Review without Comments

Comment:

Employee

Entered by:

(On Leave) (

Date:

06/17/2019

Status:

Acknowledge Review without Comments

Comment:

Goals

Blood culture contamination rate

Team goal <3%

Individual goal <10%

Team <3% Meets

3-4% Partially Meets

>4% Does Not Meet

Individual 0-5% Exceeds

5-10% Meets

>10% Does Not Meet

Due Date:

06/30/2019

Status:

Completion Date:

Category:

1. People Centered Care, 3. Operational Excellence, 2. Engaged Colleagues

Weight:

25

Manager Evaluation

Employee Evaluation

Rating:

Fully Meets

Rating:

Fully Meets

Comment:

Colleague continues to perform well and

Comment:

rarely has a blood culture contamination. He uses the proper procedure for collection.

.Reduce by 10% the number of Misidentification Errors/ Error Correction/Voice reports.

>10.00% Exceeds

=10% Meets

1-9% Partially Meets

Increased Errors Does not meet

Due Date:

06/30/2019

Status:

Completion Date:

Category:

1. People Centered Care, 3. Operational Excellence, 2. Engaged Colleagues

Weight:

25

Manager Evaluation

Employee Evaluation

Fully Meets

Rating:

Comment:

Fully Meets

Colleague has attention to detail and

performs his job efficiently. I do not receive many errors made and he continues to work

in this manner.

Comment:

Rating:

Implement IDEA Boards

Contribute >6 times on Idea Boards-Exceeds

Contribute 6 times on Idea Boards- Meets

Contribute 2-5 times on Idea Boards- Partial Meet

Contribute 0-1 - Does Not Meet

Due Date: 06/30/2019

Status:

Completion Date:

Category:

3. Operational Excellence, 2. Engaged Colleagues

Weight:

15

Manager Evaluation

Employee Evaluation

Fully Meets

Rating: Comment: **Fully Meets**

Colleague asks questions and continues to

give opinions when needed to help the

workflow go smoothly

Comment:

Rating:

Improve STAT collection/Turnaround Times to 85% or (+ 5% from current metric) within 45 minutes from Time of Specimen Receipt to Time of Results Reports for Troponin, CBC, and BMP.

>5.00% Exceeds

=5.00% Meets

<5.00% Partially Meets

<0.00 Improvement Does Not Meet

Due Date: 06/30/2019

Status:

Completion Date:

		Employee Ev	aluation
Rating:	Fully Meets	Rating:	Fully Meets
Comment:	Colleague continues to collect specimens and send them down to the lab in a timely manner.	Comment:	
Section	n Summary		
Manager Ev	valuation	Employee E	Evaluation
Rating:	Fully Meets	Rating:	Fully Meets
Core Valu	les		
The Trinity I Stewardship	with others, internally and externally, to a Health Core Values are: Reverence, Cop, and Integrity.	mmitment to [*]	Those Who Are Poor, Justice,
Manager Ev		Employee Ev	
Rating:	Exceeded	Rating:	Exceeded
Response:	Colleague is always respectful towards patients and employees. He does his job well by putting the Core Values in the front line of his job.	Response:	
Section	n Summary		
Manager Ev	raluation	Employee E	valuation
Rating:	Exceeded	Rating:	Exceeded
	cific Job Duties		
Role Spec		atial funct	
Colleaguin the jo	b description, including oth		ions, knowledge and skills and competencies as
Colleaguin the jo	b description, including oth d.		and competencies as
Colleague in the journal	b description, including oth d.	er duties	and competencies as

Employee Evaluation

Manager Evaluation

Rating: Fully Met Rating: Fully Met

Staff Annual Performance Review 2016 -

17

MCHS_Phlebotomist_M2301

Manager: Stahl, Shannon R (224219)

Evaluated By: Stahl, Shannon R (224219)

Organization: Core Lab (Stahl, Shannon R (224219))

Location: MCHS - Mount Carmel West

07/01/2016 - 06/30/2017

Overall			
Manager Overall E	Evaluation		
Calculated Rating:			
Rating: Comment:	Fully Met		
Acknowledgen	nent		
Manager			
Entered by:	Stahl, Shannon R (224219)	Date:	11/15/2017
Status:	Acknowledge Review without Comments		
Comment:			
Employee			
Entered by:		Date:	
Status:			
Comment:			

Goals

Fire Safety team with evening shift supervisor(Havilah Stansbery). Responsibilities would include keeping others on the shift up to date in competency.

Due Date: 07/30/2017 Status: In Progress Completion Date:

Category: 3. Operational Excellence, 2. Engaged Colleagues

Weight: 33

Manager Evaluation Employee Evaluation

Rating: Fully Meets Rating:

Comment: participated on the fire safety team for Comment:

his shift.

Additional Manager Evaluation

Keep blood culture contamination rate <3%

Due Date: 07/30/2017 Status: Completed Completion Date: 07/30/2017

Category: 3. Operational Excellence, 2. Engaged Colleagues, 1. People Centered Care, 6. Effective Stewardship

Weight: 34

Manager Evaluation	Employee Evaluation
Rating: Fully Meets	Rating:
Comment: The phlebotomy team has consistently maintained a rate <3% both individual and together.	Comment:
Additional Manager Evaluation	
Team project: Improve TAT for collection times of	of DT and STATs. Reduction should be 10%
Due Date: 07/30/2017 Status: Completed	Completion Date:
Category: 3. Operational Excellence, 2. Engaged Collea	gues, 1. People Centered Care, 6. Effective Stewardship
Weight: 33	
Manager Evaluation	Employee Evaluation
Rating: Fully Meets	Rating:
Comment: The laboratory met the turnaround time (TA goals set for the PI monitors for STAT ED and STAT inpatient samples. There was improved TAT from the prior Fiscal year (FY with a higher target set for FY17 compared FY16. Additional Manager Evaluation	<i>(</i>),
Section Summary	
anager Evaluation	Employee Evaluation
ating: Fully Meets	Rating:
omment:	Comment:
ore Values	= T.
everence	
We honor the sacredness and dignity of every person.	
 I connect with compassion and courtesy I respect every person. I use preferred names, introduce myself, my role, and wha I smile, acknowledge others, open doors, make eye contact I am aware of my facial expressions and body language. 	-
Manager Evaluation	Employee Evaluation
Rating: Exceeded	Rating:

Comment:

Additional Manager Evaluation

Commitment to Those Who are Poor

Comment:

We stand with and serve those who are poor, especially those most vulnerable.

Establishes rapport with coworkers

cultures, and religions

Show appropriate respect for coworkers and customers of different backgrounds,

- I reach out to help those in need.
- I escort patients/family to their location.
- I notice when others are suffering or struggling and reach out to comfort and assist them.

Manager Evaluation		Employee Evaluation
Rating:	Exceeded	Rating:
Comment:		Comment:
Additional Man	ager Evaluation	

Justice

We foster right relationships to promote the common good, including sustainability of Earth.

- · I make every moment matter.
- I build and maintain healthy and trusting relationships.
- I avoid judging others because of differences or circumstances.
- I listen and avoid interrupting and multitasking.

Manager Evaluation		Employee Evaluation
Rating: Fully Met		Rating:
Comment:		Comment:
Additional Manager Evaluation		

Stewardship

We honor our heritage and hold ourselves accountable for the human, financial and natural resources entrusted to our care.

- I engage every day with an owner's mind and a servant's heart.
- I support others in fulfilling our Mission.
- I own every problem and seek to find a resolution.
- I practice self-care and invest in my own resilience.

Manager Evaluation		Employee Evaluation	
Rating:	Exceeded	Rating:	
Comment:	 Can be counted on to contribute to improvement of the laboratory Always eager to learn new skills and improve performance 	Comment:	
Additional Ma	anager Evaluation		

Integrity

We are faithful to who we say we are.

- I am a champion for our Mission and Core Values.
- I put people at the center of all I do by being present and attentive.
- I practice gratitude.
- I take responsibility for my role as a team member.

Manager Evaluation			Employee Evaluation	
Rating: Exceeded		Exceeded	Rating:	
Comment:	•	Takes responsibility for their role as a member of the laboratory team	Comment:	

the highest quality Additional Manager Evaluation Section Summary **Employee Evaluation** Manager Evaluation Rating: **Exceeded** Rating: Role Specific Accountabilities of the Job Description Colleague demonstrates the essential functions, knowledge and skills in the job description, including other duties and competencies as assigned. **Employee Evaluation** Manager Evaluation Rating: **Partially Met** Response: Would like to see how we can manage pager Response: response more affectively and complete draws in a timely manner. has helped with new colleagues on the shift get adjusted. Additional Manager Evaluation Section Summary

Shows dedication to producing work at

Manager Evaluation

Partially Met

Rating:

Department Orientation Checklist



Review the contents below with each new hire or transfer colleague within Mount Carmel Health System on their first day in a department/unit. Retain in the colleague's department record.

ileague f	6.6		olleague ID Nur	7	a de este a
Title:	Lio	Job Code:	Hire/Tra	nsfer Date:	9/4/18
Departn	ent Tour: restrooms, lo	cker, work supplies, colleague lounge, commu	inication process	s	
Departm	tent Organization: organ	izational chart; reporting relationships; depar	rtmental meetin	gs; etc.	
Paging S	ystem				
Policies :	and Procedures:				
		- HR, HR Policies webpage):			
		onal Appearance (Dress Code Guldelines)			
		Hours and Work Assignments)			
	Absences/Tardiness/Call	In procedure-Attendance Policy (Attendance	2)		
		Procedures (on @MC – Worklife, Polices & Pr			
		tient Status and Updates to Friends and Fami	ily Members		
		(name and date of birth)			
	Incident or Occurrence R Interpreting Services	teporting			
	Interpreting Services Patlent Rights and Respo	melhilible			
efety Pr	ocedures and Plans: (on	@MC - Safety & Security webpage):			
		ent specific responsibilities; evacuation plan			
	Location of fire alarms as	nd extinguishers			
	ty and Security: Code Adam (Infant/child	ah du aktan			
	Code Yellow (disaster)	abouction)			
	Code Red (fire)				
	Code Black (bomb threat	١			
	Code Gray (severe weath				
	Code Orange (hazardous				
	ode Blue (medical emer				
	Code Pink (pediatric med				
	Code Violet (violent pers				
	Code Silver (person with				
	Code Brown (missing adu	it patient)			
	Code Evac (evacuation)				
	Code Utility (loss of utiliti	•			
Emer	gency and disaster proce	dures and department specific responsibilities	es		
	rd Communication				
E S	DS Information/ Emerge	ncy procedures related to splils or exposure			
C E	yewash - Deluge Showe	r Stations (If applicable)			
tection i	Control: (on @MC - Clin	ical Quality, infection Control webpage)			
		autions and use of personal protective equipm	ment		
Isolati	ion precautions	The state of the s			
Infect	ious Waste	in			
				C 4	18
ague Sig	nature:		Date:	Sen 4 9/4/18	, 10
-	-		Park.	Aluta	
ager Sign	nature:	part there	Date:	4/4/13	

Laura Mangia Christopher M. Kent From: Wednesday, September 24, 2014 3:57 PM Sent: To: Laura Mangia **Subject:** & Brittany Borre Laura, is still in the system as being budgeted for 0.9 FTE, he should have been changed to 1.0 FTE back in August. Thanks! From: Christopher M. Kent Sent: Wednesday, August 13, 2014 11:27 AM To: Laura Mangia Subject: RE: & Brittany Borre Thanks! Chris | Laboratory Supervisor | Mount Carmel West | 614.234.1319 From: Laura Mangia **Sent:** Tuesday, August 12, 2014 1:25 PM To: Christopher M. Kent Subject: RE: & Brittany Borre HI, Chris! I think I have them flipped – I will change accordingly – should be FT/80 and Brittany should be FT/72 then, right? I will fix them! Laura @ From: Christopher M. Kent Sent: Tuesday, August 12, 2014 11:16 AM To: Laura Mangia Subject: & Brittany Borre Laura, Can you please send PCFs for an analysis and Brittany Borre so that I can ensure that it is budgeted the correct FTE

Thanks! Chris

1. Sec. 4. 9

Christopher M. Kent | Laboratory Supervisor | Mount Carmel West | 614.234.1319

count? should be 1.0 FTE and Brittany is to be 0.9 FTE.

17 20

Laura Mangia

From:

Christopher M. Kent

Sent:

Tuesday, August 12, 2014 11:16 AM

To:

Laura Mangia

Subject:

& Brittany Borre

Laura,

Can you please send PCFs for and Brittany Borre so that I can ensure that it is budgeted the correct FTE count? Should be 1.0 FTE and Brittany is to be 0.9 FTE.

Thanks!

Chris

Christopher M. Kent | Laboratory Supervisor | Mount Carmel West | 614.234.1319

MCHS Laboratory Phlebotomy **Incomplete Introductory Period Review**

Upon review of the colleague file, a performance review was not conducted at the completion of the colleague's introductory period. The colleague's scompetency in the work area has been validated through observation of daily work with discrepancies addressed through appropriate processes.

The introductory period performance review was not conducted after 90 days of employment due to:

Unintentional Omission

Where applicable, a complete annual performance review has been performed and presented to the colleague since the completion of the introductory period.

Colleague Name:

Introductory Period End Date:

1/28/2013

Manager Signature: Churlophu M Kut

Date: 2 24 2014.

€ 2-10-13

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atifes.

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APR 1 6 2014

HUMAN RESOURCE



DEPARTMENT ORIENTATION CHECKLIST

Review the contents below with each new associate who is newly hired or transfers within the Mount Carmel Health System within the first two weeks. Retain in the associate's department record.

A STATE OF THE STA	
Associate Name:	_ Associate ID Number:
Job Title: THEBOTOM ST Job Code: M 2	301 Hire/Transfer Date: 10 28 2012
Job Description Given/Reviewed	1.01
Competency-Based Orientation Information/Packer	t Given
Department Tour: restrooms, locker, work supplies,	associate lounge, communication process
Department Organization: reporting relationships, of	epartmental meetings, etc
☑ Guiding Behaviors	1.4 L DI T
Scheduling work hours: timekeeping procedures: lu	inch/breaks; overlime; PLT; etc.
☑ Timekeeping & Payroll practices policy/procedure re ☑ Dress/Uniform	aview and pay information
_, _, _, _, _, _, _, _, _, _, _, _, _, _	
Policies and Procedures:	on Decourage websers).
Human Resources (available on Insight – Huma	in Resources webpage):
 ☐ Absences/Tardiness/Call in procedure ☐ Internet utilization 	
Introductory and evaluation process	
Administrative Policies (able to locate on Insigh	n¢\.
☐ Risk Management/incident reporting	n).
	f Health Information; Find Code: Release of Patient Information
Code of Conduct	1 (16gill) inflormation, I file Code. Itelease of I attent information
Department specific policies (available on Insig	aht or manual):
Safety Procedures and Plans: (available on Ins	
Fire procedures and department specific resp	
Location of fire alarms and extinguishers	
Safety and Security:	
Gode Adam (Infant/child abduction)	
Code Yellow (disaster)	
☐ Code Red (fire)	
Code Black (bomb threat)	
Code Orange (hazardous material spill)	
Code Blue (medical emergency)	
Code Plnk (pediatric medical emergency))
Code Violet (violent person)	
Code Silver (person with weapon/hostage	a)
Code Brown (missing adult patient)	
Code Brown (missing adult patient) Code Evac (evacuation) Code Utility (loss of utilities)	
Code Utility (loss of utilities)	
Emergency and disaster procedures and department	artment specific responsibilities
Proper handling and storage of chemicals	
MSDS information/ Emergency procedure	s related to spills or exposure
Infection Control: Infection Control Manual (able	e to locate on Insight)
Hand washing	
Universal precautions and use of personal pro	otective equipment
Multi-drug resistant organisms (MDRO)	
Respiratory precautions (TB) and negative pre	essure rooms
Infectious Waste	
	0-4- 0-1-1
Associate's	Date 4/7/2014
signature	Date - 111 1 - 1
Manager's signature	Date 14 1 2014:
(Manufact III tones	

	Non-	Management Per	formance Appraisal For	m
First Name	Last Name		Associate ID #	
				BEAPS (FB
Department	Dept ID #	Job title		RECEIVED HUMAN RESOURCES
MCW Phiel	botomy 19012	Ph	lebotomist	HUMAN RESOURCES
Review Due Date 5/1/2013	Review Period (start & en: FY13 - 7/1/2012 to 6/30/20		RATING SCALE: 3 = consistently exceeds expec 2.6 = occasionally exceeds expec 2 = meets expectations 1.6 = occasionally meets expectations 1 = does not meet expectations	MAY 0 1 ZUI3
evaluation is important to should not hold up the e- will then complete the met The completed evaluation	completes the self-evaluation column to the evaluation process, and his valuation if the Associate does reager-rating and schedule a performance of the performance of the sent to Human Restoto be kept in the department life and	ghly encouraged; howe lot complete a self eval nance review conference cources. All other require	ever, the manager lustion. The manager s with Associate ad competencies and	MOUNT CARMEL WEST
	GUIDING BE	HAMORE		1
GUIDING BEHAVIORS	GUIDING DE	MAIORS		
The Guiding Behaviors flor	w directly from Trinity Health and M The Gulding Behavlors set the expe			
.] We support each oth	er in serving our patients and co	ommunities		
J We communicate open 1 We are fully present .] We are all accountab □ We trust and assume 2 We are continuous le	goodness in intentions	directly		
Supporting Examp	les (Associate Comments)	Supporting Exam	ples (Manager Comments)	Character Count (limit 760 characters)
		phlebotomy departmen with the intention of be	concerns regarding the nit to his supervisor and manager stering the department. His d contributes to the department's	ENTERED CARL SPECKMAN MAY 0 3 2013
				HUMAN RESOURCES
Self Rating	#N/A	Mgr Rating	2 Meets	0.67
QI	KILL AND KNOWLED	GE COMPETEI	NCIES	
How does the Associate de responsibility is met, a scor	emonstrate all essential job respons e of 2 is applicable. If an essential Applicable (N/A). (Note: Ratings of	ibilities from the Job Des Job responsibility has ch	scription? If an essential job nanged or does not require a	
Essentia	i Job Responsibility / Work-F	Related Goal: (Servic	e Excellence)	N. T.
ole modeling excellence	E: Exhibits each of the Mount of for all to see. For example, do a professional environment, an	emonstrates friendline	ess and courtesy, effective	
	les (Associate Comments)		ples (Manager Comments)	Character Count (limit 760 characters)
No Comments		is friendly and co hospital and laboratory	ourteous to other members of the teams.	
		ļ.		

Mgr Rating

Self Rating

First Name Last Name	Associate ID #:	
A. Essential Job Reaponal	bility / Work-Related Goal:	Character Count (limit 500 characters)
Computer Support Services - uses computer support customers	services to the benefit of staff, patients and	
Customers		
		100
		106
Supporting Examples (Associate Comments)	Supporting Examples (Manager Comments)	Character Count (limit 760 characters)
No Comments	The phiebotomist position requires efficient and proficient use the available computer support services,	
	demonstrating competent use of Cerner PathNet	
	software to accomplish daily duties.	
Self Rating 2 Meets	Mgr Rating 2 Meels	188
Desir Petering 2 James 15	mgr runnig	
B. Essential Job Respons	hillby / Work Palated Cont	Character Count (limit 500 characters)
Technical Performance - Assists with laboratory testing		Character Coom (in in 500 Grandeters)
thephysicians and other health care providers.	g to provide dealing, account to	
		144
Supporting Examples (Associate Comments)	Supporting Examples (Manager Comments)	Character Count (limit 760 characters)
No Comments	a a consistent performer and understands his	Character Court (white 100 bildradies)
NO COMMENTS	role in the laboratory's ability to provide quality results to	
	our customers	
	1	
	1	
	The state of the s	
	41 91	
	11	
	1	
n-112-11-11		129
Self Rating 2 Meets	2 Meets	
C. Essential Job Responsi	attite. (Minute Balleted Cont.	Character Count (limit 500 characters)
Team - Supports fellow associates in the goal of provi		Character Count (limit 500 characters)
198111 - Supports lellow associates in the goal of brown	ong the best possible outcomes for the patient.	
		102
Company Company	Connection Exemples (Manager Comments)	
Supporting Examples (Associate Comments)	Supporting Examples (Manager Comments)	Character Count (limit 760 characters)
No Comments	has demonstrated a willingness to help others with their workloads - this assistance allows us to	
	provide improved test result turnsround times, thereby	
	allowing patient care to move forward in a more timety manner. Additionally, manner has demonstrated often	
	demonstrates flexibility in his schedule so that special	
	scheduling requests by other team members may be accompidated. In order to ensure best possible	
	outcomes for the patient, it is necessary that Aaron	
	remain productive throughout her scheduled hours	
Self Rating 2 Mosts	Mgr Rating 2 Meets	521
Self Rating 2 Meets	Internal Internal	

First Name La	st Name	Associate ID #	
D. Essential Job R	Character Count (limit 500 characters)		
Health, Safety and Education - Supports Labo	pretory in maintaining a s	afe work environment	
10,650			89
Supporting Examples (Associate Comm	nents) Supporting	Examples (Manager Comm	ents) Character Count (limit 760 characters)
No Comments	is compl position.	lent with the PPE standards of he	
Self Rating 2 Meets	Mgr Rating	2 Meels	58
P P P P P P P P P P P P P P P P P P P	16.114 (186 A. 6)	Lated Oracle	Character Count (limit 500 characters)
Communication and Customer Satisfaction - I	asponsibility / Work-Re Develops and maintains		
staff and other departments to promote custor	ner service.	1.00.00	
			158
Supporting Examples (Associate Comm	nents) Supporting	Examples (Manager Commo	ents) Character Count (limit 760 characters)
No Comments	with other mem teams - when n assistance from regarding the p	aloped effective working relationshoers of the hospital and laborator beeded, he requests additional now-workers. By providing feedby resent processes of the departmetrales attention to customer satisfations.	y ack rit,
Self Rating 2 Meets	Mgr Rating	2 Meets	302 0.67

First Name	Last Name Associate ID	#:
INDIVIDUAL GOALS: (for PAST 12 months) Individual Goals support Department, Business Unit and System Goals Please DOCUMENT and provide RATINGS for your Individual Goals for the past year in the space		Rating Scale: 3 = achieved goal 2 = some progress towards goal 1 = unable to make progress towards poal (,5 scores are acceptable)
provided below.		
Individual Goal	Also Also	Rating Self Manager
Train as a phlebotomist new place within the phlebotomy of the phlebotomy of the phlebotomy of the phlebotomy of the phlebotomist new the phlebotomist new place within the phlebotomy place	to the Mount Carmel West. Learn to use processes and systems that department.	t are in
Individual Goal Contribute to reduction in ove West phlebotomy team - phle indicators.	erall turnaround time for testing on specimens collected by the Mount obotomy "time" is measured within laboratory performance improveme	Carmel ent 2
Individual Goal		
100% compliance with Mount	Carmel hand hygiene standards.	3
Individual Goal	ONLY OF THE CONTROL O	
individual Goal		
		0.78

REQUIREMENTS	A Company
Demonstrates training with new equipment.	Yes or No
Demonstrates training/education regarding new or revised documentation forms, policies/procedures, and quality ssues.	
 Demonstrates knowledge and Integration of bloodborne pathogen regulations/TB into practice (Complies with TB esting). 	
 Demonstrates knowledge and integration of 7 safety practices (medical equipment, utilities, emergency preparedness, life safety, hazardous material, safety including back safety), and security management, as documented in HealthStream. 	4
5. Demonstrates knowledge and skill in caring for population specific patients (Complete and attach the Population Specific Competency Evaluation Form and keep with education records in department. Enter competency into HealthStream)	4
 Demonstrates knowledge of other regulatory practices as appropriate to area/department practice. Has completed required HIPAA education. 	4
7. Demonstrates knowledge and accurate documentation of time worked in the automated timekeeping system.	4
	ective Action.
All Associates are expected to keep these requirements current. Fallure to do so may result in Core Manager's Comments 274452 Manager's Signaure 274452	ective Action. Date 4 30 20
- Anintodur M. Vult - 274452	r 4/-30/201
All Associates are expected to keep these requirements current. Fallure to do so may result in Core Manager's Comments 274452	Dete 4/-36/20
All Associates are expected to keep these requirements current. Fallure to do so may result in Core Manager's Comments 274452	Dete 4/-36/20
All Associates are expected to keep these requirements current. Fallure to do so may result in Core Manager's Comments 274452 Manager ID Associate's Comments 285671 Associate's Signature 285671 Associate ID	Dete 4/-36/20

Page 5 of 6

First Name	Last Name	Associate ID #:
	INDIVIDUAL GOALS: (for NEXT 12 months)	
	Individual Goals support Department, Business Unit and System G	Soals

Individual Goals for the upcoming year need to be documented on the evaluation form and submitted to HR. Managers should give a copy to their Associate and keep one for the manager file.

Set three to five Individual Goals related to major areas of job responsibility and/or CORE Values. (The "Individual Goal-Setting Guide" is available on the Human Resources page on Insight).

Individual Goal	Character Count (limit 610)
Demonstrate a positive attitude during the continued transition period of the phlebotomy department.	
	100
Individual Goal	Character Count (limit 610)
Contribute to reduction in overall turnaround time for testing on specimens collected by the Mount Carmel West phiebotomy team - phiebotomy "time" is measured within laboratory performance improvement indicators	
	212
Individual Goal	Character Count (limit 610)
Individual Goal	Character Count (limit 610)
N= 01	
Individual Goal	Character Count (limit 610)
	4



New Employee Information Form

Mount Carmel Health System is an equal employment opportunity employer. We do not discriminate on the basis of race, color, religion, age, physical or mental handicap, marital status or any other basis prohibited by law. In order to maintain accurate records for our benefit programs and to comply with federal, state and local laws, Human Resources needs the following information on all employees. If any of the Information you have provided on your application or on this form change prior to your start date, please contact your recruiter. If any corrections are made to your name, you must provide proof in order for the change to be processed.

, , , , , , , , , , , , , , , , , , , ,	me exactly as it appears on your Social		
First Name	Middle Name	Last Nam	e
Social Security No. (### - ## - ####)		Hire Date	10/23/2012
Street Address		Apt or P.O. Box	
City	Knoxville	State	TN
County		Zip Code	37923
Home Phone Numbe (###) ###- ####	er	Cell Phone Number (###) ###- ####	
Other Phone Numbe (###) ###- ####	er	Birthdate (MM/DD/YYYY)	Gi 25 1988
Gender	Marital Status		
Male 🛱	☐ Single	Married Married	☐ Divorced
Female	☐ Separated	☐ Widowed	
Highest Education:			
lilitary Status:	ed No Military Service	Active Reserv	/e
to track those employees who are considered a veteran.	se Linestive Reserve	Retired Militar	у
		Other Protecte	ed Veteran
	☐ Veteran (VA Ineligible)	☐ Vietnam & Ot	her Protected Vet
	☐ Pre-Vietnam-Era Veteran	☐ Not a Vietnam	-Era Veteran
	Post-Vietnam-Era Veteran	∐ Vietnam-Era V	eteran
	☐ Not a Veteran		

Ethnic Group - Primary: You may select more	Providing this information for this section is voluntary, however, the Equal Employment Opportunity Commission (EEOC) strongly encourages self- identification of race and ethnic categories. The data collected will not be used in the determination of hiring decisions,							
than one ethnic group; however, for EEO	han one ethnic group; eligibility for promotion, transfer or tenure.							
reporting purposes,	☐ American Indian/Alaska Native ☐ Black/Afr			Atric	frican American 🔲 Asian			
only one group may be selected as primary.	☐ Hawaiian/Other Pacific Islander ☐ American Indian/Alaska Native		☐ Black/African American ☐ Asian					
Ethnic Group - Secondary: (if applicable)								
	☐ Hawaiian/Other P	acific	Islander	☐ White/	Cau	casian	☐ Hispanic/Latino	
Primary Emergency Contact Information:								
Name								
Address								
	city Calumbus		State	QH			Zip Code 42331	
Relationship	□ Spouse		Mother			Father		
	☐ Daughter		Son	1		Friend		
	☐ Sister		Brother	1		Other		
Phone Numbers	Home		Busine	55			Other	
Secondary Emergency		_						
Contact Information: Name					_			
Address			_	_				
Address								
	City Columbus		_ State_	SH			Zip Code	
Relationship	☐ Spouse		Mother		X I	Father		
	☐ Daughter		Son	1		Friend		
	Sister		Brother			Other		
Phone Numbers	Home		Busine	55			Other	
Position Information								
Job Title Phlebotomis	st							
Department Laboratory			S	tart Date	11/0	05/201	2	
							i	
Location you will be worl	king at? ☐ MCE 🔯 MC	:W 🗆	MCSA 🗆	New Alban	y 🗆	Offsite,		

Professional License and	or Certification Info	rmation (Only if applicable for your position)
EXA	AMPLE: License Cod	le_RNExpires_8/31/07_License # RN-000000
PLEA	SE BRING ALL LICE WITH YO	NSURE, CERTIFICATION AND CPR CARD INFO OU TO HUMAN RESOURCES
Name of License #1	Expires	License #
Name of License #2	Expires	License #
Name of License #3	Expires	License #
Name of Certification		Certification #Expires
CPR Certified? ☐ Yes ☐	No Expires	

Guide to Personnel Data Standards	ETHNICITY AND RACE (Please read the Privacy Act Statement and in	IDENTIFICATION netructions before completing form.)
Name (Lest, First, Middle Initial)	Social Security Number	Birthdate (Month and Year)
		01/82
Agency Use Only		
Privacy Act Statement		
the Office of Management and Budget's and Ethnicity. Providing this Information of missing Information, your employing as This Information is used as necessary to is also used by the U. S. Office of Perindividuals for personnel research or signallytical studies in support of the functional studies. Social Security Number (SSN) is requested the purpose of uniform, orderly administrations.	ted under the authority of 42 U.S.C. Section 1997 Revisions to the Standards for the Class voluntary and has no impact on your empercy will attempt to identify your race and explain for equal employment opportunity throus the production of personnel records. Providing this production of personnel records. Providing this production of personnel records.	ployment status, but in the instance of thinicity by visual observation. Sughout the Federal government. It is maintaining the records to locate summary descriptive statistics and maintained, or for related workforce 19397, which requires SSN be used information is voluntary and failure
	low are designed to identify your ethnicity and rac	ce. Regardless of your answer to
1 1 1 1 1 1	to the Manham Buerle Bless Con	111800
Spanish culture or origin, regardless of race.) Yes No		th or Central American, or other
Spanish culture or origin, regardless of race.) Yes No	y or categories with which you most closely identi	th or Central American, or other
Spanish culture or origin, regardless of race.) Yes No Question 2. Please select the racial category	y or categories with which you most closely identi-	ith or Central American, or other ify by placing an "X" in the appropriate
Spanish culture or origin, regardless of race.) Yes No Question 2. Please select the racial category box. Check as many as apply. RACIAL CATEGORY	y or categories with which you most closely identi	ify by placing an "X" in the appropriate CATEGORY
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Standard Form 181 Revised August 2005 Previous editions not usable

42 U.S.C. Section 2000e-16

NSN 7540-01-099-3446

Notice to Employee

- For state purposes, an individual may claim only natural dependency exemptions. This includes the taxpayer, spouse and each dependent. Dependents are the same as defined in the Internal Revenue Code and as claimed in the taxpayer's federal income tax return for the taxable year for which the taxpayer would have been permitted to claim had the taxpayer filed such a return.
- You may file a new certificate at any time if the number of your exemptions increases.

You must file a new certificate within 10 days if the number of exemptions previously claimed by you decreases because:

- (a) Your spouse for whom you have been claiming exemption is divorced or legally separated, or claims her (or his) own exemption on a separate certificate.
- (b) The support of a dependent for whom you claimed exemption is taken over by someone else.
- (c) You find that a dependent for whom you claimed exemption must be dropped for federal purposes.

The death of a spouse or a dependent does not affect your withholding until the next year but requires the filling of a new certificate. If possible, file a new certificate by Dec. 1st of the year in which the death occurs.

Signature.

For further information, consult the Ohio Department of Taxation, Personal and School District Income Tax Division, or your employer.

- If you expect to owe more Ohio income tax than will be withheld, you may claim a smaller number of exemptions; or under an agreement with your employer, you may have an additional amount withheld each pay period.
- 4. A married couple with both spouses working and filing a joint return will, in many cases, be required to file an individual estimated income tax form IT 1040ES even though Ohio income tax is being withheld from their wages. This result may occur because the tax on their combined income will be greater than the sum of the taxes withheld from the husband's wages and the wife's wages. This requirement to file an individual estimated income tax form IT 1040ES may also apply to an individual who has two jobs, both of which are subject to withholding. In lieu of filing the individual estimated income tax form iT 1040ES, the individual may provide for additional withholding with his employer by using line 5.

IT 4 Rev. 5/07 Department of Employee's Withholding Exemption Certificate Taxation Social Security number_ Print full name 37923 Knoxville TN Home address and ZIP code. 2563 Columbus School district no. Public school district of residence. (See The Finder at tax.ohio.gov.) 1. Personal exemption for yourself, enter "1" if claimed 2. If married, personal exemption for your spouse if not separately claimed (enter "1" if claimed) 3. Exemptions for dependents 4. Add the exemptions that you have claimed above and enter total Under the penalties of periury, I certify that the number of exemptions claimed on this certificate does not exceed the number to which I am entitled.

please detach here

MOUNT CARMEL HEALTH SYSTEM CONFIDENTIALITY AND NETWORK ACCESS AGREEMENT

The following rules for Confidentiality and Network Access apply to all non-public patient and business information (Confidential Information) of Mount Carmel Health System, Trinity Health, and related organizations. The rules also apply to the non-public and business information of joint ventures, or of other entities and persons collaborating with Mount Carmel Health System and Trinity Health, to which the user has access. As a condition of being permitted to have access to Confidential Information relevant to my job function or role I agree to the following rules:

1. Permitted and required access, use and disclosure:

- I will access, use or disclose Confidential Patient Information (PHI) only for legitimate purposes of diagnosis, treatment, obtaining payment for patient care, or performing other health care operations functions permitted by HIPAA and I will only access, use or disclose the minimum necessary amount of information needed to carry out my job responsibilities.
- I will access, use or disclose Confidential Business Information only for legitimate business purposes
 of Mount Carmel Health System or Trinity Health.
- I will protect all Confidential Information to which I have access, or which I otherwise acquire, from loss, misuse, alteration or unauthorized disclosure, modification or access including:
 - o making sure that paper records are not left unattended in areas where unauthorized people may view them;
 - using password protection, screensavers, automatic time-outs or other appropriate security measures to ensure that no unauthorized person may access Confidential information from my workstation or other device;
 - appropriately disposing of Confidential Information in a manner that will prevent a breach
 of confidentiality and never discarding paper documents or other materials containing
 Confidential Information in the trash unless they have been shredded
 - safeguarding and protecting portable electronic devices containing Confidential Information including laptops, smartphones, PDAs, CDs, and USB thumb drives.
- I will disclose Confidential Information only to individuals, who have a need to know to fulfill their job responsibilities and business obligations.
- I will comply with Mount Carmel Health System/Trinity Health's access and security procedures, and
 any other policies and procedures that reasonably apply to my use of the computer systems and/or
 my access to information on or related to the computer systems including off-site (remote) access
 using portable electronic devices.

2. Prohibited access, use and disclosure:

- I will not access, use or disclose Confidential Information in electronic, paper or oral forms for personal reasons, or for any purpose not permitted by Mount Carmel Health System/Trinity Health policy, including information about co-workers, family members, friends, neighbors, celebrities, or myself. I will follow the required procedures at Mount Carmel Health System to gain access to my own PHI in medical and other records.
- I will not use another person's, login ID, password, other security device or other information that enables access to Mount Carmel Health System/ Trinity Health's computer systems or applications nor will I share my own with any other person.
- If my employment or association with Mount Carmel Health System/Trinity Health ends, I will not subsequently access, use or disclose any Mount Carmel Health System/Trinity Health Confidential Information and will promptly return any security devices and other Mount Carmel Health System/ Trinity Health property.
- I will not engage in any personal use of Mount Carmel Health System's computer systems that inhibits or interferes with the productivity of employees or others associated with Mount Carmel Health System/Trinity Health's operations or business, or that is intended for personal gain;
- I will not engage in the transmission of information which is disparaging to others based on race, national origin, sex, sexual orientation, age, disability or religion, or which is otherwise offensive, inappropriate or in violation of the mission, values, policies or procedures of Mount Carmel Health System/ Trinity Health;

MOUNT CARMEL HEALTH SYSTEM CONFIDENTIALITY AND NETWORK ACCESS AGREEMENT

 I will not utilize the Mount Carmel Health System/Trinity Health network to access Internet sites that contain content that is inconsistent with the mission, values and policies of Mount Carmel Health System/Trinity Health.

3. Accountability and sanctions:

- I will immediately notify the Mount Carmel Health System/Trinity Health Security Official or Privacy
 Official if I believe that there has been improper/unauthorized access to the Mount Carmel Health
 System/Trinity Health network or improper use or disclosure of confidential information in electronic,
 paper or oral forms.
- I understand that Mount Carmel Health System/Trinity Health will monitor my access to, and my activity within, Mount Carmel Health System's/Trinity Health's computer system, and I have no rightful expectation of privacy regarding such access or activity.
- I understand that if I violate any of the requirements of this agreement, I may be subject to disciplinary
 action, my access may be suspended or terminated and/or I may be liable for breach of contract and
 subject to substantial civil damages and/or criminal penalties.
- If I lose my security device I will report the loss to Mount Carmel Health System Information Resources Customer Support immediately and I may be charged for its replacement.

4. Software use:

- I understand that my use of the software on Mount Carmel Health System/Trinity Health's network is governed by the terms of separate license agreements between Trinity Health and the vendors of that software.
- I agree to use such software only to provide services to benefit Mount Carmel Health System/Trinity
 Health.
- I will not attempt to download copy or install the software on any other computer.
- I will not make any change to any of Mount Carmel Health System/Trinity Health's systems without Mount Carmel Health System's/ Trinity Health's prior express written approval.

5. Network:

- I understand that access to Mount Carmel Health System's/Trinity Health's network is "as is", with no warranties and all warranties are disclaimed by Trinity Health.
- Mount Carmel Health System/Trinity Health may suspend or discontinue access to protect the network or to accommodate necessary down time. In an emergency or unplanned situation Mount Carmel Health System/Trinity Health may suspend or terminate access with out advance warning.
- Mount Carmel Health System/Trinity Health may terminate this agreement, user access and use of Confidential Information at any time for any reason or no reason.
- 6. Employer acceptance of responsibility for an individual with access to Confidential Information:

 (Applies to physicians/physician practices: other individual or facility providers; a vendor that is not a business associate; payers; any other unaffiliated organization).
 - · I accept responsibility for all actions and/or omissions by my employees and/or agents
 - I agree to notify the Mount Carmel Health System Information Resources Customer Support within 5
 business days if any of my employees or agents who have access to Mount Carmel Health
 System's/Trinity Health systems or applications no longer need or are eligible for access due to
 leaving my practice/company, changing their job duties or for any other reason.
 - I agree to report any actual or suspected privacy or security violations made by my employees and/or agents to the Mount Carmel Health System/Trinity Health Privacy Official or Security Official.
 - I understand that Mount Carmel Health System/Trinity Health may terminate my employee and/or agent's access.

MOUNT CARMEL HEALTH SYSTEM CONFIDENTIALITY AND NETWORK ACCESS AGREEMENT

SIGNATURE PAGE RELATIONSHIP TO MOUNT CARMEL HEALTH SYSTEM/TRINITY HEALTH

I am a: (Please check all that apply to you)		
Direct relationships with Mount Carmel Health System		
Associate (employee) at Mount Carmel Health System		
Physician Credentialed on Mount Carmel Health System Medical Staff		
Volunteer at a Mount Carmel Health System Facility		
Temporary/Contractor at a Mount Carmel Health System/ Facility: (name of agency)		
Student at Mount Carmal Health System: (name of educational organization)		
Employed by or Associated with a Mount Carmel Health System Credentialed Medical State	ff Member	
Medical Staff Member's Employee or Temp Staff (name of practice)		
Medical Staff Member's Vendor's Employee (name of vendor)		
Vendor Providing Goods or Services to Mount Carmel Health System		
Employee/Temp Staff of Mount Carmel Health System's clinical services vendor: (name of ve	endor)	
Employee/Temp Staff of Mount Carmel Health System's business services vendor. (name of	vendor)	
Employee/Temp Staff of Mount Carmel Health System's IT services vendor: (name of vendor		
Mount Carmel Health System's Joint Venture or a Facility Managed by Mount Carmel Heal	th System	
Employee of a Mount Carmel Health System's Joint Venture (name of Joint venture)		
Employee of a Hospital/Other Facility Managed by Mount Carmel Health System (name of fa	cility)	
Credentialed Physician on Medical Staff of a Hospital/Other Facility Managed by Mount Carry	nel Health Syst	em:
(name of facility):		
Employee or Temp Staff of a Credentialed Physician on the Medical Staff of a Hospital/O	ther Facility M	anaged by Mount
Carmel Health System: (name of physician's practice)		
Other		
Unaffiliated (non-credentialed) Physician/Other Provider. (name of practice)		
Employee of an Unaffiliated Physician or Facility: (name of practice or facility)		
Employee of a Payer: (name of payer)		
Researcher (Research study name)		
Other (name of employer)		
USER SIGNATURE	Lawrence S	eri Anthurb Niller
If there are any items in this agreement that I do not understand I will ask my Mount Carmel Hea appropriate Mount Carmel Health System contact person for clarification. My signature below a understand and accept this agreement and realize it is a condition of my employment or associat System/ Trinity Health. I also acknowledge that I have received a copy of the Confidentiality and	cknowledges ti tion with Mount	t Carmel Health
Print Name		
	10/30	112
	- 1 - 1	
Signature of Individual to be given access	Date	
EMPLOYER SIGNATURE		
	at or facility pro	wider a vendor
(Required when user is an employee or agent of: a physician/physician practice; other individual that is not a business associate; any other organization unaffiliated with Mount Carmel Health or	Trinity Health.	MIGGI, a VOINGOI
THE IS NOT A DUSTILESS ASSOCIATE, BITY OTHER ORGANIZATION CHARMATER WITH WORK OUTSING FROM IT	rinning riounan	
My signature below acknowledges that I have read, understand and accept my responsibilities a of the user who has signed this agreement above.	s the employer	r or the sponsor
of the agree the agreement exerc.		
Print Nar	di	1
	10/3	0/12
Company of the Landson		
Signature of employer of the individual to be given access	Date	G

MOUNT CARMEL A Member of Trinity Health

DISCLOSURE/CONFLICT OF INTEREST STATEMENT BY EMPLOYED PHYSICIAN, EMPLOYEE AND VOLUNTEER

The purpose of this form is to disclose any interest or affiliations you or a family member may have that may create a conflict of interest, based upon your position at Mount Carmel.

ipon your position at Mount Carmel.
hereby state that I or a member of my family have the following affiliations or interests that might possibly constitute a conflict of interest:

1.	Business Relationship with Mount Carmel: Please identify and describe any business arrangements you or a family member have with Mount Carmel, its affiliates and its subsidiaries.
2.	Relationships External to Mount Carmel: Please describe any employment or other relationship(s) you have with an organization that has a business or other relationship with Mount Carmel or its subsidiaries (including consulting activities, governance/directorship appointments, etc).
3.	Outside Activities: Please identify any outside activities in which you or a family member participate which might constitute a conflict of interest (example: holding a position as an officer, director or consultant to a business entity providing or receiving products or services to/from Mount Carmel).
I a	gree to immediately inform Mount Carmel People Services/Medical Staff Office as appropriate, of any changes in my personal or family mem- et's circumstance relative to conflict of interest which may occur prior to completion of my next annual disclosure statement.
	nderstand that if I terminate my employment or association with Mount Carmel that I will not share any business information that I had access and acknowledge that legal action may result if I do so.
I u	nderstand that the contents of this document will be treated as confidential information accessible only to Mount Carmel's governing board as cessary to determine the existence of a conflict of interest on my part or on the part of a member of my family.
	ORGANIZATIONAL INTEGRITY
Int	n aware of and understand that it is my responsibility to follow the Mount Carmel Standards of Conduct in regard to the Organizational egrity Program. I further understand that if I engage in conduct that violates these policies, I will be subject to discipline up to and including mination.
Na	me: (Please print)
Sig	Date: 10 36 19

Standards of Conduct Acknowledgement and Certification

I acknowledge that I have received a copy of the Mount Carmel Standards of Conduct. I agree to read the Standards of Conduct and discuss any questions I have with my supervisor, a higher-level manager, or other individuals responsible for my relationship with the organization.

I agree to abide by these Standards of Conduct during the course of my employment, medical staff appointment or other business relationship with Mount Carmel. I understand that I will be held accountable for my actions and behaviors inconsistent with the Standards of Conduct. Violations could result in disciplinary action, up to and including termination of employment, suspension of medical staff privileges, or termination of business relationships, as applicable, in accordance with Mount Carmel's and Trinity Health's policies.

NAME:	
Department: Laboratory Phlebotomy MCW	
Organization: Mount Carmel West	
Signature:	
Date: 0/30/12	



HELANI YEMBET 🐼 TO HARMAN A

Mount Carmel Policy and Procedure Acknowledgement of Receipt

I acknowledge receiving a copy of the Mount Carmel Human Resources Policies and Procedures Manual. I recognize as a condition of my employment, to comply with all provisions in this manual and other policies. I understand that no representative of Mount Carmel has the authority to make an agreement contrary to the provisions of this manual.

I recognize that this manual does not constitute a contract of employment. I understand that at any time, for any reason, I can terminate my employment relationship and that Mount Carmel has the same right regarding my employment status. I agree to take any lawful medical substance abuse, or other examination required by Mount Carmel as a condition of my employment, and I understand that my employment can be terminated for refusing to take such a lawful examination.

ASSOCIATE SIGNATURE	_
TODAY'S DATE 10/10/12	
SOCIAL SECURITY NUMBER	_
PRIMARY WORK SITE	
Mount Carmel East Mount Carmel West Mount Carmel St. Ann's	
Mount Carmel New Albany Care Continuum Businesses	
Corporate Services Center Other (please indicate)	



Application for System Access for Physicians, Office Staff and Authorized Contractors for Medical Practices

Please complete the request form below, an asterisks or *** denotes a required field. For assistance, please contact the Physician HELP line at (614) 234-8995.

REQUESTOR'S HOME INFORMATION

First Name*	MI Last N	lame*		Home F	hone Nur	nber*
Home Address*			City* Knoxville		State*	Zip Code* 37923
VERIFI	CATION OF REC	QUESTO	R AUTHORITY AND I	ENTITY	,	
Specify New or Existing User* New User Existing User	User Role*			aff Physi		Resident Other
Clinical License/Certification Type Phlebotomist	(or if mone - Job title)		Number		Expiration	on Date
City of Birth' Sulf Lake Cit	Mothe		u Name.			ur Digits SSN* 5356
			JESTING ACCESS			
Reason for Requesting Access* - S						102.00
Current Patient Treatment If Other, Describe Reason	Coding	Billing	Scheduling [Regist		Other 20000 or 05000000
Practice Name* (Contractors enter prac		R'S OFF	CE INFORMATION Office Telephone Nu	mber*	T Back Offic	ce/Private Humber
Mount Carmel West	the men employer,		Office Telephone Te		2000	
Office Address* (Contractors enter prac	tice then employer)		City* (Practice fren em	ployer)	State*	Zip Code'
First and Last Name of Physician C	ffice Manager	Office	Manager E-mail Addre	58	Busines	s Fax Number
	PHYSICIA	N REOL	ESTORS ONLY			
Pager			Cell Number			
I AM REQUESTIN	IG THE FOLLOV	VING PR	IVILIGE(5) - SELECT	ALL TH	AT APPLY	(*
New or additional clinical softwar	are as specified b			su tedne	sting hom	e access
Applications Requesting Access To		tMaxx	Medical Manager	□ N	exiGen	

Application for System Access Print and Fax 10/15/2009



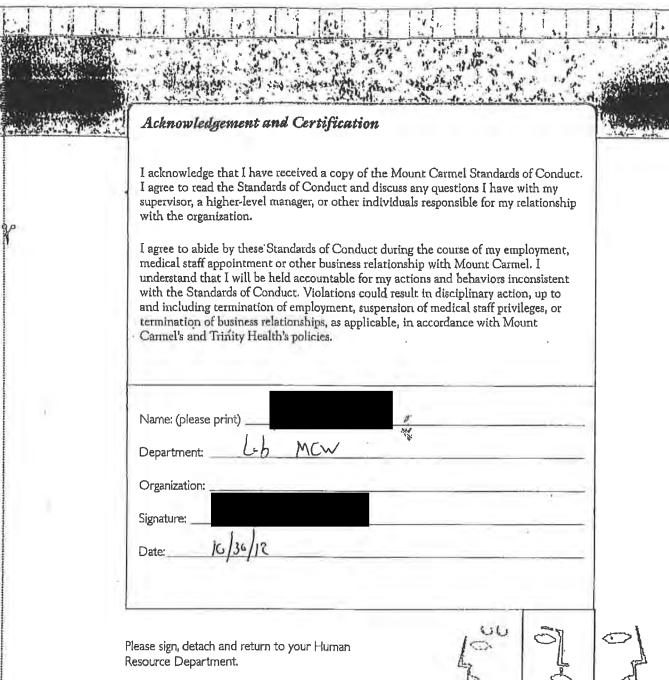
Job Description Acknowledgement Receipt

I have received and read a copy of my current job description and understand its contents.

Signature

Printed Name

16/36/12



New Hire File Audit

Comments			
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Comp			
(2) Reference Complete	7		
Criminal Check Complete			Į,
OIG Clear	•		
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Associate Name;			

Interview Results Form Page 1 of 1



Interview Result Form Submitted By PATRICIA A BENNON (ID #: 222632) On 2012-10-23 20:43:00.0

HR Generalist LAURA A MANGIA

Applicant Name Date Interviewed 09/10/2012

Internal or External Candidate? External Job Code

Position Interviewed For Phlebotomist Cost Center Number OH1MH.19012.002

Department MCW Phlebotomy Cost Center Location MCW Phlebotomy

Job Preview/Shadowing No

Candidate Selected Yes

Start Date 11/05/2012 Requisition Number

Employee Will Be FullTime Certification/Licensure No

Hours Per Week 36 Certificate/License #

Work Shift Hours 2nd shift Exp. Date

Fingerprinting Required? No

Grant Funded? No

Manager Comments Aaron has been working for us as a temp in phlebotomy. He is highly skilled, great customer service aptitude also. We feel fortunate to be able to hire him into a 0.9 hour position on second shift.

		For Human	Resources Use Only	
Rehire		No	Lab & Physical Date Time	10/29/2012 11:00am
Sign-On Bonus Amount		No	Lab & Physical Location	MCW
Payout over		Years		
Starting Hourly Rate (\$)		14.00	Years of Experience	13
Orientation Date		11/05/2012	Referred By	
Self-Study		No		
Position Accepted		- Yes	Reason	
People Service Commo	ents			
Signature	LAURA A	A MANGIA	Date	10/24/2012 14:00:48



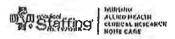




PERSONAL & CONFIDENTIAL

The below named applicant has applied for employment with Medical Staffing Network Healthcare, LLC, and has submitted your name as a former employer, supervisor, or co-worker for reference purposes. The applicant has authorized this request to verify employment and his/her performance. MSN strives to promote the highest quality and service. In keeping with these standards we recruit accordingly and are dependent on receipt of references. MSN appreciates your cooperation in completing this form as objectively as you can. Thank you for your help.

for employment, without any further notice to me. I	ny background, r further authorize billy for employr fall claims, deme	ETED BY APPLICANT eferences, employment record, and other matters related my former employers or any other third party to disclose ment. In addition, I hereby release the company and its of ands, and/or liabilities arising out of or related to such inve	ilcers and
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Applicant's Neme (punt or type) Lest: Position Held: Phyle bytomist			1/2-
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Hospitel/Clinic Cab Corp		Department/Unit: Lab (Phl	ebotomy
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City: 17 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A .		
Phone Numbers: (8(5) 305 459	7		
Reason for Leaving: 25- 884-55	40		
ne to either of above, why?		ant eligible for Re-Hire?No	
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PERSONAL & CONFIDENTIAL

The below named applicant has applied for employment with Medical Staffing Network Healthcare, LLC, and has submitted your name as a former employer, supervisor, or co-worker for reference purposes. The applicant has authorized this request to verify employment and his/her performance. MSN strives to promote the highest quality and service. In keeping with these standards we recruit accordingly and are dependent on receipt of references. MSN appreciates your cooperation in completing this form as objectively as you can. Thank you for your help.

		ALLO SO CITALIA
I authorize the company to thoroughly investigate my bact for employment, without any further notice to me. I furthe all reports and other information related to my suitability to	Kground, references, employment record, and other matters or authorize my former employers or any other third party to corremployment. In addition, I hereby release the company at the co	disclose to the Compan and its officers and uch investigation or
		POPEL
Applicant's Name (print or type) Last:	Firet:	Inilial;
Position Held: Phlip otomist	Employment Dales: From: 3/2004 To:	8/2012
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	Hisan Tille: Sugar sor	-
	Department/Unit: Philips	
Hospital/Clinic: (N. V) COP P	Department/Unit: 7703030	20111g
Street: City: Khixville		-
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Phone Numbers: 815 1305-45-99	1	
· Neggion and American		
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erbal Reference Oblained by	Tille:	Dale:

Mangia, Laura

From:

Anderson, Mary Beth

Sent:

Wednesday, October 24, 2012 9:36 AM

To:

Mangia, Laura

Subject:

Phlebotomist

Attachments: 20121024092400179.pdf

RE:

Laura,

The buy out will be dependent on if he works 40 hours per week until Nov 3. If he does so then it should be around \$2,000.00 (could be less or a little more depending on the exact hours). We will provide the amount as soon as he starts on November 5th. The buyout fee will be invoiced to cost center OH1MH-19012-002.

Attached are his references. He did attend day 1 & 2 of orientation, it is documented in healthstream.

Let me know if you need anything additional @

Mary Beth Anderson

Staffing Manager **Dawson Healthcare Mount Carmel Health System** Office: (614) 234-3702

Fax: (614) 255-1393 Cell: (614) 307-0831 manderson2@mchs.com

From: Mangia, Laura

Sent: Tuesday, October 23, 2012 2:13 PM

To: Anderson, Mary Beth

Phlebotomist Subject: FW:

Importance: High

's contract and have him start on our payroll on November 5th. Hi, Mary Beth! We would like to buy-out Can you please send me any references that you have for him? Also, can you please verify that he did attend both days of system orientation as a temporary? Thanks so much! Laura @

Laura Mangia Generalist, Human Resources Mount Carmel Health System 614/234-7212 614/234-6611 (fax)

This electronic message transmission contains confidential or privileged information from Mount Carmel. The information is intended for use by the individual or entity named above. If you are not the Intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this information is prohibited. If you have received this electronic transmission in error, please notify us immediately by telephone (614-234-8700) or by electronic mail (exchange@mchs.com).

From: McKibben, Sean

Sent: Tuesday, October 23, 2012 12:08 PM

To: Null, Amy; Bush, Dina R

Cc: Mangia, Laura; Kent, Christopher M; Bennon, Patricia

Subject: RE: , Phlebotomist I am in agreement with this.

Approved.

Thanks Sean

From: Null, Amy

Sent: Tuesday, October 23, 2012 9:56 AM

To: Bush, Dina R; McKlbben, Sean

Cc: Mangia, Laura; Kent, Christopher M; Bennon, Patricia

Subject: FW: Phlebotomist

Dina & Sean,

Please see below – in summary, we have a contract phlebo right now who is FABULOUS. We want to hire him; if we keep him on contract until 11/3/12 we can then buy him out for \$2,000. Would you please approve? We are paying him about \$25/hour right now on contract. Thanks,

Amy

Amy Null

System Director, Laboratory Services
Mount Carmel Health System
Office (614) 234-1420
Cell (614) 309-1830
Fax (614) 234-5756

anull@mchs.com

From: Kent, Christopher M

Sent: Monday, October 22, 2012 2:31 PM

To: Null, Amy; Bennon, Patricia

Subject: FW: Phlebotomist

Not that it is a great time to talk about needing money to buy out a contract, however, this would be a great deal for us. It is trained, has received positive feedback from team members, I have received word of appreciation from a nursing staff member because he went out of his way to help with a difficult situation, and possesses a positive attitude, and a good work ethic (former military in combat zones).

Chris

From: Anderson, Mary Beth

Sent: Monday, October 22, 2012 2:20 PM

To: Kent, Christopher M **Cc:** Mangia, Laura

Subject: RE: Phlebotomist

They said it would be around \$2,000. Thanks.

Mary Beth Anderson

ď

Staffing Manager Dawson Healthcare

Mount Carmel Health System

Office: (614) 234-3702 Fax: (614) 255-1393 Cell: (614) 307-0831 manderson2@mchs.com

From: Kent, Christopher M

Sent: Monday, October 22, 2012 8:13 AM

To: Anderson, Mary Beth

Cc: Mangia, Laura

Subject: FW: Phlebotomist

Mary Beth,

Can you please check on the buy-out if we keep on through the end of

on through the end of his present contract (through 11/3)?

Thanksi Chris

Chris

From: Mangia, Laura

Sent: Friday, October 19, 2012 10:43 AM

To: Null, Amy; Bennon, Patricia; Kent, Christopher M

Subject: FW: Phlebotomist

Buy-out for Please let me know... TY! Laura ©

Laura Mangia Generalist, Human Resources Mount Carmel Health System 614/234-7212 614/234-6611 (fax)

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From: Anderson, Mary Beth

Sent: Friday, October 19, 2012 9:41 AM

To: Mangia, Laura

Subject: RE: Phlebotomist

Hi Laura,

\$2640-24th

\$2400 -29th

Let me know of any decisions ©

Mary Beth Anderson

Staffing Manager Dawson Healthcare **Mount Carmel Health System**

Office: (614) 234-3702 Fax: (614) 255-1393 Cell: (614) 307-0831 manderson2@mchs.com

From: Mangia, Laura

Sent: Wednesday, October 17, 2012 4:48 PM

To: Anderson, Mary Beth

Subject: RE: Phiebotomist

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Subject: RE: Phlebotomist

As of what date?

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Sent: Wednesday, October 17, 2012 2:39 PM

To: Anderson, Mary Beth

Subject: Phlebotomist

Importance: High

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Mangia, Laura

From:

McKibben, Sean

Sent:

Tuesday, October 23, 2012 12:08 PM

To:

Null, Amy; Bush, Dina R

Cc:

Mangia, Laura; Kent, Christopher M; Bennon, Patricia

Subject: RE:

Phlebotomist

I am in agreement with this.

Approved.

Thanks Sean

From: Null, Amy

Sent: Tuesday, October 23, 2012 9:56 AM

To: Bush, Dina R; McKibben, Sean

Cc: Mangia, Laura; Kent, Christopher M; Bennon, Patricia

Subject: FW: Phlebotomist

Dina & Sean,

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Amy

Amy Null

System Director, Laboratory Services
Mount Carmel Health System
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electronic mail (exchange@mchs.com).

Laboratory Phlebotomy department at Mount Carmel West. As discussed, your base salary will be \$14.00 per hour. Your manager is Chris Kent, whose phone number is (614) 234-1319.

As mentioned on the telephone, your lab and physical appointment time is Tuesday, October 30, 2012 at 10:00am in Health Services at Mount Carmel West. Upon arrival, you will need to show photo identification (i.e.: driver's license, passport, school ID). Your physical does include a drug and alcohol urinalysis (offer of employment is contingent upon successfully passing the drug and alcohol urinalysis, physical, references and background check). Please allow 1 hour for this appointment.

In addition to your lab and physical you will be required to attend a new associate meeting prior to your first day of employment. Please come to Human Resources at Mount Carmel West. We will review your completed new-hire paperwork as well as provide an overview of Mount Carmel. Please allow 30-45 minutes for this appointment. You must bring with you the following:

Completed new-hire paperwork (sent via e-mail/U.S. mail)
State Issued Photo I.D. (i.e. Drivers License, Passport)
Proof of Eligibility to work in the U.S. (i.e. Social Security Card, Birth Certificate, Passport)
Any Licensure required for your job (i.e. Nursing License, CPR Card, Drivers License)

After your new associate meeting you will be directed to Facilities or Safety & Security to have your photo taken for your Mount Carmel associate ID badge. You will receive your ID badge once your picture has been taken.

Your first day of employment will be Monday, November 5, 2012. You will not need to attend system orientation since you already attended as a temporary associate.

Please note that effective January 1, 2007, Mount Carmel has committed to becoming a tobacco and smoke-free campus. Should you need assistance in personally meeting this expectation, you are encouraged to contact our Health Services or Human Resources Department for available resources.

I am delighted that you have accepted a position at Mount Carmel. If you have any questions, do not hesitate to call me at 614-234-7212. Welcome!

Sincerely,

Laura Mangia

Laura Mangia Human Resources Generalist Cc:file

This letter is intended to confirm the rate of pay and other pertinent employment information. The letter in no way constitutes an employment contract, nor is it intended to be an employment agreement. We reserve our right to exercise an employment at will philosophy.

Mangia, Laura

From:

Mangia, Laura

Sent:

Tuesday, October 23, 2012 4:46 PM

To:

Bennon, Patricia; Kent, Christopher M

Cc:

Null, Amy

Subject:

Importance: High

Hi, Pat & Chris!

has accepted and will be officially a Mount Carmel associate on Monday, November 6th. He is going to do his drug screen next Monday, October 29th at 11am. He will not have to attend orientation since he attended as a temporary associate.

Could one of you please send me an interview result form for him so I can complete his file?

I did let Mary Beth know that we did want to buy-out his contract.

Thanks so much!

Laura @

Laura Mangia Generalist, Human Resources Mount Carmel Health System 614/234-7212 614/234-6611 (fax)

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Amy

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1

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Laura Mangia Generalist, Human Resources Mount Carmel Health System 614/234-7212 614/234-6611 (fax)

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Service	Description		Status
Subject Data	A CONTRACTOR OF THE PARTY OF TH		•
Sex Offenders	Subject Name:	State: National	•
Sex Offenders	Subject Name:	State: Illinois	0
Sex Offenders	Subject Name:	State: Tennessee	•
County Criminal	Felony & Misd Knox, Tennessee		0
County Criminal	Felony & Misd Lake, Illinois		
Federal Criminal	Felony & Misd Knox, Tennessee		0
Federal Criminal	Felony & Misd Lake, Illinois		0
Education			X
Education	Hospital Corp School		X
National Criminal Database	Subject Name:		
OIG & GSA Excluded Parties	OIG & GSA Excluded Parties		0
SanctionsBase Certiphi SanctionsBase			

 ■ Review = Pass \triangle = Pending **⚠** = Pending Possible Key:

NOTICE: Please be advised that Certiphi Screening's "Pass/Review" ratings are exclusively based on objective standards of interpreting background information legally obtained under The Fair Credit Reporting Act (15 U.S.C. section 1681). Such "Pass/Review" assessments should not be inferred nor understood as legally binding indications, recommendations or consumer rating assessments by Certiphi Screening. Any and all interpretive procedures utilized in characterizing what constitutes all "Pass/Review" ratings are established individually by each client of Certiphi Screening and are merely included in said report for that client's specific requirements. Certiphi Screening does not make any employment or contracting decisions for its clients based on background information in accordance with section 1681m of the FCRA.

Due Diligence Investigation Service Entry/Support Positions - Standard Level



Client:

Mount Carmel Health System - Human

Resources

Client Code: 200-200

Requester:

Laura Mangia / 72504.655500

Report #: 2410000

Request Date: 10/04/2012

Delivery Date: 10/17/2012

Personal & Confidential: This report is to only be used in strict adherence to the terms and conditions set forth in our Agreement. © Certiphi Screening, Inc., 2012. All rights reserved. Certiphi Screening, Inc. is a subsidiary company of Vertical Screen, Inc. Direct any questions to Certiphi Screening, Inc., P.O. Box 541, Southampton, PA 18966 USA. Phone: (800) 803-7860; Fax: (888) 260-1380.

Subject Data **Pass** Name: Date of Birth: 01/25/1982 Social Security /ID#: SSN/ID# Validation State Issued: TN Date Issued: DOB Scan: 01/01/1987-12/31/1989 Clear Clear Death Index: Valid SSN/ID#: Yes **Current Address:**

Knoxville, TN 37923 **Knox County**

United States

Other Addresses:

WAUKEGAN, IL 60087

Lake County **United States**

Comments: None

Offender **Pass** is

Source Searched: National Sex Offender Registry

Date of Search: 10/05/2012 Subject Covered: 01/25/1982 Date of Birth:

Search Results: No Records Found

Comments: None

Sex Offender Reg stry Pass

Illinois State Police Statewide Sex Offender Registry Source Searched:

Date of Search: 10/05/2012 Subject Covered:

Date of Birth: 01/25/1982

Search Results: No Records Found Comments:

Sex Offender Registry

Pass

Source Searched: Tennessee Sexual Offender Registry

None

10/09/2012 Date of Search:

Subject Covered: 01/25/1982 Date of Birth:

Search Results: No Records Found

None Comments:

County Criminal Pass

Source Searched **Knox County Criminal Court Records Covered** Felony & Misdemeanor

10/08/2012 Date of Search: Subject Covered:

No records found Search Results:

Comments: None

ou Cr m nal **Pass**

Source Searched: Lake County Circuit Court Records Covered: Felony & Misdemeanor

10/04/2012 Date of Search: Subject Covered:

No records found Search Results:

Comments: None Report -

eral Criminal

Pass

Source Searched: Records Covered: USDC - Eastern District of TN Felony & Misdemeanor.

Date of Search:

10/04/2012

Subject Covered: Search Results:

No records found

Comments:

None

ederal Cr m na

Pass

Source Searched: Records Covered: USDC - Northern District of IL Felony & Misdemeanor

Date of Search:

10/04/2012

Subject Covered: Search Results:

No records found

Comments: None

ucation

Review

Postal Code:37932

School: Location:

Years Attended:

not available

Years Reported by Subject:

00/00/0000 - 00/00/0000

Degree:

not available

Degree Reported by Subject: DegreeScan:

HIGH SCHOOL Clear

Credit Hours Obtained:

not available

not available

Major Reported by Subject:

None reported

Comments:

We have received no response to our request for additional

information. Please contact us with the requested

information if you would like us to continue our attempts to

complete this verification.

Research History

Date

Events

Phone/Source

Thurs, 10/4 10:31AM

Number was not provided - looking for new number Unable to locate new number □ additional review

Thurs, 10/4 10:46AM () -Thurs, 10/4 4:07PM ()-

required Client/applicant contacted-awaiting reply.

Our office is closed today - additional attempts will be

Sat, 10/6

made the following business day.

Sun, 10/7

Our office is closed today - additional attempts will be

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Thurs, 10/11 9:39AM () -

Unable to complete verification with institution.

Applicant Contact History

Date Phone/Source **Events**

Fri, 10/5 1:05PM Sent email to candidate Mon, 10/8 8:12AM Sent email to candidate Tues, 10/9 10:12AM Sent email to candidate Wed, 10/10 9:10AM Sent email to candidate

Fri, 10/12 8:37AM Advised candidate to provide documentation Mon, 10/15 8:07AM Advised candidate to provide documentation Tues, 10/16 3:30PM Advised candidate to provide documentation Wed, 10/17 7:48AM

Candidate did not respond

Education History

Review

School: Hospital Corp School Location: , Postal Code:

Years Attended: not available

Years Reported by Subject: 00/00/0000 - 00/00/0000 not available

Degree Reported by Subject: No Degree

DegreeScan: Clear Credit Hours Obtained: not available not available

Major Reported by Subject: None reported

Comments: We have received no response to our request for additional

information. Please contact us with the requested

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Research History

Date Phone/Source **Events**

Thurs, 10/4 10:31AM Number was not provided - looking for new number Unable to locate new number

additional review

Thurs, 10/4 12:17PM ()required

Thurs, 10/4 4:19PM () -Client/applicant contacted-awaiting reply.

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Thurs, 10/11 9:41AM () -Unable to complete verification with institution.

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Mon, 10/8 8:13AM Sent email to candidate Tues, 10/9 10:12AM Sent email to candidate Wed, 10/10 9:11AM Sent email to candidate

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Wed, 10/17 7:48AM Candidate did not respond Crim nal Database

Pass

Source Searched: National Criminal Database 10/04/2012

Date of Search: Subject Covered: Search Results:

Comments:

No records found

None

O G & GSA Exc uded Part es

Pass

Source Searched: **OIG & GSA Excluded Parties**

Date of Search: Subject Covered: 10/04/2012

Search Results: No records found

Comments: None

Note: This search covers the HHS Office of Inspector General's (OIG) List of Excluded Individuals/Entities (LEIE), and the General Service Administration (GSA) - Excluded Parties List (EPLS). These lists include individuals and entities excluded from federally-funded health care programs, and parties debarred, suspended, proposed for debarment, or declared ineligible by agencies or by the General Accounting Office.

Sanct onsBase ™

Pass

Source Searched: Certiphi SanctionsBase ™

Date of Search: 10/04/2012 Subject Covered:

Search Results: No records found

Comments: None

> The Certiphi ase is a d ase , discipli

The heal atory au istrative actio various database currently contains information from the FDA, NIH, GSA, OFAC as well as hundreds of other federal and state-level licensing and regulatory bodies. Please advise if you would like more detailed information on the exact contents of Certiphi's SanctionsBase.

> **End of Report** Copy of Credit Report Attached

PORT

<POSITION>

*** BEST MATCH ***

<SUBJECT>

CURRENT ADDRESS>

KNOXVILLE TN. 37923

<SSN>

CSSN>

1/82

CDATE RPTD>

4/10

4/10

KNOXVILLE TN. 37932 WAUKEGAN IL. 60087 1/05

JIM COGDILL SALES

2/07 2/07 10/06

U S NAVY 7/03

S P E C I A L M E S S A G E S **** 0001 INQUIRIES ON FILE ***

ID REPORT SERVICED BY:

TRANSUNION 800-888-4213

2 BALDWIN PLACE, P. O. BOX 1000, CHESTER, PA. 19022

END OF TRANSUNION REPORT

EMPLOYEE REQUISITION APPROVAL

Job Title: Phlebotomist Date: 07/11/2012 Job Code: M2301 Hiring Manager Name: Pat Bennon/Chris Kent Hours per Pay: 72 Department (example: MHS00000): Job Location: MCW: OH1MH.19012.002 Shift: 2nd Status: Full-Time Part-Time Casual Budgeted⊠ Unbudgeted□ 1701 Replacement? Yes No Position Previously Filled by (Name): Sheridan Byrd Status Change Transfer; Transfer Date: Other: Reason Associate Vacated Position: Resigned, accepted offer at OSU General Justification/Reason for Filling: Minimum phlebotomy staff required for inpatient phlebotomy, 24/7 department; evening shift position, need minimum number of FTEs to cover the shift (including weekends and holidays). Direct impact on length of stay, patient care, and patient/physician/nursing satisfaction if not adequately staffed.

Additional Information Required for All Requested Positions:

- If your department is over standard YTD, what is your plan to meet standard by the end of the fiscal year?

 N/A
- If your department has a negative salary variance YTD, please explain how you
 plan to meet salary budget by the end of fiscal year.

 Eventual plan to combine phlebotomy and specimen processing staff, assist with
 coverage.
- If this position is not approved, how would you get the work done and who would perform these functions?

 We would need to cover this position with additional OT, extra part-time hours, or agency phlebotomist(s) to meet minimum staffing levels.

Additional Information Required for Supervisory/Management Positions:

- Organizational Chart please forward with signed request
- What is the # and Titles of Direct Reports to this Position?
- Does this Position have Responsibility to Evaluate the Work of Others? If so, what are the positions evaluated?
- Does this Position Directly Manage a Budget? If so, what is the approximate annual budget?
- Does this Position Independently Develop and/or Recommend Policies and Procedures? If so, give examples of the Policies/Procedures.

If this position is new or part of a new program, please include Business Plan (if prepared) and expected return on investment and other expected outcomes as a result of filling this position.

Approved by: Department Head: Pat Bennon, MCW Laboratory Director VP: SVP:

x Δ Department Number Position

FTEs hald for PLT 9.90 Authorized FIEs # FIEs currently filled Vacancy rate

	Manth	Month-To-Dets (MTD)	6	Standard	Yes	Year-To-Date (YTD)	9	Standard
	Prior - 1 Manth	Actual	Budget	Plug Number Below	Actual	Budget	F	
Printery Statistic	4,224	4°154	4,079	0.64	44,316	45,177	45,994	49.0
Total Puld FTEs	12.60	12.73	11.51	0.61	12,60	11.55	12.46	0.80
Payrol Productive Hours	1,930.20	2,099.80	1,683,53	(0.13)	22,302.00	20,118,92	21,414.10	(910)
Temporary/Outsourced Pred Hours	4	*		Salacient Host	4			
Reynoll Nos-Productive Hours	224.35	149,00	151.05	151.05 percent route	1,771.39	1,933.25	2,457.70	
Total Productive Hours/JUS	0.46	0.51	0.46	25.00%	020	0.45	0,49	
Total Teraporary/Outsearced/UOS			,					
Total Nos-productive Hours/JOS	900	900	0.04		0.04	100	90'0	
Tetal Paid Hours/JOS	0.51	0.55	06.0		*60	0.49	10.00	
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	Prior Pay period Last Pey Period	Last Pey Period	C.					
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** Overhired FTEs		•						
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Sitter hours (prior 2 PP)?								
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Education hours (prior 2 PP) ?								
Orientation bours (prior 2 PP)7								

Prior - 1 Bloant Achual Budget Variance Achual Budget Variance Psyrall Productive Dollary \$ 31,343 \$ 34,151 \$ 31,578 \$ 2,590 \$ 34,577 \$ 30,561 Psyrall Nen-Productive Dollary \$ 35,916 \$ 37,415 \$ 2,900 \$ 36,777 \$ 36,777 \$ 31,100 Psyrall Core Dollary \$ 34,916 \$ 37,415 \$ 34,778 \$ 2,637 \$ 369,777 \$ 36,777 \$		1	-		Moeth-To-Date (MTD)	8	e (MTD)				Ye	8	Year-To-Date (YTD)	6	
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	AHR (productive cnly)	49	16.24	49	16.26	10	26'91	*	(0,86)	49	12	19	16.96 \$	64	(0.26)
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at strict y transact	Non-productive time								364						4,635
in Samuel	Total seminor to busines								4 4.07						OF SER

What is the direct inport of not filling the position? If there entiqueled overties/premium pay expected as a realit of not filling the position? Althinum staffing local required to oneer second utilit? I days per week. High turn-over is this job code. TAT for lab draws is mailtened and can What is the Impact of this position on patient estifaction LOS management/throughput and Clinical cerulas delivery?

See above justification. LOS and physicion scattefaction is imported if physician center obtain leb results in a timely maneer.

Is this department petition required to meet elithean staffing levels?

Is this opportunit is useded to center hours of equation? deeps per week.

Is this position dus to see service efforting with bases resulted?

Is this position dus to see services efforting with bases resulted?

No. Philamental rangeal has current eight accord titlif position or of July 28

Peaus captain ratary expense versions.

OT and carval hears or librad new to cover open shifts dow to terminations, transfers, LOAs, jury daty, etc. When is the daynes of difficiality to nearth? Hand to restall qualified, experienced phisbotranists. An impertual job for potital satisfaction, but lower on the solary reals an difficult to find good,

Mangia, Laura

From:

Bennon, Patricia

Sent:

Wednesday, July 11, 2012 4:13 PM

To:

Mangia, Laura

Cc:

Kent, Christopher M; McKibben, Sean; Null, Amy; Contosta, Jeannette; Young, Shari;

Flannery, Kevin J

Subject:

New SRC request for FT Phlebotomy, 2nd shift

Follow Up Flag: Follow up

Flag Status:

Red

Attachments:

SRC - Lab Phlebo Eve shift 19012 07-11-2012.xls; Employee Req - Lab Phlebotomist

19012 (eve shift 0.9 fte) Sheridan Byrd 07-11-2012.doc

We received a resignation today in Phlebotomy and if possible would like to have it included in the SRC reviews for this week. We are at critical staffing levels right now and need to make sure we get the open positions filled and new staff trained ASAP.

Thanks,

Pat Bennon, MHA, MT
Director, Mount Carmel West Laboratory
Mount Carmel Health System
793 W. State Street
Columbus, Ohio 43222
Phone (614) 234-3355
Fax (614 234-1373
email: pbennon@mchs.com

Mangia, Laura

From:

McKibben, Sean

Sent:

Thursday, July 12, 2012 7:21 AM

To:

Mangia, Laura

Subject: RE: New SRC request for FT Phlebotomy, 2nd shift

Thanks!

From: Mangia, Laura

Sent: Thursday, July 12, 2012 7:21 AM **To:** McKibben, Sean; Bennon, Patricia

Cc: Kent, Christopher M; Null, Amy; Contosta, Jeannette; Young, Shari; Flannery, Kevin J

Subject: RE: New SRC request for FT Phlebotomy, 2nd shift

Hi, Sean - thank you for your approval. Yes, we can absolutely get it on for today - I was waiting to hear from you

before I sent it out. Thank you! Laura

From: McKibben, Sean

Sent: Thu 7/12/2012 7:07 AM
To: Bennon, Patricia; Mangia, Laura

Cc: Kent, Christopher M; Null, Amy; Contosta, Jeannette; Young, Shari; Flannery, Kevin J

Subject: RE: New SRC request for FT Phlebotomy, 2nd shift

Approved.....Laura can we get it on today's agenda?

From: Bennon, Patricia

Sent: Wednesday, July 11, 2012 4:13 PM

To: Mangla, Laura

Cc: Kent, Christopher M; McKibben, Sean; Null, Amy; Contosta, Jeannette; Young, Shari; Flannery, Kevin J

Subject: New SRC request for FT Phlebotomy, 2nd shift

We received a resignation today in Phlebotomy and if possible would like to have it included in the SRC reviews for this week. We are at critical staffing levels right now and need to make sure we get the open positions filled and new staff trained ASAP.

Thanks,

Pat Bennon, MHA, MT
Director, Mount Carmel West Laboratory
Mount Carmel Health System
793 W. State Street
Columbus, Ohio 43222
Phone (614) 234-3355
Fax (614 234-1373
email: pbennon@mchs.com

Job Application



Position Applied For

Position: Phlebotomist Facility: Mount Carmel East

Department: Clinical Laboratory MCE

Schedule: Part time Req Num: 20122226

Application for Employment

We consider applicants for all positions without regard to race, color, religion, creed, national origin, age, disability, sexual orientation, marital status, or any other legally protected status.

Instructions to Applicant

- 1. You must fully and accurately complete the Application for Employment, Incomplete applications will not be considered. Mount Carmel Health System may use the information given in the application to investigate the applicant's previous employment and background.
- If you are hired, proof of citizenship or immigration status will be required to verify your lawful right to work in the

* Required Information

August 20, 2012

PERSONAL INFORMATION

Are you a current associate of Mount Carmel Health No.

Are you a current associate with any other Trinity Health No. Ministry Organization?*

First Name:*

Last Name:*

Address:*

City:* Knoxville

State:* TN Province/Region:

Zip:* 37923

Country:* United States

County of Residence: * Knox

Social Security Number:*

Home/Other Phone:*

Work Phone: 865-305-4599

Cell Phone:

Best way to contact: No Preference

Email Address:*

EDUCATION

High School

Name of school: Degree Type: HIGH SCHOOL Street: Did you graduate? Yes

City: Knoxville State: TN Province: Zip: 37932

Country: United States

Other

Name of school: Hospital Corp School

Major:

Street:

Degree Type:

Citv:

Did you graduate? Yes

State: Province:

Zip:

Country:

List scholastic honors, specialized training, apprenticeship, and extra-curricular activities that may be helpful in considering your application:

United States Navy Hospital Corp School.

LICENSES/CERTIFICATIONS

Professional Licensure

Please Provide Professional Licenses/Registrations held. Include License Number and Expiration Date.

Type

State

Number

Date Issued

Expiration Date

Temp / Perm

If you are applying for a job category that requires licensure, please answer the following question: Is your license currently subject to any investigation by a licensing agency?

DRIVING INFORMATION

If the position you are applying for requires you to drive a motor vehicle you must possess a valid driver's license. Please provide your license information if applicable.

Driver License Number

Driver License Type

Plate Number

State of Issue

Date Issued

Date Expired

Personal

560-ZFT

TN

02 2012

01 2017

No

Has your driver's license ever been suspended, revoked or modified?, If Yes Explain:

WORK HISTORY

Please include a complete employment history (up to 10 years is preferred), beginning with your most recent employer. Make sure you include volunteer work or other job related training which provides information on skills/abilities you have developed. It is important to be accurate and complete since your pay rate is related to your experience.

Are you presently employed? Yes

1. Current/most recent employer:

Name of Company:* Lab Corp of America

Street:

City:* Knoxville

State:* TN

Zip:* 37922

ProvInce/Region:

Country:* United States

Employer's Phone:* 865-305-4599

Other Name(s) Used:

Job Title:* psts

Employed From:* 04 2009

Starting Salary:* 14.25

Ending Salary:* 14.96

Supervisor's Name:* Brenda Hutchinson

Employment Status: Full Time

Job Duties and Responsibilities:*
phlebotomy and patient care

Reason For Leaving:*
Moving to ohio to be closer to family.

May we contact this employer for a reference?

* Yes

Are there any gaps in employment history? If yes please explain:

MILITARY SERVICE

Were/Are you a member of the U.S. Armed Forces? Yes

Branch of Service: United States navy

Period of Active Duty: From: 08 2000

To: 10 2006

REFERENCES

Please give three professional references (DO NOT list relatives or personal references)

Name Name of Company Phone Number Em

Email Address

Relationship

Years Known

ADDITIONAL INFORMATION

Minimum Salary Required:* 14.00

When will you be available to begin work? June 1st

How did you find out about this position?* Indeed.com

If you selected other, please enter "Other" source:

If you were referred by an associate, please list their name (s):

If you heard from an advertisement, please list the publication:

	_	
1		-
2	٠,	P

	Which job status/shift would you accept? (please check all that apply) (X) Full Time (X) Day (X) Sunday (X) Monday (_) On Call (_) Night (_) Holiday (_) Temporary (_) Rotating Shifts (X) Sunday (X) Wednesday (_) Rotating Shifts (X) Friday (X) Saturday
Please answer al	I of the following questions. Do you have any relative(s) working for Mount Carmel Health System?
No	If yes, please list their : Name: Relationship:
* No	Have you ever been employed by any member of Mount Carmel Health System or any other facility sponsored by Trinity Health?
	If yes, enter the name and address of member/facility and dates of employment: Name: Address: Dates of employment:
* No	Have you ever worked or attended school under another name?
	If yes, what name(s):
* Yes	Are you 18 years of age or older?
* Yes	Do you have the legal right to remain and work in the United States and after employment, can you submit legal verification of your legal right to work in the United States?
* No	Have you ever been involuntarily terminated or involuntarily dismissed from a former position or job? Note: Involuntary termination is not an automatic bar to employment; all circumstances will be considered.
	If yes, please explain:
* No	Other than a minor traffic violation, have you ever pled guilty to or been convicted of any crime?
	If yes, give the Offense, the dates pled guilty or convicted, and the Name and Location of the court that convicted you. Please include felonies, misdemeanors, nolo contendres. DO NOT include crimes adjudicated in invention managing. Note: Appropriate "you" to this question #44.7 not
	adjudicated in juvenile proceedings. Note: Answering "yes" to this question MAY not automatically disqualify you from consideration. Misstatements and/or omissions on this question will disqualify you from consideration.
* No	Do you have any pending criminal charges against you?
* No	Have you ever been sanctioned by the Office of Inspector General of the Department of Health and Human Services (HHS/OIG) or the Government Services Administration (GSA) or excluded or suspended from participation in any federal or state health care program?
RESUME	
	your resume: e text on the resume you want to copy. C' to copy (Hold down the Ctrl key and press C).

- 3. Place the cursor in the RESUME box below.
- 4. Press 'Ctrl V' to paste the information.

Cover Letter

Resume

Knoxville, TN 37923

Home:

? Cell: (865)257.8773

Work Experience 1999 - Present

Lab Corp of America 03/2009 - Present

1932 Alcoa Highway Bldg C155 * Knoxville, TN 37920

Position: Patient Service Technician Specialist

Responsibilities: Patient care, Implementing proper procedure for blood draws

including Stats, AP, Routine, Emergency, Legal, Trama, Pediatric, Neonatal), Retrieving

Specimens, Cultures, and Tissue Samples, Inventory Control, Medical Knowledge.

Achievements: Team Player of the Week Award for Highest Productivity and 100% TAT

Multiple weeks in a row.

Knoxville Convention Center 02/2008 -08/2008

701 Henley Street * Knoxville, TN 37902

Position: Event Technician

Responsibilities: Event Preparation, Equipment Set-up, Serving Food, Audio Set-up.

Jim Cogdill Dodge 01/2007 - 02/2008

8544 Kingston Pike * Knoxville, TN 37919

Position: Lead Associate

Responsibilities: New / Used Auto Sales, Commercial Auto Sales, Inventory Control, Training New Sales Associates, Financial Management, Credit Checking, Customer Service, Personal Shopper, Internet Sales, Special Order Sales, Product Knowledge.

Dicks Sporting Goods 06/2006 - 12/2006

221 North Peters Road * Knoxville, TN 37923

Position: Lead Fitness Associate, Hunting Lodge Manager - Gun Salesman

Responsibilities: Fitness Equipment Assembly, Loading and Unloading of Merchandise, Sales Associate,

Customer Service & Assistance, Product Knowledge, Product Assembly.

Parkwest Medical Center 11/2005 - 05/2006

9352 Park West Boulevard * Knoxville, TN 37923

Position: Materials Associate

Responsibilities: Inventory Control, ER and OR Surgery Instrument Preparation, Emergency Materials

Runner, Biohazard Waste Management, and Instrument Sterilization.

US Navy 08/2000 - 11/2005

(See Military Work Experience: Page 3)

Pep Boys 12/1999 - 05/2000

106 Market Place Boulevard * Knoxville, TN 37922

Position: Intermediate Mechanic

Responsibilities: Changed Oll, Alignment, Changed and Rotated Tires,

Education

1996 - Present

Pellissippi State Technical Community College 2006 - 2008

Special Courses: Media Technologies, Mac I & II, Design I & II, Typography.

Major: Communications Graphic Technology.

Degree: In Progress

University of Phoenix 2005

Courses: On-Line: General Studies 101, B+

Degree: Transferred

Great Lakes Naval Hospital Corps School (A-school), 2000 - 2001

Great Lakes Naval Training Center

Special Courses: EMT, Cardiac Care, Pharmacy Certificate: Graduate of Naval Hospital Corps School

Great Lakes Naval Training Center (Boot Camp) 2000

Degree: Graduated

Farragut High School 1996 - 2000

Special Courses: Graphic Design I, II, &III; Drafting I, II, & III

Degree: High School Diploma

Honors / Awards

US Joint Services Achievement Medal - in support of Operation Enduring Freedom and the Global War on Terrorism

Combat Action Ribbon

Navy Meritorious Unit Commendation

Navy Good Conduct Medal Navy & Marine Overseas Service Ribbon

Global War on Terrorism Service Medal

National Defense Service Medal

Navy Expert Rifleman Medal (Sharpshooter)

Navy Expert Pistol Medal (Sharpshooter)

Military Work Experience

U S Navy 10/09/2005 Honorable Discharge

Pensacola Naval Air Station and Hospital 5/2005 - 10/2005 BMC Corry Station Clinic

(see below)

Guantanamo Bay Naval Station (GTMO)/ Southern Command 11/2004 - 5/2005

Rank: HM (E-3) / Top Security Clearance

Responsibilities: Provided highest standard and emergent care to: a population of over 500 Taliban and Al Qaeda detainees and Taliban and El Qaeda insurgents during their capture and transport from Afghanistan or Iraq to the detention center at GTMO. Provide medical assistance to US casualties while on-station in Iraq and Afghanistan.

Special Training: Anti-Terrorism, Suicide Prevention, Cell Extraction.

Pensacola Naval Air Station and Hospital 9/2003 - 10/2004

BMC Corry Station Clinic

Supply Petty Officer (annual budget - \$180K)

Responsibilities: Medical Records Keeping - input/verification; Patient Treatment general sick call; Basic lab

technician with phlebotomy as a regular duty

Training Lectures Given: Sexual Transmitted Disease Prevention Education; Biological/Chemical Weapons

and Threat Agents
Community Service: Habitat for Humanity

Special Training: Helicopter Search & Rescue / Hurricane Ivan Rescue and Recovery

Great Lakes Naval Hospital and Clinic 04/2001 - 9/2003

Rank: HM (E-3)

Responsibilities: Assisting in the prevention and treatment of disease and injuries; Preparing/Administering medications including injections; Caring for the sick and injured; Administering immunization programs; Rendering emergency medical treatment; Instructing sailors and marines in first aid, Self aid and personal hygiene procedures; Transporting the sick and injured; Conducting preliminary physical examinations; Performing medical administrative, Supply, and Accounting procedures; Maintaining treatment records and reports; Supervising shipboard and field environmental sanitation and preventive medicine programs; Supervising air, water, food and habitability standards, General sick call and medial records input/verification, Basic lab tech with phlebotomy as a regular duty,

Training Lectures Given: Sexual Transmitted Diseases, Sexual Harassment, and Suicide Awareness. Community Service: Worked at the Clinic (USS Red Rover Training Command Clinic), High School volunteer

work, from counseling to High school football games.

Special Training: Auxiliary Security Force Training - ASF (post 9/11) Basic police force policies, procedures, and tactics including vehicle patrol, security measures and surveillance; small arms and rifle training.

READ AND SIGN

Read the following carefully before signing.

As an applicant for employment at Mount Carmel Health System, it is important to understand we enforce a Tobacco Free Workday - Every Day policy. What this means for associates is they may not use tobacco products at any time during their work shifts, even during breaks, and whether on or off campus. During the shift, your personal presence including clothing, must be free of the odor of tobacco or tobacco smoke.

Please type your name below in agreement with this policy.

Candidate's/Applicant's Signature: Aaron Cole

Applicant Authorization and Release:

I certify that the information contained in this application is correct to the best of my knowledge and understand that any falsification, misrepresentation or omission on this application is grounds for refusal to hire, or if hired, dismissal. I authorize any of the persons or organizations referenced in this application to give Mount Carmel Health System any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application and release all or such parties and the Hospital from all liability for any damage that may result from furnishing such information. I authorize Mount Carmel Health System to request, receive and use such information and release Mount Carmel Health System from any liability regarding the use of such information. I specifically waive any written notice provisions required by state or federal law. Further, I understand and agree that Mount Carmel Health System and/or any affiliate may conduct an investigation into criminal history, past employment, education records, Medicare/Medicaid Fraud check and agree to cooperate in any investigation and release all of such parties and the Hospital from all liability for any damage that may result from furnishing such information. Additionally, Mount Carmel Health System may, through a testing service of its choice, collect a blood, urine, hair, saliva, or breath sample from me and conduct necessary medical tests to determine the presence or use of drugs and/or alcohol, including controlled substances. I hereby release Mount Carmel Health System and its employees from any liability arising out of such test and agree to be bound by its results. I agree that the test results and other relevant medical information may be released to Mount Carmel Health System for appropriate review. I also understand that if I refuse to execute this consent, I will not be considered for employment with Mount Carmel Health System. If I am accepted for employment with Mount Carmel Health System, I agree to comply with its Drug Free Workplace Policy. I understand that my employment is contingent upon successfully completing any background check or post offer physical exam.

I understand and agree that this application for employment and any of the investigations conducted regarding my application may be shared with any other members of Mount Carmel Health System and/or affiliates for other employment opportunities.

I agree to comply with Mount Carmel Health System rules, regulations and policies and acknowledge that these rules, regulations and policies may be changed, interpreted, withdrawn, or supplemented any time, and without prior notice to me. I understand that I am required to follow all policies, procedures, rules or regulations of Mount Carmel Health System and/or its affiliates and that any violation may result in disciplinary action including termination of my employment.

I understand that I must be willing and able to rotate shifts, work Saturdays, Sundays and Holidays as required by

Job Application Page 8 of 8

Mount Carmel Health System and/or affiliates.

I acknowledge that any offer of employment, or my acceptance of an employment offer, if such is to occur, may be withdrawn, with or without cause, and with or without prior notice, at any time, at the option of Mount Carmel Health System or myself. I understand that this application and any other documents, which I may receive, are not contracts of employment. If employed, I understand that I will be an employee "at will" and either Mount Carmel Health System or I may terminate my employment relationship at any time with or without notice for any reason not violative of the law. I further understand that no representative of Mount Carmel Health System other than an officer has any authority to enter into any agreement for employment for any specified period of time or to assume any other personnel action, either prior to commencement of employment or after I have become employed, or to assure any benefits or terms and conditions of employment, or make any agreement contrary to the foregoing.

My typed name below shall have the same force and effect as my written signature.

Candidate's/Applicant's Signature:

Date: August 20, 2012

Mangia, Laura

From: Anderson, Mary Beth

Sent: Friday, October 19, 2012 10:43 AM

To: Mangia, Laura

Subject: RE: Phlebotomist

Thanks ©

Mary Beth Anderson

Staffing Manager
Dawson Healthcare
Mount Carmel Health System
Office: (614) 234-3702

Fax: (614) 255-1393 Cell: (614) 307-0831 manderson2@mchs.com

From: Mangia, Laura

Sent: Friday, October 19, 2012 10:42 AM

To: Anderson, Mary Beth

Subject: RE: Phlebotomist

Thanks, Mary Beth! No more news yet about the hold – Alan is coming over for lunch though so I will ask him to get back to you this afternoon. ©

Laura Mangia Generalist, Human Resources Mount Carmel Health System 614/234-7212 614/234-6611 (fax)

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From: Anderson, Mary Beth

Sent: Friday, October 19, 2012 10:17 AM

To: Mangia, Laura

Subject: RE: Phlebotomist

His contract is supposed to be up on 11/3 but since that was only an 8 week assignment he would not be at his 520 hours ©

Have you received any more news from Alan regarding the hold? I have not received any since the first day you and I spoke.

Mary Beth Anderson

Staffing Manager
Dawson Healthcare
Mount Carmel Health System
Office: (614) 234-3702

Fax: (614) 255-1393

Cell: (614) 307-0831 manderson2@mchs.com

From: Mangia, Laura

Sent: Friday, October 19, 2012 10:09 AM

To: Anderson, Mary Beth

Subject: RE: Phlebotomist

Thanks, Mary Beth! When would his contract period be up please? Sorry, I have so many reports open – feeling a bit overwhelmed... ③

Laura Mangia Generalist, Human Resources Mount Carmel Health System 614/234-7212 614/234-6611 (fax)

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From: Anderson, Mary Beth

Sent: Friday, October 19, 2012 9:41 AM

To: Mangia, Laura

Subject: RE: Phlebotomist

Hi Laura,

\$2640-24th

\$2400 -29th

Let me know of any decisions ©

Mary Beth Anderson

Staffing Manager
Dawson Healthcare
Mount Carmel Health System
Office: (614) 234-3702

Fax: (614) 255-1393 Cell: (614) 307-0831 manderson2@mchs.com

From: Mangia, Laura

Sent: Wednesday, October 17, 2012 4:48 PM

To: Anderson, Mary Beth

Subject: RE: Phlebotomist

Is it better to do a complete week or could we look at mid-week next week? If middle of the week doesn't work, let's just look at October 29th... If middle of the week is possible, could you possibly ask for buy-out effective for both dates? Thanks, Mary Beth! Laura:)

From: Anderson, Mary Beth Sent: Wed 10/17/2012 3:53 PM

To: Mangia, Laura	_
Subject: RE:	Phlebotomist

As of what date?

From: Mangia, Laura

Sent: Wednesday, October 17, 2012 2:39 PM

To: Anderson, Mary Beth

Subject: Phlebotomist

Importance: High

Hi, Mary Beth!

Can you please check on a buy-out rate for us on

Thank you!

Laura ©

Laura Mangia Generalist, Human Resources Mount Carmel Health System 614/234-7212 614/234-6611 (fax)

This electronic message transmission contains confidential or privileged information from Mount Carmel. The information is intended for use by the individual or entity named above. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this information is prohibited. If you have received this electronic transmission in error, please notify us immediately by telephone (614-234-8700) or by electronic mail (exchange@mchs.com).

Internal) View Candidate: Mr.

Jobs Applied to 14

Overview

Overview

Experience

none entered

Websites

none entered

Skills

none entered

Education

none entered

Candidate Information

Added By Mr.

Duplicates

Potential Duplicates

Type	Name	Eligible for Rehire	Match Reasons	Merge	Remove
Candidate	AARON Cole				
Employee	Alexandra Cole (Terminated) (4205673) No	S.			
Employee	Allison Cole (4253904)				
Employee	Angela L Cole (5055204)				
Employee	Angela Gaye Cole (1811892)				
Employee	Dr. Arthur N Cole (Terminated) (267639)				
Employee	Ms. Amy R Cole (269890)				
Employee	Amy Cole (4266311)				
Employee	Angela Cole (4210028)				
Employee	Audrey Cole (4262194)				
Employee	Audrey Cole (5049839)				
Employee	Ms. Allison L Cole (4052581)				
Candidate	Andrea Cole				
Candidate	Andrea Cole				

View Candidate: Mr.

Type	Name	Eligible for Rehire	Match Reasons	Merce	Remove
Candidate				5	DAOIION.
Candidate					

View Candidate: Mr.

Туре	Name	Eligible for Rehire	Match Reasons	Merae	Remove
Candidate				200	
Candidate					
Candidate					

Additional Data

View As Of 07/19/2019

SkillSurvey Reference Check

Survey ID

Screening

Screening Questions

Questionnaire Internal Standard Questionnaire: Trinity Health V5

Respondent Mr. Submission Date 06/28/2019

Question	An	Answers
Have you communicated your interest in this position to your current Manager?	Answers	Yes
As a current colleague are you looking to add this opportunity as an Additional Job?	Answers	o _N
Have you had any disciplinary action in the past 12 month's	Answers	o _N
If yes, to disciplinary questions, please provide details.		
If you are aware of any relatives that currently work for any organization within the Trinity Health System, please provide their name and contact information here.		
Which shifts are you willing to work? (Select one or more)	Answers	Nights, Evenings, Weekends, Rotating, Days
Are you willing to travel for work?	Answers	<25% travel
Are you willing to relocate?	Answers	o _N
Are you legally able to remain and work in the United States without Sponsorship?	Answers	Yes
Are you 18 years of age or older?	Answers	Yes
Have you ever been sanctioned or are you currently under investigation by the Office of Inspector General of the Department of Health and Human Services (HHS/OIG) of the Government Services Administration (GSA) or excluded or suspended from participation in any federal or state health care program? Sanctions. Exclusions, or Suspensions Details	Answers	No

View Candidate: Mr.

Answers ž Answers What is your desired minimum pay rate in dollars? (provide as an annual or hourly amount) Have you ever been found or are you currently under investigation to have engaged in substantiated abuse or neglect of children or adults under the laws of any states of the United States?

Assessments

none entered

Background Check History

none entered

Interview

Interview Feedback

Overall Average Rating 5 (out of 5)

Ratings Submitted 1 of 1 Interviewer Feedback Received

Interview - 00147253 Armed Safety and Security Officer - Security - Mount Carmel St. Ann's (Fill Date: 07/21/2019)

Overall Rating 5 (out of 5) - Highly Recommended Feedback Submitted Interviewer

Time Zone

Mr. Jeremy M Reisinger (4033234)

Questionnaire Results

Initial Application

Questionnaire Internal Standard Questionnaire: Trinity Health V5

Respondent Mr. Aaron D Cole (285671)

Submission Date 06/28/2019

Question	Answers
Have you communicated your interest in this position to your current Manager?	Answers Yes
As a current colleague are you looking to add this opportunity as an Additional Job?	Answers

View Candidate: Mr.

Question	Answers	
Have you had any disciplinary action in the past 12 month's	Answers No	
If yes, to disciplinary questions, please provide details.		
If you are aware of any relatives that currently work for any organization within the Trinity Health System, please provide their name and contact information here.		
Which shifts are you willing to work? (Select one or more)	Answers Nights, Evenings, Weekends, Rotating, Days	ekends, Rotating, Days
Are you willing to travel for work?	Answers <25% travel	
Are you willing to relocate?	Answers No	
Are you legally able to remain and work in the United States without Sponsorship?	Answers Yes	
Are you 18 years of age or older?	Answers Yes	
Have you ever been sanctioned or are you currently under investigation by the Office of Inspector General of the Department of Health and Human Services (HHS/OIG) of the Government Services Administration (GSA) or excluded or suspended from participation in any federal or state health care program?	Answers No	
Sanctions, Exclusions, or Suspensions Details		
Have you ever been found or are you currently under investigation to have engaged in substantiated abuse or neglect of children or adults under the laws of any states of the United States? What is your desired minimum nay rate in dollars?	Answers No	

Offer

Questionnaire Offer Details - Do NOT select "None of the Above"

Derek Doncyson (4250399) 07/02/2019

Respondent Submission Date

Question	Answers
What is the pay type for this offer?	Answers Hourly
Does this offer include a relocation package?	Answers No
Is this offer for a Work from Home Employee?	Answers No
Is this a Union Job?	Answers No
FOR INTERNAL: Is there a change in benefits?	Answers No change or is not applicable

Attachments

Attachments

View Candidate: Mr.

Resume / Cover Letter

Attachment Other Documents

Attachment

Category

Offer

Offer Details

Job Details

07/21/2019 Hire Date

MCHS - Mount Carmel St. Ann's Location

Data Change > Transfer > Move to Another Manager (Reporting Relationship Change) Hire Reason

MCHS_Armed Safety and Security Officer_M4850 Job Profile

MCHS_Armed Safety and Security Officer_M4850 **Business Title**

40 Default Weekly Hours

Scheduled Weekly Hours

Contract End Date

Compensation

Totals

Total Base Pay	Currency	Programme
		i reduction
	1800 030	7
		AIRO

Trinity Health - Compensation Package Compensation Package

MCHS_Structure Grade

MCHS 9 Grade Profile

OH_MCHS Mount Carmel Health System Company

Plan Assignments

Plan Type	Compensation Plan	Assignment
Allowance	MCHS - On Call	2.00 USD Hourdy
Allowance	MCHS - Night Differential	2.50 USD Hourdy
Allowance	MCHS - Evening Differential	2 00 USD Hourdy
Allowance	MCHS - Charge Pay	1.00 USD Hourly
Allowance	MCHS - Weekend Differential	1.00 USD Hourly
Houriv	TH Hourly Plan	18 OO LICE LINES

Attachments

View Candidate: Mr.

Generated Documents

Trinity Health Systems Office Office	The same of the sa		TOTAL DELECTION
ministrication observed cetter - intermal		07/03/2019 08:32:05 PM	Trinity Hoolth Synthesis Office
07/02/2019 pdf			illing reguli oystems one

Reminders

Upcoming

none entered

Completed

none entered



Complete Report

Social Security Number: DOB: Jan 25, 1982

Prepared By: HireRight

3349 Michelson Dr. Suite 150 Irvine, CA 92612

Phone: 866-521-6995

Fax: 877-797-3442 customerservice@hireright.com

Request #: HA-070319-A86Q7

Turnaround time: 38 seconds

Package: Custom

Requested By:
Derek Doncyson
Trinity Health Corporation (Mount Carmel, OH)
6150 East Broad Street

Columbus, OH 43213 Phone: (614) 546-3474

E-mail: Derek.Doncyson@mchs.com

Date Request Submitted: Jul 3, 2019 5:19 AM PDT
Request Completion Date: Jul 3, 2019 5:20 AM PDT
Adjudication Status: Meets Company Standards (change)
Adjudication Status Set: Jul 15, 2019 5:39 AM PDT
Adjudication Pending Date: Jul 3, 2019 5:20 AM PDT

Product	Verification	Result	Adjudication Result
MVR	UG797436, OH, USA	Complete - No Violation Data Found	

Reviewer's Comments

Comments from Trinity Health Corporation (Mount Carmel, OH) Adjudicated by Ashley Beckham (Jul 15, 2019 5:39 AM PDT) Adjudication Status: Meets Company Standards **MVR**

MVR

Complete - No Violation Data

Found 1

Time Completed: Jul 3, 2019 5:20 AM PDT

Name:

License Number:

State Issued:

Date License was First Issued:



ОН

Information Provided

Information Corrected

License Number:

Driver's License First Name:

Driver's License Middle Name:

Driver's License Last Name:

License and Permit Information:

License Type:

1. PERSONAL

Class D

Class OPERATOR

Description

Issued Date May 22, 2019

Expiration Jan 25, 2022

Date

Status VALID

Restrictions CORRECTIVE LENSES

Endorsements MOTORCYCLE

Misc Data:

Indicates if the driver is deceased or not:

Ν

NO DRIVER RECORDS IN FILE

Activity Log

Activity	Date/Time	Performed By	Recipient	Result
Report	Jul 3, 2019 5:19	Trinity Health Corporation (Mount		

Submitted	AM PDT	Carmel, OH)		
Adjudicated	Jul 3, 2019 5:20 AM PDT	HireRight		Pending
Email Notification	Jul 3, 2019 5:20 AM PDT	HireRight System	Trinity Health Corporation (Mount Carmel, OH)	Pending
Adjudicated	Jul 15, 2019 5:39 AM PDT	Trinity Health Corporation (Mount Carmel, OH)		Meets Company Standards

¹ "Complete" indicates that this request has been processed to conclusion. Please review the report details in their entirety to evaluate any potential discrepancies or records related to this request.

All times listed in America/Los_Angeles timezone

The Activity Log above may reflect activity for this screening report. E-mail notifications, if configured by the company that requested the report, may have been sent by or through HireRight to an authorized company-user (shown as the "Recipient"). Some adjudication history entries and related e-mail notifications, if any, indicate whether an initial determination was made regarding whether the report satisfied the company's hiring criteria (shown in the "Result" column), including any preliminary status Result of "Meets" or "Does Not Meet" company standards. Sometimes a company's final adjudication determination may change from its initial determination. Questions about the company's hiring decisions should be directed to the company.

LEGAL NOTES:

This report contains personal information, and should be handled at all times in accordance with your Service Agreement with HireRight and applicable law. Proper use of the content of this report, and final verification of the named individual's identity, are your responsibility.



07/02/2019

Mr.
Grove City, Ohio43123
Dear ,
On behalf of Mount Carmel, I am pleased to confirm our offer for the Full-time Armed Security Officer position at the Mount Carmel St. Ann's Campus.
Your manager is: Jeremy Reisinger
 Your transfer: includes a change in pay. Your new compensation is: \$18.00USD/HR
Your official transfer date will be: July 21st 2019
I am delighted that you have accepted a new position at Mount Carmel. If you have any questions, do not hesitate to call me at (614)-546-3474. Congratulations!
Sincerely,
Derek Doncyson Talent Acquisition Partner, Human Resources Mount Carmel Health System A Member of Trinity Health
Cc: Supporting documents

This letter is intended to confirm the rate of pay and other pertinent employment information. The letter does not constitute an employment contract, nor is it intended to be an employment agreement. We reserve our right to exercise an employment at will

Sponsored by Catholic Health Ministries.

(Internal)

philosophy.

Name: Mr.



Signature: daron Xole

Date: Jul 3, 2019

Grove City, Ohio 43123 Mobile: (614)886.8114 Cole.AaronD@gmail.com

Work Experience

1999 - Present

Mount Carmel Grove City

5300 N Meadows Drive Grove City, OH 43123

Position: Critical Care Technician

<u>Responsibilities:</u> Patient care, Implementing proper procedure for blood draws including Stats, AP, Routine, Emergency, Legal, Trauma, Retrieving and Processing Specimens, Cultures, and Tissue Samples, Inventory Control, Medical Knowledge.

Lab Corp of America

03/2009 - 08/2012

11/2012 - present

1932 Alcoa Highway Building C155 • Knoxville, TN 37920

Position: Patient Service Technician Specialist

Responsibilities: Patient care, Implementing proper procedure for blood draws including Stats, AP, Routine, Emergency, Legal, Trauma, Pediatric, Neonatal, Retrieving Specimens, Cultures, and Tissue Samples, Inventory Control, Medical Knowledge.

Achievements: Above and Beyond Award - For going above and beyond to save a life. Team Player of the Week Award - For Highest Productivity and 100% TAT (Multiple weeks in a row).

<u>Responsibilities:</u> Fitness Equipment Assembly, Loading and Unloading of Merchandise, Sales Associate, Customer Service & Assistance, Product Knowledge, Product Assembly.

US Navy 08/2000 – 11/2005

(See Military Work Experience: Page 3)

Education

L.E.P.D. 06.29.2019 -**Special Courses:** OPATA Training 06.30.2019 Contact: Lori Delbert (614) 999-1009 **Pellissippi State Technical Community College** 2006 - 2008**Special Courses:** Media Technologies, Mac I & II, Design I & II, Typography. Major: Communications Graphic Technology. **Degree:** In Progress **University of Phoenix** 2004 Courses: On-Line: General Studies 101, B+ **Degree:** Transferred 2000 - 2001**Great Lakes Naval Hospital Corps School (A-school)** Great Lakes Naval Training Center Special Courses: EMT, Cardiac Care, Pharmacy **<u>Certificate:</u>** Graduate of Naval Hospital Corps School **Great Lakes Naval Training Center (Boot Camp)** 2001 **Degree:** Graduated **Farragut High School** 1996 - 2000 Special Courses: Graphic Design I, II, &III; Drafting I, II, & III **Degree:** High School Diploma

Honors / Awards

US Joint Services Achievement Medal - in support of Operation Enduring Freedom and the Global War on Terrorism Navy Meritorious Unit Commendation Navy Good Conduct Medal Global War on Terrorism Service Medal National Defense Service Medal Navy Expert Rifleman Medal (Sharpshooter) Navy Expert Pistol Medal (Sharpshooter)

Military Work Experience

U S Navy 10/09/2005

Honorable Discharge

Pensacola Naval Air Station and Hospital BMC Corry Station Clinic

5/2005 - 10/2005

(see below)

Guantanamo Bay Naval Station (GTMO)/ Southern Command 11/2004 - 5/2005

Rank: HM (E-3) / Top Security Clearance

Responsibilities: Provided highest standard and emergent care to: a population of over 500 Taliban and Al Qaeda detainees and Taliban and El Qaeda insurgents during their capture and transport from Afghanistan or Iraq to the detention center at GTMO. Provide medical assistance to US casualties while on-station in Iraq and Afghanistan.

Special Training: Anti-Terrorism, Suicide Prevention, Cell Extraction.

Pensacola Naval Air Station and Hospital BMC Corry Station Clinic

9/2003 - 10/2004

Supply Petty Officer (annual budget - \$80K)

<u>Responsibilities:</u> Medical Records Keeping - input/verification; Patient Treatment general sick call; Basic lab technician with phlebotomy as a regular duty

<u>Training Lectures Given:</u> Sexual Transmitted Disease Prevention Education; Biological/Chemical Weapons and Threat Agents

Community Service: Habitat for Humanity

Special Training: Helicopter Search & Rescue / Hurricane Ivan Rescue and Recovery

Great Lakes Naval Hospital and Clinic

04/2001 - 9/2003

Rank: HM (E-3)

Responsibilities: Assisting in the prevention and treatment of disease and injuries; Preparing/Administering medications including injections; Caring for the sick and injured; Administering immunization programs; Rendering emergency medical treatment; Instructing sailors and marines in first aid, Self aid and personal hygiene procedures; Transporting the sick and injured; Conducting preliminary physical examinations; Performing medical administrative, Supply, and Accounting procedures; Maintaining treatment records and reports; Supervising shipboard and field environmental sanitation and preventive medicine programs; Supervising air, water, food and habitability standards, General sick call and medial records input/verification, Basic lab tech with phlebotomy as a regular duty,

<u>Training Lectures Given:</u> Sexual Transmitted Diseases, Sexual Harassment, and Suicide Awareness.

<u>Community Service:</u> Worked at the Clinic (USS Red Rover Training Command Clinic), High School volunteer work, from counseling to High school football games.

Special Training: Auxiliary Security Force Training - ASF (post 9/11) Basic police force policies, procedures, and tactics including vehicle patrol, security measures and surveillance; small arms and rifle training.

*EstImated Times are stated in hours:minutes format,

LEGEND = Course = Curriculum

HealthStream.

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Build: 13.01.28.895.841 | AO: 175

Job Description
Orientation
Hospital Orientation
Licenses
Job Orientation



Job Description





A MEMBER OF TRINITY HEALTH

POSITION DESCRIPTION

POSITION TITLE: Armed Safety & Security Officer	DEPARTMENT: Safety & Security
JOB CODE: M4850	REPORTS TO: Armed Supervisor of Safety & Security
DATE ISSUED: 2/1/2017	SUPERVISES: N/A
DATE REVISED: 2/1/2017	MATRIX REPORTING RELATIONSHIPS: N/A

Mount Carmel Mission Statement and Guiding Behaviors

Mission: We serve together in Trinity Health, in the spirit of the Gospel, to heal body, mind and spirit, to improve the health of our communities and to steward the resources entrusted to us.

The Guiding Behaviors set the expectation for how we work together in living our Mission and Core Values. They are:

- We support each other in serving our patients and communities.
- We communicate openly, honestly, respectfully and directly.
- We are fully present.
- We are all accountable.
- We trust and assume goodness in intentions.
- We are continuous learners.

Job Summary

- In accordance with the Mission and Guiding Behaviors; the Safety & Security Officer is to provide protective services to all persons and property across the Mount Carmel Health System.
- Ensure a safe environment for all associates, physicians, patients, and visitors in compliance with various regulatory standards to include, JC, OSHA, ect.
- Provide a quality service consistant with the values of Mount Carmel Health System for our associates, physicians, patients and visitors.

Job Qualifications (Knowledge, Skills, and Abilities)

- Education: High school graduate or GED required.
- Licensure / Certification: Receipt of Ohio Peace Officer Training Academy certificate of completion prior to being assigned a shift as an Armed Safety and Security Officer for Mount Carmel
- Experience: Three to five years experience in security, law enforcement or military disciplines or equivalent training which might include criminal justice, homeland security, or law enforcement academy is preferred.
- Effective Communication Skills
- Valid driver's license with good driving record maintained
- Customer service oriented able to function in high stress situations with personal restraint, integrity, and control.
- Basic computer skills that commensurate with the job.
- Ability to communicate effectively and appropriately with diverse populations.
- Ability to write, read, and communicate effectively in the English language.

Essential Responsibilities

- Exhibits each of the Mount Carmel Service Excellence Behavior Standards holding self and
 others accountable and role modeling excellence for all to see. For example: demonstrates
 friendliness and courtesy, effective communication creates a professional environment and
 provides first class service.
- Meets population specific and all other competencies according to department requirements.
- Promotes a Culture of Safety by adhering to policy, procedures and plans that are in place to prevent workplace injury, violence or adverse outcome to associates and patients.
- Relationship-based Care: Creates a caring and healing environment that keeps the patient
 and family at the center of care throughout their experience at Mount Carmel following the
 principles of our interdisciplinary care delivery system.
- (For patient care providers) Provides nursing care, ensures an environment of patient safety, promotes evidence-based practice and quality initiatives and exhibits professionalism in nursing practice within the model of the ANCC Magnet Recognition Program®.
- Maintain a safe and secure environment through job knowledge, skills and engagement.
 Intervene as appropriate in any safety & security observed issues.
- Enforces all governmental regulations, standards, policies associated with Mount Carmel Health System and Safety & Security policies, (i.e. smoking policy).
- Communicate safety and security discrepancies to the appropriate parties for mitigation.
- Ensure department goals & objectives are reached/maintained during assigned shift(s).
- Responsible for assuring that the Safety, Life Safety, security, and Emergency Management, and the JC standards are followed as it relates to the position.
- Responsible for completing and documenting assigned tasks, such as fire drill and safety tours on time.
- Ensure accurate documentation during assigned shift (i.e. security reports, safety incidents, activity logs).
- Ensure consistent delivery of professional, friendly, and courteous service.
- Comply with the organization and department dress code.
- Conduct initial and follow-up investigations, if warranted or directed, ensuring documentation of investigative steps.
- Proactive patrolling of the campus by foot, segway, or vehicle as assigned.
- Respond to all "STAT" calls expeditiously and safely.

- Be familiar with all hospital emergency codes and appropriate responses
- Responsible for completing assigned tasks/duties on time (i.e. fire drills and safety tours).
- Provide on-the-spot in-service training to staff where knowledge related discrepancies are noted.
- Demonstrate sound judgment, decision skills, and prioritizing responses to emergency situations.
- Ability to perform duties in an independent manner.
- Custodial responsibility for patient valuables and maintaining lost and found by following the proper protocols.

Other Job Responsibilities

- Inspects panic alarms, AED's, and call boxes as assigned.
- Provides escorts for associates, patients, visitors and students (where located) in the hospital areas and areas contiguous to the hospital areas.
- Issue parking citations and enforce the parking policy.
- Provide helipad duties during helicopter landings and departures
- Assist in the collection of ICES data as directed
- Monitoring of cameras and access control responsibilities as assigned
- Citizen arrest duties only in accordance with applicable laws and statutes
- Assist motorist with vehicle assistance as appropriate (i.e. jump start)
- Traffic enforcement keeping emergency entrances and approaches clear of non-emergency vehicle traffic
- Respond to safety incidents/visitor injuries as appropriate, ensuring medical is summoned as appropriate.
- During emergent events direct media to the proper area/contact
- Perform other assigned duties as directed by Management.
- Use proper radio procedures and monitors on-going activity
- Be familiar with geographic location and facility layout
- Immediately report and respond appropriately to Salient events, communicating the event to your supervisor.
- Provide for security per policy for VIPs
- Chemical spill clean up as assigned.
- Responsible for compliance with Organizational Integrity through raising questions and promptly reporting actual or potential wrongdoing.
- All other duties as assigned.

EQUIPMENT: This section requires a response of Yes or No from drop down box.

Radiation: No

Electrical: Yes_

Chemical: Yes

Mechanical: No

KEY TO FREQUENCY CODES for Physical Requirement Sections: This section requires a numerical response from drop

1 = Up to 33% of the time

3 = Over 66% of the time

2 = From 33% - 66% of the time

4 = Not Applicable

PHYSICAL REQUIREMENTS

Sitting: 3

Balancing: 3

Standing: 3

Walking: 3

Ability to be Mobile: 3

Bending: 2

Kneeling/Crawling: 1

Stooping: 1

Turning/Pivoting: 2

Reaching Overhead: 1

Grasping: 3 Keyboarding : 3

Pinching: 3

Twisting: 2

Climbing: 1 Pulling: 2

Working Above Shoulder Level: 4

Pushing: 2

Maximum Weight: Equal to or greater than 35 lbs

Lifting: 3

Maximum Weight: Equal to or greater than 35 lbs

POTENTIAL EXPOSURE: This section requires a response of Yes or No from drop down box.

Blood / Body Fluid Contact: Yes Humidity: No Temperature: No Air-borne Pathogen: Yes Chemicals (Fumes / Burns): No Dust: No

Radiation: No Vibrations: No Noise: No

Personal Protective Equipment: This section requires a response of Yes or No from drop down box.

Gloves: Yes Shoes: No Goggles: Yes Aprons: No

Masks: Yes Head Covering: No Gowns: Yes

Emotional / Psychological Factors: This section requires a response of Yes or No from drop down box.

Trauma: Yes Grief: Yes Death: Yes Public Contact: Yes Deadlines: Yes

This job description is intended to describe the general content of and requirements for the performance of this job. It is not to be considered an exhaustive statement of duties, responsibilities, or requirements.

Reviewed and Approved by:

Drew Evans

Title:

Manager System Safety and Security

Date:

3/15/2017

Compensation Rep:

Jim Kousaie

Title: Date:

Sr. Compensation Consultant

3/15/2017

Orientation

MOUNT CARMEL HEALTH SYSTEM SAFETY AND SECURITY SECURITY OFFICER ORIENTATION

Orientee:	
Primary Preceptor: J. Reisinger	
Secondary Preceptor:	
Start Date: 7/73/19	
Reviewed By: Juny M	
7 110	

* Return to manager when completed *

INTRODUCTION AND OVERVIEW OF THE MOUNT CARMEL HEALTH SYSTEM

SYSTEM MISSION STATEMENT

Mount Carmel Health System
is a community of committed persons
working to extend God's ministry of health.
We seek out and respond to the health needs
of our communities.
We serve and care for all people
with fairness, respect and compassion.

As a member of the Holy Cross Health System
we dedicate ourselves to
Fidelity, Excellence, Empowerment and Stewardship
by living the values of
Dignity of Persons, Service to Others,
Social Justice for All.

Faithful to the spirit of the
Congregation of the Sisters of the Holy Cross
both the Holy Cross Health System
and the Mount Carmel Health System
exist to witness Christ's love through excellence in the
delivery of health services
motivated by respect for those we serve.
While stewarding our resources, we foster a climate
that empowers those who serve with us.

INTRODUCTION AND OVERVIEW OF THE MOUNT CARMEL HEALTH SYSTEM SAFETY AND SECURITY DEPARTMENT

Mission Statement

Safety and Security is a team of dedicated individuals working together to provide a safe and secure environment by providing high quality life safety, personal and property protection services.

We achieve timely, cost effective results through the collective knowledge, talents, and skills of Associates working together for the benefit of those we serve.

Simply stated, we:

- ☆ work as a team,
- strive for excellence,
- ☆ are on time,
- ☆ are within budget,
- njoy our work and each other.

REQUIREMENTS

- Annual TB Test See Associate Health Services
- Annual Safety Education Training (HealthStream)
- Annual OPOTA FIREARMS Recertification
- Good written and verbal skills
- Computer Skills Windows and Microsoft Office
 Demonstrates the Use of the Mouse
 Demonstrates the use of the Keyboard
 Demonstrates the use of the Registrar

SECURITY OFFICER ORIENTATION WEEKLY PROGRESS

Week One:	Day one: System Orientation	
	Day two: Introduction to Employees	
	√ Review Job Description	
	Review Supervisor/Take Charge	
	Responsibilities	
	Department Goals and Objectives	
	√ Organizational Chart	
	Campus Tour	
	Work Schedule/Post Assignments/Overtin	ne
	Meals and Breaks	
	PLT/DIS/LOA's	
	Clocking In/Absenteeism/Tardiness	
	✓ Dress Code	
	Day three: Department Resources and Manuals	
	Review H.R. Policies and Procedures	
	Emergency Operations Manuals	
Week Two:	Safety Management	
Week Three	Security Management and Emergency Preparedness	
and Four:	Management	
Week Five and Six:	Hazardous Materials Management	
Week Seven and Eight:	Life Safety Management	

GENERAL ORIENTATION CHECKLIST

ITEM	RESPONSIBLE PERSON	TIME FRAME	DATE COMPLETED
Home Address & Telephone No.	Employee	Day 1	7-23-14
Uniforms/Equipment	Supervisor	Day 1	1/23/19
Shift Assignment	Supervisor	Day 1	7/23/19
E-Mail Address	Supervisor	Week 1	7/23/19
Review Progressive Counseling Policy	Supervisor	Week 1	7/23/19
Confidentiality Policy	Supervisor	Week 1	7/23/19
Joint Commission/Life Safety/OSHA Regulations	Supervisor	Week 3	7/23/19
Hospital Paging System	Supervisor	Week 1	7/23/19
Complaints against Security Officers	Supervisor	Week 1	7/23/19
Department Policies and Procedures	Supervisor	Week 1	8/17/19
Department Forms/Pass-On Log	Supervisor	Week 1	7/23/19
Productivity Data/ Dispatch Log	Supervisor	Week 1	3/17/19

SECURITY OFFICER

	Reviews Pertinent Information		Performs With Assistance		Performs Independently	
	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials
SAFETY MANAGEMENT					130233	ZAZERAJO
Describes AMA Patients		11/23/19	P	747/30/19		
Describes Pink Slipped Patients		01 7/22/19	P.	12 2/30/19		
Demonstrates Camera Center Operations		9/7/78/19	d	7/30/19		
Describes Correction of Hazardous Conditions		9/2/12/19	E	Misolia		
Demonstrates Detainment/Restraint of Patients		11 1/20/1A	8	2/20/19		
Describes Elevator Locations & Operations		71 1/23/19	R	7/30/19		
Demonstrates Heliport Lighting/Traffic Control		7/25/14	.10	7/17-19		
Describes and Demonstrates Infectious Control/Universal Precautions		Modea	Po	2/20/19		
Conducts Safety Inspections						
SECURITY MANAGEMENT						
Demonstrates 10 codes / Two-Way Radio Communications		Modia	(b)	2/1/20/19		
Describes Areas Unauthorized		92 7/23/14	e	9127/3/19		
Demonstrates Vehicle Operations		1	(b)	11/13/19		
Demonstrates writing Departmental Forms / Pass-On Book		19/23/14	e	1/3/19		
Demonstrates and describes Door Lock / Unlock Schedules		7/26/10	4	2/2/19		
Demonstrates Identification / Package Checks				27/30/19		
Demonstrates and describes Visitation Policy			A	2/30/19		

SECURITY OFFICER

	A. The second second second	Pertinent mation	Performs With Assistance		Performs Independently	
	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials
Demonstrates Numerical Keypads /		11.15-101	A D	11		
Codes / Use of			C	1-20-14		
Demonstrates Lost and Found		14 7.519	P	1127-30-19		
Describes Matrix System / Card Access						
Demonstrates Money / Protective		2/25-19		11		
Escorts		715-1		9-30-19		
Demonstrates and describes Off Property Duties / Alarms			Æ	1R 1-30-19 SR 7-3x-19		
Demonstrates and describes Parking						
Enforcement			E	9/ 30-19		
Demonstrates and describes Patient Valuables Policy / Procedure			&	12019		
Demonstrates Patrols / Interior /		pr		-		
Exterior / Emergency Room		1-15-14	E	12.20-10		
Demonstrates Defensive Tactics			m	98-19		
and ASP and OC Training			R	3/1/1		
Describes Removal of Belligerent / Combative Visitors, Patients, or			£	71-30-19		
Associates						
Demonstrates Safety / Security			Da	11/20-19		
Vehicle Procedures			80	4-2		
Demonstrates Signing on			8	7-30-19		
Computers / Work Orders LIFE SAFETY MANAGEMENT						
Conducts Construction Safety				100 11		
Inspection (ILSM Forms)			A	927-19		
Completes Construction Safety			6	211119		
Evolution Form (ILSM)			6			
Describes Electrical Safety			NO	92011/19		
Conducts Fire Drills			Ø	218/11/19		
Completes Drill Evaluation Form			0	NV811114		

	Reviews Pertinent Information		Performs With Assistance		Performs Independently	
	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials
Describes Fire Hazards			10	1/18/17/19		
Describes types of Fire			P	1		
Extinguishers				13/17/19		
Describes types of fires			C	1/1/9/17/19		
Describes Fire Response Team			PO	10011119		
Demonstrates inspection of Fire						
Extinguishers & Locations	L		0	01011119		
Describes locations of Fire System			Λ			
Pull-Boxes			Φ	18/1/19		
Describes location of Mechanical			An	00 . 110		
Rooms & Airhandlers			D	913/11/19		
Describes Simplex Fire Alarm			Λ.	AR NA		
System			A	9017/19		
Describes Safety and Security Fire			Δ.	(1)(1		
Plan			D	0/11/19		
Demonstrates Safety / Security			A.	11. 111		
Intervention Regarding Patients			0	28/17/19		
HARARDOUS MATERIALS				, v		
MANAGEMENT						
Demonstrates and Describe Hazmat			A	2110		
Suit / Location			D	8//11		
Describes SDS Manuals			10	216/1/19		
Demonstrates Use of SDS			P	216/12/19		
Describes Mercury &						
Chemotherapy Spills			80	nelina		
Describes Personal Protective				On 1 114		
Equipment			6	1 Blista		

	Reviews Pertinent Information		Performs With Assistance		Performs Independently	
	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials
EMERGENCY PREPAREDNESS MANAGEMENT						
Demonstrates Trauma Team Alerts						
				- 4		

Hospital Orientation

Licenses



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Z 8

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Job Orientation

Winchester Ranger 9mm +P 1 /o/// I understa I may use while on duty and a magazines at all times.	124 Grain amn and that this is	the only duty ammunition
Received By:	7/2	16/14/19
Issued By	_	15/14/17

have been issued 52 rounds of Federal Premium 124 Grain HST HP 9 mm ammunition on 30/31, 20/9. I understand that this is the only duty ammunition I may use while on duty and must carry in my duty weapon and magazines at all times.

I, have received the following issued uniforms from the Safety & Security Department at Mount Carmel St. Ann's Hospital.

	Item Description	Quantity	Received
1	Short Sleeve Class A Navy Blue Shirt	2	
2	Kenwood Digital Radio, Charger, Remote Speaker Mic (SA712)	1	V
3	Uniform Navy Blue Pants	2	V
4	All Weather Navy Blue Jacket	0	
5	Mount Carmel Ball Cap	1	V
6	Nylon Duty Belt	1	V
7	Nylon O/C Case	1	V
8	Nylon Radio Case	0	
9	Nylon Glove Pouch	1	V
10	Nylon Handcuff Case	1	V
11	Nylon Belt Keepers	4	V
12	Key Holder	1	V
13	ASP Holder	1	V
14	Magazine Holder	1	V
15	Level 3 Duty Holster	1	V
16	Pair of Handcuffs w/ Key	1	V
17	ASP Expandable Baton	1	V
18	Can of O/C	1	V
19	MCHS Security Badge	1	V
20	Name Plate	B	
21	Pair of Collar Brass	B	
22	Office Key	1	V

Upon termination of employment, I understand that the above issued property must be turned into the Security Supervisor.

	1 vest & external carie,
Printed Name:	7/23/19
Signed:	
Date: July 23, 2019	
Issued By:	

For: 00147253 Armed Safety and Security Officer - Security - Mount Carmel St. Ann's

Step Hire
Source Internal Recruiting Source -> Internal Recruiting Source

Mr. Jeremy M Reisinger (4033234)

Hiring Manager

Derek Doncyson (4250399)

Recruiter

Verview

Experience

Overview

none entered

Websites

none entered

Skills

none entered

Education

none entered

Candidate Information

Added By Mr.

Screening

Screening Questions

Questionnaire Internal Standard Questionnaire: Trinity Health V5

Respondent Mr. Submission Date 06/28/2019

Have you communicated your interest in this position to your current Manager	Ar	Answers
As a current colleague are you looking to add this opportunity as an Additional John	Answers Yes	Yes
Have you had any disciplinary action in the past 12 month's	Answers	No
If yes, to disciplinary questions, please provide details.	Answers No	N _o
If you are aware of any relatives that currently work for any organization within the Trinity Health System, please provide their name and contact information here.		
writer stills are you willing to work? (Select one or more)		
Are you willing to travel for work?	Answers	Nights, Evenings, Weekends, Rotating, Days
Are you willing to relocate?	Answers	<25% travel
Are you legally able to remain and work in the I lotted States with and S	Answers	No
Are you 18 years of age or older?	Answers	Yes
Have you ever been sanctioned or are you currently under in the sanctioned or are your currently under its actual to the sanctioned or actual to the your currently under its actual to the your currently under its act	Answers	Yes
Inspector General of the Department of Health and Human Services (HHS/OIG) of the Government Services Administration (GSA) or excluded or suspended from participation in any federal or state health care program?	Answers	No
Sanctions, Exclusions, or Suspensions Details Have you ever been found or are you currently under investigation to have engaged in substantiated abuse or neglect of children or adults under the laws of any states of the United States?	Answers	No
What is your desired minimum pay rate in dollars? (provide as an annual or hourly amount)		

Assessments

Page 3 of 6

none entered

Background Check History

none entered

Interview

Interview Feedback

Overall Average Rating 5 (out of 5)

Ratings Submitted 1 of 1 Interviewer Feedback Received

iterview - 00147253 Armed Safety and Security Officer - Security - Mount Carmel St. Ann's (Fill Date: 07/21/2019)

Interviewer

Mr. Jeremy M Reisinger (4033234) Feedback Submitted 5 (out of 5) - Highly Recommended Overall Rating

Time Zone

Initial Application

Questionnaire Results

Questionnaire Internal Standard Questionnaire: Trinity Health V5

Respondent Submission Date Mr. Aaron D Cole (285671)

Answers <25% travel	Answers
Nights, Evenings, Weekends, Rotating, Days	Are you willing to travel for work?
No	Answers
No	A ISWEIS
o de la companya de l	As a current colleague are you looking to add this opportunity as an Additional Job?
TOTAL CONTRACTOR OF THE CONTRA	Have you communicated your interest in this position to your current Manager?
Answers	

) or mining to relocate;	
Are you legally able to remain and work in the United States without Space.	Answers No
Are you 18 years of age or older?	Answers Yes
Have you ever been sanctioned or are you currently under investigation to the	Answers Yes
Inspector General of the Department of Health and Human Services (HHS/OIG) of the Government Services Administration (GSA) or excluded or suspended from participation in any federal or state health care program?	Answers No
Sanctions, Exclusions, or Suspensions Details	
ave you ever been found or are you currently under investigation to have engaged in ubstantiated abuse or neglect of children or adults under the laws of any states of the United States?	Answers No
What is your desired minimum pay rate in dollars? (provide as an annual or hourly amount)	

Опег

Questionnaire Offer Details - Do NOT select "None of the Above"

Derek Doncyson (4250399) 07/02/2019

Respondent Submission Date

Question	Ar	newers
what is the pay type for this offer?	_	Alsweis
Does this offer include a relocation package?	Answers	Answers Hourly
Is this offer for a Work from Home Employee?	Answers	No
Is this a Union Job?	Answers	No
COR INTERNAL: Is there a change in benefits?	Answers	No
	Answers	Answers No change or is not applicable

Attachments

Attachments

Resume / Cover Letter

Other Documents

Attachment

Attachment

Category

Page 5 of 6

Offer

Offer Details

Job Details

Hire Date Location 07/21/2019

MCHS - Mount Carmel St. Ann's

Hire Reason Job Profile Data Change > Transfer > Move to Another Manager (Reporting Relationship Change)

Business Title MCHS_Armed Safety and Security Officer_M4850

MCHS_Armed Safety and Security Officer_M4850

Default Weekly Hours 40

Scheduled Weekly Hours Contract End Date

Totals Compensation

Compensation Package

18.00 USD

Currency

Hourty

Frequency

Total Base Pay

Grade Trinity Health - Compensation Package MCHS_Structure

Grade Profile MCHS_9

Company OH_MCHS Mount Carmel Health System

Plan Assignments

Allowance Hourly Allowance Allowance Allowance llowance Plan Type MCHS - Weekend Differential MCHS - Evening Differential MCHS - Charge Pay MCHS - Night Differential TH Hourly Plan MCHS - On Call Compensation Plan 2.00 USD Hourly 1.00 USD Hourly 1.00 USD Hourly 2.50 USD Hourly 2.00 USD Hourly 18.00 USD Hour Assignment

Attachments

Generated Documents

107/02/2019.pdf	Timity realth systems Offer Letter - Internal	Trinity Looks On the One	posement	Document
		E-sign by Adoba Sign	Signature Type	
	Mr. Aaron D Cole (285671)		Signed By	
	07/03/2019 08:32:05 PM	Albra america	Signature Deta	
Trinity Health Systems Offer Letter - Internal uploaded		Uploaded Document		

Reminders

Upcoming

Completed

none entered

none entered

07:01 PM 07/18/2019 Page 6 of 6

Evaluation/Safety Test/Competency Awards Application/Transfers

Evaluation/Safety Test/Competency

Mount Carmel Health System Competency Assessment Safety & Security Safety & Security Officer

Associate Name:	ID Mumaham	THE PROPERTY OF THE PROPERTY OF
	ID Number:	Job Title:
		Suffer & Searity affice
☐ High Risk ☐ Low Ve		
☐ High Risk ☐ Low Ve		w Equipment/Service Process Change
	CARING COMPONEN	NTS:
Demonstrates service excellence	e behavior	
	KNOWLEDGE AND SKILL CO	MPONENTS:
Effective in patrol techniques, co	Ommunications use of cameras-monito	ring/recording, escorts, door openings, assist calls
de l'estation de decum	y sensitive areas.	of the second of
Enforces policies & procedures		
Completes accurate incident rep	ort documentation/investigation and fo	ollow-ups as appropriate
completes accurate activity logs		The second secon
Ability to apply clinical restraints	and assistance	
Ability to work independently		
Completes timely fire drills and c	ritiques	
Understands ILSM protocols		
Ability to turn off Med Gas per po	licy	
Workplace Violence policy knowl	edge	
Ability to process visitors after-ho	ours or as required	
Ability to lock and unlock facility (includes Lockdown plan)	
vianagement of Aggressive Beha	avior and de-escalation techniques	
Inderstands Safe Medical Device	e Act responsibilities	
Helicopter operations- Safety duti	les	
Discernment of sentinel events-no	otification protocols	
nowledge of Emergency Codes	and security response (i.e. Code Red,	Code Adam, Code Orange, etc).
onows the department uniform a	ing gress code	30,000
disseminates pertinent info (pass	on book, memo, reports, BOLO)	
Inderstands Forensic responsibil	ities	
nderstands role and actions- VIF	P/Media event	
micer can articulate use of force	and demonstrate "take downs" and the	e use of defensive weapons: ASP & Pepper Spray
officer besie besieved ability to	co-operate with other agencies, depart	rtments, and staff as appropriate
meet mad a basic understanding	Of the National Patient Safety Goale	
fficer demonstrates proper telepi	none etiquette.	
flicer is knowledge-black in	adio communications-understands RF	interference
flicer is knowledgeable of all sec	curity alarms and responds appropriate	ely (panic, infant, etc).
micer conducts proper patient val	luables receiving and returning	
orgue procedures (MCSA only)		
and ingress/egress control- norr	mal and emergency (i.e. emergency ro	om areas)
ed for.	proper use of Fire Extinguisher and known	ows where and what K type extinguishers are
ficer knows the Emergency Proc	edures for handling Hazardous Materi	ials (chemical, asbestos, etc) and security
		Concentration, aspestos, etc.) and security
ficer understands their role in the	e incident command structure (HICS)	
THE THE PROPERTY OF THE PROPER	incident command structure (Hit.S)	
iderstanding of response to eleva	ator malfunction	12.32
oper PPE use- Infectious, Chemi	ator malfunction	ecautions, chemical protection
iderstanding of response to eleva	ator malfunction ical, Noise, PAPR etc (i.e. universal pr	recautions- chemical protection)

Mount Carmel Health System Competency-Based Orientation and Introductory Period Evaluation (Safety & Security)

Associate Name:	ID Number:	Job Title: Armed Security Officer	New Hire _X TransferAdditional job code
			90 Day Evaluation
			Date entered into role: 7/23/19
Attach above Competency	Based Orientation to Intro	oductory Evaluation b	elow.
	ully completed the Introducto		
Developmental Needs identified	d related to competency: Non	o Mondad	
	romed to competency. Non	e Needed	
additional needs identified dur	ing Introductory Period: None	Needed	
oals (includes identified comp			
•	and developmental need	us).	
1) To have a positive impa	ct with each person I encounter	r	
2) To perform at least two	rounds interior and exterior to	incure nationt Ctoff A 1	visitor safety.
3) To team build with my c	olleagues and learn more each	day.	

Manager Signature

Associate Signatu

Date

Mount Carmel Health System

£1-12-1-13-1-13-1-13-1-13-1-13-1-13-1-13	Competency Assessmen	nt.
	Safety & Security Safety & Security Office	
	Salety & Security Office	
Associate Name :	ID Number:	Job Title: Armed Security Officer
		90 Day-Evaluation
☐ High Risk ☐ Low Volum	ne Problem Prone New E	quipment/Service Process Change
Demonstrates service excellence be	boules	
Demonstrates service excellence be		
Effective in patrol techniques, comm	KNOWLEDGE AND SKILL COMP	ONENTS:
Knowledge of location of Security se	unications use of cameras-monitoring	recording, escorts, door openings, assist calls.
Enforces policies & procedures	nomive dicas.	
Completes accurate incident report of	documentation/investigation and follow	WARE TO SCORE BY VE
Completes accurate activity logs	iodamentation/investigation and follow	v-ups as appropriate
Ability to apply clinical restraints and	assistance	
Ability to work independently		
Completes timely fire drills and critique	Jes	
Understands ILSM protocols		
Ability to turn off Med Gas per policy		
Workplace Violence policy knowledge	e	
Ability to process visitors after-hours	or as required	
Ability to lock and unlock facility (included)	ides Lockdown plan)	
Management of Aggressive Behavior	and de-escalation techniques	
Understands Safe Medical Device Ac	t responsibilities	
Helicopter operations- Safety duties		
Discernment of sentinel events-notific	ation protocols	
Knowledge of Emergency Codes and	security response (i.e. Code Red, Co	ode Adam, Code Orange, etc).
and the department unfolder and	ITESS CODE	go, etc).
Disseminates pertinent info (pass on	book, memo, reports, BOLO)	
Understands Forensic responsibilities	1	
Understands role and actions- VIP/Me	adia event	
and law enforcement restraints: (i.e. h	demonstrate "take downs" and the us	se of defensive weapons: ASP & Pepper Spray
Officer demonstrates the ability to co- Officer has a basic understanding of t	be National Potient Setate Comment	ents, and staff as appropriate
Officer demonstrates proper telephone	e etiquette	
Officer demonstrates the proper radio	communications understands DE:	
Officer is knowledgeable of all security Officer conducts proper patient valuable	valarms and responds appropriately	errerence
Officer conducts proper patient valuab	es receiving and returning	panic, infant, etc).
worgue procedures (MCSA only)		
Traffic ingress/egress control- normal	and emergency (i.e. emergency room	(araoa)
The officer has demonstrated the prop	per use of Fire Extinguisher and knows	s where and what K type extinguishers are
used for.		s where and what it type extinguishers are
Officer knows the Emergency Procedu	ires for handling Hazardous Materials	(chemical, asbestos, etc) and security
		(Security
Officer understands their role in the inc	cident command structure (HICS)	
oriderstanding of response to elevator	malfunction	
Proper PPE use- Infectious, Chemical, MRI Safety	Noise, PAPR etc (i.e. universal preca	autions- chemical protection)
vii (i Galety		

Role in Romb Throat accept to the inventor					
Role in Bomb Threat- search techniques/staging Knowledge of Burn Permit process					
Understands Property Search policy and role					
Suicide precautions/assessment					
Proper lifting/body mechanics					
Pediatric; (I year – 12 years)					
Needs to involve parents if possible:					
Provide privacy as appropriate.					
Allow child to exercise some control					
Speaks at eye level maintaining eye contact					
Uses direct approach with child, giving one direct	ion at a time				
Allows choice when possible.	ion at a time.				
Adolescent: (13-17 years)					
Needs to recognize that this age group:					
 Needs to be called by name or preferred name. 					
Provide privacy/modesty					
Allows choice when possible, and encourages ve	arhalization of concorns and faces				
 Tells patients behaviors that are permitted. 	maileation of concerns and lears.				
 Watches for body language and cue for feelings. 					
 Speaks directly to patient in simple medical terms 					
 Concerns and fears. 	,				
Geriatric: (65+)					
 Needs to establish that the patient is wearing glas 	sses, hearing aids, or may have memory loss and recognizes the				
toole that are needed for effective communications	S during interviews and investigations				
boes not shout at patients, speak slowly and dist	inctly.				
 Does not rush patient, gives them time to process 	information.				
 Repeats instructions several times. 	•				
 Discuss one item at a time. 					
 Assist in transferring patient under direction of a R 	Registered Nurse.				
 Provide privacy/modesty 					
Adult (18-64 years)					
 Calls patient by preferred name. 					
 Allows choices when possible 					
 Provides for privacy/modesty 					
 Respects patient right to make informed decisions 					
 Assists in relinquishing valuables 					
 Watches body language as cue for feelings. 					
 Interviews patient in a calm, reassuring manner co 	incerning lost articles				
 Assists in controlling confused patient. 	and the state of t				
Knowledge of Automated External Defibrillator (AED) –loca	ation and use				
Able to act appropriately in an emergent or sentinel type of	event				
METHOD OF COMP	PETENCY VALIDATION:				
Return Demonstration	□ QI Monitors/Audits				
□ Observation of Daily Work	□ Peer Review				
Post Test	☐ Case Study				
	☐ Discussion Group				
Mock Event/Simulation	Discussion Group				
Competency Validated By: (Signature and credentials)	M supervisor Date 10-29-19				
Developmental Needs identified: (See Performance Evalua	ation for related goals)				
. f					
Associate Signatur	Manager Signature Date				
	vidence Based References/Resources (if applicable): Date 10/24/7 Manager Signature Date				
	vidence Based References/Resources (if applicable):				

MOUNT CARMEL POLICY/PROCEDURE

SUBJECT: Authorized Access to Medication Storage Areas

Appendix A

Orientation Checklist

Medication Sto	orage Areas -	Access	by Non-	-Licensed	Personnel
----------------	---------------	--------	---------	-----------	-----------

	S Tron Election 1 Crook	HE.
Employee's Name:	Employee ID Number:	
Position: Security	Dept: Security Date: 4-17-2020	

- € Access to medication storage areas is restricted to authorized personnel.
- € Access to medication storage areas by non-licensed support services personnel is based on the need for the individual to perform their assigned task.
- € Authorization for non-licensed personnel to access a medication storage area is identified by job classification and department specific job description with competencies related to the specific role(s).
 - Environmental Services
 - Facility Operations/Engineering/Management
 - Security
- € Support services personnel that are <u>not</u> authorized access may only access a secure medication storage area in the presence of an authorized individual. (e.g. nurse, pharmacy)
- € Medications must be stored in a secure environment.
- € Medication storage areas (patient servers, medication carts, medication rooms, medication refrigerators, etc.) must be secured at all times.
- € Medications in patient care areas that are not actively staffed must be locked.
- € Medication storage areas must be clean and provide sanitary conditions for medication storage and preparation.
- \in Medications and medication related supplies may not be placed by the sink or drain.
- € Contact the area supervisor or the pharmacy if work in a medication storage area may interfere with medication security or integrity (e.g. if medications need to be moved).
- € Report any suspected employee impairment, diversion or theft of medications, syringes, needles or any supplies to the area supervisor or pharmacy.

Preceptor's Name: Jeremy Keisinger	(print)
Preceptor's Signature:	Date: 4-17-2070
Employees Name: I acknowledge that I have read and understand my respons	(print) sibilities related accessing medication storage areas
Employees Signature:	Date: 4-17-2020

MOUNT CARMEL POLICY/PROCEDURE

SUBJECT: Authorized Access to Medication Storage Areas

Appendix B

Medication Storage Areas - Access by Non-Licensed Personnel Competency

	Competency
1.	Medication storage areas can be accessed by any hospital employee.

2. If you have a job to do in a secure medication storage area you;

(b). False

- a. May access the area to do the job without authorization
 - b. May access the area if authorized by your job description
 - c. May access the area under the supervisor of an authorized nurse or pharmacy staff
- (d) B and C

a. True

- 3. Medication carts, medication rooms, medication refrigerators, freezers and warmers are all medication storage areas.
 - (a) True
- b. False
- 4. An unlocked mobile medication cart containing medications is in the hallway on a unit that is closed. You should;
 - a. Move the cart to a secure area
 - Report by contacting the area supervisor or pharmacy
 - c. Leave the cart alone because the unit may reopen soon
 - d. None of the above
- 5. You find used needles and syringes when cleaning a restroom in a restricted access area of the hospital. You should;
 - a. Clean it up and continue working
 - b. Not report this because you don't know who used them
 - c. Not report this because it is not your responsibility
 - d) Immediately report the finding to your supervisor

Education





OHIO PEACE OFFICER TRAINING COMMISSION

THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that

Private Security Firearms Requalification Program has completed the Ohio

Conducted by

L.E.P.D. Training Academy Awarded On

November 20, 2020

Attorney General

Vernon P. Stanforth, Champerson

Ohio Peace Officer Training Commission

REQUALIFICATION DUE BY 12/30/2021

Ohio Peace Officer Training Commission Dwight A Holcomb, Executive Director

School Commander

This certificate alone does not authorize you to work as a security guard or private investigator. For licensing requirements contact the Ohio Department of Public Safety/Private Investigator Security Guard Services or visit http://pisgs.ohio.gov/



Certificate

has successfully completed HeartCode® BLS Online Portion

Hands-on skills practice and testing, either conducted by an authorized AHA BLS Instructor or using a voice-assisted manikin system, is required to receive a Basic Life Support Provider course completion card.

For greater success, it is recommended the hands-on skills session be conducted shortly after completing the online portion. Please take this certificate with you to your hands-on skills session.

This certificate does not constitute successful completion of the full Basic Life Support Provider Course.

n-scyyw-sqp92-u38vk-zkm48
Certificate Number

2020-01-12

Date Completed



GUIDELINES 2015 CPR & ECC

Certificate

has successfully completed the skills practice and testing for the HeartCode® BLS Hands-On Session

This certificate does not constitute successful completion of the full Basic Life Support Program. This certificate and the Online Portion certificate are required to receive the American Heart Association Basic Life Support Provider course completion card.

2-ee94p-p2mxt-5d6a7-ma725

Certificate Number

2020-10-01

Date Completed

Certificate of Completion

This is to Certify



has completed the course

MCHS - Heartcode w/COMPUTERIZED MANIKIN Skills Check

on

3/3/2020





GUIDELINES 2015 CPR & ECC

Certificate

has successfully completed HeartCode® BLS Online Portion

Hands-on skills practice and testing, either conducted by an authorized AHA BLS Instructor or using a voice-assisted manikin system, is required to receive a Basic Life Support Provider course completion card.

For greater success, it is recommended the hands-on skills session be conducted shortly after completing the online portion. Please take this certificate with you to your hands-on skills session.

This certificate does not constitute successful completion of the full Basic Life Support Provider Course.

n-scyyw-sqp92-u38vk-zkm48
Certificate Number

2020-01-12

Date Completed

Baton Basic Certification

TECHNIQUE PROFICIENCY CHECKLIST

1) C	neck:	Pass:	raii:
2) R	edirection:	Pass:	Fail:
3) C	los e d Mode Weapon Strike	Pass:	Fail:
4) C	losed Mode Reaction Strike	Pass:	Fail:
5) C	iosed Mode Straight Strike	Pass:	Fail:
6) O	pening the Baton	Pass:	Fail:
7) O	pen Mode Weapon Strike	Pass:	Fail:
8) O	pen Mode Reaction Strike	Pass:	Fail:
9) O	pen Mode Straight Strike	Pass:	Fail:
10) C	losing the Baton	Pass:	Fail:
TECHNIQU	JE PROFICIENCY	PASS:	FAIL:
		i št	
COUNSEL	FD:	. 5	
	1 / 1		
CERTIFICA	TION APPROVED:	CERTIFICATION D	ENIED:
INSTRUCT	OR: / MM Tayla	B-41764	-
DATE: 3	5 a a a		

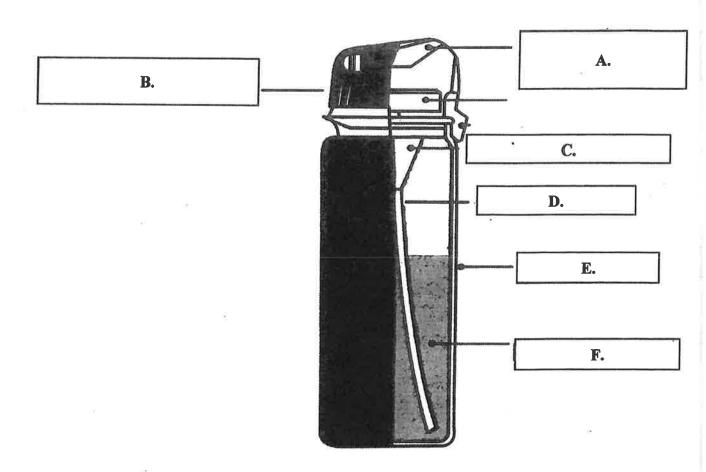


Box 1794 Appleton, WI 54912 (920) 735-6242 - Fax (920) 735-6245 - eap-usa.com

ASP Basic Certification (ABC) EXPANDABLE BATON TRAINING

Information Sheet

Initial Cartification	(Please Print)		Date 3 5 2621
First Name Home Address City Gove City State Off Province Zip 43/23 Telephone E-mail Address Employing Agency Mount Cornel Agency Address 500 5 clevel And City Westernibe State Off Province Zip 43/08 Employing Agency Mount Cornel Agency Address 500 5 clevel And City Westernibe State Off Province Zip 43/08 Agency Telephone (366) 646 - 4005 E-mail Address Duty Status: Full Duty Restricted Duty Has your agency adopted or authorized the use of the ASP Baton? How many officers are in your agency? Height 51 Weight 200 Age 39 Date of Birth 135 1983 Have you been exercising? Cs Do you have any knee, back or health problems? NO Are you on any medication? No Person to be selffed in a second of the ASP Baton? Height Selffy describe any health problems: Injury Check: 14 Adverse Selffy Adsembly Walver Britannia Systems and Procedures, INC, and all of their agents, representatives, end assigns, I hereby walve, relies forever discharge Armament Systems and Procedures, INC, and all of their agents, representatives, heirs, executors, administrators, such assigns, of and from any and all claims, demands, rights and causes of action of whatsoever kind and nature, arising from, and by remaining administrations and manual health; (b) I have no reason to believe that i a good physical and mental health; (b) I have no reason to believe that i a good physical and mental health; (b) I have no reason to believe that i a good physical and mental health; (b) I have no reason to believe that i a good physical and mental health; (b) I have no reason to believe that i a good physical and mental health; (b) I have no reason to believe that i a good physical and mental health; (b) I have no reason to believe that i a good physical and mental health; (b) I have no reason to believe that i a good physical and mental health; (b) I have no reason to believe that i a good physical and mental health; (b) I have no reason to believe that i a good physical and mental health; (b) I have no reason to believe that i a good physical and me	☐ Initial Certification	☐ Recertification	
Home Address City CroxeCity State Off Province	First Name		
Telephone	Home Address	1450110	
Employing Agency Mount Cornel Agency Address 500 5 clevel Ave City Weyternile State OH Province Zip 43081 Agency Telephone (386) 6/16 - 4/005 E-mail Address Duty Status: Full Duty Restricted Duty Has your agency adopted or authorized the use of the ASP Baton? How many officers are in your agency? Age 39 Date of Birth 135 1983 Have you been exercising? So Age 39 Date of Birth 135 1983 Have you been exercising? No Person to health problems? No Person to health address? No Relationship Spoce Briefly describe any health problems: Injury Check: Alternate (City Grove City	State OH Province	Zin 43/23
Agency Address 500 Sclevelle State OH Province Zip 13081 Agency Telephone (386) 816 - 1005 E-mail Address Duty Status: □ Full Duty □ Restricted Duty Has your agency adopted or authorized the use of the ASP Baton? How many officers are in your agency? 200 Height 50 Weight 300 Age 39 Date of Birth 1 35 1983 Have you been exercising? 165 Do you have any knee, back or health problems? 160 Person to be patified in the problems 160 Person to be patified in the problems 160 Relationship 500 Relationship 500 Relationship 500 Relationship 500 Relationship 500 NAIVER Release from Liability and Assumption of Risk Agreement 1) Intending that this Agreement be legally binding upon me, my heirs, executors, administrators, and assigns, I hereby waive, release forever discharge Armament Systems and Procedures, iNC, and all of their agents, representatives, heirs, executors, administrators, such assigns, of and from any and all claims, demands, rights and oauses of action of whatsoever kind and nature, arising from, and by the agent of the property in good physical and mental health; (b) I have no reason to believe that I a pood physical and mental health; (c) I am fully aware of, and do acknowledge and assume all risk of injury inherent in my participation in this seminar; (d) I have read and fully understand the terms and conditions of this Agreement.	Telephone		
Agency Address 500 Sclevelle State OH Province Zip 13081 Agency Telephone (386) 616 - 1005 E-mail Address Duty Status:	Employing Agency Mount Corne	13	
City Westernite State OH Province Zip 43081 Agency Telephone (360) 616 - 4005 E-mail Address Duty Status: Full Duty Restricted Duty Has your agency adopted or authorized the use of the ASP Baton? How many officers are in your agency? Height 59 Weight 300 Age 39 Date of Birth 1 35 1983 Have you been exercising? Have you been exercising? Have you on any medication? Person to be selfed in second female and the problems? No Are you on any medication? Person to be selfed in second female and the problems? Name Phone Relationship Spouce Briefly describe any health problems: Injury Check: Alternate () Province Zip 43081 WAIVER Release from Liability and Assumption of Risk Agreement 1) Intending that this Agreement be legally binding upon me, my heirs, executors, administrators, and assigns, i hereby waive, release from several discharge Amarment Systems and Procedures, INC, and all of their agents, representatives, heirs, executors, administrators, such and assigns, of and from any and all claims, demande, rights and causes of action of whatsoever kind and nature, arising from, and by reany and all known and unknown, foreseen and unforeseen physical and mental hydres and consequences thereof, suffered by me during all ASP Expandable Baton certification training activities. 2) In agriculture and consequences thereof, suffered by me during all ASP Expandable Baton certification training activities. 2) In agriculture and one of the suffered by me during all ASP Expandable Baton certification training activities. 2) In a processing and mental health; (c) I am fully aware of, and do acknowledge and assume all risk of Injury Inherent in my participation in this seminar; (d) I have read and fully understand the terms and conditions of this Agreement.	Agency Address 500 Scleveling		
Agency Telephone (386) 646 - 4005 E-mail Address Duty Status:			71n 43081
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20

8.)	What	is the second step in the decontamination process? Spray them again
	B.	Tell them to stop crying like a baby Offer verbal rapport to the subject
9.)	What A. B. C.	is the third step of the decontamination process? Expose subject to fresh air Throw the subject a bottle of water Stand there and record them with your cellphone
	.) What A. B. C.	is the best way to flush the eyes? Using milk Rubbing eyes continually Water
11.	A. B.	type of agent is OC? Glue Cleaning Fluid Inflammatory
12.	A. B. C.	is the main ingredient of OC? Water Cayenne Pepper Powder
13	,	CMS (Center for Medicaid/Medicare System) guidelines allow for be used on a PATIENT? Yes No Only if they deserve it.
14	.) List tl	ne nomenclature of a canister of OC
	A.	Flip Top
	В.	Actuator o Nozele
	C.	Valve Assembly
	D.	Tube
	E.	Conske
	F.	Formuladion

Name:
Campus: 51 / March 5, 2021

HANDCUFFING TEST

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
 - D.) ALL OF THE ABOVE
 - (E) BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?
 - A.)TRUE
 - (B.)FALSE
- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - C) SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?
 - A.) TRUE
 - (B.) FALSE

DT Training Scenarios

1. Patient Wanding – Patient arrives at the hospital via private transport. Patient checks in stating "I do not wish to live anymore" and is immediately taken to the triage area for further evaluation. Patient is carrying a small bag and has on street clothes. Charge RN contacts Safety and Security regarding wanding the patient due to the statements made by the patient. Verbalize response and next steps prior to intervention with patient.

PASS / FAIL

- 2. Code Violet Security is called STAT to ER for verbally aggressive patient. While responding to STAT call, Security hears "Code Violet ER #9" paged overhead. Security arrives to find staff attempting to hold patient down in bed. Patient is making verbal threats while trying to bite, spit, kick, and punch at staff who are attempting to control patient. Verbalize response to code violet and further information needed before scenario resumes.
 PASS / FAIL
- 3. Restraint Security is responding to call for service on in-patient unit. Not much information is given prior to responding. Upon arrival Security witnesses several staff members attempting to keep confused patient in bed. Patient is flailing his arms and legs attempting to "escape" from the hospital. Patient recognizes Security as law enforcement and begins to focus on officers. Patient is begging Security to take him with them because he is not safe around nursing staff. Verbalize response and de-escalation efforts needed before scenario resumes. Obtain additional information as needed.

PASS FAIL

4. Pink Slip — Security responding to disturbance in ER. Upon arrival Security intercepts patient attempting to leave the hospital. Staff is stating that the patient cannot leave. What is the response by Security at that exact moment? Patient becomes verbally aggressive with Security stating "you cannot hold me!" Verbalize efforts to get the patient back to his room and information needed to make appropriate decisions during the incident. What factors are important to consider? Resume scenario...

PASS/ FAIL

5. Suspicious Person – Security receives a call from a visitor stating that they have observed a vehicle on campus that appears to be occupied sitting at the edge of property near connex boxes that contain contractor tools and equipment. This box has already been broken into previously and several thousands of dollars in equipment was stolen. Describe steps taken when dispatched and actions on-scene. Start scenario...

PASS FAIL

6. Domestic Situation – Security responding to a disturbance in Maternity unit. Upon arrival security speaks with RN who advises that she has heard yelling and screaming coming from inside the room. She further advises that the only people inside the room are the patient and the father of the baby. Security responds to the room and finds patient in tears stating that she has been physically assaulted by the male party. Male party states that is not leaving his baby! Start scenario...

PASS/ FAIL

9. GSW – Security is sitting post in ER lobby when GSW arrives via private vehicle. Two individuals carry the GSW into the ER lobby and drop him near the entrance. Both individuals flee the ER to their vehicle (Late model Infinity SUV, black with orange wheels with orange Infinity logo on each side). Patient has been shot in the chest. Gather additional information and advise response. Action...

PASS / FAIL

10. Property Search/Overdose - Security called to in-patient room for suspicion of patient using drugs in the room. Upon arrival security speaks with physician who advises that she has spoken with the patient on two occasions today. The first time he was alert and oriented and even energetic. The second time he appeared lethargic and completely out of it, he was having trouble finishing sentences without falling asleep. None of the medications he is receiving would cause the change in behavior. The patient also has a history of IV drug abuse and admitted to using drugs 3 days prior to admission into the hospital. He is there for an abscess that is infected on his arm that he needs to receive surgery for. Please provide steps needed to perform search and explain how these are communicated to the patient. Also state any notifications that are made and any witnesses to the search. Begin...

PASS/ FAIL

11. Discharged Patient – Security called to ER because discharged patient is refusing to leave the room. Patient states that he is not ready to leave because staff and the doctor has not addressed his concerns. Patient is being passive aggressive with staff and stating that he will not leave until he has had an opportunity to speak with the doctor about his care. Ask any additional questions as appropriate and determine your strategy for his removal from the room. Scenario resumes when ready...

PASS FAIL



A MEMBER OF TRINITY HEALTH

Safety and Security Defensive Tactics / OC Repellant / ASP Baton Competency Form

Students Name (print): I.D. Number: Date: 3 5 2021 Campus: ST ANN		
Campus		
1. Escort Position	Pass	Fail
2. Balance Displacement		
a. At the shoulder	Pass	Fail
b. Friction on the back	Pass	Fail
c. At the hip	Pass	Fail
3. Handcuffing		
a. Standing/Prone Position	Pass	Fail
b. Removing Handcuffs	Pass	Fail
4. Armbars/Wristlocks	0	
a. Transport Wristlock	Pass	Fail
b. Transport Wristlock Takedown to Handcuffs	Pass	Fail
c. Straight Arm bar	Pass	Fail
d. Straight Arm bar Takedown to Handcuffs	Pass	Fail
5. Weapon Retention Drills	~	
a. Holstered	(Pass)	Fail
b. Un-holstered	Pass	Fail
c. Stripping Weapon from Subject	Pass	Fail
6. Oleoresin Capsicum (OC)		
a. Nomenclature	(Pass)	Fail
b. Spray Patterns	-	
i. Balance/Movement/Verbal Commands/Control	Pass.	Fail
ii. Up/Down	Pass	Fail
iii. Side to Side	(Pass)	Fail
iv. Circular	Pass	Fail
c. Decon Process	(Pass)	Fail

Fail

Name: St ANN
Date: 9-4-2020

HANDCUFFING TEST

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
 - D.) ALL OF THE ABOVE
 - E. BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?

A.)TRUE B.)FALSE

- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - © SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?
 - A.) TRUE
 - B. FALSE

OC Test Mount Carmel Health System Safety and Security



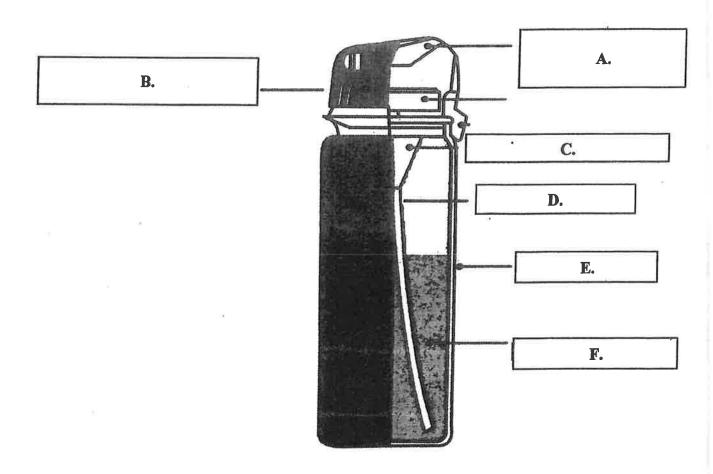
1.)	Wh	at does OC stand for?
	A.	Orange Crush
	В.	Ocean Crust
	C .	Oleoresin Capsicum
2.)	Wha	at is the average expiration date on an OC canister?
	A.	1-2 years
	B)	3-4 years
	č.	4-5 years
3.)	How	often should you check your OC spray for adequate spray strength?
	A.	30 days
	B.	60 days
	(C)	90 days
4.)	How	long of a burst should you use on a threat?
	A B.	1-2 seconds
	B.	2-4 seconds
	C.	Empty the entire can
5.)	Wha	t is Oleoresin Capsicum commonly known as?
	A.	Mace
	₿.	Pepper Spray
	Č.	Gas
6.)	When towa	n deploying OC, what area of the body should you deploy the OC
	A.	Arms
	<u>B.</u>	Chest
	(C)	Face and eyes

7.) After using OC on a subject, what should you immediately do with the subject?

A. Leave lying on the ground.

Remove from contaminated area

C. Spray again





Box 1794 Appleton, WI 54912 (920) 735-6242 Fax (920) 735-8246 asp-uss.com

ASP Basic Certification (ABC)

EXPANDABLE BATON TRAINING

Information Sheet

(Please Print)		Date 9-4-2020
☐ Initial Certification First Name	Recertification Last Name	
Home Address_	011 011	Zip 43123
City Gove C.+7	State OH Province	Zip
	State 6 H Province	Zip_43081
Have you been exercising? Yes	the use of the ASP Baton? Yes 7 17 Age 38 Date of Birth 1 25	
Person to be petitled in case of emerg Name _ Phone (Relationship _W) FE	ency: Alternate ()	
Briefly describe any health problems:		Injury Check: 1A 1
	WAIVER	
Я	elease from Liability and Assumption of Rick Agreement	
forever discharge Armament Systems and Pro and assigns, of and from any end all claims, de any and all known and unknown, foreseen and all ASP Expandable Baton certification training 2) In signing this Release, I assert that (good physical and mental health; (c) I am fully a seminar; (d) I have read and fully understand the	 (a) I am presently in good physical and mental health; (b) I am presently in good physical and mental health; (b) I am presently in good physical and mental health; (c) I am presently in good physical and mental health; (d) I am presently in good physical and mental health; (e) I am presently in good physical and mental health; (e) I am presently in good physical and mental health; (f) I am presently in good physical and mental health; (e) I am presently in good physical and mental health; (f) I am presently in good physical and mental health; (f) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health; (g) I am presently in good physical and mental health;	eirs, executors, administrators, successor and nature, arising from, and by reason of ses thereof, suffered by me during any and I have no reason to believe that I am not I y inherent in my participation in this training
9-4-2020		
Date	Signed	

15. ASF	Weapon Side Strikes are intended to be
	formed at a:
	45 degree angle
	b. 180 degree angle
	c. Horizontal angle
	d. 90 degree angle
	e. Vertical angle
16. Wh	en striking the ASP Baton is gripped with:
	a. The Index finger and thumb
	b. A loose flexible grip
	c. Two fingers and the thumb
	Full hand grip
	e. Both hands
17. Off	icer/Subject factors include:
	a. Special knowledge
	b. Imminent danger
	c. Injury or exhaustion
	d) Size
	e. Officer on the ground
	he subject compiles, the Officer doesn't not
aov	vance/strike (a,) True
	b. False
10 The	ASP Baton is designed to be
19. The	a. An offensive weapon
	b. A comealong device
	A defensive weapon
	d. A deadly force option
	e. A restraining device
20. The	principle goal of any arrest or physical
	infrontation is:
	(i) Establishing control
	b. Superior Officer skill
	c. Subject safety
	d. Documentation
	e. Punishment
	. (
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Graded By:	
ASP Writte	n Exam: Pass Fail
ASP WITCE	Tall 1935
Instructor:	Charles 13-41764
	alulanza
Date:	1171000
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DT Training Scenarios

1. Patient Wanding – Patient arrives at the hospital via private transport.

Patient checks in stating "I do not wish to live anymore" and is immediately taken to the triage area for further evaluation. Patient is carrying a small bag and has on street clothes. Charge RN contacts Safety and Security regarding wanding the patient due to the statements made by the patient. Verbalize response and next steps prior to intervention with patient.

PASS/ FAIL

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PASS FAIL

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PASS / FAIL

5. Suspicious Person – Security receives a call from a visitor stating that they have observed a vehicle on campus that appears to be occupied sitting at the edge of property near connex boxes that contain contractor tools and equipment. This box has already been broken into previously and several thousands of dollars in equipment was stolen. Describe steps taken when dispatched and actions on-scene. Start scenario...



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PASS / FAIL

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10. Property Search/Overdose - Security called to in-patient room for suspicion of patient using drugs in the room. Upon arrival security speaks with physician who advises that she has spoken with the patient on two occasions today. The first time he was alert and oriented and even energetic. The second time he appeared lethargic and completely out of it, he was having trouble finishing sentences without falling asleep. None of the medications he is receiving would cause the change in behavior. The patient also has a history of IV drug abuse and admitted to using drugs 3 days prior to admission into the hospital. He is there for an abscess that is infected on his arm that he needs to receive surgery for. Please provide steps needed to perform search and explain how these are communicated to the patient. Also state any notifications that are made and any witnesses to the search. Begin...

ASS / FAIL

11. Discharged Patient – Security called to ER because discharged patient is refusing to leave the room. Patient states that he is not ready to leave because staff and the doctor has not addressed his concerns. Patient is being passive aggressive with staff and stating that he will not leave until he has had an opportunity to speak with the doctor about his care. Ask any additional questions as appropriate and determine your strategy for his removal from the room. Scenario resumes when ready...

PASS / FAIL



A MEMBER OF TRINITY HEALTH

Safety and Security Defensive Tactics / OC Repellant / ASP Baton Competency Form

Students Name (print): I.D. Number: Date: りょうしょう		
Campus:ST - ANN		
1. Escort Position	Pass	Fail
2. Balance Displacement		
a. At the shoulder	Pass	Fail
b. Friction on the back	Pass	Fail
c. At the hip	Pass	Fail
3. Handcuffing		
a. Standing/Prone Position	(Pass)	Fail
b. Removing Handcuffs	Pass)	Fail
4. Armbars/Wristlocks	0	
a. Transport Wristlock	(Pass)	Fail
b. Transport Wristlock Takedown to Handcuffs	Pass	Fail
c. Straight Arm bar	Pass	Fail
d. Straight Arm bar Takedown to Handcuffs	Pass	Fail
5. Weapon Retention Drills	0	
a. Holstered	(Pass	Fail
b. Un-holstered	Pass	Fail
c. Stripping Weapon from Subject	Pass	Fail
6. Oleoresin Capsicum (OC)		
a. Nomenclature	Pass	Fail
b. Spray Patterns	5	
i. Balance/Movement/Verbal Commands/Control	Pass	Fail
ii. Up/Down	Pass	Fail
iii. Side to Side	Pass	Fail
iv. Circular	Pass	Fail
c. Decon Process	(Pass	Fail

Instructor Copy

Oleoresin Capsicum

HISTORY

The first use of pepper as a defensive or offensive weapon dates back to approximately 2000 BC during the wars between India and China.

The first use of <u>OLEORESIN CAPSICUM</u> as a weapon was 1540 by the Aztec Indians against the Spanish. A field of peppers was burned to create an irritant smoke cloud to stop the Spanish invaders.

In 1930, the U.S. military developed an <u>OLEORESIN CAPSICUM (OC)</u> compound, but found no effective method of delivery suitable for military use.

In 1974, the first commercial OC product for law enforcement was developed.

In 1987, the Firearms Training Unit of the FBI began a study of OC with the intention of supplementing their CN/CS munitions. It concluded with the adoption of <u>OC for use by their Special Agents in January 1990.</u>

During the early 1990's Aerosol Companies throughout the US experienced a dramatic increase in the demand for OC aerosol projectors, attributes primarily to two factors:

- 1.) The high profile of the Rodney King incident and the concern over the public's perception of excessive force, which ultimately increased the need for alternative force options.
- 2.) The Law Enforcement community's awareness of blood borne pathogens, and the need to reduce the potential for exposure.

DEFINITIONS

Oleoresin: a mixture of an essential oil and resin found in nature.

Capsicum: any solanaceous plant of the genus capsicum, as C. Frutescent, the common pepper of the garden, occurring in many varieties that range from mild to hot, having pungent seeds, also ranging from mild to hot, enclosed in a podded or bell-shaped pericap.

Oleoresin Capsicum: oil of capsicum

Pungency: the heat or intensity of the pepper

<u>Capsaicinoids</u>: a group of compounds, naturally occurring within the fats, oils, and waxes of the pepper plant.

Capsaicin: the most prevalent of the seven compounds found within the Capsaicinoids and considered to be the ACTIVE ingredient in OC.

Scoville Heat Units (SHU): a measurement of heat as perceived from the burning sensation when peppers are placed on the tongue.

<u>Solvents</u>: a liquid substance capable of dissolving or dispersing one or more other substances.

Emulsifier: a substance that creates an emulsion, or a mixture of mutually insoluable liquids in which one is dispersed in droplets throughout the other-bonds two or more liquids together.

<u>Carrier</u>: the ingredient, or ingredients, other than the OC, which compromise the OC Formulation-carries the OC from the canister to the target.

<u>Propellant</u>: the gas or liquid, which pressurizes the canister and propels the carrier and agent to the target

WHAT IS OLEORESIN CAPSICUM AND HOW DOES IT WORK?

Oleoresin Capsicum (Pepper Spray) or OC, is derived from <u>Cavenne</u>
<u>Peppers</u>. Unlike Mace or Tear Gas, which are irritants, Pepper Spray (OC) is an <u>Inflammatory Agent</u>. Contact with mucous membranes (eyes, nose, throat, and lungs) causes immediate dilation of the capillaries. This can result in temporary blindness, and inflammation of the breathing tube tissue and systematically cut off all but life support breathing.

OC also will create an intense burning sensation on the surface of the skin. However, OC WILL NOT cause any lasting effects. The effects will last from <u>FIFTEEN MINUTES</u> TO <u>SIXTY MINUTES</u> in length or duration. However, depending on the individual, the effects may be lesser or greater depending on an individuals tolerance level.

Because <u>OC</u> is an <u>INFLAMMATORY AGENT</u> and not an irritant, it is effective on those who feel no pain such as psychotics and those under the influence of narcotics or alcohol.

When using your <u>OC</u> make sure you have a safe distance between you and the threat if at all possible. Aim the unit at the <u>FACIAL region</u> of the threat and release a <u>1-2 second burst from the unit</u>. After deploying your unit step away from the threat however, keeping visual contact on the threat.

OC like any other product will lose its strength over time. It is recommended that it be replaced every 3 to 4 years. The OC should be tested every 90 days to insure proper spray strength. This should be done outside with you being down wind to prevent self contamination.

Considerations for Deploying O.C.

Use of Force Continuum Considerations

- 1. Presence
- 2. Verbal
- 3. Soft Physical Techniques
- 4. Hard Physical Techniques
- 5. Deadly Force

Deploying Formula

- 1. Spray (One to Two second bursts)
- 2. Command
- 3. Evaluate
- 4. Control

Securing Subject(s)

- 1. After subject has been sprayed, secure into handcuffs.
- 2. Goal Oriented Subjects can still fight and attack an Officer even after being sprayed several times.
- 3. Nothing is failsafe! Always use caution.

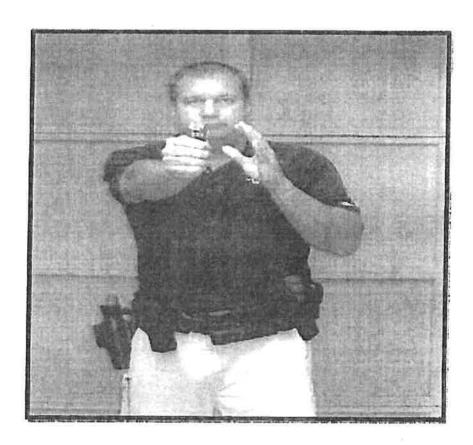
CARRY POSITIONS

One Hand Carry:

Canister held in hand with the bottom of the canister over the Officer's front foot. Do not fully extend the arm holding the canister. Empty hand is positioned either with the fingertips lower than the cheekbone and forward of the nozzle or behind the nozzle, in either position do not extend the canister any further than 3-6 inches from the chest.

<u>Advantage</u>: Presents a dominant and authoritative appearance allowing for easy transitioning between weapons and provides a clearing or checking hand.

<u>Disadvantage</u>: The possibility exists that during the deployment of OC might contaminate the Officer's free hand.



Two Hand Conceal Carry/Front Position:

Officer assumes a good stable interview position, strong leg back, canister held in front and close to the body by either strong or weak hand. Both elbows above the Officer's duty belt, placing the free hand over the unit to conceal it from view, keeping the thumb off the actuator or on the safety cap. Primarily for the second responding Officer at the scene.

Advantage: Presents a professional appearance and a low profile approach for the Officer and will not alert other bystanders that the Officer is ready to deploy OC. Designated finger needs to be above the flip top safety to prevent accidental discharge.

The benefits of using the thumb are often favored as it allows the user to apply direct pressure downward on the actuator for quick and smooth release of the aerosol.

<u>Disadvantage</u>: Some thumbs may not be able to fit in the actuator housing to allow the Officer to safely discharge the unit.

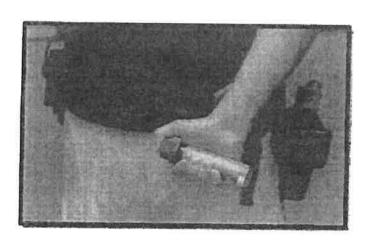


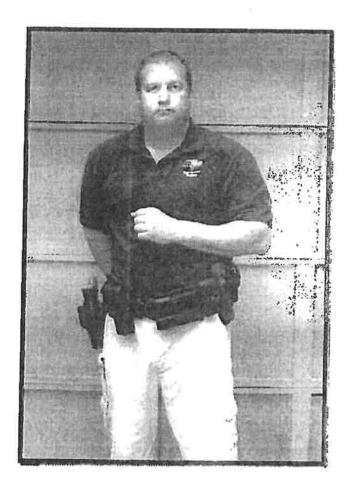
Low Profile/Rear Carry:

Canister held in hand with the arm extended downwards to the Officer's side, and the thumb is on top of the flip top safety.

Advantage: Presents a low profile, hiding the unit from immediate view, presenting a professional, but tactically ready position.

Disadvantage: If the subject attacks the Officer at the rear, subject may be able to grab the unit.



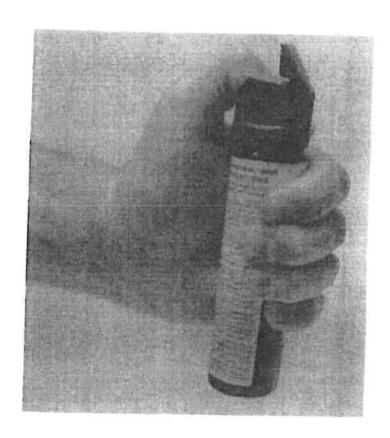


PROPER GRIP



- Fingers extended and joined
- Index finger below the nozzle guard
- Thumb on top of the flip top safety

PROPER GRIP



- Keep fingers extended and joined
- Thumb firmly on actuator
- Slow steady pressure directly down on the actuator

IMPROPER GRIP



DECONTAMINATION OF SUBJECTS

Step 1

Remove subject from contaminated area. (Physically)

Step 2

Verbal rapport advising subject of anticipated effects of the spray.

Step 3

Provide physical relief - Expose subject to fresh air and face into wind, have subject stay still, breathe normally and relax as much as possible.

Step 4

When a viable water source is available, have subject flush eyes (strobing, repeated opening/closing of the eyes) out with copious amounts of water.

MOUNT CARMEL HEALTH SAFETY AND SECURITY Policy



SUBJECT: Use of Force

PURPOSE

To provide guidelines for Security Officers in using force to control hostile persons and to provide guidelines for the use of defensive weapons.

POLICY

Security Officers must be prepared to perform assigned duties at all times. When using force to control a subject or to overcome resistance, the force must be based on the actions and behavior of the subject and be reasonable for the situation. The level of force used must be balanced against the likelihood of injury to the subject and/or officer.

The Safety and Security Department will use the USE OF FORCE CONTINUUM as a guide when dealing with an uncooperative subject. The USE OF FORCE CONTINUUM is a general guideline to be used in subject control and officer defense. Since confrontation is dynamic and is often unpredictable, an officer may be forced to escalate, de-escalate, or go from minimum to maximum use of force without resorting to each intermediate step. The Department's Use of Force Continuum is designed to aid and assist officers in the decision-making process.

Use of Force continuum and training in defensive weapons will take place within the first 90 days of employment for Safety & Security Officers and annual thereafter. Competencies/methodology of training will be tracked. Safety & Security will provide training on OC repellent, ASP Expandable Baton, and Defensive Tactics annually. In addition, Security Officers will have Initial 20-hour security firearms training authorized by the State of Ohio and annual re-qualifications thereafter.

USE OF FORCE CONTINUUM

Same Color

- Physical Presence of the Officer
- 2. Issuance of Verbal and Physical Directions or Commands
 - a. To direct subject
 - b. To inform bystanders
 - c. To create a voice stunning value
 - d. To calm subject
- 3. Empty Hand Control
 - a. Soft
 - 1. Assistance from other officers
 - 2. Escort Position

- b. Hard Defensive Tactics
 - 1. Joint Manipulations or pressure points, takedowns,
 - 2. Handcuffing

Mark Boston

Use of Non-Lethal Defensive Weapons

A. OC Repellent-Chemical

- 1. The OC repellent is a liquid or foam imitant. It requires direct application to the subject's face to be effective.
- 2. The application of the agent should be made ideally from a range of 6-12 feet. This distance also provides safety for the officer. If the agent is applied at a closer range it may affect the officer. When spraying the subject, the spray should be directed at the eyes for maximum effect. If the subject is wearing glasses spray at the top of the glasses and allow the agent to splash into the eyes. The agent should take full effect in 2-5 seconds.
- 3. Officers using the agent should not touch their face until they have had the opportunity to wash their hands with soap and water.
 - After spraying a person, afford that person an opportunity to wash the contaminated areas and remove any saturated clothing. The most effective antidote is a large amount of air. The subject should be taken to the Emergency Department to be checked.
 - If the agent is used in an enclosed area, such as a small room or vehicle, open all windows and allow the area to ventilate.
- 4. The OC agent should only be used when a physical confrontation is occurring or is about to occur.

B. Canine (K9)

If a perpetrator becomes violent and physically assaulting by way of non-deadly measures, K9s can be deployed to get the perpetrator(s) under control to prevent bodily harm/physical assault.

4.0

C. Expandable Baton

- 1. The expandable baton is to be primarily used as a defensive weapon. Striking a person with the baton is justified when an officer is:
 - a. Protecting him/herself or another from assault
 - b. Attempting to stop an individual's aggression or to overcome resistance or violent behavior where lessor means of physical force are ineffective.
- 2. The primary target areas for applying non-lethal force with the baton are the large muscle groups or bones. Light strikes to these areas will cause pain and minor bruising, although such a strike can potentially disable an assailant and bring the attack to an abrupt halt.
- It is important to avoid striking the head, temple, throat, and the back of the neck. Even light strikes or pressure these areas could inflict serious or possibly fatal injuries.
- 4. If an officer strikes a person with the baton that person will be taken to the Emergency department to be checked.



Lethal/Deadly Force

Firearms

Select officers/ supervisors carry firearms and the use of firearms on a person is considered lethal and deadly force. The use of deadly force will be in accordance with Ohio State Laws (ORC) – and will only be used on a perpetrator for the protection of life from substantial risk of death or serious bodily injury to self or others. Officers/supervisors that carry firearms have gone through the OPOTA Security Firearms training program and have met proficiency/competency and will re-qualify on an annual basis. Armed security must make sound judgment when using fire arms in the above circumstances, but be cognizant to their action as it relates to the potential of bullets hitting and wounding innocent bystanders. Firearms should not be discharged on moving vehicles unless it is a situation that is life-threatening. Only authorized department firearms will be used.

SPECIAL PROVISIONS

Anytime that an officer uses the OC repellant, K9, baton, handcuffs, or firearm on any individual an Incident Report will be completed by the Officer's Supervisor/In Charge Officer. Local Law Enforcement Agency will also be contacted for possible charges on subject that OC repellant, K9, handcuffs, baton, firearm was used on. This report will be forwarded to the Regional System Manager of the Safety and Security Department. All Use of Force Incidents will be investigated by the Defensive Tactics Instructors.

Reviewed 09-2011 Revised 12/2012 Reviewed 08/2014 Reviewed 08/2016 Revised 11/2016, 12/2016 Firearms effective: 2/1/17

DEFINITIONS:

- 1. Active Resistance Behavior that consists of non-threatening physical opposition to being controlled.
- Assaultive Behavior Aggressive physical opposition directed towards the officer or others by a subject. Assaultive behavior can be either an actual attack, or threat of attack conveyed through body language and assaultive verbalization.
- 3. Controlling Force Usually the minimal amount of physical force needed to control a subject who will not submit to verbal commands. Generally, this level of force involves the application of pain without injury. Controls techniques are used to encouraged a subject to go in a desired direction, and usually are applied to subjects that are either passively or actively resisting the officer's attempt to control them.
- 4. Deadly/Lethal Force Any force which carries a substantial risk that it will proximately result in the death or serious bodily injury of any person.
- 5. Reasonable Belief That belief by an officer, acting on personal knowledge of facts and circumstances which are reasonably trustworthy, that would justify a person of average caution to believe that a crime has been or is being committed. Similar to the probable cause standard.
- 6. Reasonable Force Force that will likely lead to a safe control of the subject. If a lesser force would likely lead to safe control the lesser force should be used.
- 7. Serious Physical Injury Injuries being inflicted or about to be inflected which could cause the death of any person.



SUBJECT: Detainment of Individuals

PURPOSE

To provide guidelines for the detention of persons on Mount Carmel Health property by Security Officers.

POLICY

There are three instances when a Security Officer may detain a person on Mount Carmel Health property. They are:

- 1. When there are reasonable grounds to believe that a person has committed a felony pursuant to section 2935.04 of the Ohio Revised Code.
- When there is probable cause to believe that a person has unlawfully taken items
 offered for sale at a mercantile establishment pursuant to section 2935. 04.1 of
 the Ohio Revised Code.
- 3. When a psychiatrist, licensed clinical psychologist, licensed physician, health officer designee has taken a person into custody and has reason to believe that the person is mentally ill pursuant to sections 5122.10 and 5122.01 of the Ohio Revised Code.

PROCEDURE

Security Officers in the detention of persons will follow the following procedures.

- A. Section 2935.04 ORC Detention of a person when a felony has been committed.
- Section 2935.04 of the Ohio Revised Code (ORC) allows any person to make an
 arrest without a warrant if there are reasonable grounds to believe that the person has
 committed a felony. In main an arrest under this section the Security Officer has two
 additional requirements:
 - a. Section 2935.07 ORC requires that the person making the arrest must, before making the arrest, inform that person of the intention to make the arrest and the cause of the arrest.

SUBJECT: Detainment of Individuals (Con't)

- b. Section 2935.06 ORC requires that the arrested person be delivered to a judge, clerk of courts, or an officer authorized to execute criminal warrants (law enforcement officer) without unnecessary delay.
- 2. Security Officers will follow the above sections of law in detaining a person that has committed a felony. The local police department will be called immediately to respond to the hospital. When the police officer arrives the Security Officer will brief the officer on the incident. The entire incident will be turned over to the local police department for investigation. The Security Officer will cooperate with the Police Department during the investigation. The Security Officer will be available to file charges and to testify in court if necessary.
- B. Section 2935.04.1 ORC Detention of a Shoplifter.

1.Section 2935.04.1(A) permits the agent of a merchant who has probable cause to believe that items have been taken from the merchant unlawfully. Probable cause is defined as reasonable grounds to believe that the person is guilty of the theft. Other sections that apply are:

- a. Section 2935.04.1(D) prohibits the search of the person or to seize property belonging to the person without the person's consent.
- b. Sections 2935.06 and 2935.07 ORC applies to this section of the ORC. The person must be told of the intention to arrest and must be delivered to an officer without unnecessary delay.
- 1. When a Security Officer stops a suspected shoplifter there needs to be probable cause. This may be established by the Security Officer witnessing the crime or have a witness to the crime. The Security Officer will request that the local police department respond to the hospital. The Security Officer may ask the person for the merchandise that was taken. If the person refuses, the Security Officer will keep the person under surveillance until the police arrive. When the police arrive the incident will be turned over to them. The Security Officer will cooperate with the investigation. The Security Officer will be available to file charges and to testify in court if necessary.
- C. Section 5122.10 ORC Detention of mentally ill person.
- Section 5122.10 ORC permits the emergency/temporary detention of persons believed to be mentally ill by various licensed professionals. These professionals are psychiatrist, licensed clinical psychologist, licensed physician and health officers. Health officers are defined in section 5122.01(J) ORC as any public health physician, public health nurse, or other authorized or designated person.

SUBJECT: Detainment of Individuals (Con't)

- a. The Emergency Department's Licensed Independent Social Worker (LISW) and Licensed Professional Clinical Counselor (LPCC) have been designated as "health officers" as referred to in section 5122.01(J).
- When a patient has been determined to be mentally ill by a person listed in section 5122.10 ORC and this person is attempting to leave the hospital, a Security Officer should be called immediately.
 - a. If the person is located on Mount Carmel property the Security Officer should attempt to persuade the person to return to the hospital. If the person refuses the Security Officer should restrain the person and return the person to the hospital.
 - b. If the person can not be located on Mount Carmel property the local police department will be notified. Once the person is located the police department should transport the person to a mental health facility.

SPECIAL PROVISIONS

- A. In all incidents the Security Officer will initiate an Incident Report. The Safety and Security Department should request either a "run number" or report number of the Police responding to the incident and include it with the Incident Report.
- B. Any use of force used to detain a person must be within the Safety and Security Department policy on Use of Force.
- C. The safety of visitors, patients, and employees must be considered in detaining persons by force. Should the situation present an unsafe condition the Security Officer should refrain from using force.

Awards

Application / Transfers





A MEMBER OF TRINITY HEALTH

POSITION DESCRIPTION

POSITION TITLE: Phlebotomist	DEPARTMENT: Assigned department or location	
JOB CODE: 2301, 0119	REPORTS TO: Assigned supervisor	
DATE ISSUED: 1/1/98	SUPERVISES: N/A	
DATE REVISED: 12/18/06; 11/22/2010, 7/2012	MATRIX REPORTING RELATIONSHIPS:	

Mount Carmel Mission Statement and Guiding Behaviors

Mission: We serve together in Trinity Health, in the spirit of the Gospel, to heal body, mind and spirit, to improve the health of our communities and to steward the resources entrusted to us.

The Guiding Behaviors set the expectation for how we work together in living our Mission and Core Values. They are:

- We support each other in serving our patients and communities.
- We communicate openly, honestly, respectfully and directly.
- We are fully present.
- We are all accountable.
- We trust and assume goodness in intentions.
- We are continuous learners.

Job Summary

In accordance with the Mission and Guiding Behaviors; the Phlebotomist ensures accurate registration of patients with all information required. Places patient orders; collects and labels specimens utilizing positive patient identification. Processes and prepares specimens for transport as needed. Produces reports for faxing or delivery as needed and communicates appropriate information to the healthcare team.

Job Qualifications (Knowledge, Skills, and Abilities)

- Education: High school diploma or equivalent
- Licensure / Certification: Phlebotomy certification desirable, but not required.
- Experience: Phlebotomy and basic computer skills required;
- Effective Communication Skills
- Working knowledge of medical terminology is desirable.
- Detail oriented, able to work with minimal supervision.
- Ability to effectively function in stressful situations.
- Ability to work a flexible schedule, as needed.
- Working knowledge of third party payor regulations and requirements desirable.

Essential Responsibilities

- Exhibits each of the Mount Carmel Service Excellence Behavior Standards holding self and
 others accountable and role modeling excellence for all to see. For example: demonstrates
 friendliness and courtesy, effective communication creates a professional environment and
 provides first class service.
- Meets population specific and all other competencies according to department requirements.
- Promotes a Culture of Safety by adhering to policy, procedures and plans that are in place to prevent workplace injury, violence or adverse outcome to associates and patients.
- Relationship-based Care: Creates a caring and healing environment that keeps the patient and family at the center of care throughout their experience at Mount Carmel following the principles of our interdisciplinary care delivery system.
- (For patient care providers) Provides nursing care, ensures an environment of patient safety, promotes evidence-based practice and quality initiatives and exhibits professionalism in nursing practice within the model of the ANCC Magnet Recognition Program®.
- Customer Service Establishes, maintains and improves strong positive relationships with the medical staff, the public, other Mount Carmel Health departments and own department staff.
- Greet all patients in a friendly and gracious manner, creating a warm and friendly atmosphere.
- Obtains all patient information in a private and confidential manner.
- Performs contract management and LIS registrations. Maintains all required documentation.
- Places patient orders accurately.
- Identifies each patient accurately by verifying date of birth, spelling of last and first name.
- Collects specimens utilizing professional and accepted practices: Venipuncture, Capillary puncture and Urine Collection.
- Labels all specimens accurately.
- Transports specimens in a timely manner.
- Processes specimens per laboratory procedure.
- Review computer reports, resolves any problems and makes appropriate corrections.
- Answers telephone promptly (within 3 rings) and handles all calls with courtesy and efficiency. Provides appropriate results and delivers accurate messages regarding specimen collection and processing.
- Maintains adequate supply levels for assigned areas.
- Maintains a safe environment following hospital policies and procedures, performs required safety checks.
- Maintains a high level of quality assurance.
- Reports all quality concerns according to policy.

Cancels and charges in LIS and HIS at Supervisor / Coordinator direction.

Other Job Responsibilities

- Participates in continuing education activities.
- Attends department specific meetings.
- Responsible for compliance with Organizational Integrity through raising questions and promptly reporting actual or potential wrongdoing.
- All other duties as assigned.

EQUIPMENT: This section requires a response of Yes or No from drop down box.

Radiation: No Electrical: Yes_

Chemical: No Mechanical: No

KEY TO FREQUENCY CODES for Physical Requirement Sections: This section requires a numerical response from drop

1 = Up to 33% of the time 3 = Over 66% of the time 2 = From 33% - 66% of the time 4 = Not Applicable

PHYSICAL REQUIREMENTS

Sitting: 1

Balancing: 1

Standing: 3 Walking: 3

Reaching Overhead: 1 Grasping: 2

Ability to be Mobile: 3 Bending: 2

Keyboarding Pinching: 3

Kneeling/Crawling: 1 Stooping: 2

Twisting: 1 Climbing: 1

Pulling: 2

Turning/Pivoting: 1

Working Above Shoulder Level: 1

Pushing: 2 Lifting: 1

Maximum Weight: Equal to or greater than 35 lbs Maximum Weight: Equal to or greater than 35 lbs

POTENTIAL EXPOSURE: This section requires a response of Yes or No from drop down box.

Blood / Body Fluid Contact: Yes Humidity: No Temperature: No Air-borne Pathogen: Yes Chemicals (Fumes / Burns): No Dust: No

Radiation: No Vibrations: No Noise: No

Personal Protective Equipment: This section requires a response of Yes or No from drop down box.

Gloves: Yes Shoes: No Goggles: Yes Aprons: No

Masks: Yes Head Covering: No Gowns: Yes

Emotional / Psychological Factors: This section requires a response of Yes or No from drop down box.

Trauma: No Grief: No Death: No Public Contact: Yes Deadlines: Yes

This job description is intended to describe the general content of and requirements for the performance of this job. It is not to be considered an exhaustive statement of duties, responsibilities, or requirements.

Reviewed and Approved by: Amy Null

Title:

System Director, Lab Services

Date:

12/19/2010 Mary Ann Wolf

Human Resources Leader:

Vice President - Human Resources

Title: Date:

2/11/2011 Kim Berno

Compensation Rep: Title:

Sr. Compensation Analyst

Date:

2/11/2011

LABORATORY FIRE DRILL

R.A.C.E

- 1. Rescue people in immediate danger.
- 2. Alarm: Pull/Activate the nearest "Fire Alarm Box"
- 3. Report fire by calling "3".

Information to give operator when calling "3"

- a. Name
- b. We have a fire.
- c. Exact location (i.e. 2 Tower Laboratory- Hematology, 4 Tower Laboratory-Blood Bank, etc)
- 4. Alert all Laboratory personnel; don't forget Registration if in 2 Tower Lab.
- 5. Confine: Close all doors. Do not endanger yourself or others.
- 6. **Evacuate** Laboratory. Meet in designated area. Remember to account for everyone
 - a. 2 Tower-Souder Street across from outside 2 Tower Lab side entrance.
 - b. 4 Tower-Columbus Rehab Parking Lot SE corner.
- 7. Only return after receiving notification from Security or Fire Department.

Colleague:			ï	Í
Supervisor:	Date: _	16	R	14
		- 1	- 1	

Mount Carmel West Laboratory Annual Evaluation Checklist Phlebotomy and Specimen Processing

Colleague:

Please initial below next to each laboratory manual indicating you are knowledgeable about the contents of the manual and able to perform the tasks as directed. Only initial for the manuals that relate to the departments you are trained in.

All Colleagues to Review and Initial	
General Laboratory Manuals Reviewed	INITIAL
Laboratory Administrative Manual	
Emergency Response Manual / Plan	
Laboratory Safety Manual	
(Includes Chemical Hygiene Plan)	
Infection Control Manual (on InSight)	

Initial the Appropriate Lab Departme	nt(s)
Specimen Processing Manual Reviewed:	INITIAL
Specimen Processing Manual	1000
Phlebotomy Manual Reviewed:	INITIAL
Opening in Proceeding Manual	

Colleague Signature:

Date: 16/7/14



A MEMBER OF TRINITY HEALTH

POSITION DESCRIPTION

POSITION TITLE:	DEPARTMENT:
Phlebotomist	Laboratory Services
JOB CODE: 2301	REPORTS TO: Supervisor, Laboratory / Coordinator, Phlebotomy
DATE ISSUED:	SUPERVISES:
1/1/98	N/A
DATE REVISED: 12/18/06; 11/22/2010	MATRIX REPORTING RELATIONSHIPS:

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registration of patients with all information required. Places patient orders; collects and
labels specimens utilizing positive patient identification. Processes and prepares specimens
for transport as needed. Produces reports for faxing or delivery as needed and
communicates appropriate information to the healthcare team.

Signature Date

Job Qualifications (Knowledge, Skills, and Abilities)

Education: High school diploma or equivalent

- Licensure / Certification: Phlebotomy certification desirable, but not required.
- Experience: Phlebotomy and basic computer skills required;

Effective Communication Skills

- Working knowledge of medical terminology is desirable.
- Detail oriented, able to work with minimal supervision.
- Ability to effectively function in stressful situations.

Ability to work a flexible schedule, as needed.

Working knowledge of third party payor regulations and requirements desirable.

Essential Responsibilities

- Exhibits each of the Mount Carmel Service Excellence Behavior Standards holding self and others accountable and role modeling excellence for all to see. For example: demonstrates friendliness and courtesy, effective communication creates a professional environment and provides first class service.
- Meets population specific and all other competencies according to department requirements.
- Promotes a Culture of Safety by adhering to policy, procedures and plans that are in place to prevent workplace injury, violence or adverse outcome to associates and patients.
- Relationship-based Care: Creates a caring and healing environment that keeps the patient and family at the center of care throughout their experience at Mount Carmel following the principles of our interdisciplinary care delivery system.
- (For patient care providers) Provides nursing care, ensures an environment of patient safety, promotes evidence-based practice and quality initiatives and exhibits professionalism in nursing practice within the model of the ANCC Magnet Recognition Program®.
- Customer Service Establishes, maintains and improves strong positive relationships with the medical staff, the public, other Mount Carmel Health departments and own department
- Greet all patients in a friendly and gracious manner, creating a warm and friendly atmosphere.
- Obtains all patient information in a private and confidential manner.
- Performs contract management and LIS registrations. Maintains all required documentation.
- Places patient orders accurately.
- Identifies each patient accurately by verifying date of birth, spelling of last and first name.
- Collects specimens utilizing professional and accepted practices: Venipuncture, Capillary puncture and Urine Collection.
- Labels all specimens accurately.
- Transports specimens in a timely manner.
- Processes specimens per laboratory procedure.
- Review computer reports, resolves any problems and makes appropriate corrections.
- Answers telephone promptly (within 3 rings) and handles all calls with courtesy and efficiency. Provides appropriate results and delivers accurate messages regarding specimen collection and processing.
- Maintains adequate supply levels for assigned areas.
- Maintains a safe environment following hospital policies and procedures, performs required safety checks.
- Maintains a high level of quality assurance.
- Reports all quality concerns according to policy.

Cancels and charges in LIS and HIS at Supervisor / Coordinator direction.

Other Job Responsibilities

- Participates in continuing education activities.
 Attends department specific meetings.
 Responsible for compliance with Organizational Integrity through raising questions and promptly reporting actual or potential wrongdoing.
 All other duties as assigned.

EQUIPMENT: This section requires a response of Yes or No from drop down box.

Radiation: No

Electrical: Yes

Chemical: No

Mechanical: No_

KEY TO FREQUENCY CODES for Physical Requirement Sections: This section requires a numerical response from drop down box.

1 = Up to 33% of the time

3 = Over 66% of the time

Reaching Overhead: 1

Grasping: 2

Pinching: 3

Twisting: 1

Climbing: 1

Keyboarding : 3

2 = From 33% - 66% of the time

4 ≃ Not Applicable

Pulling: 2

PHYSICAL REQUIREMENTS

Sitting: 1

Balancing: 1

Standing: 3 Walking: 3

Ability to be Mobile: 3

Bending: 2

Kneeling/Crawling: 1 Stooping: 2

Turning/Pivoting: 1

Working Above Shoulder Level: 1

Pushing: 2

Maximum Weight: Equal to or greater than 35 lbs

Lifting: 1

Maximum Weight: Equal to or greater than 35 lbs

POTENTIAL EXPOSURE: This section requires a response of Yes or No from drop down box.

Blood / Body Fluid Contact: Yes Humidity: No Temperature: No Alr-borne Pathogen: Yes Chemicals (Fumes / Burns): No Dust: No

Radiation: No Vibrations: No Noise: No

Personal Protective Equipment: This section requires a response of Yes or No from drop down box.

Gloves: Yes Shoes: No Goggles: Yes Aprons: No

Masks: Yes Head Covering: No Gowns: Yes

Emotional / Psychological Factors: This section requires a response of Yes or No from drop down box.

Trauma: No Grief: No Death: No Public Contact: Yes Deadlines: Yes

This job description is intended to describe the general content of and requirements for the performance of this job. It is not to be considered an exhaustive statement of duties, responsibilities, or requirements.

Reviewed and Approved by:

Amy Null

Title:

System Director, Lab Services

Date:

12/19/2010

Human Resources Leader: Title:

Mary Ann Wolf

Date:

Vice President - Human Resources 2/11/2011

Compensation Rep:

Kim Berno

Title:

Sr. Compensation Analyst

Date:

2/11/2011



Transfer Application

Position Applied For

Position: Phlebotomist

Facility: Mount Carmel West

Department: Laboratory Phlebotomy MCW

Schedule: Full time Req Num: 20121701

We consider associates for all positions without regard to race, color, religion, creed, national origin, age, disability, sexual orientation, marital status, or any other legally protected status.

* Required Information

September 12, 2012

PERSONAL INFORMATION

Are you a current associate of Mount Carmel Health System?* Yes

Associate ID#:* 855858

First Name:* MI:

Last Name:*

Address:*

City:* columbus

State:* OH

Zip:* 43231

Social Security Number:*

Home/Other Phone:*

Work Phone:

Cell Phone:

Best way to contact: Cell Phone

Email Address:*

CURRENT STATUS

Current Job Title:* phlebotomist

Current Location:* mount carmel west

Current Department:* blood bank

Current Job Responsibilities:* draw blood,. pt care

Current Shift:* 2

Start Date:* 9/10/12

Manager Name:* chris kent

Manager Extension:* 1319

Why are you requesting a transfer?* to be perm position

Is your current manager aware of your request for transfer?*

Yes

Is this position in addition to your current position?* No

EDUCATION

High School

Name of school:

Degree Type:

Street:

Did you graduate?

City:

State: Province:

Zip: Country:

List scholastic honors, specialized training, apprenticeship, and extra-curricular activities that may be helpful in considering your application:

LICENSES/CERTIFICATIONS

Professional Licensure

Please Provide Professional Licenses/Registrations held. Include License Number and Expiration Date.

Type

State

Number

Date Issued

Expiration Date

Temp / Perm

If you are applying for a job category that requires licensure, please answer the following question: Is your license currently subject to any investigation by a licensing agency?

DRIVING INFORMATION

If you are required to drive a motor vehicle you must possess a valid driver's license. Please provide your license information.

Driver License Number

Driver License Type

Plate Number

State of Issue

Date Issued

Date Expired

Has your driver's license ever been suspended, revoked or modified? If Yes,

WORK HISTORY

Please provide the requested information about your past employers, beginning with your most recent employer. Make sure you include volunteer work or other job related training which provides information on skills/abilities you have developed. It is important to be accurate and complete since your pay rate is related to your experience.

1. Previous positions at Mount Carmel and/or previous employers:

Name of Company:* labcorp of america

Job Duties and Responsibilities:*
draw blood and pt care

Street:

City:

Reason For Leaving:*

State:

family

Zip:

May we contact this employer for a reference?*

Yes

Employer's Phone:

Other Name(s) Used:

Job Title:* phlebotomist

Employed From:* 03 2009

Employed To:* 08 2012

S	Starting Salary:* 14			
1	Ending Salary:* 15			
Supe	ervisor's Name: brend hutchinson			
	oyment Status: Full Time			
1				
ADDITIONAL INFO	Are there any gaps in emplo	oyment history?	Please explain:	
	Minimum Salary Required:			
	How did you find out about this position?*	Internal Trans	sfer	
If you	selected other, please enter "Other" source:			
	Which job status/shift would you accept? (please check all that apply)	() Full Time () Part Time () PRN () Flex Time	○ Evening○ Night	Days (_) Sunday (_) Monday (_) Tuesday (_) Wednesday (_) Thursday (_) Friday (_) Saturday
Please answer all (of the following questions. Have you been in your current posi	ition for at leas	st 6 months?	
* No	Do you have any relative(s) working			?
	If yes, please list their Name: Relationship:			
* Ņo	Have you received corrective action	n within the las	st 12 months?	
* No	Have you ever worked or attended a			
	If yes, what name(s):			
* Yes	May we contact your present manag	ger/supervisor	?	
* Yes	Are you 18 years of age or older?			
ESUME				
Resume To copy and paste ye	our resume:			
Press 'Ctrl C' Place the curr	text on the resume you want to copy. to copy (Hold down the Ctrl key and press (sor in the RESUME box below. to paste the information.	C).		
Cover Letter				
Resume				
EAD AND SIGN				
lead the follow	ing carefully before signing.			
As an associate at Day policy, What the	Mount Carmel Health System, it is important is means for associates is they may not use whether on or off campus. During the shift	nt to understand e tobacco produ your personal p	we enforce a Tobac acts at any time duri presence including c	cco Free Workday - Every ng their work shifts, even lothing, must be free of the
Please type your n	ame below in agreement with this policy			

Candidate's/Associate's Signature:

aaron cole

Associate Authorization and Release:

I certify that the information contained in this application is correct to the best of my knowledge and understand that any falsification, misrepresentation or omission on this application is grounds for refusal to hire, or if hired, dismissal. I authorize any of the persons or organizations referenced in this application to give Mount Carmel Health System any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application and release all or such parties and the Hospital from all liability for any damage that may result from furnishing such information. I authorize Mount Carmel Health System to request, receive and use such information and release Mount Carmel Health System from any liability regarding the use of such information. I specifically waive any written notice provisions required by state or federal law. Further, if applicable, I understand and agree that Mount Carmel Health System and/or any affiliate may conduct an investigation into criminal history, past employment, education records, Medicare/Medicaid Fraud check and agree to cooperate in any investigation and release all of such parties and the Hospital from all liability for any damage that may result from furnishing such information. Additionally, Mount Carmel Health System may, through a testing service of its choice, collect a blood, urine, hair, saliva, or breath sample from me and conduct necessary medical tests to determine the presence or use of drugs and/or alcohol, including controlled substances. I hereby release Mount Carmel Health System and its employees from any liability arising out of such test and agree to be bound by its results. I agree that the test results and other relevant medical information may be released to Mount Carmel Health System for appropriate review. I also understand that if I refuse to execute this consent, I will not be considered for employment with Mount Carmel Health System. If I am accepted for employment with Mount Carmel Health System, I agree to comply with its Drug Free Workplace Policy. I understand that my employment is contingent upon successfully completing any background check or post offer physical exam.

I understand and agree that this application for employment and any of the investigations conducted regarding my application may be shared with any other members of Mount Carmel Health System and/or affiliates for other employment opportunities.

I agree to comply with Mount Carmel Health System rules, regulations and policies and acknowledge that these rules, regulations and policies may be changed, interpreted, withdrawn, or supplemented any time, and without prior notice to me. I understand that I am required to follow all policies, procedures, rules or regulations of Mount Carmel Health System and/or its affiliates and that any violation may result in disciplinary action including termination of my employment.

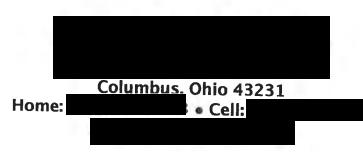
I understand that I must be willing and able to rotate shifts, work Saturdays, Sundays and Holidays as required by Mount Carmel Health System and/or affiliates.

I acknowledge that any offer of employment, or my acceptance of an employment offer, if such is to occur, may be withdrawn, with or without cause, and with or without prior notice, at any time, at the option of Mount Carmel Health System or myself. I understand that this application and any other documents, which I may receive, are not contracts of employment. If employed, I understand that I will be an employee "at will" and either Mount Carmel Health System or I may terminate my employment relationship at any time with or without notice for any reason not violative of the law. I further understand that no representative of Mount Carmel Health System other than an officer has any authority to enter into any agreement for employment for any specified period of time or to assume any other personnel action, either prior to commencement of employment or after I have become employed, or to assure any benefits or terms and conditions of employment, or make any agreement contrary to the foregoing.

My typed name below shall have the same force and effect as my written signature.

Candidate's/Associate's Signature:

Date: September 12, 2012



Work Experience

1999 - Present

Lab Corp of America

03/2009 - Present

1932 Alcoa Highway Bldg C155 . Knoxville, TN 37920

Position: Patient Service Technician Specialist

Responsibilities: Patient care, Implementing proper procedure for blood draws including Stats, AP, Routine, Emergency, Legal, Trama, Pediatric, Neonatal, Retrieving Specimens, Cultures, and Tissue Samples, Inventory Control, Medical Knowledge.

Achievements: Above and Beyond Award – For going above and beyond to save a life. Team Player of the Week Award – For Highest Productivity and 100% TAT (Multiple weeks in a row).

Knoxville Convention Center

02/2008 -08/2008

701 Henley Street • Knoxville, TN 37902

Position: Event Technician

Responsibilities: Event Preparation, Equipment Set-up, Serving Food, Audio Set-up.

Jim Cogdill Dodge

01/2007 - 02/2008

8544 Kingston Pike • Knoxville, TN 37919

Position: Lead Associate

Responsibilities: New / Used Auto Sales, Commercial Auto Sales, Inventory Control, Training New Sales Associates, Financial Management, Credit Checking, Customer Service, Personal Shopper, Internet Sales, Special Order Sales, Product Knowledge.

Dicks Sporting Goods

06/2006 - 12/2006

221 North Peters Road • Knoxville, TN 37923

Position: Lead Fitness Associate, Hunting Lodge Manager - Gun Salesman Responsibilities: Fitness Equipment Assembly, Loading and Unloading of Merchandise, Sales Associate, Customer Service & Assistance, Product Knowledge, Product Assembly.

Parkwest Medical Center

11/2005 - 05/2006

9352 Park West Boulevard • Knoxville, TN 37923

Position: Materials Associate

<u>Responsibilities:</u> Inventory Control, ER and OR Surgery Instrument Preparation, Emergency Materials Runner, Biohazard Waste Management, and Instrument Sterilization.

US Navv

08/2000 - 11/2005

(See Military Work Experience: Page 3)

Certificate of Course Completion

This is to certify that

has completed

MCGC Fire & Life Safety Course for Pre-Opening Training

 REPORT NO: MLPRT

MOUNT CARMEL HEALTH

PAGE NO: 001

ELECTRONIC MAIL

FOR: BENNON, PATRICIA A

FROM: BENNON, PATRICIA A

DATE/TIME: 10/28/15 12:43

SUBJECT: xmas holiday coverage, 2nd sh

and Nicole,

We need one of you to either pick up this shift or you can always ask if someone would want to work it for you. Casie is already signed up, and Natasha worked xmas last year.

If you can find anyone who wants the double time pay, let me know and we will place both of your names in a hat and draw one. This is the fairest way I know to do it!

thanks, Pat

REPORT NO: MLPRT

MOUNT CARMEL HEALTH

PAGE NO: 001

ELECTRONIC MAIL

FOR:

DATE/TIME: 06/07/18 08:28

FROM: STAHL, SHANNON R

SUBJECT: 6T AM draw CC: 224219

Patient on 6T, you had a TROPI in RM COL, a METAB still in dispatch, but you collected the CBC. All were ordered for 0600.

This delayed patient care, especially for the Troponin. If it was a difficult stick, them please make sure not to confirm it or relay to someone to try to recollect.

Remember to collect an extra if possible, especially on 6T patients.

Thanks.



Mount Carmel Grove City Emergency Department

5300 North Meadows Drive Grove City, Ohio 43123

Phone: 614-663-5300

Work	Re	ease	Form	1
------	----	------	------	---

This notice verifies that your employee was seen in this facility on 11/03/2017 21:29:01.

Excused from work for 2 days
The following restrictions: None:

<u>NOTE:</u> If symptoms continue and the employee is unable to perform the full duties of their job by this date, please advise the employee to return to this facility or make an appo intment with the referral physician for further evaluation.

ED Physician/Provide r



Mount Carmel Corrective Action

Mount Carmel and all of us individually are held accountable for our behaviors and actions. Guiding Behaviors are how we work together by: Supporting each other in servicing our patients and communities, Communicating openly, honestly, respectfully, and directly, Being fully present, Being accountable, Trusting and assuming good intentions, and Being continuous learners. In addition to supporting our Mission and Values, the Standards of Conduct also assist us in ensuring that our actions and behaviors are consistent with the legal, ethical, and professional obligations that apply to our health system ministry. Actions and behaviors that are inconsistent with the Standards of Conduct can significantly harm relationships with patients, communities, business partners, and others we rely upon to assist us in delivery of healthcare services.

Name

ID#: _____ Date: <u>5/11/2015</u>

Position Title:Phlebotomist

Department: 19008-Clinical Laboratory

Corrective Action Level: Verbal

Action Codes:

(Inv) Excessive Absenteeism

Current Issue

has accrued more than four unscheduled absences (and/or early shift departures) within less than a 6-month period (from 1/7/2015 to present).

These unscheduled absences include: 1/7/2015, 3/2/2015, 3/27/2015 (early departure), 4/24/2015 (early departure), and 4/29/2015.

In accordance with Mount Carmel Health System's Policies and Procedures, Section 440.2, a Verbal Warning is issued.

Instances of absence and tardiness negatively impact the ability of the laboratory to provide service to other department and our patients.

Previous Discussions / Corrective Actions

Date	Issue	Action
10/3/14	Excessive Internet Use	

Expectation

Per Mount Carmel Health System's Policies and Procedures, Section 440.0...

"An Associate is expected to work as scheduled and report on time."

The Mount Carmel West Laboratory policy on tardiness is that instance of clocking in four (4) or more minutes after the start of shift are considered as tardy occurrences.



RECEIVED

JAN 1.4 2015

MCHS Influenza Vaccination Program Associate Health 2014-2015 Influenza Vaccination Program Vaccine Commo Carmel West

Please Print Clearly:
Name: Last First MI
Colleague ID# or
Non-employed: Physician Volunteer Other (specify)
The 2014-2015 nasal and injection vaccines contain the identified strains as recommended by the Center for Disease Control (CDC).
CONSENT: I have had the opportunity to read the information (current VIS dated 8/19/14) about the influenza vaccine and have had an opportunity to ask questions and have them answered. I understand the benefits and risks of influenza vaccine as described.
Signature:Date: Date:
□ Screening completed
Vaccine Manuacure Studio Loss Exp. Date 17000-06
Route: Nasal Min Site: Left Deltoid Right Deltoid Dose: 0.5ml
Signature:BAB Cieges 10#_ 267488 Date: 1/14/2015

Please fax completed forms to 614-234-8903



Mount Carmel Corrective Action

Mount Carmel and all of us individually are held accountable for our behaviors and actions. Guiding Behaviors are how we work together by: Supporting each other in servicing our patients and communities, Communicating openly, honestly, respectfully, and directly, Being fully present, Being accountable, Trusting and assuming good intentions, and Being continuous learners. In addition to supporting our Mission and Values, the Standards of Conduct also assist us in ensuring that our actions and behaviors are consistent with the legal, ethical, and professional obligations that apply to our health system ministry. Actions and behaviors that are inconsistent with the Standards of Conduct can significantly harm relationships with patients, communities, business partners, and others we rely upon to assist us in delivery of healthcare services.

TAT	
Name:	

ID#: Date: <u>10/3/2014</u>

Position Title: Phlebotomist

Department: MCW Phlebotomy

Corrective Action Level: Verbal

Action Codes: Inapprop/Excess Internet Usage

Current Issue

Mount Carmel Health System provides access to the World Wide Web so that associates can appropriately and effectively perform their job responsibilities. The Mount Carmel Internet Policy, as indicated in the New Associate Information book, is that the internet is to be used for business purposes only.

During the month of August 2014, had more than 8,500 internet accesses (almost 109 GB).

It should be noted that demonstrated a significant reduction in internet use during the month of September 2014.

Previous Discussions / Corrective Actions

Date	Issue	Action

Expectation

Mount Carmel Health System provides access to the World Wide Web so that associates can appropriately and effectively perform their job responsibilities. The Mount Carmel Internet Policy, as indicated in the New Associate Information book, is that the internet is to be used for business purposes only.

Please note that Mount Carmel's Internet Policy does state that records of corrective action do remain in effect for the duration of employment with Mount Carmel.

Performance Improvement Pla No Yes (see attached if app	olic e)
Consequences of Failure to Imp	prove
Consequences of failure to improve may result in further Correcti Termination of employment with Mount Carmel.	ve Action up to and including
Associate Response	
*This is to acknowledge that this Corrective Action Form has been reviewed mean that I agree.	with me. My signature does not necessarily
*Mount Carmel's appeal process may be utilized under certain circumstances	
Other Signatures	
Supervisor / Manager:	Date:
Director (if appropriate):	Date:
Human Resources: Copies to: Associate, Human Resources, Supervisor / Manager	Date:
- Totalian Resources, Supervisor / Ivianager	
9	
	€



Mount Carmel

Internet Resource Utilization Report (Cost Center)

August 01, 2014 through August 31, 2014

Ra	t Carmel nking	Employee	Title	Total Accesses	Browse Time (Minutes)	Total Volume
(780) (McKIBBEN, SEA	N.			(windles)	(Gigabyte
190.	12 - Laboratory I	Phlebotomy MCW		141		
7.	59		Dhiahata			
5,6	87 (ml260480)	Leon, Mechelle	Phlebotomist	8,505	37.5	109
5,93	33 (as273476)	Sotiri, Alma	Phlebotomist Phlebotomist	85	2.8	7
6,0	17 (bk282261)	Khdour, Belal		57	1.6	5
1900	02 - Outpatient D		Phlebotomist	49	3.5	2
5,17						
5,70	(1	Angerer, Pete	Phlebotomy Registration Spec	170	6.5	3
		Houston, Perlita	Phlebotomy Registration Spec	83	1.1	2
1901	1 - Lab Outreach	1		55	1.1	0
2,26		Wagner, Kassie	Phlebotomy Registration Spec			
2,47		Southers, Jennifer	Phlebotomy Registration Spec	1,957	7.9	19
3,07		Feliciano, Maricela	Phlebotomy Registration Spec	1,665	13.3	14.
3,09		Mercier, Leandra	Phlebotomy Registration Spec	1,059	21.2	15.
3,529	9 (ts280186)	Sater, Tanya	Phlebotomy Registration Spec	1,033	9.6	15.
4,352	,,	Reher, Veronica	Phlebotomy Registration Spec	737	9.9	6.
4,504	(vn260972)	Newton, Virginia	Phlebotomy Registration Spec	358	5.4	5.
4,661	0	Fichter, Jennifer	Phlebotomy Registration Spec	313	1.6	4.
4,816	(ph271739)	Hebb, Pamela	Phlebotomy Registration Spec	272	9.3	2.
4,857	(dg292957)	Graham, Dawn	Phlebotomy Registration Spec	235	4.4	6.9
4,892	(tm272562)	Moore, Terri	Phlebotomy Registration Spec	226	3.0	5.2
5,051	(ls292968)	Starkey, Laura	Phlebotomy Registration Spec	222	11.5	1.6
5,335	(bb157041)	Barnes, Barbara	Phlebotomy Registration Spec	192	5.4	4.9
5,451	(xqsm7174)	Kraft, Kelly		137	0.6	1.0
5,505	(cb259591)	Bowen, Cathy	Phlebotomy Registration Spec	118	7.1	1.0
5,516	(te281707)	Ewing, Tammy	Phlebotomy Registration Spec	108	8.6	2.1
5,934	(bg260183)	Gillilan, Bernadine	Phlebotomy Registration Spec	107	1.7	2.5
6,059	(so275093)	Old, Susan	Philebotomy Registration Spec	57	1.0	0.9
6,202	(sw294389)	White, Sommer	Philebotomy Registration Spec	46	4.0	0.6
6,296	(sd274807)	Downs, Shalene	Phlebotomy Registration Spec	32	2.0	0.1
48901	- Long Term Acu		Phlebotomy Registration Spec	26	1.5	0.2
706	(jf839658)	Ferguson-Donnell, Julia				
1,656	(lw856549)	Woods, Lekeeta	Unit Coordinator	9,246	93.3	184.3
1,790	(sr842160)	Risko, Shirley	Unit Coordinator	3,271	45.2	64.0
2,185	(tqq/2308)	Costlow, Sydney	Unit Coordinator	2,910	9.5	55.7
3,149	(nrhq4107)	Franks, Ashley	Unit Coordinator	2,092	66.1	60.0
4,180	(sk856728)	Kaur, Sandeep	RN Staff	994	4.2	9.2
19007 -	- Microbiology	i, sendeep	Unit Coordinator	422	13.5	7.1
1,096	(kg222360)	Class W. I.				
2,461	(db261652)	Glass, Karla	Med Technologist	5,638	29.8	44.5
3,918	(ha259390)	Bermeo, Darla	Med Lab Technician	1,685		44.0
-,-20	(11023330)	Andreason, Heather	Med Technologist	528	10.0	13.9

REPORT NO: MLPRT

MOUNT CARMEL HEALTH

PAGE NO: 001

ELECTRONIC MAIL

FOR: DATE/TIME: 11/18/13 09:36

FROM: KENT, CHRISTOPHER M

SUBJECT: TB Questionnaire

Aaron,

Please go to the Associate Health Page on InSight, select TB Screening from the tab choices, print the Questionnair Form, and fax it to Associate Health.

Annual completion of this form is a condition of employment, please complete this before performing any phlebotomy responsibilities.

Thank you, Chris

Page 1 of 1 Course Certificate

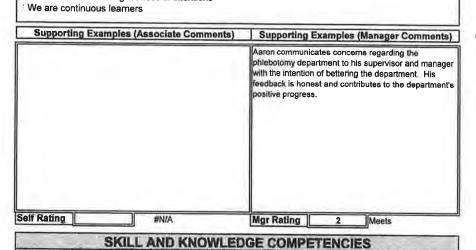


Mount Carmel Health System Competency-Based Orientation and Introductory Period Evaluation Specimen Processing Mount Carmel Health System Specimen Processing

Associate Name	ID Number:	Job Title:	New Hire Transfer
		Thebotomist	Additional job code

Core Competencies	- N	letho (ma	d of	Comp more t	etenc	y Va	lidati	on	With the	1,770
Based upon job description, performance standards, and regulatory/accrediting standards.	Return Demonstration	Observation of daily work	Post-test	Mock Event/ Simulation		Peer Review	Case Study	Discussion Group	Date	Competence Assessed by: (signature and
Specimen Processing	-				")			0 3	- 4	credentials)
Prepares specimens for testing in a Mount Carmel Health System laboratory		1	L				1.00	35100	101748	1-3
Displays positive customer attitude		1							1677+3	B
 Answer phone in a pleasant fashion identifying the laboratory, your name, and asking "How may I help you?" 		1							10+1-48	13
 Courteous and professional when answering the phone 			- 1				- 1	S. X	77	
 Resolve concerns and questions of the caller 							. 5	77	V. T	
 Transfer phone to the proper department in a timely manner with proper introduction 				1		ď	Ta			
Operates pneumatic tube system	100	1					T		10-17:8	13
Uses Cerner PathNet to perform tasks including: order laboratory testing, cancel test requests, track specimens, and locate patient results		1								13
Processes samples appropriately for testing, this may include: centrifugation, aliquoting samples, and ensuring storage at the correct temperature							1		(47.8	13
Operates centrifuge	_	/ 1	-		-	2007	29.84	-1	01718	
 Delivers specimens to proper department for testing 					554					
Understand HIPAA and Mount Carmel Health System privacy practices		1		T	100			olyen.		0
Able to triage phone calls		1	_	_			-3		617-18	13
Able to triage specimen workload	-	1	-	-	-				W17-18	13
has successfully completed					-				0-17-10	13

First Name	Last Name	Associate ID #
	Last Walle	Associate ID #:
Department	Dept ID# Job title	
MCW Phlebo		Phlebotomist
Review Due Date 5/1/2013	Review Period (start & end dates) FY13 - 7/1/2012 to 6/30/2013	RATING SCALE: 3 = consistently exceeds expectation: 2.5 = occasionally exceeds expectation
Instructions: Associate co	npletes the self-evaluation column and returns form to	2 = meets expectations 1.5 = occasionally meets expectations 1 = does not meet expectations
evaluation is important to should not hold up the ev. will then complete the mana The completed evaluation for	impletes the self-evaluation column and returns form to the evaluation process, and highly encouraged; ho aluation if the Associate does not complete a self e ger-rating and schedule a performance review confere- turn should be sent to Human Resources. All other req be kept in the department file and/or recorded in Healt	1.5 = occasionally meets expectations 1 = does not meet expectations o manager. A self- owever, the manager evaluation. The manager ence with Associate
evaluation is important to should not hold up the eva will then complete the mana The completed evaluation for	the evaluation process, and highly encouraged; ho aluation if the Associate does not complete a self e ger-rating and schedule a performance review conference arm should be sent to Human Resources All other req	1.5 = occasionally meets expectations 1 = does not meet expectations o manager. A self- owever, the manager evaluation. The manager ence with Associate



We support each other in serving our patients and communities We communicate openly, honestly, respectfully and directly

We trust and assume goodness in intentions

We are fully present We are all accountable

Character Count (limit 760 characters)

220 0.67

How does the Associate demonstrate all essential job responsibilities from the Job Description? If an essential job responsibility is met, a score of 2 is applicable. If an essential job responsibility has changed or does not require a score, you may check Not Applicable (N/A) (Note: Ratings other than 2 should have supporting documentation.)

Essential Job Responsibility / Work-Related Goal: (Service Excellence)

SERVICE EXCELLENCE: Exhibits each of the Mount Carmel Service Excellence Behavior Standards, role modeling excellence for all to see. For example, demonstrates friendliness and courtesy, effective communication, creates a professional environment, and provides first class service.

Supporting Examples (Associate Comments)	Supporting Examples (Manager Comments)	Character Count (limit 760 characters)
No Comments	Aaron is friendly and courteous to other members of the hospital and laboratory teams.	
Self Rating 2 Meets	Mgr Rating 2 Meets	86

Last Name		As	sociate ID #:	1
A. Essential Job Responsit	ility / Work-Related	Goals		
Computer Support Services - uses computer support s customers	ervices to the benefit	t of staff, pati	ents and	Character Count (limit 500 characters
Supporting Fam. 1				106
Supporting Examples (Associate Comments) No Comments	Supporting Exar	mples (Mana	ger Comments	Character Count (limit 760 characters
Sommerits.	The phlebotomist pos proficient use the ava demonstrating compe software to accomplis	sition requires a	efficient and er support services	The state of the s
Self Rating 2 Meets	-	2 Meet	ś	188
B. Essential Job Responsibili	ity / Work-Related C	Goal:		Character Count (limit 500 characters)
echnical Performance - Assists with laboratory testing t nephysicians and other health care providers.	o provide quality, acc	curate results	to	onaracters)
Supporting Examples (Associate Comments)	Supporting Evanua	alla des		144
Comments	Supporting Examp	ples (Manag	er Comments)	Character Count (limit 760 characters)
f Rating 2 Meets	2	Meets		129
C. Essential Job Bears W.W.				
C. Essential Job Responsibility am - Supports fellow associates in the goal of providing	the best possible out	eal: tcomes for the	e patient.	Character Count (limit 500 characters)
Supporting Examples (Associate Comments)	Supporting Example	es (Manager	Comments	102 Character Count (fig. 1) Top
with pro- alic ma der sch	has demonstrated a h their workloads - this wide improved test resu wing patient care to mo	a willingness to assistance alicult turnaround in ove forward in has demonst his schedule so ner team memile ensure best po	b help others bws us to times, thereby a more timely strated often b that special bers may be besible	Character Count (limit 760 characters)
Rating 2 Meets Mig	Rating 2	Meets		521

Last Name Last Name	Associate ID #:	
D. Essential Job Responsi	bility / Work-Related Goal:	Character Count (limit 500 characters
Health, Safety and Education - Supports Laboratory in	n maintaining a safe work environment	Simulation Country (minimage distributions)
Supporting Examples (Associate Comments)	Supporting Examples (Manager Comments)	89
No Comments	Is compliant with the PPE standards of her position.	Character Count (limit 760 characters
Self Rating 2 Meets E. Essential Job Responsil	Mgr Rating 2 Meets	58
Communication and Customer Satisfaction - Develops staff and other departments to promote customer servi	and maintains effective working relationables with	Character Count (limit 500 characters)
Supporting Examples (Associate Comments)	1.0	158
No Comments	Supporting Examples (Manager Comments) has developed effective working relationships with other members of the hospital and laboratory teams - when needed, he requests additional assistance from co-workers. By providing feedback regarding the present processes of the department, demonstrates attention to customer satisfaction.	Character Count (limit 760 characters)
Self Rating 2 Meets	Mgr Rating 2 Meets	302 0.67

Last Name Associate ID #:	
MODULAL COMP	
INDIVIDUAL GOALS: (for PAST 12 months)	Rating Scale:
Individual Goals support Department, Business Unit and System Goals	3 = achieved goal 2 = some progress towards goal
Please DOCUMENT and provide RATINGS for your Individual Goals for the past year in the space provided below.	1 = unable to make progress towards goal (.5 scores are acceptable)
Individual Goal	Rating
Train as a phlebotomist new to the Mount Correction	Self Manager
place within the phlebotomy department. Learn to use processes and systems that are in	2
Individual Goal	
Contribute to reduction in overall turnaround time for testing on specimens collected by the Mount Carmel West phlebotomy team - phlebotomy "time" is measured within laboratory performance improvement	
nuicators.	2
ndividual Goal	
00% compliance with Mount Carmel hand hygiene standards.	
18	
	3
	1 1
dividual Goal	
dividual Goal	

Dr	OUDCHELINA			
	EQUIREMENTS			
. Demonstrates training with new equipment.			Yes	or No
 Demonstrates training/education regarding new ssues. 	or revised documentation forms, po	licies/procedures, and quali	у	_
. Demonstrates knowledge and integration of blo sting).	odborne pathogen regulations/TB int	to practice (Complies with Ti		
Demonstrates knowledge and integration of 7 separedness, life safety, hazardous material, safe HealthStream.	afety practices (medical equipment, ity including back safety), and securi	utilities, emergency ty management, as docume	nted	
Demonstrates knowledge and skill in caring for poecific Competency Evaluation Form and keep wealthStream).	population specific patients (Complet ith education records in department	e and attach the Population Enter competency into		
Demonstrates knowledge of other regulatory pra equired HIPAA education.	ctices as appropriate to area/departr	ment practice. Has complete	ed	
			ed	
Demonstrates knowledge and accurate document of the contract o	ntation of time worked in the automat	ted timekeeping system		on.
Demonstrates knowledge and accurate documents Other job specific requirements. Il Associates are expected to keep these Manager's Comments	ntation of time worked in the automat	ted timekeeping system		1/30/2013.
Demonstrates knowledge and accurate documents Other job specific requirements. Il Associates are expected to keep these Manager's Comments	ntation of time worked in the automat	ted timekeeping system to do so may result in (Corrective Action	.1 1
Demonstrates knowledge of other regulatory praequired HiPAA education. Demonstrates knowledge and accurate document of the polymer of the po	ntation of time worked in the automat	ted timekeeping system to do so may result in (Corrective Action	.1 1
Other job specific requirements. Il Associates are expected to keep these Manager's Comments	ntation of time worked in the automat	to do so may result in 0	Corrective Action	.1 1
Demonstrates knowledge and accurate documents Other job specific requirements. I Associates are expected to keep these Manager's Comments	ntation of time worked in the automat	ted timekeeping system to do so may result in (Corrective Action	.1 1
Demonstrates knowledge and accurate documents Other job specific requirements. Il Associates are expected to keep these Manager's Comments	ntation of time worked in the automat	to do so may result in 0 274452 Manager ID 285671 Associate ID	Corrective Action	.1 1

Please click link below to be directed to the Annual Mandatory forms. http://eforms.mchs.com/ifserver/Annual Mandatory Forms

First Name	W. T. P. T.	- Applaisal Lol
First Name	Last Name	Associate ID #:
		1
De-1	INDIVIDUAL GOALS: (for N	EXT 12 months)
	Individual Goals support Department, Busines	s Unit and System Goals

Individual Goals for the upcoming year need to be documented on the evaluation form and submitted to HR. Managers should give a copy to their Associate and keep one for the manager file.

Set three to five Individual Goals related to major areas of job responsibility and/or CORE Values. (The "Individual Goal-Setting Guide" is available on the Human Resources page on Insight).

Demonstrate a positive attitude during the continued transition period of the phlebotomy department.	Character Count (limit 610
Individual Goal	100
Contribute to reduction to overall transfer	Character Count (limit 610)
Contribute to reduction in overall turnaround time for testing on specimens collected by the Mount Carmel West phlebotom team - phlebotomy "time" is measured within laboratory performance improvement indicators.	у
Individual Goal	212
mulvidual Goal	Character Count (limit 610)
ndividual Goal	
	Character Count (limit 610)
ndividual Goal	1
	Character Count (limit 610)

First Name	Last Name	1	Associate ID #:	
Department	Dept ID #	Job title		
		-	hlebotomist	
Review Due Date 5/1/2013	Review Period (start & et FY13 - 7/1/2012 to 6/30/2	2013	RATING SCALE: 3 = consistently exceeds experiments are consistently exceeds experiments. The consistent is expected in the consistent in	ectations
hould not hold up the e ill then complete the mai the completed evaluation	completes the self-evaluation colur to the evaluation process, and he evaluation if the Associate does nager-rating and schedule a perfor form should be sent to Human Re to be kept in the tenertment like se	ignly encouraged; how not complete a self eva mance review conference	ever, the manager luation. The manager e with Associate.	
oucation documents are	are asparanent ille all	wor recorded in HealthS	tream.	
UIDING BEHAVIORS ne Guiding Behaviors flow connect with the Mission. To core Values.	W directly from Trinity Health and M The Guiding Behaviors set the expe		nd help us to focus on and together in living our Mission and	1
We are fully present We are all accountable	goodness in intentions	ommunities directly		
Supporting Exampl	es (Associate Comments)	Supporting Every	ples (Manager Comments)	Character Count (limit 760 characters
f Rating Q	#N/A	Mgr Rating	#N/A	
SK	ILL AND KNOWLEDG	E COMPETEN	CIES	
onsibility is met, a score	ionstrate all essential job responsit of 2 is applicable. If an essential jo plicable (N/A). (Note: Ratings oth	olities from the Job Desc	ription? If an essential job	
modeling excellence for	Job Responsibility / Work-Re Exhibits each of the Mount Co or all to see. For example, den	armel Service Exceller	nce Behavior Standards,	
	professional environment, and s (Associate Comments)	provides first class se	rvice.	
- Proving Examples	(Associate Comments)	Supporting Example	es (Manager Comments)	Character Count (limit 760 characters)
Rating 2	#N/A IN	gr Rating	#N/A	

Last Na	ne A	ssociate ID #;
Computer Support Services - uses computer support	sibility / Work-Related Goal:	Character Count (limit 500 characters
customers	it services to the benefit of staff, pa	tients and
6		106
Supporting Examples (Associate Comments	Supporting Examples (Mar	nager Comments) Character Count (limit 760 characters)
elf Rating 2 #N/A	Mgr Rating	#N/A
B. Essential Job Respons	Ibility / Work-Pointed Cont.	
chnical Performance - Assists with laboratory testing ephysicians and other health care providers.	ng to provide quality, accurate resul	Character Count (limit 500 characters) ts to
Proposition		144
Supporting Examples (Associate Comments)	Supporting Examples (Mana	ger Comments) Character Count (limit 760 characters)
Reting 4N/A		
		#N/A
C. Essential Job Responsit m - Supports fellow associates in the goal of providence	Illty / Work-Related Goal: ing the bet possible outcomes for the	Character Count (limit 500 characters)
		101
Supporting Examples (Associate Comments)	Supporting Examples (Manage	Pr Comments Character Count (limit 760 characters)
		N .
Rating 8 #N/A	Mgr Rating #	
	#	N/A

First Name Last Name	Δ	ssociate ID #:	
		SSOCIATE ID #.	
D. Essential Job Responsi	bility / Work-Related Goal:		Character Count (III to and
Health, Safety and Education - Supports Laboratory in	maintaining a safe work environ	ment	Character Count (limit 500 characters
Supporting Examples (Associate Comments)	Supporting Examples (Man	ager Commente)	89 Character Count (limit 760 characters
E. Essential Job Responsible ommunication and Customer Satisfaction - Develops a aff and other departments to promote customer service	and maintains affective at	#N/A Plationships with	Character Count (limit 500 characters)
Supporting Examples (Associate Comments)			158
(Associate Community)	Supporting Examples (Mana	ger Comments)	Character Count (limit 760 characters)
If Rating & #N/A	Mgr Rating	#N/A	#DIV/0!

First Name

First Name Last Name Associate ID #:	
INDIVIDUAL GOALS: (for PAST 12 months) Individual Goals support Department, Business Unit and System Goals Please DOCUMENT and provide RATINGS for your Individual Goals for the past year in the space provided below.	Reting Scale: 3 = achieved goal 2 = some progress (owards goal 1 = unable to make progress towards goal (.5 scores are acceptable)
Individual Goal	Rating Self Manager
To become more aware of the procedures and protocals of Mount Carmel.	2
ndividual Goal	
dividual Goal	
arriddai Goal	
ividual Goal	
vidual Goal	
	#DIV/01

REQU	JIREMENTS				
Demonstrates training with new equipment.				Yes or No	7
Demonstrates training/education regarding new or re issues.	evised documentation	n forms, policies	s/procedures, and quality]
Demonstrates knowledge and integration of bloodbo esting).	rne pathogen regulati	ions/TB into pra	actice (Complies with TB		7
 Demonstrates knowledge and integration of 7 safety reparedness, life safety, hazardous material, safety income healthStream. 	practices (medical ed cluding back safety),	quipment, utilitie and security m	es, emergency anagement, as documente	d	
 Demonstrates knowledge and skill in caring for popul pacific Competency Evaluation Form and keep with edealthStream). 	ation specific patients ducation records in de	s (Complete an epartment. Ent	d attach the Population er competency into		
Demonstrates knowledge of other regulatory practice equired HiPAA education.	s as appropriate to ar	rea/department	practice. Has completed		1
Demonstrates knowledge and accurate documentation	n of time worked in th	ne automated t	mekeeping system.]
				1 11	II .
	irements current.	. Failure to d	lo so may result in Col	rective Action.	
II Associates are expected to keep these requ	irements current.	Failure to d	lo so may result in Col	rective Action.	
II Associates are expected to keep these requ Manager's Comments	irements current.	Failure to d			
ll Associates are expected to keep these requ Manager's Comments	irements current.	Failure to d	lo so may result in Con	rective Action.	
II Associates are expected to keep these requ Manager's Comments anager's Signature	irements current.	Failure to d			
Other job specific requirements. II Associates are expected to keep these requirements Manager's Comments Janager's Signature Associate's Comments	irements current.	Failure to d			
II Associates are expected to keep these requing Manager's Comments anager's Signature	irements current.	Failure to d			
II Associates are expected to keep these requing Manager's Comments anager's Signature	irements current.	Failure to d			
II Associates are expected to keep these requisition in the second secon	irements current.	Failure to d			1-13
Il Associates are expected to keep these requi Manager's Comments anager's Signature	irements current.		Manager ID	Date	1-13
II Associates are expected to keep these requisition of the second secon	irements current.	Failure to d	Manager ID	Date	1-13
II Associates are expected to keep these requ Manager's Comments anager's Signature	#DIV/0!		Manager ID	Date	1-13

First Name	16000		The strong and the st	
	Last Na	ime	Associate ID #:	
	INDIVIDUAL GOAL	S: (for NEXT 1:	2 months)	
	Individual Goals support Departr	nent Business Unit o	and Contract	

Individual Goals for the upcoming year need to be documented on the evaluation form and submitted to HR. Managers should give a copy to their Associate and keep one for the manager file.

Set three to five Individual Goals related to major areas of job responsibility and/or CORE Values. (The "Individual Goal-Setting Guide" is available on the Human Resources page on Insight).

Individual Goal	
To help focus on working together with Nursing staff on providing better patient cure and timby lab processory.	Character Count (limit 610
Individual Goal	_
To better communicate openly, and honestly with fellow co-workers.	Character Count (limit 610)
Individual Goal	
To be more accountable for my actions and help management with future changes and procedures.	Character Count (limit 610)
marviduai Gugi	Character Count (limit 610)
Individual Goal	Character Count (limit 610)

Mount Carmel Health System

Student Assignment Completion Report

Due Date Range: 4/25/2012 Through

4/24/2013

Data as of: 4/23/2013 12:00 AM

Reporting on

Score Not Yet Due as: Not Yet Due

Scores

Delivered 4/24/201:

Include User ID:

No

Total Completed

0.00%

Include Job Title:

No

-COMPLETED ON-TIME: -COMPLETED LATE: -COMPLETED FAILED:

Not Yet Due:

0.00% 0.00%

0.00%

Past Due:

0.00%

Delinquent:

0.00%

Total:

100.00%

Exempt:

100.00%

Student Completion: 0.00%

Supervisor:

Department: MMH1901202-LABORATORY PHLEBOTOMY

MCW

Ite	91	n	S	;			
ur.			4	**C	120	-	
	- 1						

Completed On Time

Late

Past Due (Was Due On...)

Delinquent (As of...)

(1/10/2013)

(12/31/2012)

Exempt

2012 Clinical New

Associate System Education TH - Enterprise

Information Security -Maintaining the Privacy and Security of Trinity Health Information

Student Totals

0.00%

Not Yet Due

(Is Due On...)

0.00%

0.00%

0.00%

Failed

0.00%

100.00%

HealthStream'

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O:HLCWEB27

Legend:

Curriculum Equivalent Course Assessment

OFFICIAL TRANSCRIPT Mount Carmel Health System

Transcript Range: Apr. 25, 2012 - Apr. 24, 2013

Report Date: April 24, 2013 9:57 AM

TOTALS FOR

COMPLETIONS ESTIMATED TIME

3 16:30

Name	Est. Time*	Completion Date
TH - Falls Prevention for Ancillary Associates	0:30	04/12/2013
MCHS - New Associate Orientation Day 2	8:00	11/06/2012
MCHS - New Associate Orientation Day 1	8:00	11/05/2012

* Estimated Times are stated in hours:minutes format.

Legend:

Course



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Build 13.01.28.895.20

O:HLCWEB27

for Ancillary Associates Assignment Name: Falls Prevention for Ancillary Associates, Assigned By: GARRICK DUCAT Course Group Exempt Legend: Curriculum Course
Copyright © 2013 HealthStream, Inc. All Rights Reserved. Build 13.01.28.895.20 O:HLCWEB27 A:HLCWEB27 C:UNKNOWN

Mount Carmel Health System Competency-Based Orientation and Introductory Period Evaluation <u>Use of Cerner Bridge ("TranSpec")</u> Mount Carmel Health System Phlebotomy

	ID Number:			Joi Ph	b Title: leboto	mist			1	lew Hire ransfer additional job code
Core Competencies	· N	lethor (ma	of of	Comp more t	etenc	y Va	lidati	on		Figuria _t S
Based upon job description, performand standards, and regulatory/accrediting standards.	Demonstration Return lards.	Obsen	Post-test	Mock Event/ Simulation	QI Monitors/ Audits	Peer Review	Case Study	Discussion Group	Date	Competency Assessed by: (signature and
Cerner Bridge Application ("TranSpec")		3	4	36	8 8	*	₹		1 1 A	credentials)
			-						9/20/12	SDD
has successfully com	pleted the I	ntrod	inta-	n. Da	la d					
Additional needs identified during Introductory Goals (includes identified competency and developm Associate Signatur	ental needs):					AM	Man L			
Sale_	45415	/lanage	er Sk	gnatu	e	VI	lut		Date	21/2012
P. W	CARING COL	MPON	ENT	e.		_				
Positively identify the patient		014	-101	0.	-					
Log into Cerner Bridge ("TranSpec") Scans patient wristband Review the tests and specimen containers to Prints label at the bedside using the TranSpe Upon completion of specimen collection, labe Confirm collection of the tests in TranSpec Uncheck specimens (in TranSpec) that were	c wireless la	bel pri	nter at the	e beds	side					
CRITIO		G COI	MPO	NENT	SIS		_			
Review the battery level of the handheld print	WE ILLIMATIN	C CC								

	Annual Con	irmel Health Syste npetency Assessir lealth System Phle	one	
Associate Name:	ID Nu	mber:	Job Title:	Phlebotomist
☐ High Risk ☐ Low Volume ☐	Problem Prone	☐ New Equipme	nt/Service Proc	ess Change
Definition: Demonstrates ability to	properly collect s	IPUNCTURE pecimens for testi	ng via venipuncture.	
 Greet the patient and family mem 	hers with a smile "	hollo " and ideatif		
	patient if the patient	refuses to have blo	tion (name and title/ro	le)
			od diawii	
Speak clearly and explains why s	pecimen(s) are to b	e collected		
Uses positive body language and	maintain eye conta	ct with the nationt	in the second se	
Wash hands when entering patier	it room	D SKILL COMPON		
Identify the patient by asking the p	patient (or a nursing	Staff member) their	name and date state	
				h
Apply tourniquet, locate a vein for Collect blood cultures correctly	venipuncture site, a	and clean collection	site with alcohol	
- Contains Contains				
Clean septum of each bottle w Prepare sterile site with proper	ith alcohol, leave a	lcohol pad on stopp	ЭГ	
Prepare sterile site with proper Perform the venipuncture while	solution and allow	collection site to dr	completely prior to ve	nipuncture
 Inoculate bottles in the correct 				
Properly anchors the vein		t arribuilt of blood		
Insert needle at proper angle and o	lepth			
Collect specimens in the correct or Release tourniquet	der of draw			
Withdraw needle, apply pressure to	4h			
Withdraw needle, apply pressure to Properly dispose of the needle	the site, and activa	ate safety device on	needle	
Invert the specimen collection tubes	s eight to ten times			
Label specimen containers at the n	atient's hedside			
Examine specimen collection site for	or bleeding, apply of	ressure as needed.		
Trider stands, recountizes, rakes nro	Mot corrective eatic	.m	onal assistance from a	ppropriate parties (i
needed) in the event of an adverse Remove all collection materials, ren	patient reaction to t	the phiebotomy prod	edure.	Prespection Partico (
	CRITICAL THINK	CINIC COMPONIES	c	
If unable to establish required blood	flow adjust needle			
Ose correct order of draw based on	the laboratory spec	imens/tests to be co	lected	
Return Demonstration	ETHOD OF COMP	ETENCY VALIDAT	ION:	
		☐ QI Monitors/Auc	its	
numbervation of Daily Work ost Test		☐ Peer Review		
		☐ Case Study ☐ Discussion Grou	m	
lock Event/Simulation		Biscussion Grou	P	
npetency Validated By: (Signature and c	redentials)	—	Date_10-1/	-16
elopmental Needs identified: (See P	erformance Evaluat	tion for related goals	bale 10 11	10
ociate Signatur	Date 0 11 18	Manager Signature	Lyma On tol	ite 10. 17-18
ebotomy Competency – Annua		/-	Description of the Control of the Co	** I I I I

	ID Number:	Job Title: Phlebotomist
Definition: Uses Cerner PathNe	LABORATORY INFORMATION S	YSTEM include result inquiry and test order entr
		include result inquiry and test order entr
Courteous and professional whe Resolve concerns and questions	en answering the phone	
treestre concerns and questions	s of the caller	
Transfer priorie to the proper de	partment in a timely manner with prope	er introduction
 Able to sign on to Cerner PathNo 	KNOWLEDGE AND SKILL COMBO	NENTS:
Receive specimens: SPR. S	cimen Received, CLN- Collection Log	
Orders laboratory test requests:	COE- Clinical Order Entry and ROU-	g-in
editions laboratory test requests	. C 13- Cancel Lests	Requisition Order Update $\mathcal{N}\mathcal{A}$
 Reprints labels using function LF 	RP- Label Reprint	
 Able to retrieve patient laborator 	history and results: OID- Order Inqui	rv Bv Date
Correctly reads and applies footr	10tes to laboratory test requests [E441]	
reviews pending collection repor	t: NCC-Nursing Collection Chooklie	st .
axes results. CCC- Communic	ations Chart Create . / \	
Able to read and send message	via Cerner PathNet Electronic Mail: MC	OV- Message Overview, EMR- Electronic
Mail Routing	via Cerner PathNet Electronic Mail: MC	
Mail Routing	via Cerner PathNet Electronic Mail: MC	Inquiry
Mail Routing Look up physician or diagnosis in	via Cerner PathNet Electronic Mail: MC formation: DTI- Doctor Demographic CRITICAL THINKING COMPONE	Inquiry
Mail Routing Look up physician or diagnosis in Able to follow instructions to use	via Cerner PathNet Electronic Mail: MC formation: DTI- Doctor Demographic CRITICAL THINKING COMPONE new functions in order to provide service	Inquiry
Mail Routing Look up physician or diagnosis in Able to follow instructions to use Troubleshooting – contacting the computer programs.	via Cerner PathNet Electronic Mail: MC formation: DTI- Doctor Demographic CRITICAL THINKING COMPONE new functions in order to provide service appropriate person(s) in the event of a	Inquiry NTS Ee concern with Cerner PathNet or other
Mail Routing Look up physician or diagnosis in Able to follow instructions to use a Troubleshooting – contacting the computer programs. Return Demonstration	via Cerner PathNet Electronic Mail: MC formation: DTI- Doctor Demographic CRITICAL THINKING COMPONE new functions in order to provide service	Inquiry NTS December 2
Mail Routing Look up physician or diagnosis in Able to follow instructions to use a Troubleshooting – contacting the computer programs. Return Demonstration	via Cerner PathNet Electronic Mail: MC formation: DTI- Doctor Demographic CRITICAL THINKING COMPONE new functions in order to provide service appropriate person(s) in the event of a METHOD OF COMPETENCY VALID □ QI Monitors □ Peer Review	Inquiry NTS Deconcern with Cerner PathNet or other ATION: //Audits
Able to read and send message Mail Routing Look up physician or diagnosis in Able to follow instructions to use Troubleshooting – contacting the computer programs. Return Demonstration Observation of Daily Work	via Cerner PathNet Electronic Mail: MC formation: DTI- Doctor Demographic CRITICAL THINKING COMPONE new functions in order to provide service appropriate person(s) in the event of a METHOD OF COMPETENCY VALID QI Monitors Peer Review Case Study	Inquiry NTS De concern with Cerner PathNet or other ATION: //Audits
Mail Routing Look up physician or diagnosis in Able to follow instructions to use a Troubleshooting – contacting the	via Cerner PathNet Electronic Mail: MC formation: DTI- Doctor Demographic CRITICAL THINKING COMPONE new functions in order to provide service appropriate person(s) in the event of a METHOD OF COMPETENCY VALID □ QI Monitors □ Peer Review	Inquiry NTS De concern with Cerner PathNet or other ATION: //Audits
Mail Routing Look up physician or diagnosis in Able to follow instructions to use a Troubleshooting – contacting the computer programs. Return Demonstration Observation of Daily Work Post Test Mock Event/Simulation Competency Validated By: (Signature and	via Cerner PathNet Electronic Mail: MC formation: DTI- Doctor Demographic CRITICAL THINKING COMPONE new functions in order to provide service appropriate person(s) in the event of a METHOD OF COMPETENCY VALID QI Monitors Peer Review Case Study Discussion C	Inquiry INTS Deconcern with Cerner PathNet or other ATION: //Audits //Audits //Audits //Audits //Audits //Audits //Audits //Audits //Audits //Audits
Able to read and send message Mail Routing Look up physician or diagnosis in Able to follow instructions to use a Troubleshooting – contacting the computer programs. Return Demonstration Observation of Daily Work Post Test Mock Event/Simulation Competency Validated By: (Signature and	via Cerner PathNet Electronic Mail: MC formation: DTI- Doctor Demographic CRITICAL THINKING COMPONE new functions in order to provide service appropriate person(s) in the event of a METHOD OF COMPETENCY VALID QI Monitors Peer Review Case Study Discussion C	Inquiry NTS Deconcern with Cerner PathNet or other ATION: //Audits V Group
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MU Date 10-17-18

Associate Name:	ID Number:	Job Title: Phlebotomist
Definition: Demonstrates ability to		ate specimen collection and positive patient
 Positively identify the patient 	CARING COMPONENTS:	
	KNOWI EDGE AND BUILD COME	
-ag into certier plique (Itanspec.	KNOWLEDGE AND SKILL COMPO	DNENTS:
 Scans patient wristband 		
Review the tests and specimen con	tainers to be collected	
inite label at the pensine using the	Transnoo wireless lebel	
Short contibiction of specimen collections	TIOD labola the black to the contract of the c	edside
The second of the lesis in the	insnec	
 Uncheck specimens (in TranSpec) t 	hat were not collected and discard la	abels
	CRITICAL THINKING COMPONE	INTS
Review the battery level of the hand	held printer	
Reboot the Transpec device in the e Call Customer Support if technical s	event that I ranSpec has logged off	
- N	ETHOD OF COMPETENCY VALID	
Return Demonstration	□ QI Monitors/A	
Observation of Daily Work	☐ Peer Review	uaits
Post Test	☐ Case Study	
Mock Event/Simulation	□ Discussion Gro	oup
Competency Validated By: (Signature and cr	redentials)	Date_16-11-18
Developmental Needs identified: (See Pr	orformance Evaluation for related go	pale)
	1. 1.	alo _j
ssociate Signature	Date 16/11/19 Manager Signatur	ro.
	- / / manager olynatu	re Date

Mount Carmel Health System **Annual Competency Assessment** Mount Carmel Health System Phlebotomy Associate Name ID Number: Job Title: Phlebotomist High Risk ☐ Low Volume ☐ Problem Prone ☐ New Equipment/Service ☐ Process Change VENIPUNCTURE Definition: Demonstrates ability to properly collect specimens for testing via venipuncture. CARING COMPONENTS: Greet the patient and family members with a smile, "hello," and identification (name and title/role) Remain calm and polite with the patient if the patient refuses to have blood drawn Listen to the patient's concerns Speak clearly and explains why specimen(s) are to be collected Uses positive body language and maintain eye contact with the patient KNOWLEDGE AND SKILL COMPONENTS: Wash hands when entering patient room Identify the patient by asking the patient (or a nursing staff member) their name and date of birth Apply gloves Apply tourniquet and locate a vein for venipuncture site Clean collection site with alcohol Collect blood cultures correctly Clean septum of each bottle with alcohol, leave alcohol pad on stopper Prepare sterile site with proper solution and allow collection site to dry completely prior to venipuncture Perform the venipuncture while maintaining a sterile field Inoculate bottles in the correct order with sufficient amount of blood Properly anchors the vein Insert needle at proper angle and depth Collect specimens in the correct order of draw Release tourniquet Withdraw needle, apply pressure to the site, and activate safety device on needle Properly dispose of the needle Invert the specimen collection tubes eight to ten times Label specimen containers at the patient's bedside Examine specimen collection site for bleeding, apply pressure as needed Remove all collection materials Remove gloves and wash hands CRITICAL THINKING COMPONENTS If unable to establish required blood flow, adjust needle Use correct order of draw based on the laboratory specimens/tests to be collected METHOD OF COMPETENCY VALIDATION: ☐ Return Demonstration ☐ QI Monitors/Audits Observation of Daily Work Peer Review □ Post Test ☐ Case Study ☐ Discussion Group ☐ Mock Event/Simulation Competency Validated By: (Signature and credentials) Date Developmental Needs identified: (See Performance Evaluation for related goals) Date 12/14/13 ssociate Signature Manager Signature Date

hlebotomy Competency - Annual

'age 1 of 3

	ID Number:	Job Title: Phlebotomist
Evidence Based References/Reso	OUTCES (if applicable):	
	(spp. sable).	
Definition: Uses Cerner PathN	LABORATORY INFORMATION SY	STEM
	CARING COMPONENTS:	STEM nolude result inquiry and test order entry.
Courteous and professional wh	en answering the phone	
Tresulve concerns and direction	as of the caller	
Transfer phone to the proper de	epartment in a timely manner with proper	introduction
Able to sign on to Cerner PathN		VENTS:
Receive specimens: SPR Spe	cimen Possived CLN C II .	
Orders laboratory test requests:	COE- Clinical Order Entry BOE Base	ln Jisition Order Entry, and ROU- Requisition
Order Update	To a similar order Entry, ROE- Requ	disition Order Entry, and ROU- Requisition
Cancels laboratory test requests	s: CTS- Cancel Tests	
Reprints labels using function LI	RP- Label Reprint	
ribio to retrieve patient lapprator	N history and results: OID Order In	D. D. I
Correctly reads and applies foot	ry history and results: OID- Order Inquiry	By Date
Reviews pending collection reportance results: CCC- Communic	ort: NCC- Nursing Collection Checklist	
Reviews pending collection reportance Faxes results: CCC- Communic	ort: NCC- Nursing Collection Checklist	
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Associate Name	ID Number:	Job Title: Phlebotomist
Definition	CERNER BRIDGE APPLICATION ("TR	ANSDEC")
Definition: Demonstrates ability t	o use TranSpec to ensure appropriate identification.	ANSPEC") e specimen collection and positive patie
	CARING COMPONENTS:	
 Positively identify the patient 	CARTING COMPONENTS:	
	KNOWLEDGE AND SKILL COMPON	IENER
Log into Cerner Bridge ("TranSpe	ec")	ENIS:
Scans patient wristband		
Review the tests and specimen co	Ontainers to be collected	
i into label at the pedside using the	he Transnoo wiroloog label en l	
Chair combiguition of Specimen Coll	ection labels the blood tubes - Lucia	1.11
o o minimo o necessori or the lesis in t	ranspec	
Uncheck specimens (in TranSpeci) that were not collected and discard lab	in the
	LIGHT THINKING COMPONEN	Dels
Review the battery level of the har	idheid printer	115
Repoot the Transpec device in the	event that Transnoo hoo learned ass	
Call Customer Support if technical	support is required	
	METHOD OF COMPETENCY VALIDA	TION
Return Demonstration	☐ QI Monitors/Aud	Hon:
Observation of Daily Work	Normors/Aud	iits
Post Test	☐ Case Study	
	☐ Discussion Grou	
Mock Event/Simulation		pp
ompetency Validated By: (Signature and	credentials) Hill B.	Date 12 14 13
evelopmental Needs identified: (See	Performance Evaluation for related goal	Date IC FI 12
(000)	character Evaluation for related goal	(s)
sociate Signature_	Date 12 14 D Manager Signature	Date
idence Based References/Resources	TAIGHBUCK WILLIAME	

Mount Carmel Health System Competency-Based Orientation and Introductory Period Evaluation

Venipuncture Mount Carmel Health System Phlebotomy

Associate Name:	ID Number:	Job Title: Phlebotomist	New Hire Transfer Additional job code
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Core Competencies		Method of Competency Validation (may use more than one method)							- 12 C.3		
Based upon job description, performance standards, and regulatory/accrediting standards. Venipuncture	Return Demonstration	Observation of daily work	Post-test	Mock Event/ Simulation	QI Monitors/ Audits	Peer Review	Case Study	Discussion Group	Date	Competency Assessed by: (signature and credentials)	
Vacutainer Needie		. /					1			, orogonnais)	
 Syringe and Needle 		V						30.7	9/20/12	SDD	
 Winged "Butterfly" Needle 		V					V.J.		9/20/12	300	
han ausaccata II						-			9 2012	800	

has successfully completed the Introductory Period.

evelopmental Needs identified related to competency:

Additional needs identified during Introductory Period:

Goals (includes identified competency and developmental needs):

Associate Signature

Date 9 21 12 Manager Signature

Date 7

CARING COMPONENTS:

- Greet the patient and family members with a smile, "hello," and identification (name and title/role) Remain calm and polite with the patient if the patient refuses to have blood drawn
- Listen to the patient's concerns
- Speak clearly and explains why specimen(s) are to be collected
- Uses positive body language and maintain eye contact with the patient

KNOWLEDGE AND SKILL COMPONENTS:

- Wash hands when entering patient room
- Identify the patient by name and date of birth
- Apply gloves
- Apply tourniquet and locate a vein for venipuncture site
- Clean collection site with alcohol
- Properly anchors the vein
- Insert needle at proper angle and depth
- Collect specimens in the correct order of draw
- Release tourniquet
- Withdraw needle, apply pressure to the site, and activate safety device on needle
- Properly dispose of the needle
- Invert the specimen collection tubes eight to ten times
- Label specimen containers at the patient's bedside
- Examine specimen collection site for bleeding, apply pressure as needed

Remove all collection mate	rials		<u> </u>	es a contract de la contraction de la contractio	Introductory
Remove gloves and wash I	ands			8	
	CRITICA	L THINKING COM	PONENTS		- THE MINISTER PROPERTY OF THE PERSON NAMED IN
If unable to establish requir	an blood flow adius	A man - 11			
Occorrect order or draw h	acon on the laborat	Andrew Control of the	te to be collecte	ai .	
/idence Based References/Re	SOURCES (if applicable)	00001110110/100	to to be collecte	<u>a</u>	

Mount Carmel Health System

Competency-Based Orientation and Introductory-Period Evaluation

<u>Use of Cerner PathNet (Laboratory Information Systems)</u>

<u>Mount Carmel Health System Phlebotomy</u>

N ·	ID No	ımber:				b Title: ileboto				1	New Hire Transfer Additional job cod
Core Competencies	**	N	lethor (may	of v	Comp	eteno than or	y Va	lidat	lon -	13.5	
Based upon job description, pestandards, and regulatory/accredition	rformance ng standards.	Demonstration	Observation of daily work			QI Monitors/ Audits	Peer Review		Discussion Group	Date	Competency Assessed by:
Cerner PathNet		23	* 27	A	3 5	OF O	We We	ş	B 8	- 1	(signature and credentials)
			V			-	AL IT			9 2012	SDD
Mas succes	sfully complet						1		-		
Associate Signature	Date %21/15	Z. A	/lanage	ir Sir	——	re	(M)	luk		Date 4	2/2/2-12-
	7 7	-			gridia	******	-	10.	_	Date _	21/20
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TOUGHT CONCERNS AND MIDONADO AS	nswering the pho	G COI	MPON	ENT	8:					Date	
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Mount Carmel Health System

Competency-Based Orientation and Introductory Period Evaluation

Blood Culture Collection

Associate Name:	Mount Carm										
	ID No	mber:			Joi Ph	Title: leboto	mist			T	lew Hire ransfer dditional job cod
Core Competencies		IN	fethor (ma	d of o	Comp	etenc	y Va	lidati	on		\$ 14 S
Based upon job description, per standards, and regulatory/accreditin	formance ng standards.	Return Demonstration	Observation of daily work	Post-test	Mock Event/ Simulation		Peer Review	Case Study	Discussion Group	Date	Competence Assessed by: (signature and
Blood Culture Collection		-	1	-	-	6 2	~	4	ซิลั	1	credentials)
lan august								-		9/20/12	SDD
Additional needs identified during Intro											
ssociate Signature	Date 4/21/	// n	/anag	er Si	gnatu	re	Cm	llut		Date	9/21/2012
Great the notions and family	CARING	G COI	MPON	ENT	S:		1	-			1 '
Greet the patient and family member Remain calm and polite with the patie	s with a smile,	"hello	" and	iden	tificati	on (na	me a	and ti	tle/role	e)	
Listen to the patient's concerns	see in the patient	r i Giu	ses to	nave	bloo	d drav	V N			•	
Speak clearly and explains why speak	imen(s) are to	ha col	lantad								
poonive body language and ma	intain eye cont	act wi	th the	natie	enf						
. 1	16 30VI P-11(-16- A)	ND SI	CILL C	OM	PONE	NTS:		-	-		
Wash hands when entering patient roll identify the patient by name and date	nom					-					
Apply gloves	Of DIATH										
Apply tourniquet and locate a vein for	venipuncture	cito									
Oldan Septum of each poine with alco	hal lanua alan	4 -1	rd on s	itann	ar						
. Topolo de la sue will bibbet solling	an and allow on	Hautt.		to dr	v com	nietel	v nric	or to a	onin.	ın akı ın a	
Perform the venipuncture while maint	aining a sterile	field).		,	.p.:0101	, 1211) (O)	rempu	moture	
Inoculate bottles in the correct order value specimen containers at the pati	vith sufficient a	moun	t of blo	ood							
Examine specimen collection site for li	ent's bedside										
Remove all collection materials	bleeding, apply	press	sure a	s nee	ded						
Remove gloves and wash hands											
	CRITICAL THI	NKIN	G COI	/IPO	MENT	'e					
in anabie to establish tedilited blood th	OW adjust non	JI.					-				
Ose correct order of draw based on th	o laborations on	ecime	ens/tes	its fo	he or	llecto	d				
dence Based References/Resources (ii	applicable):				2000	HOOLO	м	_			

MCHS Laboratory Phlebotomy Incomplete Introductory Period Review

Upon review of the colleague file, a performance review was not conducted at the completion of the colleague's introductory period. The colleague's competency in the work area has been validated through observation of daily work with discrepancies addressed through appropriate processes.

The introductory period performance review was not conducted after 90 days of employment due to:

Unintentional Omission

Where applicable, a complete annual performance review has been performed and presented to the colleague since the completion of the introductory period.

Colleague Name:

Introductory Period End Date:

1/28/2013

Manager Signature: (My Cut

Date: 2/24/2014



DEPARTMENT ORIENTATION CHECKLIST

Review the contents below with each new associate who is newly hired or transfers within the Mount Carmel Health System within the first two weeks. Retain in the associate's department record.

Associate Name:	The associate's department record.
Job Title: DJ Ga	de: M 2301 Hire/Transfer Date: 10 28 20 2
Joh Description City ST Job Co	de: M 2301 Hire/Transfer D
Competency Based Ori	Time Transfer Date: 10 28 2012
Competency-Based Orientation Inform	ation/Packet Given
Department Organizations, locker, wo	eation/Packet Given ork supplies, associate lounge, communication process ationships, departmental meetings, etc.
Department Organization: reporting rel	ationships, departmental meetings, etc.
Scheduling work haves	modings, etc
Scheduling work hours: timekeeping profile Timekeeping & Payroll practices policy/	ocedures: lunch/breaks: overtime: DLT
Timekeeping & Payroll practices policy/ Dress/Uniform	procedure review and pay information
Policies and Procedures:	F-y monitation
Human Resources	
Human Resources (available on Ins Absences/Tardiness/Call in proces	ight - Human Resources webnage):
Absences/Tardiness/Call in proce	edure "appage).
Introductors and a second	
Introductory and evaluation proce	ess
Administrative Policies (able to loca	ate on Insight):
Code of Conduct	Security of Health Information: Find Code: Balance of Butter
Department specific	ing & Security of Health Information; Find Code: Release of Patient Information
Safety Procedures and Plans: (avail	lable on Insight):
" Plocedules all department	NAME OF A PARTY OF THE PARTY OF
Location of fire alarms and ex Safety and Security:	tinguishers
- odiety and Security	
Code Adam (Infant/child abdu	ction)
Code Yellow (disaster) Code Red (fire)	
Code Red (fire)	
Code Black (bomb threat)	
Code Gray (severe weather)	
Code Orange (hazardous mat	erial spill)
Code Blue (medical emergence	cy)
Code Pink (pediatric medical e	emergency)
- Code violet (violent person)	
Code Silver (person with wear	on/hostage)
Code Brown (missing adult pa	tient)
Code Utility (loss of utilities)	
Emergency and discates are	where we are a second of the s
Hazard Communication	es and department specific responsibilities
Proper handling and storage of	
MSDS information/	chemicals
Infection Control: Infection Control	/ procedures related to spills or exposure
Infection Control: Infection Control M Hand washing	anual (able to locate on Insight)
Universal precautions and use of p Multi-drug resistant organisms (MD	ersonal protective equipment
Respiratory precautions (TB) and n	(RO)
Infectious Waste	egative pressure rooms
Tradic	
Associate's	20.1
signature	Date [] 2 2014
Manager's signature	4/2 2014
NA ARM CHAULAN	Date 41, 120,4
Olhumbia	IV.

Mount Carmel Health System Annual Competency Assessment Mount Carmel Health System Phlebotomy Associate Name: ID Number: Job Title: Phlebotomist ☐ High Risk ☐ Low Volume ☐ Problem Prone ☐ New Equipment/Service ☐ Process Change VENIPUNCTURE Definition: Demonstrates ability to properly collect specimens for testing via venipuncture. **CARING COMPONENTS:** Greet the patient and family members with a smile, "hello," and identification (name and title/role) Remain calm and polite with the patient if the patient refuses to have blood drawn Listen to the patient's concerns Speak clearly and explains why specimen(s) are to be collected Uses positive body language and maintain eye contact with the patient KNOWLEDGE AND SKILL COMPONENTS: Wash hands when entering patient room Identify the patient by asking the patient (or a nursing staff member) their name and date of birth Apply gloves Apply tourniquet and locate a vein for venipuncture site Clean collection site with alcohol Collect blood cultures correctly Clean septum of each bottle with alcohol, leave alcohol pad on stopper Prepare sterile site with proper solution and allow collection site to dry completely prior to venipuncture Perform the venipuncture while maintaining a sterile field Inoculate bottles in the correct order with sufficient amount of blood Properly anchors the vein Insert needle at proper angle and depth Collect specimens in the correct order of draw Release tourniquet Withdraw needle, apply pressure to the site, and activate safety device on needle Properly dispose of the needle Invert the specimen collection tubes eight to ten times Label specimen containers at the patient's bedside Examine specimen collection site for bleeding, apply pressure as needed Remove all collection materials Remove gloves and wash hands CRITICAL THINKING COMPONENTS If unable to establish required blood flow, adjust needle Use correct order of draw based on the laboratory specimens/tests to be collected METHOD OF COMPETENCY VALIDATION: □ Return Demonstration □ QI Monitors/Audits Deservation of Daily Work ☐ Peer Review □ Case Study ☐ Post Test ☐ Discussion Group □ Mock Event/Simulation Competency Validated By: (Signature and credentials) Developmental Needs identified: (See Performance Evaluation for related goals) Associate Signatur

Phlebotomy Competency - Annual

Page 1 of 3

Associate Name	ID Number	Job Title: Phlebotomist		
Ŀ				
Definition 11	LABORATORY INFORMATION SYS	STEM		
Definition: Uses Cerner Pathl	let to perform daily job functions – to in-	clude result inquiry and test order entry		
 Courteous and professional w Resolve concerns and question 	nen answering the phone			
Transfer phone to the proper	ons of the caller			
Transfer priorie to the proper t	department in a timely manner with proper i	ntroduction		
 Able to sign on to Cerner Path 	KNOWLEDGE AND SKILL COMPON	ENTS:		
· Receive specimens: SPR-Sp	ecimen Received, CLN- Collection Log-I			
Orders laboratory test requests	S: COE- Clinical Order Entry and DOLL D.	N equipition Order Undet-		
cancels laboratory test reques	IS. U.S. Cancel Lests	equisition Order Opdate		
 Reprints labels using function I 	LRP- Label Reprint			
 Able to retrieve patient laborate 	ory history and results: OID, Order Inquire	By Date		
Correctly reads and applies footnotes to laboratory test requests [E44]				
Bouleus need:	otholes to laboratory test requests [F11]			
reviews pending collection rep	Off: NCC-Nursing Collection Chacklist			
Faxes results: CCC- Commun	OORT: NCC- Nursing Collection Checklist			
Faxes results: CCC- Commun Able to read and send message	Off: NCC-Nursing Collection Chacklist	- Message Overview, EMR- Electronic		
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Faxes results: CCC- Commun Able to read and send message Mail Routing Look up physician or diagnosis	ications Chart Create e via Cerner PathNet Electronic Mail: MOV information: DTI- Doctor Demographic In	quiry		
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	Job Title: Phlebotomist	
CER Definition: Demonstrates ability to us	NER BRIDGE APPLICATION ("TRANSPEC") se TranSpec to ensure appropriate specimen collection and positive patien identification.	
	CARING COMPONENTS:	
 Positively identify the patient 	The state of the s	
KI	IOWLEDGE AND SKILL COMPONENTS:	
1 209 into Cerrier Bridge ("Transpec")	The Commontage	
 Scans patient wristband 		
Review the tests and specimen contains label at the	iners to be collected	
I will abe at the bedside using the 1	ran Spac wireless lebel multi-te	
opon completion of specimen collecti	On labels the blood tubes of the lead to	
o think oblication of the tests in Tran	Shec	
Oncheck specimens (in TranSpec) that	t were not collected and discard labels	
	CRITICAL THINKING COMPONENTS	
"CVICW (IIE Dalle) Vievel of the handha	ld printer	
Reboot the Transpec device in the eve	ent that TranSpec has logged off	
 Call Customer Support if technical sur 	port is required	
□ Return Demonstration	THOD OF COMPETENCY VALIDATION:	
	□ QI Monitors/Audits	
© Observation of Daily Work	□ Peer Review	
□ Post Test □ Case Study		
□ Mock Event/Simulation □ Discussion Group		
Competency Validated By: (Signature and cred	entials) Holly Davi or Apate S-7-16	
Developmental Needs identified: (See Per	ormance Evaluation for related goals)	
Associate Signature	Date 5/7/16 Manager Signature Pat Busine Date 5/3-/	

Progressive Counseling Chronologicals Attendance/Pit

Progressive Counseling

Chronologicals

EMPLOYEE'S CHRONOLOGICAL RECORD

Department Unit Shift ate & Time Comments Signature	NAME		Date Hired	
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	ate & Time	Comments		Signature
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Mount Carmel Health System Competency Assessment Safety & Security

Associate Name	ID Number:	Job Title:
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		OFC
☐ High Risk ☐ Low Volume	Problem Prone New Equ	ipment/Service Process Change
D	CARING COMPONENTS.	ipment/Service Process Change
Demonstrates service excellence beha-	avior	
ABILITY TO EXPLAIN THE	KNOWLEDGE AND SKILL COMPON	IENTS:
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ABILITY TO PERFORM A STRAIGHT ABILITY TO USE HANDCUFFS IN TH	ARM BAR TO BOTH THE RIGHT ANI	D LEFT SIDE
ABILITY TO USE HANDCUFFS FROM	E STANDING METHOD	
ABILITY TO REMOVE HANDCUFFS	THE KNEELING POSITION	
ABILITY TO UNDERSTAND WHEN TO	DI ACE HANDOUEER	
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BILITY TO PERFORM THE USE OF S	TRAIGHT BATON FRON THE READ	YSTANCE
BILITY TO PERFORM THE USE OF S BILITY TO PERFORM THE USE OF S	TRAIGHT BATON USING THE FORW	VARD FLUID SHOCKWAVE STRIKE
BILITY TO PERFORM THE USE OF S BILITY TO PERFORM THE USE OF S	TRAIGHT BATON USING THE FORM	VARD CUTTING STRIKE
BILITY TO PERFORM THE USE OF S	TRAIGHT BATON USING THE BACK	HAND STRIKE
BILITY TO CLOSE THE BATON FROM	THE KNEELING POSITION	
BILITY TO OPEN AND USE THE BATCHER	ON FROM THE CRISIS POSITION	
BILITY TO EXPLAIN WHEN TO USE S BILITY TO EXPLAIN WHAT O.C. STAN	TRAIGHT BATON AND WHEN NOT	TO USE STRAIGHT BATON
ILITY TO EXPLAIN WHEN TO USE O	IDS FOR	
ILITY TO EXPLAIN WHEN NOT TO U	IC.	
ILITY TO EXPLAIN WHETHER TO US	SE O.C. ON A DATIFUE OF	
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<u>Defensive Tactics / Impact Weapon</u>
<u>Opposite Properties / Impact Weapon</u> INSTRUCTORS:

STUDENTS NAME:

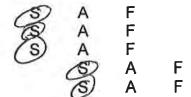
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OUNT		CAS

7.	BALANCE DISPLACEMENT TECHNIQUE			
b	 Starts from Escort Position Removes hand from Triceps and places it on rear waist of suspect Presses hand forward and downward, displacing balance Suspect steps in desired direction 	0000	A A A	F F F
a. b.	n the Back) Starts from Escort Position Places hand in the middle of suspect's back and presses forward Moves hand in random manner, forcing steps in desired direction	(300)	A A A	F F F
a. b.	otion at the Shoulder) Starts from the Escort Position Continually moves suspect's arm in a random manner Suspect is off balance and moves in desired direction	SOS	A A A	F F
e. f. g.	RANSPORT WRIST LOCK Elbow tucked between arm and body Forearm elevation Wrist hyperextension To the ground	(0) (0) (0) (0) (0) (0) (0) (0) (0) (0)	A A A	F F F

Defensive Counter Maneuvers

7. GRABBING

- a. Separation
- b. Verbal Commands
- c. Peeling the hand(s)
 - 1. Outside/In
 - 2. Inside/Out



Comments:

8. FINGER POKES

- a. Separation
- b. Verbal Commands
- c. Peeling the fingers/hands
- d. Second Responding Officer Action

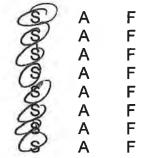
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(3)	Δ	F

Comments:

Ground Techniques

9. Scarf Position (Left/Right)

- a. From the side/cross mount positionb. Perform a sit out maneuver
- c. Right leg ends at 10 o'clock position
- d. Keep hips off of the ground
- e. Left foot is at 8 o'clock position
- f. Right arm around subjects neck/head
- g. Left arm and hand secures subjects arm
- h. Pin your chest to subjects chest



Comments:



Box 1794 · Appleton, WI 54912 · (920) 735-6242 · Fax (920) 735-6245 · asp-usa.com

ASP Basic Certification (ABC) EXPANDABLE BATON TRAINING

Information Sheet

(Please Print)		Data 8/2/19
☐ Initial Certification	-	Date - 1-11
	Recertification	
First Name	Last Name	
Home Address_		
City Grove City	State OH Province	Zip 43123
Telephone	E-mail Address_	2.1p
Employing Agency MT Carnel		
	ded hie	
City Vesta Ville		
Agency Telephone (GIY) 8%- 4	State Province	Zip_43081
Duty Status: ☐ Full Duty ☐ Restric		
	cted Duty	
Has your agency adopted or authorized	d the use of the ASP Baton?	
How many officers are in your agency?		
Height 5 10 Weight 195	Age37 Date of Birth/	25/1982
Have you been exercising?		
Do you have any knee, back or health i	problems?No	
Are you on any medication? Yes		
NamePhone (Alternate ()_	Injury Check: 1A PP
	Manage.	
Pa	WAIVER	
1) Intending that the a	elease from Liability and Assumption of Risk Agreement	
and assigns, of and from any and all claims, de any and all known and unknown, foreseen and a all ASP Expandable Baton certification training at 2) In signing this Release Lassert that (a) I am presently in good physical and mental health; (b)	neirs, executors, administrators, successors and nature, arising from, and by reason of ices thereof, suffered by me during any and
	ed. Mere participation does not automatically ass	
	W and an anomalically ass	are successful completion.
Clalia	£	
0/4/50/010		
Date		

Baton Basic Certification TECHNIQUE PROFICIENCY CHECKLIST

The following checklist is designed to assist you and the ASP Instructor in evaluating your performance of ASP Techniques. Those components of the technique that are acceptable are checked.

-		то выстрыные ите спескед.
1)	Check Balance Movement Verbalization Technique Target	6) Opening the Baton Balance Movement Verbalization Technique Target
2)	Redirection Balance Movement Verbalization Technique Target	7) Open Mode Weapon Strike Balance Movement Verbalization Technique Angle Target
3)	Closed Mode Weapon Strike Balance Movement Verbalization Technique Angle Target	8) Open Mode Reaction Strike Balance Movement Verbalization Technique Target
4) (Closed Mode Reaction Strike Balance Movement Verbalization Technique Angle Target	9) Open Mode Straight Strike Balance Movement Verbalization Technique Target
5) C	Closed Mode Straight Strike Balance Movement Verbalization Technique Target	10) Closing the Baton Balance Movement Technique
CHNIC UNSE	• Three of the compo • Each technique mu • The minimum passi QUE PROFICIENCY: ACCEPTABLE	nates an acceptable observed action. Interest must be acceptable for a passing score. In passing score for certification. In passing score is 100% (10 techniques). NOT ACCEPTABLE DATE

OC Test Mount Carmel Health System Safety and Security

100° 1.

- What does OC stand for? 1.)
 - **A.**. **Orange Crush**
 - Ocean Crust
 - **(C.)** Oleoresin Capsicum
- What is the average expiration date on an OC canister? 2.)
 - 1-2 years
 - 3-4 years
 - 4-5 years
- How often should you check your OC spray for adequate spray strength? 3.)
 - 30 days
 - 60 days
 - 90 days
- 4.) How long of a burst should you use on a threat?
 - (A) 1-2 seconds
 - B. 2-4 seconds
 - C. Empty the entire can
- 5.) What is Oleoresin Capsicum commonly known as?
 - Mace
 - Pepper Spray
 - Gas
- **6.)** When deploying OC, what area of the body should you deploy the OC towards?
 - A. Arms
 - B. Chest
 - (C.) Face and eyes
- After using OC on a subject, what should you immediately do with the 7.) subject?
 - A. Leave lying on the ground.
 - Remove from contaminated area **(B.)**
 - Spray again

OLANGIA

Name: Campus: MCH Saint Ann Date: 8/2/19

HANDCUFFING TEST

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
 - D.) ALL OF THE ABOVE
 - (E.) BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?
 - A.)TRUE B) FALSE
- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - (C.) SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?
 - A.) TRUE
 - FALSE

Mount Carmel Health System Competency Assessment <u>Safety & Security</u>

Associate Name:	ID Number:	REPELLANT/DE-ESCALATION/RESTRAIN
	Trainiber.	Job Title:
		OR.
☐ High Risk ☐ Low Volum	e 🗆 Problem Prone 🗀 New I	
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BILITY TO USE HANDOUFFS IN TH	IE STANDING METHOD	THE LEFT SIDE
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BILITY TO UNDERSTAND WHEN TO	O PLACE HANDCUFFS ON SUBJE	CT
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BILITY TO PERFORM PEFLING OF	FROM A FINGER JAB	
BILITY TO PERFORM PEELING OF BILITY TO PERFORM A SCARF PO	FINGER(S)/HAND(S) DURING A F	INGER JAB
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BILITY TO PLACE THE PROPE	ER COLORED COIT C	W. H.E.	
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TO DACE DE TRAINING	- SCHMANIOS MINIO	the best of the be	
Able to act appropriately in a	n emergent or sentinel	type of event	
	METHOD OF CO	OMPETENCY VALIDATION:	*
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Return Demonstration		Peer Review	
□ Observation of Daily Work		Case Study	
Post Test			
Mock Event/Simulation			(f
	10		Date 020019
Competency Validated By: (Sign	ature and credentials)	ii (mlatad mools)	
Developmental Needs identified	: (See Performance E	valuation for related goals)	
Post of the Post o			Date
Associate Signature	Date	Instructor(s) Signature	Date
Fuidance Based References/Ri	esources (if applicable):		
Evidence Based References/Re	esources (if applicable):		

Defensive Tactics / Impact Weapon mpetency Form

STUDENTS NAME:

CL BANK	
St Anns	

INSTRUCTORS:

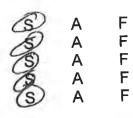
JOINT LOCKS

RALANCE DISPLACEMENT TECHNI

BALANCE DISPLACEMENT TECHNIQUE			
Suspect steps in desired direction	(0) (0) (0) (0) (0)	A A A	F F F
the Back) Starts from Escort Position Places hand in the middle of suspect's back and presses forward Moves hand in random manner, forcing steps in desired direction	(0) (0) (0) (0) (0) (0) (0) (0) (0) (0)	A A A	F F
otion at the Shoulder) Starts from the Escort Position Continually moves suspect's arm in a random manner Suspect is off balance and moves in desired direction	50	A A A	F F
RANSPORT WRIST LOCK Elbow tucked between arm and body Forearm elevation Wrist hyperextension To the ground		A A A	F F F
	Starts from Escort Position Removes hand from Triceps and places it on rear waist of suspect Presses hand forward and downward, displacing balance Suspect steps in desired direction The Back Starts from Escort Position Places hand in the middle of suspect's back and presses forward Moves hand in random manner, forcing steps in desired direction otion at the Shoulder) Starts from the Escort Position Continually moves suspect's arm in a random manner Suspect is off balance and moves in desired direction RANSPORT WRIST LOCK Elbow tucked between arm and body Forearm elevation Wrist hyperextension	Starts from Escort Position Removes hand from Triceps and places it on rear waist of suspect S Presses hand forward and downward, displacing balance Suspect steps in desired direction The Back) Starts from Escort Position Places hand in the middle of suspect's back and presses forward Moves hand in random manner, forcing steps in desired direction Otion at the Shoulder) Starts from the Escort Position Continually moves suspect's arm in a random manner Suspect is off balance and moves in desired direction RANSPORT WRIST LOCK Elbow tucked between arm and body Forearm elevation Wrist hyperextension	Starts from Escort Position Removes hand from Triceps and places it on rear waist of suspects A Presses hand forward and downward, displacing balance Suspect steps in desired direction A A The Back Starts from Escort Position Places hand in the middle of suspect's back and presses forward Moves hand in random manner, forcing steps in desired direction A Otion at the Shoulder) Starts from the Escort Position Continually moves suspect's arm in a random manner Suspect is off balance and moves in desired direction A RANSPORT WRIST LOCK Elbow tucked between arm and body Forearm elevation Wrist hyperextension

3. STRAIGHT ARM BAR

- i. Decentralize the center of gravity
- j. Maintain control over subject's arm
- k. Maintained balance while lowering center for takedown
- To the ground
- m. Control for handcuffing procedure



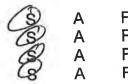


Comments:

HANDCUFFING

4. STANDING METHOD

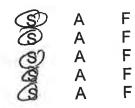
- a. Approach is from rear
- b. Simultaneous Control at application, thumb lock/cuff push
- c. Position maintained with the flip under technique
- d. Second cuff applied without loss of control



Comments:

5. TAKEDOWN FROM KNEELING POSITION

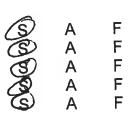
- e. All slack is removed from cuffed hand
- f. Decentralized towards the 2.5 position
- g. Iron wrist lock is applied simultaneously with decentralized pull
- h. Straight arm applied after proning the target
- i. Second cuff applied without loss of control



Comments: __

REMOVING HANDCUFFS

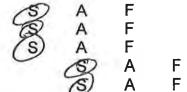
- a. Officer Instructs suspect he is going to be de-cuffed
- b. Suspect is told to leave uncuffed hand on his hip
- c. Open handcuff closed immediately and put in weak hand
- d. Officer steps to rear 45 degrees while holding cuff at arms length
- e. Second cuff is removed



Defensive Counter Maneuvers

7. GRABBING

- a. Separation
- b. Verbal Commands
- c. Peeling the hand(s)
 - 1. Outside/In
 - 2. Inside/Out



Comments:

8. FINGER POKES

- a. Separation
- b. Verbal Commands
- c. Peeling the fingers/hands
- d. Second Responding Officer Action

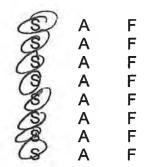
S A F S A F

Comments:

Ground Techniques

9. Scarf Position (Left/Right)

- a. From the side/cross mount position
- b. Perform a sit out maneuver
- c. Right leg ends at 10 o'clock position
- d. Keep hips off of the ground
- e. Left foot is at 8 o'clock position
- f. Right arm around subjects neck/head
- g. Left arm and hand secures subjects arm
- h. Pin your chest to subjects chest



Comments:



Box 1794 · Appleton, WI 54912 · (920) 735-6242 · Fax (920) 735-6245 · asp-usa.com

ASP Basic Certification (ABC) EXPANDABLE BATON TRAINING

Information Sheet

	mornadori Sheet	1 1
(Please Print)		Date 8/2/19
☐ Initial Certification	☐ Recertification	-1-1
First Name		
Home Address	Last Name	
City Grove City	State OH Province	
Telephone		Zip 43123
	E-mail Address	
Employing Agency MT Carnel		
Agency Address Soc S Cleur	the Ave	
City_Vesta V.YL		- lan-ea
Agency Telephone (GIM) 8%-40	State C'H Province	Zip_ 43081
- /		
Duty Status: ☐ Full Duty ☐ Restrict	ted Duty	
Has your agency adopted or authorized	the use of the ASP Baton?	
How many officers are in your agency?		
Height 5 10 Weight 195	Age31 Date of Birth	1182
Have you been exercising?		
Do you have any knee, back or health p	roblems?No	
Are you on any medication? Yes		
Person to be netWind in the ge	ency:	
Phone		
Relationship WIFE	Alternate ()_	
Briefly describe any health problems:		
in problems.		Injury Check: 1A
	WAIVED	
Re	WAIVER	
1) Intending that this Agreement had a second	ease from Liability and Assumption of Risk Agreement	
Drever discharge Armament Systems and Drever	ly binding upon me, my heirs, executors, administrators, an	d assigns. I hereby waive, release, ar
nd assigns, of and from any and all claims, den	nands, rights and savers of a sit appresentatives, neirs,	, executors, administrators, successo
ny and all known and unknown, foreseen and u	nforeseen physical and montal :	nature, arising from, and by reason
II ASP Expandable Baton certification training ac	tivities.	niereor, suffered by me during any a
ood physical and mental health; (c) I am fully aw	I am presently in good physical and mental health; (b) I hat are of, and do acknowledge and assume all risk of initial to	ve no reason to believe that I am not
eminar; (d) I have read and fully understand the t	ream presently in good physical and mental health; (b) I ha are of, and do acknowledge and assume all risk of injury inf erms and conditions of this Agreement.	nerent in my participation in this trainir
	ed. Mere participation does not automatically assure s	successful completion
	The state of the s	successjui completion.
5/0/10	₽ .	
0/4/16/01/20		
Date		

Baton Basic Certification WRITTEN EXAMINATION

For each question below, circle the option that is the most correct.

1	A defensive tactic is evaluated by	8.	The A	SP Baton is always carried:	15.	ASP V	Veapon Side Strikes are led to be performed at a:
••	Its ability to:		a)	On the right side		(3)	45 degree angle
	Control v Injure		b)	In the front		b)	180 degree angle
	b) Maim v Destroy		c)	On the Reaction Side			Horizontal angle
	c) Threaten v Control		(9)	Tip down			90 degree angle
	d) React v Act		e)	On the left side			Vertical angle
	e) Demonstrate the officer's					e)	vertical angle
	skill	9.	The F	teaction Strike is primarily a:			A Miles Alea ACR Raton is gripped
	Skill		a)	Strong strike	1 6 .		striking, the ASP Baton is gripped
_	The primary striking surface of an		b)	Closed strike		with:	my to the same and through
2.	open ASP Baton is the:		(3)	Clearance strike		a)	The index finger and thumb
	open ASP Baton is the.		a)	Offensive strike		b)	A loose flexible grip
	a) Cap		e)	Initial strike		, e)	Two fingers and the thumb
	b) Center of the shaft		٠,	The state of the s		(a)	Full hand grip
	C Last 3" of the baton	40	Thor	nost frequently used ASP		e)	Both hands
	d) First joint	10.		is the:		•	
	e) Handle			Reaction Strike	17.	Speci	al circumstances do not
			(a)	Heaction Strike	.,,	includ	
3.	The hand using the service firearm is		(b)	Weapon Strike		a)	Special knowledge
	the:		c)	Straight Strike		b)	Imminent danger
	a) Weak Hand		d)	Clearance Strike			Injury or exhaustion
	b) Contact Hand		e)	Reverse Strike		<u>&</u>	
	Woapon Hand					0	Size Officer on the ground
	d) Reaction Hand	11.	Whe	n performing an Open Straight		e)	Officer on the ground
			Strik	e, the Reaction Hand is:			t it was a second bility
	e) Support Hand		a)	Palm up on the shaft	18.		ty is the ultimate responsibility
	The ASP Baton should not be		b)	44		of the	
4			(2	Guarding the face		a)	
	opened:		ð	Palm down gripping the		b)	Training partner
	a) To the sky		W	shaft		(2	Course coordinator
	b) To the ground		- \	Executing a downward block		()	Instructor
	c) During a strike		e)	Executing a communic block		e)	Administrative officer
	To the side			t to the section		-,	
	e) Towards the threat	12	. If the	baton opens too easily:	10	The	ASP Baton is designed to be:
	· ·		a)	Make the retaining clip	10	o	
5	. The two baton modes are:			smaller			
_	(a) Open and Closed		b)	Replace the o-ring		©	A defensive weapon
	b) Interview and Combat		<u> </u>	Widen the retaining clip		ଭ	A deadly force option
			ď	Remove the retaining clip		d)	
			e)			e)	A restraining device
			Ο,				
	e) Ready and Extended	10	The	most common problem in	20	. The	principle goal of any arrest or
		16	. 1110	ning the baton is:		phys	sical confrontation is:
•	. Which is not an ASP Target area:					(a)	Establishing control
	a) Center mass of the arms					b)	
	b) Center mass of the legs		b			c)	The state of the s
	c) Center mass of the body					d)	
	(d) Groin or sternum		(d	Operator error		e)	
	e) The Weapon Delivery		е	Loose handle cap		٠,	T Grillomine.
٠.	System						
•	St.	1.	4. Off	cer-Subject Factors do not			
	7. Targeting specific points violates			ude:			
	which training principle:		а) Age			
			<u>b</u>) Size			
	(a) Forgiving techniques		6	Later manual maidus			
	b) Fine motor skills		9				
	c) Spaced practice		6				
	d) Static training		-) Manapio omosic			
	e) Complex techniques						
	· E	ach a	uestic	on is worth five (5) points.			
				n acceptable score is 80% (16 correc	t).	
	· 1	ne mu	nımui	n acceptable score is 60% (_ 5 55,,00	٠,٠	
					1		
					00 11)	
_	THAT COORE /OC	GP/	/DEL	BY: Stanly	mill	11)	
F	INAL SCORE: 100	un/	_LL	1			
Δ	SP WRITTEN EXAM:	ACC	EPT	ABLE N	OT ACC	EPT/	ABLE

Baton Basic Certification TECHNIQUE PROFICIENCY CHECKLIST

The following checklist is designed to assist you and the ASP Instructor in evaluating your performance of ASP Techniques. Those components of the technique that are acceptable are checked.

W. 1	The state of the s
1) Check	Opening the Baton
Balance	, and carrent
Movement	Balance
Verbalization	Movement
Technique	Verbalization
Target	Technique
	Target
2) Regirection	7\ O=== M + M
Balance	7) Open Mode Weapon Strike
Movement	Balance
Verbalization	Movement
Technique	Verbalization
Target	Technique
	Angle Target
3) Closed Mode Weapon Strike	
Balance	8) Open Mode Reaction Strike
Movement	. I destion of the
Verbalization	Balance
Technique	Movement Verbalization
Angle	Technique
Target	Target
	raiget
4) Closed Mode Reaction Strike	Open Mode Straight Strike
Balance	
Movement	Balance
Verbalization	Movement Verbalization
Technique	Technique
Angle	Target
Target	Target
5) Olasad M. I. Santa	10) Closing the Baton
5) Closed Mode Straight Strike	Balance
Balance	Movement
Movement	Technique
Verbalization	
Technique	
Target	
A check mark indica	ites an acceptable observed action.
Three of the compon	nents must be acceptable for a passing score.
Each technique mus	t have a passing score for certification
The minimum passin	ng score is 100% (10 techniques).
CHNIQUE PROFICIENCY: ACCEPTABLE	26
Topon India	NOT ACCEPTABLE
UNSELED	Co.
TRUCTOR MACHINE	and the A
Come / congles	DATE DATE

	WRITTEN EXAMINATION TECHNIQUE PROFICIENCY CHECKLIST	1
COMMENTS:		
	`-	

OC Test Mount Carmel Health System Safety and Security

100° 1.

- 1.) What does OC stand for?
 - **Orange Crush**
 - Ocean Crust
 - (C.) Oleoresin Capsicum
- What is the average expiration date on an OC canister? 2.)
 - 1-2 years
 - 3-4 years
 - 4-5 years
- How often should you check your OC spray for adequate spray strength? 3.)
 - 30 days
 - 60 days
 - 90 days
- 4.) How long of a burst should you use on a threat?
 - (A) 1-2 seconds
 - B. 2-4 seconds
 - C. Empty the entire can
- 5.) What is Oleoresin Capsicum commonly known as?
 - Mace
 - Pepper Spray
 - Gas
- **6.)** When deploying OC, what area of the body should you deploy the OC towards?
 - A. Arms
 - B. Chest
 - (C), Face and eyes
- After using OC on a subject, what should you immediately do with the 7.) subject?
 - Leave lying on the ground. A.
 - Remove from contaminated area **(B)**
 - Spray again

¥ _		
e doi	5	
6.	8.)	What is the second step in the decontamination process?
1 34	,	A Spray them again
THE MENT OF		B. Tell them to stop crying like a baby
* 1		Offer verbal rapport to the subject
	9.)	What is the third step of the decontamination process?
	7.1	Expose subject to fresh air
		Throw the subject a hottle of water
		C. Stand there and record them with your cellphone
	10)	What is the best way to flush the eyes?
<u>*</u>):	10.)	
		A. Using milk B. Rubbing eyes continually
	1	C. Water
	11.)	What type of agent is OC?
	11.)	A. Glue
		B. Cleaning Fluid
		C. Inflammatory
	12 \	What is the main ingredient of OC?
	12.)	A. Water
		_
		B Cayenne Pepper C. Powder
	13.)	Does CMS (Center for Medicaid/Medicare System) guidelines allow for
	13.)	OC to be used on a PATIENT?
		A. Yes
		B. No
		C. Only if they deserve it.
	24	

OLANGIA

Name: Campus: MCH Saint Ann Date:

HANDCUFFING TEST

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
 - D.) ALL OF THE ABOVE
 - (E.) BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?
 - A.)TRUE
 - B)FALSE
- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - C.) SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?
 - A.) TRUE
 -) FALSE

. 945

Baton Basic Certification

TECHNIQUE PROFICIENCY CHECKLIST

1) Check:	Pass:	Fail:
2) Redirection:	Pass:	Fail:
3) Closed Mode Weapon Strike	Pass:	Fail:
4) Closed Mode Reaction Strike	Pass:	Fail:
5) Closed Mode Straight Strike	Pass:	Fail:
6) Opening the Baton	Pass: 🗾	Fail:
7) Open Mode Weapon Strike	Pass:	Fail:
8) Open Mode Reaction Strike	Pass:	Fail:
9) Open Mode Straight Strike	Pass:	Fail:
10) Closing the Baton	Pass:	Fail:
TECHNIQUE PROFICIENCY	PASS:	FAIL:
	- 45	
et .	N .	
COUNSELED:		
CERTIFICATION APPROVED:	CERTIFICATION D	DENIED:
INSTRUCTOR: / /////	1 B-41764	_
DATE: 315 2021		

	e.	Vertical angle
16.	When st	riking the ASP Baton is gripped with:
	â.	The Index finger and thumb
	b.	A loose flexible grip
	c.	Two fingers and the thumb
	@	Full hand grip
	e.	Both hands
17.	Officer/S	Subject factors Include:
	a.	Special knowledge
	b.	Imminent danger
	C.	Injury or exhaustion
	(d)	Size
	e.	Officer on the ground
18.	if the sui	bject compiles, the Officer does it not
	advançe	/strike
	(a)	True
	b.	False
19.	The ASP	Baton is designed to be
	a.	An offensive weapon
	b.	A comealong device
	(c.)	A defensive weapon
	ď.	A deadly force option
	e.	A restraining device
20.		ciple goal of any arrest or physical
	confront	ation is:
	(a.)	Establishing control
	ъ.	Superior Officer skill
	C.	Subject safety
	d.	Documentation
	e.	Punishment
		, 1
	_	2116
Gradeo	By: Za	ck Powell 30/4
ASD \A/	ritten Ex	am: Pass Fail
A3: 11	7	Martin / During
Instruc	tor:	MM 1811/2 6-41 167
Date:	3/5	121.
Date	4/1	

15. ASP Weapon Side Strikes are intended to be

b. 180 degree angle c. Horizontal angle

d. 90 degree angle

performed at a:



Box 1794 Appleton, WI 54912 (920) 735-6242 · Fex (920) 735-6246 asp-usa.com

ASP Basic Certification (ABC) EXPANDABLE BATON TRAINING

Information Sheet

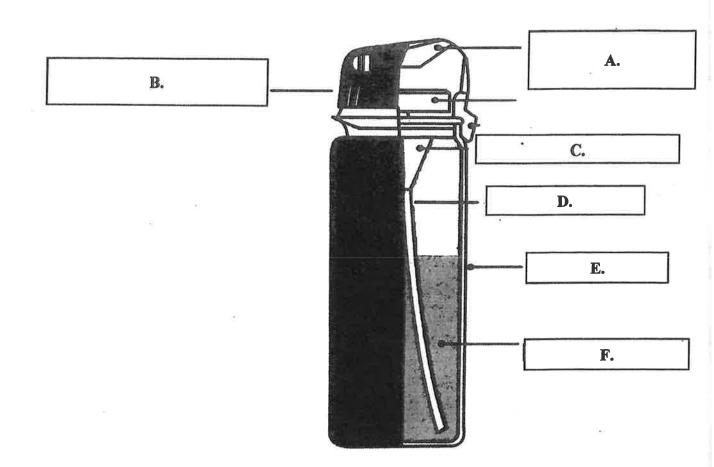
(Please Print)		Date 3 5 2621
Initial Certification First Name Home Addres	☐ Recertification st Name	
City Grove City Telephone	Consult Address -	Zip_43123
Employing Agency Mount Corm Agency Address 500 5 cleveled City Westerville	N is	zip_43081
Agency Telephone (386) 818 - 4	State Off Province	Zip_7,3961
How many officers are in your agency? Height 59 Weight 200 Have you been exercising? Yes Do you have any knee, back or health p	the use of the ASP Baton?	25 1982
Person to be notified in case of emerge Name Phone Relationship Spouce	ency: Alternate ()_	
Briefly describe any health problems:		Injury Check: 11A 111
R	WAIVER	
forever discharge Armament Systems and Pro- and assigns, of and from any and all claims, de- any and all known and unknown, foreseen and all ASP Expandable Baton certification training a 2) In signing this Release, I assert that (a good physical and mental health; (c) I am fully a seminar; (d) I have read and fully understand the	 a) I am presently in good physical and mental health; ware of, and do acknowledge and assume all risk of in terms and conditions of this Agreement. 	, heirs, executors, administrators, successon nd and nature, arising from, and by reason ences thereof, suffered by me during any ar (b) I have no reason to believe that I am not jury inherent in my participation in this training
This program is competency ba	sed. Mere participation does not automatically a	ssure successful completion.
Date	Sio	med

ASP Basic Certification

WRITTEN EXAMINATION

- 1. A defensive tactic is evaluated by it's ability to:
 - (a.) Control v Injure
 - b. Maim v Destroy
 - c. Threaten v Control
 - d. React v Act
 - e. Demonstrate the Officers skill
- 2. The primary striking surface of an open ASP Baton is the:
 - a. Cap
 - b. Center of the shaft
 - C. Last 3" of the baton
 - d. First joint
 - e. Handle
- 3. The hand using the service firearm is the:
 - a. Weak hand
 - b. Contact hand
 - (c) Weapon hand
 - d. Reaction hand
 - e. Support hand
- 4. The ASP baton should not be opened:
 - a. To the sky
 - b. To the ground
 - c. During a strike
 - (d.) To the side
 - e. Towards the threat
- 5. The two baton modes are:
 - (a) Open and Closed
 - b. Interview and Combat
 - c. Weapon and Reaction
 - d. Concealed and Loaded
 - e. Ready and Extended
- 6. Which is not an ASP target area:
 - a. Center mass of the arms
 - b. Center mass of the legs
 - c. Center mass of the body
 - (d.) Groin or Sternum
 - e. The Weapon Delivery System
- Targeting specific points violates which training principle:
 - (a.) Forgiving techniques
 - b. Fine motor skills
 - c. Spaced practice
 - d. Static training
 - e. Complex techniques

- 8. The ASP baton is always carried:
 - a. On the right side
 - b. In the front
 - c. On the reaction side
 - (d) Tip down
 - e. Left side
- 9. The Reaction Strike is primarily a:
 - a. Strong strike
 - b. Closed strike
 - (c.) Clearance strike
 - d. Offensive strike
 - e. Initial strike
- 10. The most frequently used ASP strike is the:
 - a. Reaction strike
 - **b** Weapon strike
 - c. Straight strike
 - d. Clearance strike
 - e. Reverse strike
- 11. When performing an Open Straight Strike, the Reaction Hand is:
 - a. Palm up on the shaft
 - b. Maintaining distance
 - c. Guarding the face
 - d) Palm down gripping the shaft
 - e. Executing a downward block
- 12. If the baton opens too easily:
 - a. Make the retaining clip smaller
 - b. Replace the o-ring
 - (c.) Widen the retaining clip
 - d. Remove the retaining clip
 - e. Lubricate the baton
- 13. The most common problem in opening the baton is:
 - a. Grip of the baton
 - b. Loose o-ring
 - c. Broken retaining clip
 - Operator error
 - e. Loose handle cap
- 14. Special Circumstances include:
 - a. Age
 - b. Size
 - ©.) Weapon proximity
 - d. Skill level
 - e. Mutiple Officers



-

îř .85 .1**.**1.

8.)		t is the second step in the decontamination process?
	A.	Spray them again
	B.	Tell them to stop crying like a baby
v#		Offer verbal rapport to the subject
9.)	Wha	t is the third step of the decontamination process?
	(A)	Expose subject to fresh air
	B .	Throw the subject a bottle of water
	C.	Stand there and record them with your cellphone
10.)	Wha	t is the best way to flush the eyes?
	A.	Using milk
	В.	Rubbing eyes continually
	(C.)	Water
11.)	Wha	t type of agent is OC?
	A.	Glue
	B .	Cleaning Fluid
	O	Inflammatory
12.)	Wha	t is the main ingredient of OC?
	A.	Water
	B C.	Cayenne Pepper
	C.	Powder
13.)	Does	CMS (Center for Medicaid/Medicare System) guidelines allow for
	OC t	o be used on a PATIENT?
	A :	Yes No
	C.	Only if they deserve it.
	Ċ.	
14.)	List t	the nomenclature of a canister of OC
	A.	Flip Top
	В.	Actuator o Nozele
	D.	-
	C.	Value Assembly
	D.	Tube
		Cantsker
	E.	·
	F.	Formiladion

OC Test Mount Carmel Health System Safety and Security



- 1.) What does OC stand for?
 - **Orange Crush**
 - Ocean Crust
 - Oleoresin Capsicum
- 2.) What is the average expiration date on an OC canister?
 - 1-2 years
 - **B** 3-4 years
 - · C. 4-5 years
- How often should you check your OC spray for adequate spray strength? 3.)
 - A. 30 days
 - 60 days
 - 90 days
- 4.) How long of a burst should you use on a threat?
 - 1-2 seconds (A)
 - · B. 2-4 seconds
 - C. Empty the entire can
- What is Oleoresin Capsicum commonly known as? 5.)
 - Mace
 - Pepper Spray
 - Gas
- 6.) When deploying OC, what area of the body should you deploy the OC towards?
 - A. Arms
 - Chest
 - The report of the second of th Face and eyes
- After using OC on a subject, what should you immediately do with the 7.) subject?
 - Leave lying on the ground. A.
 - Remove from contaminated area
 - Spray again

Name:
Campus: St Ann
Date: March 5, 2021

HANDCUFFING TEST

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
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 - B.) LOCAL POLICE, SIR, AND VOICE
 - (C) SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?
 - A.) TRUE
 - (B.) FALSE

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ř.					
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View Job Application:

10:23 AM 08/05/2020 Page 1 of 21

For: 00210846 Armed Safety and Security Officer - Security - Mount Carmel St. Ann's

Phone Number

Resume.pdf

Phone Number Emall Location OH 43136 United States of America Jobs Applied to

Overview

Overview

Current Job 5 years Total Jobs Total Experience 11 years

Summary

summary

Experience

OhioHealth

Protective Services officer April 2015 - July 2020 (5 years, 4 months) Pickerington

Maintained the safety and security of all associates, patients, visitors, and properties.

Utilization of de-escalation/physical control for high stress/psychological patients. Maintained and tested all emergency notification systems. Conducted investigations for criminal activities.

Valor Security Services

Security officer October 2010 - April 2015 (4 years, 7 months) Dublin

Maintained the safety and security of The Mall at Tuttle Crossing and its guest by providing first aid for medical issues, performing regular checks throughout the mall and its property, providing stores assistance with shoplifting incidents. Monitoring of the fire system along with using CCTV to help in the prevention/aid of any illegal or dangerous activity.

Chillicothe Correctional Institution

Corrections Officer January 2007 - July 2008 (1 year, 7 months) Chillicothe

Maintained the safety and security of persons and property of the institution by supervising inmates at all times and enforcing state and institutional rules of conduct.References

Available upon request

Websites

none entered

Resume / Cover Letter

Resume.pdf

Skills

Supervising

Emergency Notification

Investigations

De-Escalation

Correctional

Shoplifting

Monitoring

CCTV

Education

Nelsonville York High School

High School Diploma

Adult career center Certificate of Attainment

Ohio Department of Rehabilitation and CorrectionsAcademy

Certificate of Attainment

Candidate Information

Added By External Career Site

Duplicates

Potential Duplicates Туре Name Eligible for Rehire Match Reasons Merge Remove Candidate Certificate of Attainment High School Diploma 2007. Pre-Hire Certificate of Attainment 2007 Candidate Certificate of Attainment High School Diploma Employee Certificate of Attainment Employee l High School Diploma Employee ated) (5045227) Yes High School Diploma Employee rminated) (4274030) High School Diploma Candidate | High School Diploma Candidate | High School Diploma Candidate High School Diploma Candidate I High School Diploma Candidate l Hìgh School Diploma Candidate Certificate of Attainment Candidate High School Diploma Candidate <u>l Hloh S</u>chool Diploma Candidate | Certificate of Attainment Candidate i High School Diploma Candidate l High School Diploma Candidate High School Diploma Candidate Certificate of Attainment

Туре	Name	Eligible for Rehire	Match Reasons	Merge	Remove
Candidate			High School Diploma		
Candidate			Certificate of Atlainment		
Candidate			High School Diploma		
Candidate			High School Diploma		
Candidate			High School Diploma		
Employee	(058331)		High School Diploma		
Employee	nated) (208810)	Yes	12007		
Employee	2843)		High School Diploma		
Employee	ated) (4294181)		1 2007		
Employee	ated) (4233384)		the state of the s		
Candidate			High School Diploma High School Diploma		
candidate			High School Diploma		
andidate			I High School Diploma		
candidate			High School Diploma		
andidate			Certificate of Attainment		
andidate			Certificate of Attainment		
andidate			High School Diploma		
andidate					
andidate			High School Diploma		
andidate					
andidate			High School Diploma		
andidate			1 2007		
Candidate			High School Diploma		

Type	Name	Eligible for Rehire	Match Reasons	Merge	Remove
11.00			2007		
Candidate					
Employee			2007		
Employee					
Non-Employee	(Contract Ended)				
			2007		
Employee	d) (4226021)				
Employee					
Employee			2007		
Employee	(285124)				
	•		2007		
Employee	ited) (4231319)	Yes			
Employee			1 2007		
Candidate			12001		
Candidate					
			2007		
Candidate			2007		
Candidate			2001		
Sandidate			2007		
Candidate					
Candidate Candidate					
Candidate					
Candidate					
W. 100 100 100 100 100 100 100 100 100 10			2007		
Candidate			12/11/2		
Candidate			12007		
andidate andidate					
andidate					
-,, -, -, -, -, -, -, -, -, -, -, -, -,			2007		
andidate					
andidate			12007		
andidate			12007		
anuluato			12007		

Туре	Name	Eligible for Rehire	Match Reasons	Merge	Remove
ndidate					
ndidate	•				
didate					
bloyee	(4246460)				
ployee					
ployee	1) (4240194)				
ployee	•				
oloyee					
bloyee					
bloyee					
bloyee	ated) (4246402)				
oloyee	4220551)	Yes			
loyee	5089154)				

Туре	Name	Eligible for Rehire	Match Reasons	Merge	Remove
Employee					
Employee	ted) (5083406)	No			
Pre-Hire					
Candidate					
andidate					
Candidate					
andidate					
Candidate					
andidate		1			
Candidate					
andidate					

Type	Name	Eligible for Rehire	Match Reasons	Merge	Remove
Candidate					
andidate					
andidate					
Candidate					
Candidate					
andidate		(100)			
andidate					
andidate		1			

Туре	Name	Eligible for Rehire	Match Reasons	Merge	Remove
Candidate					
andidate					
Candidate					
andidate					
andidate					
Candidate					
andidate					

Туре	Name	Eligible for Rehire	Match Reasons	Merge	Remove
Candidate					
Candidate					
andidate					
ndidate					
ndidate					
ndidate		7			
ndidate					
ployee					
ployee	(5007060)				
oloyee					
-Employee	[C] (Contract Ended)				
ployee	J)				
ployee	d) (300370)	No			
ployee					
ployee	d) (281057)				
ployee					
ployee	ated) (4024537)				
ployee					
ployee					
ployee	d) (4207685)				
-Employee	[(Contract Ended)				
-Employee]				
oloyee					
-Employee	Contract Ended)				
ployee	39434)				
ployee	2) ed) (297784) 04)				
ployee	ed) (297784)				
ployee	04)				
ployee	ited) (5038808)				
ployee	d) (4057222)				
ployee	ted) (4054976)	No			
n-Employee	7)[C]				

	Туре	Name	Eligible for Rehire	Match Reasons	Merge	Remove
Non-Employee		C]				
Employee		nated) (5070054)	Yes			
Employee		, , , , , , , , , , , , , , , , , , , ,				
Employee						
Employee		ated) (285666)				
Non-Employee		5)[C]				
Employee		7				
Employee		nated) (4041194)				
Employee		ed) (4210746)	No			
Employee						
Employee						
Non-Employee		<u> </u>				
Employee		·				
Employee						
Employee						
Employee		ed) (4239081)	Yes			
Employee		ted) (4223727)				
Employee		d) (4267369)				
Employee		, (
Employee		ted) (5108830)	Yes			
Employee		erminated) (5055085)				
Von-Employee		(Contract Ended)	1			
Employee		9)				
Employee		ated) (5109974))			
Employee		2)				
Employee		(1820791)				
mployee		erminated) (4058010)				
Non-Employee		(Contract Ended)				
Employee		d) (4024366)				
Employee		30)				
Employee		5063777)				
mployee		14)				
mployee) (4030102)	1)			
mployee		67481)				
mployee		d) (4220918)				
mployee		ed) (4226807)	Yes			
mployee		1) (5040825)				
mployee		66910)				
mployee			No			
Employee		ated) (4058795)				
Employee		-13-, (

Туре	Name	Eligible for Rehire	Match Reasons	Merge	Remove
Employee	d) (273192)	No			
Employee					
Employee	rminated) (277741)	Yes			
Employee	(84504)	No			
Pre-Hire					
Pre-Hire					
Pre-Hire					
Candidate					
andidate					
Candidate					
Sandidate					
Candidate					
andidate					

View Job Application:

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Туре	Name	Eligible for Rehire	Match Reasons	Merge	Remove
Candidate		300			
Candidate					
andidate					
andidate					
Candidate					
andidate					
andidate					
andidate					
andidate					

Type	Name	Eligible for Rehire	Match Reasons	Merge	Remove
andidate					
indidate					
ndidate		7			
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View Job Application:

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Туре	Name	Eligible for Rehire	Match Reasons	Merge	Remove
Candidate					
Candidate		1			
Candidate					
andidate					
Candidate					

Application Changes

Application Changes	
Updated By	Updated On

Additional Data

View As Of 08/05/2020

SkillSurvey Reference Check

Survey ID

Screening

Assessments



none entered

Background Check History

Background Check History

Status Date	Overall Status	Results URL	Comments	Updated On	Business Process
				07/28/2020 10:20 AM	Background Check for Job Application - 00210846 Armed Safety and Security Officer - Security - Mount Carmel St. Ann's (Fill Date: 08/17/2020

none entered

Interview

Interview Feedback

Overall Average Rating 5 (out of 5)

Ratings Submitted 1 of 1 Interviewer Feedback Received

Interviewer	Feedback Submitted	Overall Rating
Con .	5	(out of 5) - Highly Recommended

Time Zone GMT-05:00 Eastern Time (New York)

Questionnaire Results

Offer

Questionnaire Offer Details - Do NOT select "None of the Above"

Respondent Tole, Gabriella (4291472)
Submission Date 07/28/2020

Question	Answers
What is the pay type for this offer?	Answers Hourly
Does this offer include a relocation package?	Answers No
s this offer for a Work from Home Employee?	Answers No

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Question	Answers	
Is this a Union Job?	Answers No	
FOR INTERNAL: Is there a change in benefits?	Answers No change or is not applicable	

Questionnaire Offer Details - Do NOT select "None of the Above"

Respondent Tole, Gabriella (4291472)
Submission Date 07/28/2020

Question	Answers	
What is the pay type for this offer?	Answers Hourly	
Does this offer include a relocation package?	Answers No	
Is this offer for a Work from Home Employee?	Answers No	
is this a Union Job?	Answers No	
FOR INTERNAL: Is there a change in benefits?	Answers No change or is not applicable	

Attachments

Attachments

	Attachment			
Resume.pdf				
Other Documents				
	Attachment	Cat	egory	
Standard Documents				
Document	nent Effective Date Document Attachment		Signed By	Signature Date
Health History - Mount Carmel V4 01/30/2020 Health History - Mount Carmel V4.pdf		07	7/28/2020 11:56:43 AM	

Offer

Offer Details

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Job Details

Hire Date 08/17/2020

Location MCHS - Mount Carmel St. Ann's

Hire Reason Hire Employee > Hire Employee > New Hire Job Profile MCHS_Armed Safety and Security Officer_M4850 Business Title MCHS_Armed Safety and Security Officer_M4850

Default Weekly Hours Scheduled Weekly Hours 40 Contract End Date

Compensation

Total Base Pay	Currency	Frequency
20,29 USD		Hourly

Compensation Package Trinity Health - Compensation Package

Grade MCHS_Structure MCHS_9

Grade Profile

Company OH_MCHS Mount Carmel Health System

Plan Assignments

Plan Type	Compensation Plan	Assignment
	TEL MANUSTRADA I I I I I I I I I I I I I I I I I I	
Allowance	MCHS - Evening Differential	2,00 USD Hourly
Allowance	MCHS - Charge Pay	1.00 USD Hourly
Allowance	MCHS - Weekend Differential	1.00 USD Hourly
Allowance	MCHS - On Call	2.00 USD Hourly
Allowance	MCHS - Night Differential	2.50 USD Hourly
Allowance	MCHS - Critical Staffing - Hourly	5.00 USD Hourly
Hourly	TH Hourly Plan	20.29 USD Hourly

Attachments

Generated Documents

Document	Signature Type	Signed By	Signature Date	Uploaded Document
Trinity Health Systems Offer Letter - External	E-sign by Adobe Sign			
07/28/2020.pdf			07/00/0000 44 50 45 444	
Frinity Health Systems Offer Letter - External	E-sign by Adobe Sign		07/28/2020 11:52:15 AM	Trinity Health Systems Offer
37/28/2020,pdf				Letter - External uploaded

Reminders

Upcoming

Personal Reminders

none entered

Completed

none entered

Candidate

Job Application Details Card

Job Application Details

Job Requisition 00210846 Armed Safety and Security Officer - Security - Mount Carmel St. Ann's (Fill Date: 08/17/2020)

Location MCHS - Mount Carmel St. Ann's 07/09/2020 08:35:03 PM

Source Job Sites -> Indeed



Relsinger, Jeremy M (4033234) Hiring Manager

Noletti, Madison (4246041)

Recruiter

Tole, Gabriella (4291472)

Recruiter

Step Hire

Education

Education

Nelsonville York High School High School Diploma Adult career center

Certificate of Attainment

Ohlo Department of Rehabilitation and CorrectionsAcademy

Certificate of Attainment

Work History

Work History

Current Job 5 years Total Jobs **Total Experience** 11 years

Summary

summary

Experience

OhloHealth

Protective Services officer April 2015 - July 2020 (5 years, 4 months) Pickerington

Maintained the safety and security of all associates, patients, visitors, and properties.

Utilization of de-escalation/physical control for high stress/psychological patients. Maintained and tested all emergency notification systems. Conducted investigations for criminal activities.

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Security officer October 2010 - April 2015 (4 years, 7 months) Dublin

Maintained the safety and security of The Mall at Tuttle Crossing and its guest by providing first aid for medical issues, performing regular checks throughout the mall and its property, providing stores assistance with shoplifting incidents, Monitoring of the fire system along with using CCTV to help in the prevention/aid of any illegal or dangerous activity.

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Corrections Officer January 2007 - July 2008 (1 year, 7 months) Chillicothe

Maintained the safety and security of persons and property of the institution by supervising inmates at all times and enforcing state and institutional rules of conduct.References

Available upon request

Resume Attachment

Resume / Cover Letter



Credentials

Skills

Supervising

Emergency Notification

Investigations

De-Escalation

Correctional

Shoplifting

Monitoring

CCTV

My Upcoming Reminders

Personal Reminders

none entered

Tags / Pools

Tags / Pools

none entered



A MEMBER OF TRINITY HEALTH

POSITION DESCRIPTION

POSITION TITLE: Armed Safety & Security Officer	DEPARTMENT: Safety & Security		
JOB CODE: M4850	REPORTS TO: Armed Supervisor of Safety & Security		
DATE ISSUED: 2/1/2017	SUPERVISES: N/A		
DATE REVISED: 2/1/2017	MATRIX REPORTING RELATIONSHIPS: N/A		

Mount Carmel Mission Statement and Guiding Behaviors

Mission: We serve together in Trinity Health, in the spirit of the Gospel, to heal body, mind and spirit, to improve the health of our communities and to steward the resources entrusted to us.

The Guiding Behaviors set the expectation for how we work together in living our Mission and Core Values. They are:

- We support each other in serving our patients and communities.
- We communicate openly, honestly, respectfully and directly.
- We are fully present.
- We are all accountable.
- We trust and assume goodness in intentions.
- We are continuous learners.

Job Summary

- In accordance with the Mission and Guiding Behaviors; the Safety & Security Officer is to provide protective services to all persons and property across the Mount Carmel Health System.
- Ensure a safe environment for all associates, physicians, patients, and visitors in compliance with various regulatory standards to include, JC, OSHA, ect.
- Provide a quality service consistant with the values of Mount Carmel Health System for our associates, physicians, patients and visitors.

Job Qualifications (Knowledge, Skills, and Abilities)

- Education: High school graduate or GED required.
- Licensure / Certification: Receipt of Ohio Peace Officer Training Academy certificate of completion prior to being assigned a shift as an Armed Safety and Security Officer for Mount Carmel
- Experience: Three to five years experience in security, law enforcement or military disciplines or equivalent training which might include criminal justice, homeland security, or law enforcement academy is preferred.
- Effective Communication Skills
- Valid driver's license with good driving record maintained
- Customer service oriented able to function in high stress situations with personal restraint, integrity, and control.
- Basic computer skills that commensurate with the job.
- Ability to communicate effectively and appropriately with diverse populations.
- Ability to write, read, and communicate effectively in the English language.

Essential Responsibilities

- Exhibits each of the Mount Carmel Service Excellence Behavior Standards holding self and
 others accountable and role modeling excellence for all to see. For example: demonstrates
 friendliness and courtesy, effective communication creates a professional environment and
 provides first class service.
- Meets population specific and all other competencies according to department requirements.
- Promotes a Culture of Safety by adhering to policy, procedures and plans that are in place to prevent workplace injury, violence or adverse outcome to associates and patients.
- Relationship-based Care: Creates a caring and healing environment that keeps the patient
 and family at the center of care throughout their experience at Mount Carmel following the
 principles of our interdisciplinary care delivery system.
- (For patient care providers) Provides nursing care, ensures an environment of patient safety, promotes evidence-based practice and quality initiatives and exhibits professionalism in nursing practice within the model of the ANCC Magnet Recognition Program®.
- Maintain a safe and secure environment through job knowledge, skills and engagement. Intervene as appropriate in any safety & security observed issues.
- Enforces all governmental regulations, standards, policies associated with Mount Carmel Health System and Safety & Security policies, (i.e. smoking policy).
- Communicate safety and security discrepancies to the appropriate parties for mitigation.
- Ensure department goals & objectives are reached/maintained during assigned shift(s).
- Responsible for assuring that the Safety, Life Safety, security, and Emergency Management, and the JC standards are followed as it relates to the position.
- Responsible for completing and documenting assigned tasks, such as fire drill and safety tours on time.
- Ensure accurate documentation during assigned shift (i.e. security reports, safety incidents, activity logs).
- Ensure consistent delivery of professional, friendly, and courteous service.
- Comply with the organization and department dress code.
- Conduct initial and follow-up investigations, if warranted or directed, ensuring documentation of investigative steps.
- Proactive patrolling of the campus by foot, segway, or vehicle as assigned.
- Respond to all "STAT" calls expeditiously and safely.

- Be familiar with all hospital emergency codes and appropriate responses
- Responsible for completing assigned tasks/duties on time (i.e. fire drills and safety tours).
- Provide on-the-spot in-service training to staff where knowledge related discrepancies are noted.
- Demonstrate sound judgment, decision skills, and prioritizing responses to emergency situations.
- Ability to perform duties in an independent manner.
- Custodial responsibility for patient valuables and maintaining lost and found by following the proper protocols.

Other Job Responsibilities

- Inspects panic alarms, AED's, and call boxes as assigned.
- Provides escorts for associates, patients, visitors and students (where located) in the hospital areas and areas contiguous to the hospital areas.
- Issue parking citations and enforce the parking policy.
- Provide helipad duties during helicopter landings and departures
- Assist in the collection of ICES data as directed
- Monitoring of cameras and access control responsibilities as assigned
- Citizen arrest duties only in accordance with applicable laws and statutes
- Assist motorist with vehicle assistance as appropriate (i.e. jump start)
- Traffic enforcement keeping emergency entrances and approaches clear of non-emergency vehicle traffic
- Respond to safety incidents/visitor injuries as appropriate, ensuring medical is summoned as appropriate.
- During emergent events direct media to the proper area/contact
- Perform other assigned duties as directed by Management.
- Use proper radio procedures and monitors on-going activity
- Be familiar with geographic location and facility layout
- Immediately report and respond appropriately to Salient events, communicating the event to your supervisor.
- Provide for security per policy for VIPs
- Chemical spill clean up as assigned.
- Responsible for compliance with Organizational Integrity through raising questions and promptly reporting actual or potential wrongdoing.
- All other duties as assigned.

EQUIPMENT: This section requires a response of Yes or No from drop down box.

Radiation: No Electrical: Yes Mechanical: No

KEY TO FREQUENCY CODES for Physical Requirement Sections: This section requires a numerical response from drop

down box.

1 = Up to 33% of the time 3 = Over 66% of the time 2 = From 33% - 66% of the time 4 = Not Applicable

PHYSICAL REQUIREMENTS

Sitting: 3 Balancing: 3

Standing:3Reaching Overhead:1Walking:3Grasping:3Ability to be Mobile:3Keyboarding :3Bending:2Pinching:3Kneeling/Crawling:1Twisting:2Stooping:1Climbing:1

Turning/Pivoting: 2 Pulling: 2

Working Above Shoulder Level: 4

Pushing: 2 Maximum Weight: Equal to or greater than 35 lbs
Lifting: 3 Maximum Weight: Equal to or greater than 35 lbs

POTENTIAL EXPOSURE: This section requires a response of Yes or No from drop down box.

Blood / Body Fluid Contact: Yes Humidity: No Temperature: No Air-borne Pathogen: Yes Chemicals (Fumes / Burns): No Dust: No

Radiation: No Vibrations: No Noise: No

Personal Protective Equipment: This section requires a response of Yes or No from drop down box.

Gloves: Yes Shoes: No Goggles: Yes Aprons: No

Masks: Yes Head Covering: No Gowns: Yes

Emotional / Psychological Factors: This section requires a response of Yes or No from drop down box.

Trauma: Yes Grief: Yes Death: Yes Public Contact: Yes Deadlines: Yes

This job description is intended to describe the general content of and requirements for the performance of this job. It is not to be considered an exhaustive statement of duties, responsibilities, or requirements.

Reviewed and Approved by: Drew Evans

Title: Manager System Safety and Security

Date: 3/15/2017 Compensation Rep: Jim Kousaie

Title: Sr. Compensation Consultant

Date: <u>3/15/2017</u>



A MEMBER OF TRINITY HEALTH

POSITION DESCRIPTION

POSITION TITLE: Armed Safety & Security Officer	DEPARTMENT: Safety & Security		
JOB CODE: M4850	REPORTS TO: Armed Supervisor of Safety & Security		
DATE ISSUED: 2/1/2017	SUPERVISES: N/A		
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- Immediately report and respond appropriately to Salient events, communicating the event to your supervisor.
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Stooping: 1 Climbing: 1
Turning/Pivoting: 2 Pulling: 2

Working Above Shoulder Level: 4

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Gloves: Yes Shoes: No Goggles: Yes Aprons: No

Masks: Yes Head Covering: No Gowns: Yes

Emotional / Psychological Factors: This section requires a response of Yes or No from drop down box.

Trauma: Yes Grief: Yes Death: Yes Public Contact: Yes Deadlines: Yes

This job description is intended to describe the general content of and requirements for the performance of this job. It is not to be considered an exhaustive statement of duties, responsibilities, or requirements.

Reviewed and Approved by: <u>Drew Evans</u>

Title: Manager System Safety and Security

Date: 3/15/2017
Compensation Rep: Jim Kousaie

Title: Sr. Compensation Consultant

Date: <u>3/15/2017</u>

LaSheba Hampton

From:

Sent:

Monday, August 10, 2020 2:11 PM

To:

LaSheba Hampton

Subject:

[External] Re: Nelsonville-York High School

Follow Up Flag:

Follow up

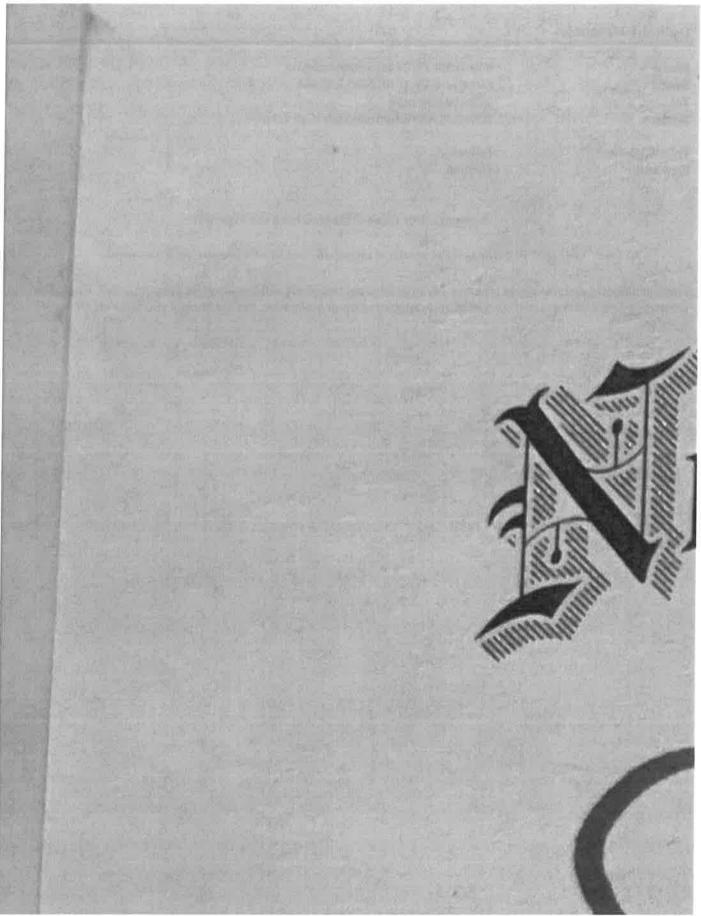
Flag Status:

Flagged

Warning: This email originated from the Internet!

DO NOT CLICK links if the sender is unknown, and NEVER provide your password.

I am sending two pictures of my Diploma. My original copy, one of my children used for coloring paper. Oops. The second picture is of the wallet version the school gave us upon graduation. Let me know if you need anything further.



On Aug 10, 2020, at 11:56 AM, LaSheba Hampton <LaSheba.Hampton@mchs.com> wrote:



I was wondering if you were able to get a picture of your high school diploma over to me so it can be verified. HireRight was unable to do so.

Let me know if you'll have troubles getting this before Thursday. Thanks!

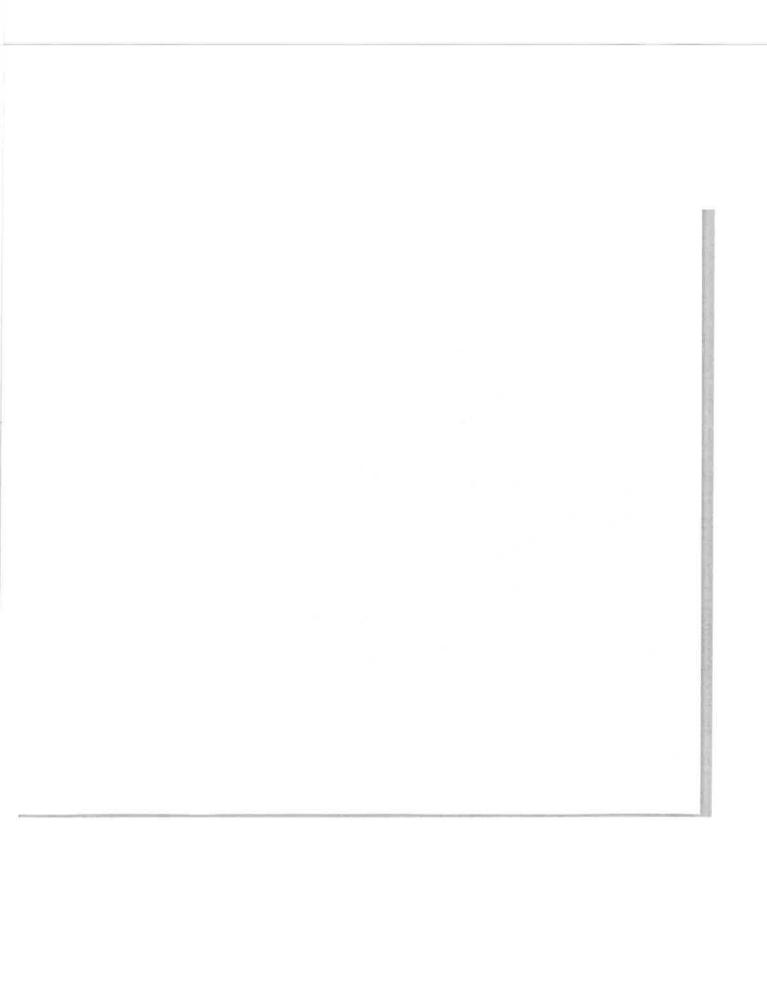
LaSheba Hampton

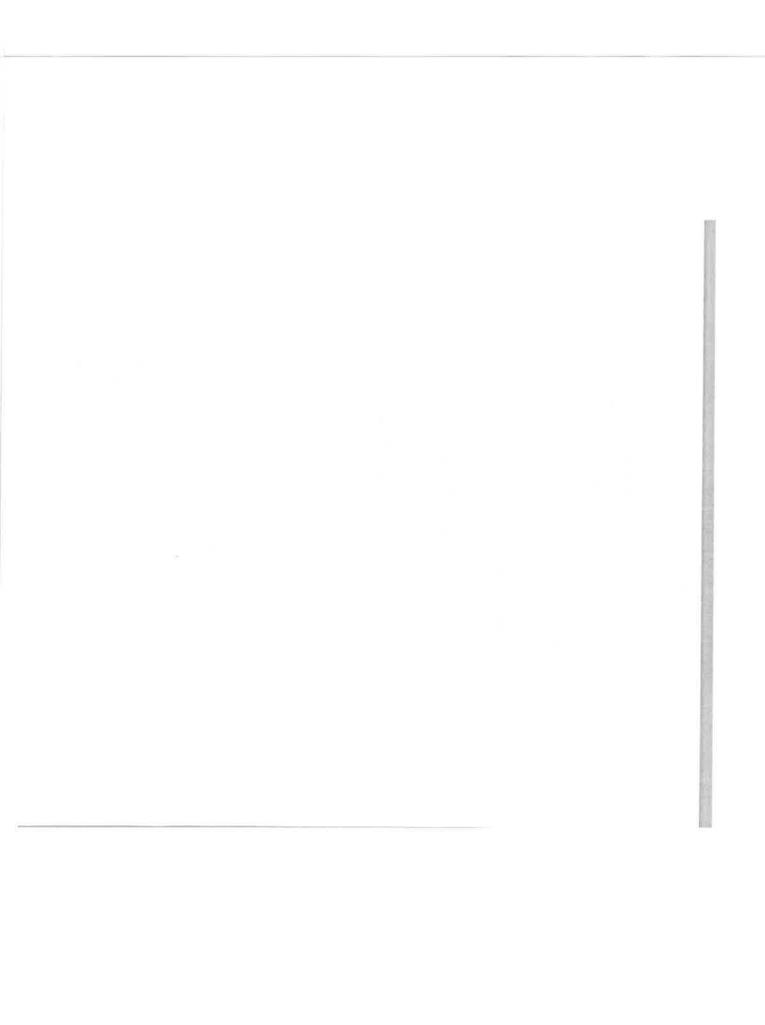
HR Specialist I, Human Resources Operations
Mount Carmel Health System | A Member of Trinity Health
Call or Text Work Cell: (614) 701-6116
LaSheba.Hampton@mchs.com | mountcarmelhealth.com
Facebook | Twitter | LinkedIn | Instagram | YouTube

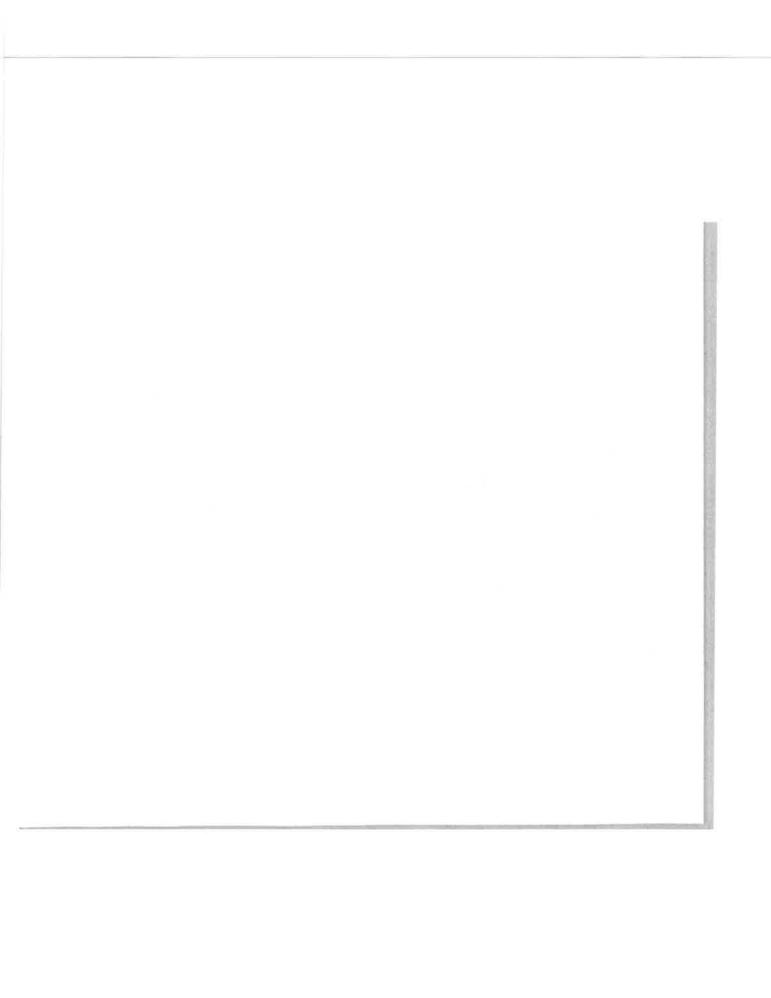
<image001.jpg>

Confidentiality Notice:

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07/28/2020



Lithopolis, Ohio 43136



Welcome to **Mount Carmel Health System** and congratulations on joining our dynamic team! We have a long standing tradition of serving the people in our communities with excellent patient-centered care.

Mount Carmel is a proud member of Trinity Health, one of the largest Catholic healthcare systems in the nation. Trinity serves communities from coast-to-coast through hospitals, continuing care facilities, home health and hospice programs, and much more. We're committed to providing a rewarding and meaningful work experience for all of our colleagues.

On behalf of Mount Carmel, I'm pleased to confirm your acceptance of our offer of employment for the **Armed Safety and Security Officer position** with an agreed-upon start date of **Monday, August 17, 2020,**. You will complete your online orientation modules in Healthstream on this day from home/remote.

Your Offer Summary:

- Full-time, 80 hours per pay period, paid bi-weekly
- Your manager is Jeremy Reisinger, whose phone number is (614) 898-4005
- Your Mount Carmel pay grade: 10
- Your rate of compensation is: \$20.29 USD per hour

This offer is contingent upon satisfactory completion and clearance of all pre-employment protocols, which include but may not be limited to: drug screening, criminal background investigation, education verification, and employment verification. Per your specific job, you may also be required to submit to a job placement physical examination, provide evidence of your current professional licensure/certification and fingerprinting. Continued employment may be, in part, conditional on maintenance of recurring credentialing and maintenance of privileges. Failure to adhere to all steps of the employment evaluation process may result in this offer of employment being withdrawn.

By accepting this offer, you agree to comply with Mount Carmel's policies, procedures, and expectations to advance our mission and values, which includes but is not limited to: annual Influenza vaccination and adherence to our Smoke Free Environment policy, as well as other identified requirements to ensure a safe and healthy workplace. You will also be accountable for annual training(s), as applicable. All organizational policies and procedures, as well as job descriptions, are available on Mount Carmel's intranet. Employment is on an at-will basis, meaning that either yourself or Mount Carmel Health System may terminate the employment relationship at any time and for any reason not contrary to law.

We are thrilled that you're joining the Mount Carmel family! If you're as excited as we are about this opportunity, we would truly appreciate it if you take a few minutes to share your enthusiasm for Mount Carmel on our Indeed and/or Glassdoor profiles, here:

- Indeed (click to review)
- Glassdoor (click to review)



And remember, if you have any questions, do not hesitate to reach out to Gabriella Tole at **Gabriella.Tole@MCHS.com**. Congratulations!

Sincerely,

Madison Noletti
Talent Acquisition Partner, Human Resources
Mount Carmel Health System | A Member of Trinity Health

Congratulations on your offer! Mount Carmel utilizes Workday for all required onboarding, including pre-employment forms and verification. Below are steps necessary to complete your electronic new hire onboarding in Workday. All onboarding steps must be completed within 48 hours of receipt to ensure that you can start on your planned orientation day.

Once you have signed your offer letter online and received a Green check mark confirming successful completion, you will have three (3) additional tasks to review and complete:

- Personal Information
- National ID (Social Security number)
- Review New Hire Documents (In this section, you will find and complete the Employee Health form. Print and bring your completed form with you to your pre-employment lab and physical appointment)

All tasks must be completed in Workday for your onboarding process to continue. It is critical that you complete and submit all tasks and required information as soon as possible.

Once I have received the signed offer letter and you have completed your other required tasks, you will receive several emails, including your Workday username and password. Please use this username and password to log into Workday via the link provided and complete the remaining required documents in your Workday Inbox. Please be sure to review the instructions on each form prior to completing it and ensure information is current and accurate. This information will become part of your colleague record.

NEXT STEPS

There are required pre-employment steps that will need to be completed prior to your start date!

Very Important Information: Instructions and additional details about each step below can be found on the New Hire Portal. This portal also provides you information about New Colleague Orientation, Benefits and additional resources to assist you in starting your career at Mount Carmel.

Click here to be taken to the New Hire Portal



Or browse to this URL: https://www.mountcarmelhealth.com/careers-and-resources/working-with-us/new-hire-portal/

You will receive a link from our background check vendor, HireRight, for completion. Please ensure you are checking all of your email folders for this link. Complete within 24 hours of receipt. This is an approved request, please do not delete. Any questions, please reach out to your Talent Acquisition recruiter. Schedule & Complete a Pre-Employment Lab & Physical with Mount Carmel Occupational Health. Attend your scheduled Onboarding Session on Tuesday, August 4, 2020 at 2:00pm at Mount Carmel Corporate Services Center at 6150 East Broad Street, Columbus, OH 43213.

Sincerely, Madison Noletti Mount Carmel Health System

Please sign at your earliest convenience:

Name:

Signature:

Date: Jul 28, 2020

MCHS - RCE - Environment of Care and Safety	0:30	02/01/2021
■ MCHS - RCE - Infection Control All Colleagues	0:25	02/01/2021
■ MCHS - RCE - Patient Care and Protection	0:30	02/01/2021
MCHS - RCE - Patient Rights	0:06	02/01/2021
MCHS - RCE - Stroke Education	0:30	02/01/2021
MCHS - RCE - ZERO Harm Error Prevention Annual Training	1:30	02/01/2021
■ TH – Influenza Prevention	0:05	11/25/2020
Caring for Patients at the End of Life – An HCCS Regulatory Course	1:15	08/25/2020
	0:00	08/25/2020
■ MCHS - Pain Management (Unlicensed) 2021	0:45	08/25/2020
	0:31	08/25/2020
● Preventing Patient Falls - A SafetyQ Course	0:18	08/25/2020
MCHS - New Colleague Virtual Orientation Day 1	8:00	08/17/2020
MCHS - Baby Friendly Hospital Initiative	0:55	08/17/2020
MCHS - Bloodborne Pathogens Mandatory Education	0:42	08/17/2020

Rights			
Colleagues Curriculum 2020 0:35 08/17/2020 MCHS - Patient Safety Risk Management & the VOICE Reporting System 0:30 08/17/2020 MCHS - RCE - Environment of Care and Safety 0:09 08/17/2020 MCHS - RCE - HIPAA Privacy Education 0:40 08/17/2020 MCHS - RCE - Infection Control All Colleagues 0:40 08/17/2020 MCHS - RCE - Patient Care and Protection 0:30 08/17/2020 MCHS - RCE - Patient Rights 0:05 08/17/2020 MCHS - RCE - Patient Rights 0:10 08/17/2020 MCHS - RCE - Stroke Education 0:10 08/17/2020 MCR - Landauer Academy - MRI Level 1 Safety for Non-MRI Personnel (CE) - ILZ0127001 0:18 08/17/2020 TH - ICP - Integrity and Compliance Program New Hire Training 0:37 08/17/2020 TH - ICP - Social Media and Your Job 0:28 08/17/2020		0:58	08/17/2020
Management & the VOICE Reporting System 0:30 08/17/2020 ■ MCHS - RCE - Environment of Care and Safety 0:30 08/17/2020 ■ MCHS - RCE - HIPAA Privacy Education 0:40 08/17/2020 ■ MCHS - RCE - Infection Control All Colleagues 0:40 08/17/2020 ■ MCHS - RCE - Patient Care and Protection 0:30 08/17/2020 ■ MCHS - RCE - Patient Rights 0:05 08/17/2020 ■ MCHS - RCE - Stroke Education 0:10 08/17/2020 ■ MCHS - RCE - Stroke Education 0:16 08/17/2020 ■ MCR - Landauer Academy - MRI Level 1 Safety for Non-MRI Personnel (CE) - ILZO127001 0:16 08/17/2020 ■ TH - ICP - Integrity and Compliance Program New Hire Training 0:37 08/17/2020 ■ TH - ICP - Social Media and Your Job 0:25 08/17/2020		0:00	08/17/2020
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Privacy Education 0:40 08/17/2020 ■ MCHS - RCE - Infection Control All Colleagues 0:40 08/17/2020 ■ MCHS - RCE - Patient Care and Protection 0:30 08/17/2020 ■ MCHS - RCE - Patient Rights 0:05 08/17/2020 ■ MCHS - RCE - Stroke Education 0:10 08/17/2020 ■ MCR - Landauer Academy - MRI Level 1 Safety for Non-MRI Personnel (CE) - ILZ0127001 08/17/2020 ■ TH - ICP - Integrity and Compliance Program New Hire Training 0:37 08/17/2020 ■ TH - ICP - Social Media and Your Job 0:26 08/17/2020		0:30	08/17/2020
Control All Colleagues MCHS - RCE - Patient Care and Protection MCHS - RCE - Patient 0:05 MCHS - RCE - Patient Rights MCHS - RCE - Stroke 0:10 MCHS - RCE - Stroke Education MCR - Landauer Academy - MRI Level 1 Safety for Non-MRI Personnel (CE) - ILZ0127001 TH - ICP - Integrity and Compliance Program New Hire Training TH - ICP - Social Media and Your Job TH - TIS - 2020 Security 0:30 08/17/2020 08/17/2020 08/17/2020		0:08	08/17/2020
and Protection MCHS - RCE - Patient		0:40	08/17/2020
Rights MCHS - RCE - Stroke Education MCR - Landauer Academy - MRI Level 1 Safety for Non- MRI Personnel (CE) - ILZ0127001 TH - ICP - Integrity and Compliance Program New Hire Training TH - ICP - Social Media and Your Job TH - TIS - 2020 Security 0:44 0:10 08/17/2020 08/17/2020 08/17/2020		0:30	08/17/2020
Education MCR - Landauer Academy - MRI Level 1 Safety for Non- MRI Personnel (CE) - ILZ0127001 TH - ICP - Integrity and Compliance Program New Hire Training TH - ICP - Social Media and Your Job TH - TIS - 2020 Security 0:15 08/17/2020 08/17/2020	MCHS - RCE - Patient Rights	0:05	08/17/2020
MRI Level 1 Safety for Non-MRI Personnel (CE) - ILZ0127001 TH - ICP - Integrity and Compliance Program New Hire Training TH - ICP - Social Media and Your Job TH - TIS - 2020 Security 0:44 0:37 0:37 08/17/2020	■ MCHS - RCE - Stroke Education	0:10	08/17/2020
Compliance Program New Hire Training TH – ICP – Social Media and Your Job TH - TIS - 2020 Security 0:44 0:26 08/17/2020	MCR - Landauer Academy - MRI Level 1 Safety for Non-MRI Personnel (CE) - ILZ0127001	0:15	08/17/2020
and Your Job TH - TIS - 2020 Security 0:44 08/17/2020	★ TH - ICP - Integrity and Compliance Program New Hire Training	0:37	08/17/2020
111- 113 - 2020 Geculity	■ TH – ICP – Social Media and Your Job	0:25	08/17/2020
	■ TH - TIS - 2020 Security Awareness Training	0:44	08/17/2020

^{*}Estimated Times are stated in hours:minutes format.

LEGEND = Course = Curriculum

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Job Description
Orientation
Hospital Orientation
Ucenses
Job Orientation

Job Description

Orientation



A MEMBER OF TRINITY HEALTH

POSITION DESCRIPTION

POSITION TITLE: Armed Safety & Security Officer	DEPARTMENT: Safety & Security		
JOB CODE: M4850	REPORTS TO: Armed Supervisor of Safety & Security		
DATE ISSUED: 2/1/2017	SUPERVISES:		
DATE REVISED: 2/1/2017	MATRIX REPORTING RELATIONSHIPS:		

Mount Carmel Mission Statement and Guiding Behaviors

Mission: We serve together in Trinity Health, in the spirit of the Gospel, to heal body, mind and spirit, to improve the health of our communities and to steward the resources entrusted to us.

The Guiding Behaviors set the expectation for how we work together in living our Mission and Core Values. They are:

- We support each other in serving our patients and communities.
- We communicate openly, honestly, respectfully and directly.
- We are fully present.
- We are all accountable.
- We trust and assume goodness in intentions.
- We are continuous learners.

Job Summary

- In accordance with the Mission and Guiding Behaviors; the Safety & Security Officer is to provide protective services to all persons and property across the Mount Carmel Health System.
- Ensure a safe environment for all associates, physicians, patients, and visitors in compliance with various regulatory standards to include, JC, OSHA, ect.
- Provide a quality service consistant with the values of Mount Carmel Health System for our associates, physicians, patients and visitors.

Job Qualifications (Knowledge, Skills, and Abilities)

- Education: High school graduate or GED required.
- Licensure / Certification: Receipt of Ohio Peace Officer Training Academy certificate of completion prior to being assigned a shift as an Armed Safety and Security Officer for Mount Carmel
- Experience: Three to five years experience in security, law enforcement or military
 disciplines or equivalent training which might include criminal justice, homeland security, or
 law enforcement academy is preferred.
- Effective Communication Skills
- Valid driver's license with good driving record maintained
- Customer service oriented able to function in high stress situations with personal restraint, integrity, and control.
- Basic computer skills that commensurate with the job.
- Ability to communicate effectively and appropriately with diverse populations.
- Ability to write, read, and communicate effectively in the English language.

Essential Responsibilities

- Exhibits each of the Mount Carmel Service Excellence Behavior Standards holding self and
 others accountable and role modeling excellence for all to see. For example: demonstrates
 friendliness and courtesy, effective communication creates a professional environment and
 provides first class service.
- Meets population specific and all other competencies according to department requirements.
- Promotes a Culture of Safety by adhering to policy, procedures and plans that are in place to prevent workplace injury, violence or adverse outcome to associates and patients.
- Relationship-based Care: Creates a caring and healing environment that keeps the patient and family at the center of care throughout their experience at Mount Carmel following the principles of our interdisciplinary care delivery system.
- (For patient care providers) Provides nursing care, ensures an environment of patient safety, promotes evidence-based practice and quality initiatives and exhibits professionalism in nursing practice within the model of the ANCC Magnet Recognition Program®.
- Maintain a safe and secure environment through job knowledge, skills and engagement.
 Intervene as appropriate in any safety & security observed issues.
- Enforces all governmental regulations, standards, policies associated with Mount Carmel Health System and Safety & Security policies, (i.e. smoking policy).
- Communicate safety and security discrepancies to the appropriate parties for mitigation.
- Ensure department goals & objectives are reached/maintained during assigned shift(s).
- Responsible for assuring that the Safety, Life Safety, security, and Emergency Management, and the JC standards are followed as it relates to the position.
- Responsible for completing and documenting assigned tasks, such as fire drill and safety tours on time.
- Ensure accurate documentation during assigned shift (i.e. security reports, safety incidents, activity logs).
- Ensure consistent delivery of professional, friendly, and courteous service.
- Comply with the organization and department dress code.
- Conduct initial and follow-up investigations, if warranted or directed, ensuring documentation of investigative steps.
- Proactive patrolling of the campus by foot, segway, or vehicle as assigned.
- Respond to all "STAT" calls expeditiously and safely.

- Be familiar with all hospital emergency codes and appropriate responses
- Responsible for completing assigned tasks/duties on time (i.e. fire drills and safety tours).
- Provide on-the-spot in-service training to staff where knowledge related discrepancies are noted.
- Demonstrate sound judgment, decision skills, and prioritizing responses to emergency situations.
- Ability to perform duties in an independent manner.
- Custodial responsibility for patient valuables and maintaining lost and found by following the proper protocols.

Other Job Responsibilities

- Inspects panic alarms, AED's, and call boxes as assigned.
- Provides escorts for associates, patients, visitors and students (where located) in the hospital areas and areas contiguous to the hospital areas.
- Issue parking citations and enforce the parking policy.
- Provide helipad duties during helicopter landings and departures
- Assist in the collection of ICES data as directed
- Monitoring of cameras and access control responsibilities as assigned
- Citizen arrest duties only in accordance with applicable laws and statutes
- Assist motorist with vehicle assistance as appropriate (i.e. jump start)
- Traffic enforcement keeping emergency entrances and approaches clear of non-emergency vehicle traffic
- Respond to safety incidents/visitor injuries as appropriate, ensuring medical is summoned as appropriate.
- During emergent events direct media to the proper area/contact
- Perform other assigned duties as directed by Management.
- Use proper radio procedures and monitors on-going activity
- Be familiar with geographic location and facility layout
- Immediately report and respond appropriately to Salient events, communicating the event to your supervisor.
- Provide for security per policy for VIPs
- Chemical spill clean up as assigned.
- Responsible for compliance with Organizational Integrity through raising questions and promptly reporting actual or potential wrongdoing.
- All other duties as assigned.

EQUIPMENT: This section requires a response of Yes or No from drop down box.

Radiation: No

Electrical: Yes

Chemical: Yes

Mechanical: No_

KEY TO FREQUENCY CODES for Physical Requirement Sections: This section requires a numerical response from drop

down box.

1 = Up to 33% of the time

3 = Over 66% of the time

2 = From 33% - 66% of the time

4 = Not Applicable

PHYSICAL REQUIREMENTS

Sitting: 3

Balancing: 3

Standing: 3

Walking: 3

Reaching Overhead: 1 Grasping: 3

Ability to be Mobile: 3

Keyboarding : 3

Bending: 2 Kneeling/Crawling: 1

Pinching: 3 Twisting: 2

Stooping: 1

Climbing: 1

Turning/Pivoting: 2 Working Above Shoulder Level: 4 Pulling: 2

Pushing: 2 Lifting: 3

Maximum Weight: Equal to or greater than 35 lbs Maximum Weight: Equal to or greater than 35 lbs

POTENTIAL EXPOSURE: This section requires a response of Yes or No from drop down box.

Blood / Body Fluid Contact: Yes Humidity: No Temperature: No Air-borne Pathogen: Yes Chemicals (Fumes / Burns): No Dust: No

Radiation: No Vibrations: No Noise: No

Personal Protective Equipment: This section requires a response of Yes or No from drop down box.

Gloves: Yes Shoes: No Goggles: Yes Aprons: No

Masks: Yes Head Covering: No Gowns: Yes

Emotional / Psychological Factors: This section requires a response of Yes or No from drop down box.

Trauma: Yes Grief: Yes Death: Yes Public Contact: Yes Deadlines: Yes

This job description is intended to describe the general content of and requirements for the performance of this job. It is not to be considered an exhaustive statement of duties, responsibilities, or requirements.

Reviewed and Approved by: **Drew Evans**

Title: Manager System Safety and Security

Date: 3/15/2017 Compensation Rep: Jim Kousaie

Title: Sr. Compensation Consultant

Date: 3/15/2017

have been issued 52 rounds of Winchester Ranger 9mm +P 124 Grain ammunition on Aug. 18, 3030. I understand that this is the only duty ammunit I may use while on duty and must carry in my duty weapon and magazines at all times.			
Received By:	Aus. 18, 2020		
Issued By	8/18/2020		

I, Billy Smith, have received the following issued uniforms from the Safety

& Security Department at Mount Carmel St. Ann's Hospital.

	Item Description	Quantity	Received
1	Short Sleeve Class A Navy Blue Shirt	2 191	
2	Kenwood Digital Radio, Charger, Remote Speaker Mic - 720	1	
3	Uniform Navy Blue Pants	2	
4	All Weather Navy Blue Jacket	N/A	
5	Mount Carmel Ball Cap	1	
6	Nylon Duty Belt	1	
7	Nylon O/C Case	1	
8	Nylon Radio Case	1	
9	Nylon Glove Pouch	1	
10	Nylon Handcuff Case	1	
11	Nylon Belt Keepers	4	
12	Key Holder	1	+
13	ASP Holder	1	
14	Magazine Holder	1	
15	Level 3 Duty Holster Left Hand	1	
16	Pair of Handcuffs w/ Key	1	
17	ASP Expandable Baton	1	
18	Can of O/C	1	
19	MCHS Security Badge	1	
20	Name Plate	- Yorderd	
22	Office Key	1	

Upon termination of employment, I understand that the above issued property must be turned into the Security Supervisor.

Printed Name:	
Signed:	
Date: Aug, 18, 20	0
Issued By:	8/18/20%
/	

MOUNT CARMEL HEALTH SYSTEM SAFETY AND SECURITY SECURITY OFFICER ORIENTATION

Orientee:		
Primary Precep	ptor: J. Relsinger	
Secondary Pred		
Start Date:	8/18/2020	
	te: 8/30/2020	
Reviewed By:	J. Rexinge	

* Return to manager when completed *

INTRODUCTION AND OVERVIEW OF THE MOUNT CARMEL HEALTH SYSTEM

SYSTEM MISSION STATEMENT

Mount Carmel Health System
is a community of committed persons
working to extend God's ministry of health.
We seek out and respond to the health needs
of our communities.
We serve and care for all people
with fairness, respect and compassion.

As a member of the Holy Cross Health System
we dedicate ourselves to
Fidelity, Excellence, Empowerment and Stewardship
by living the values of
Dignity of Persons, Service to Others,
Social Justice for All.

Faithful to the spirit of the
Congregation of the Sisters of the Holy Cross
both the Holy Cross Health System
and the Mount Carmel Health System
exist to witness Christ's love through excellence in the
delivery of health services
motivated by respect for those we serve.
While stewarding our resources, we foster a climate
that empowers those who serve with us.

INTRODUCTION AND OVERVIEW OF THE MOUNT CARMEL HEALTH SYSTEM SAFETY AND SECURITY DEPARTMENT

Mission Statement

Safety and Security is a team of dedicated individuals working together to provide a safe and secure environment by providing high quality life safety, personal and property protection services.

We achieve timely, cost effective results through the collective knowledge, talents, and skills of Associates working together for the benefit of those we serve.

Simply stated, we:

- ☆ work as a team,
- ☆ strive for excellence,
- ☆ are on time,
- ☆ are within budget,
- ☆ enjoy our work and each other.

REQUIREMENTS

- Annual TB Test See Associate Health Services
- Annual Safety Education Training (HealthStream)
- Annual OPOTA FIREARMS Recertification
- Good written and verbal skills
- Computer Skills Windows and Microsoft Office
 Demonstrates the Use of the Mouse
 Demonstrates the use of the Keyboard
 Demonstrates the use of the Registrar

SECURITY OFFICER ORIENTATION WEEKLY PROGRESS

Week One:	Day one: System Orientation
	Day two: Introduction to Employees 1/
	Review Job Description
	Review Supervisor/Take Charge
	Responsibilities
	Department Goals and Objectives
	Organizational Chart
	Campus Tour V
	Work Schedule/Post/Assignments/Overtime
	Meals and Breaks
	PLT/DIS/LOA's
	Clocking In/Absenteeism/Tardiness
	Dress Code
	Day three: Department Resources and Manuals /
	Review H.R. Policies and Procedures
	Emergency Operations Manuals
Week Two:	Safety Management
Week Three	Security Management and Emergency Preparedness
and Four:	Management
Week Five and Six:	Hazardous Materials Management
Week Seven and Eight:	Life Safety Management

GENERAL ORIENTATION CHECKLIST

ITEM	RESPONSIBLE PERSON	TIME FRAME	DATE COMPLETED	
Home Address & Telephone No.	Employee	Day 1	8/18/20	
Uniforms/Equipment	Supervisor	Day 1	8 18 70	
Shift Assignment	Supervisor	Day 1	8 (18/20	
E-Mail Address	Supervisor	Week 1	0 18/10	
Review Progressive Counseling Policy	Supervisor	Week 1	2/8/20	
Confidentiality Policy	Supervisor	Week 1		
Joint Commission/Life Safety/OSHA Regulations	Supervisor	Week 3		
Hospital Paging System	Supervisor	Week 1		
Complaints against Security Officers	Supervisor	Week 1		
Department Policies and Procedures	Supervisor	Week 1		
Department Forms/Pass-On Log	Supervisor	Week 1		
Productivity Data/ Dispatch Log	Supervisor	Week 1		

SECURITY OFFICER

	Reviews Pertinent Information		Performs With Assistance		Performs Independently	
	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials
SAFETY MANAGEMENT						
Describes AMA Patients		n 6/18/21		0/1/1/10		
Describes Pink Slipped Patients		MB/10/2		188/1/10		
Demonstrates Camera Center Operations		129/10/20		1/28/21/20		
Describes Correction of Hazardous		ar.		11/1/1/1/		
Conditions		10/10/10		arghin		
Demonstrates Detainment/Restraint of Patients		1/10/18/6		14/1/10		
Describes Elevator Locations &		In alia		- 1		
Operations		1.4110/18/18		12/2/20		
Demonstrates Heliport Lighting/Traffic Control		1/2/19/18				
Describes and Demonstrates Infectious Control/Universal Precautions		9/18/10		1/2/21/20		
Conducts Safety Inspections		9/18/14/2		- 1		
SECURITY MANAGEMENT		/		,-	1	
Demonstrates 10 codes / Two-Way Radio Communications		Palieho		98/11/10		
Describes Areas Unauthorized		9/10/10/20		128/21/20		
Demonstrates Vehicle Operations		91 6/16/20		028/11/20		
Demonstrates writing Departmental Forms / Pass-On Book		9/18/12		100/11/2		
Demonstrates and describes Door Lock / Unlock Schedules		10/18/20		16/11/10		
Demonstrates Identification / Package Checks		18/19/20		28/1/10		
Demonstrates and describes Visitation Policy		9/18/10		1 18/1/po		

SECURITY OFFICER

	Reviews Pertinent Information		Performs With Assistance		Performs Independently	
	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials
Demonstrates Numerical Keypads /		119/14/2		1/2/20/20		
Codes / Use of		Cholle		ו לו ו		
Demonstrates Lost and Found		1/10/19/21		11/8/30/10		
Describes Matrix System / Card Access		Meglato				
Demonstrates Money / Protective		101		11.110		
Escorts		16/19/20		1/3/20/20		
Demonstrates and describes Off Property Duties / Alarms		9 19/10		3/20/20		
Demonstrates and describes Parking Enforcement		2/19/21		2/20/21		
Demonstrates and describes Patient Valuables Policy / Procedure		8/19/20		16/30/20		
Demonstrates Patrols / Interior / Exterior / Emergency Room		1/0/19/10		9/30/20		
Demonstrates Defensive Tactics and ASP and OC Training		Afolials				
Describes Removal of Belligerent / Combative Visitors, Patients, or Associates		98/19/20		8/30/20		
Demonstrates Safety / Security Vehicle Procedures		1/8/19/200		18/30/20		
Demonstrates Signing on Computers / Work Orders		9/2/19/10		12/20/20		
LIFE SAFETY MANAGEMENT						
Conducts Construction Safety				110		
Inspection (ILSM Forms)				1/0/20/20		
Completes Construction Safety				0.8		
Evolution Form (ILSM)				St 0/30/1°		
Describes Electrical Safety				11 8 3010		
Conducts Fire Drills				124/30/20		
Completes Drill Evaluation Form				128/30/1-		

	Reviews Pertinent Information		Performs With Assistance		Performs Independently	
	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials	Orientee Date & Initials	Preceptor Date & Initials
Describes Fire Hazards	ALT			1/2/30/20		
Describes types of Fire Extinguishers				16/3/20		
Describes types of fires				100/20/10		
Describes Fire Response Team				9/10/3/10		
Demonstrates inspection of Fire Extinguishers & Locations				10/20/11		
Describes locations of Fire System Pull-Boxes				1/2/20/10		
Describes location of Mechanical Rooms & Airhandlers				16/20/20		
Describes Simplex Fire Alarm System				10/30/20		
Describes Safety and Security Fire Plan				1/2/30/20		
Demonstrates Safety / Security Intervention Regarding Patients				18/20/20		
HARARDOUS MATERIALS MANAGEMENT						
Demonstrates and Describe Hazmat Suit / Location				8/20/30		
Describes SDS Manuals				930/20 90		
Demonstrates Use of SDS				2/30/20/12		
Describes Mercury & Chemotherapy Spills				8/30/20/P		
Describes Personal Protective Equipment				8/30/20		



THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that

has completed the Ohio
Private Security Firearms Training Program

Conducted by

AimHi Private Security Academy

Awarded On Nevember 24, 2019

Vernon P Stanforth Champerson
Ohso Peace Officer Training Commission

Dave Xost Attorney General

642151 A PSB19-497 REQUALIFICATION DUE BY 5/24/2021



Dwight A Holyamb, Executive Director
Ohto Peace Officer Training Commission

School Compander

This correspond alone does not authorize you to work as a security guard or private investigator. For licensing requirements contact the Chio Department of Public Safety/Private Investigator Security Cound Services or visit http://psigs.ukho.gov/

Education





SAVE A LIFE

AMERICAN COLLEGE OF SURGEONS COMMITTEE ON TRAUMA

Recognizes



Presented on 2-2-2021

STOP THE BLEED® Course , by Taman West AN

STOP THE BLEED® is a registered trademark of the US Department of Defense.



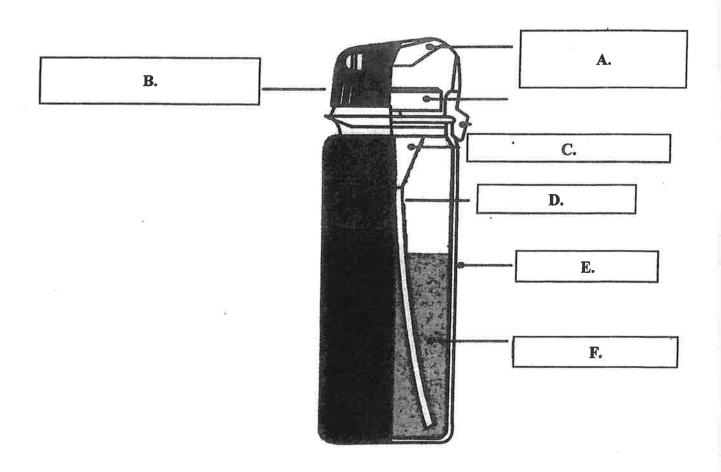




100+years

Inspiring Quality: Highest Standards, Better Outcomes AMERICAN COLLEGE OF SURGEONS

8.)	Wha	at is the second step in the decontamination process?
	A.	Spray them again
	B.	Tell them to stop crying like a baby
1 200	(C.)	Offer verbal rapport to the subject
9.)		it is the third step of the decontamination process?
	A.B.	Expose subject to fresh air
		Throw the subject a bottle of water
	C.	Stand there and record them with your cellphone
10.)	Wha	it is the best way to flush the eyes?
	A.	Using milk
•	B.	Rubbing eyes continually
	(C,)	Water
11.)		t type of agent is OC?
	A.	Glue
	B.	Cleaning Fluid
	C .	Inflammatory
12.)	Wha	t is the main ingredient of OC?
	A.	Water
	B.	Cayenne Pepper
	C.	Powder
13.)		CMS (Center for Medicaid/Medicare System) guidelines allow for
	OC to	o be used on a PATIENT?
	A.	Yes
	B	No
	C.	Only if they deserve it.
14.)	List t	he nomenclature of a canister of OC
	A.	Plip too Safety
	В.	Nozzle
	C.	Value
	D.	Diptube
	E.	Canister
	F.	Active agent



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200

1.0



Box 1794 Appleton, WI 54912 (920) 735-6242 Fax (920) 735-6245 asp-usa.com

ASP Basic Certification (ABC) EXPANDABLE BATON TRAINING

Information Sheet

			Date 9/4/2030
	☑ Initial Certification	☐ Recertification	
F	First Name	Last Name_	
	lome Address	Last Henrio_	
(City Lithopolis	State OH Province	7in 42136
1	elephone	E-mail Address_	
E	Employing Agency mount Carme	1	W. S. J. W. Z. J. J.
A	Igency Address Son South Cl		
		State OH Province	Zin 4301/
A	agency Telephone ()	E-mail Address	
D	Outy Status:	d Duty	
		ne use of the ASP Baton?	
Н	low many officers are in your agency?	Age 3 Date of Birth /3	
Н	leight Weight _/&c	Age 3 C Date of Birth //	109/1904
Н	ave you been exercising? U2	shlama? #//o	
D	o you have any knee, back or health pro	blems?No	
A	re you on any medication? Ye C		
	Phone (Alternate ()	
3r	riefly describe any health problems:		Injury Check: ゴA ゴ
		WAIVER	
	Rales	use from Liability and Assumption of Risk Agreement	
			Make the second second second second
	ever discharge Armament Systems and Proced d assigns, of and from any and all claims, dema y and all known and unknown, foreseen and unit ASP Expandable Baton certification training activ 2) In signing this Release, I assert that (a) I and physical and mental health; (c) I am fully awar	am presently in good physical and mental health; (b) e of, and do acknowledge and assume all risk of injur	neirs, executors, administrators, successor and nature, arising from, and by reason ces thereof, suffered by me during any au i have no reason to believe that I am not
u	ninar; (d) I have read and fully understand the ter	The second of th	
er	This program is competency based		

ASP Basic Certification

WRITTEN EXAMINATION



- 1. A defensive tactic is evaluated by it's ability to:
 - Control v Injure ()
 - Maim v Destroy b.
 - c. Threaten v Control
 - d. React v Act
 - e. Demonstrate the Officers skill
- 2. The primary striking surface of an open ASP Baton is the:
 - a. Cap
 - Ь. Center of the shaft
 - C. Last 3" of the baton
 - First joint
 - Handle e.
- 3. The hand using the service firearm is the:
 - a. Weak hand
 - Contact hand b.
 - Weapon hand
 - d. Reaction hand
 - e. Support hand
- 4. The ASP baton should not be opened:
 - a. To the sky
 - b. To the ground
 - During a strike
 - To the side
 - e. Towards the threat
- 5. The two baton modes are:
 - (a.) Open and Closed
 - b. Interview and Combat
 - Weapon and Reaction
 - Concealed and Loaded
 - e. Ready and Extended
- 6. Which is not an ASP target area:
 - a. Center mass of the arms
 - b. Center mass of the legs
 - Center mass of the body
 - Groin or Sternum
 - e. The Weapon Delivery System
- 7. Targeting specific points violates which training principle:
 - a. Forgiving techniques
 - Fine motor skills
 - Spaced practice
 - Static training
 - Complex techniques

- 8. The ASP baton is always carried:
 - a. On the right side
 - b. In the front
 - On the reaction side
 - d. Tip down
 - e. Left side
- 9. The Reaction Strike is primarily a:
 - a. Strong strike
 - b. Closed strike
 - C Clearance strike
 - d. Offensive strike
 - initial strike
- 10. The most frequently used ASP strike is the:
 - Reaction strike
 - **b** Weapon strike
 - Straight strike
 - Clearance strike
 - Reverse strike
- 11. When performing an Open Straight Strike, the Reaction Hand is:
 - a. Palm up on the shaft
 - b. Maintaining distance
 - Guarding the face
 - d. Palm down gripping the shaft
 - e. Executing a downward block
- 12. If the baton opens too easily:
 - Make the retaining clip smaller a.
 - b. Replace the o-ring
 - (c.) Widen the retaining clip
 - Remove the retaining clip
 - e. Lubricate the baton
- 13. The most common problem in opening the baton is:
 - a. Grip of the baton
 - Loose o-ring
 - Broken retaining clip
 - Operator error
 - e. Loose handle cap
- 14. Special Circumstances include:
 - Age a.
 - b. Size
 - C. Weapon proximity
 - d. Skill level
 - e. Mutiple Officers

	4P AGRAM - ALL STOR
	15. ASP Weapon Side Strikes are intended to be
•	performed at a:
	a.) 45 degree angle
	b. 180 degree angle
	c. Horizontal angle
	d. 90 degree angle
	e. Vertical angle
	16. When striking the ASP Baton is gripped with:
	a. The Index finger and thumb
	b. A loose flexible grip
	c. Two fingers and the thumb
	d: Full hand grip
	e. Both hands
	17. Officer/Subject factors include:
	a. Special knowledge
	b. Imminent danger
	c. Injury or exhaustion
	d. Size
	e. Officer on the ground
	18. If the subject compiles, the Officer doesn't not
	advance/strike
	True
	b. False
	19. The ASP Baton is designed to be
	a. An offensive weapon
	b. A comealong device
	A defensive weapon
	d. A deadly force option
	e. A restraining device
	20. The principle goal of any arrest or physical
	confrontation is:
	a Establishing control
	b. Superior Officer skill
	c. Subject safety
	e. Punishment

MAN TO THE P

Graded By		
ASP Written	Exam) pass	Fail
Instructor:	(Mul Taylor)	B-41764
Date:	14/2020	

Baton Basic Certification

TECHNIQUE PROFICIENCY CHECKLIST

1)	Check:	Pass:	Fail:	
2)	Redirection:	Pass: 🔽	Fail:	
3)	Closed Mode Weapon Strike	Pass: 🖊	Fall:	
4)	Closed Mode Reaction Strike	Pass: 🔟	Fail:	
5)	Closed Mode Straight Strike	Pass: 🗸	Fail:	
6)	Opening the Baton	Pass: 🖊	Fail:	
7)	Open Mode Weapon Strike	Pass: 🔽	Fail:	
8)	Open Mode Reaction Strike	Pass: 🔽	Fail:	
9)	Open Mode Straight Strike	Pass: 🗸	Fail:	
10)	Closing the Baton	Pass: 📈	Fail:	
TECHNI	QUE PROFICIENCY	PASS:	FAIL:	
COUNSI	ELED:	·		
CERTIFICATION APPROYED:		CERTIFICATION DENIED:		
INSTRU	CTOR: / MM Taylor	15-41764		
DATE:	9/4/2020	•		

9/4/20

DT Training Scenarios

1. Patient Wanding – Patient arrives at the hospital via private transport. Patient checks in stating "I do not wish to live anymore" and is immediately taken to the triage area for further evaluation. Patient is carrying a small bag and has on street clothes. Charge RN contacts Safety and Security regarding wanding the patient due to the statements made by the patient. Verbalize response and next steps prior to intervention with patient.

PASS / FAIL

- 2. Code Violet Security is called STAT to ER for verbally aggressive patient. While responding to STAT call, Security hears "Code Violet ER #9" paged overhead. Security arrives to find staff attempting to hold patient down in bed. Patient is making verbal threats while trying to bite, spit, kick, and punch at staff who are attempting to control patient. Verbalize response to code violet and further information needed before scenario resumes.
 PASS/ FAIL
- 3. Restraint Security is responding to call for service on in-patient unit. Not much information is given prior to responding. Upon arrival Security witnesses several staff members attempting to keep confused patient in bed. Patient is flailing his arms and legs attempting to "escape" from the hospital. Patient recognizes Security as law enforcement and begins to focus on officers. Patient is begging Security to take him with them because he is not safe around nursing staff. Verbalize response and de-escalation efforts needed before scenario resumes. Obtain additional information as needed.

DT Training Scenarios

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4. Pink Slip – Security responding to disturbance in ER. Upon arrival Security intercepts patient attempting to leave the hospital. Staff is stating that the patient cannot leave. What is the response by Security at that exact moment? Patient becomes verbally aggressive with Security stating "you cannot hold me!" Verbalize efforts to get the patient back to his room and information needed to make appropriate decisions during the incident. What factors are important to consider? Resume scenario...

PASS / FAIL

5. Suspicious Person – Security receives a call from a visitor stating that they have observed a vehicle on campus that appears to be occupied sitting at the edge of property near connex boxes that contain contractor tools and equipment. This box has already been broken into previously and several thousands of dollars in equipment was stolen. Describe steps taken when dispatched and actions on-scene. Start scenario...

PASS / FAIL

6. Domestic Situation – Security responding to a disturbance in Maternity unit. Upon arrival security speaks with RN who advises that she has heard yelling and screaming coming from inside the room. She further advises that the only people inside the room are the patient and the father of the baby. Security responds to the room and finds patient in tears stating that she has been physically assaulted by the male party. Male party states that is not leaving his baby! Start scenario...

7. Elopement – Security receives frantic call from ER staff stating that the patient in ER #9 is running out the squad bay doors. Security responds and sees patient attempting to run off property. Describe steps taken and ask for any additional information needed at that time. Security catches up to patient just before he leaves property but are unable to stop and hold at that point. Describe next steps needed at that time. Begin scenario....

PASS / FAIL

8. Security is advised of a juvenile patient who arrived at the hospital due to an overdose. Patient took multiple prescription pills as an attempt to end her life. She had made comments that she does not wish to live anymore and wants the pain to go away. Patient's parents show up to the hospital and demand to be reunited with their daughter immediately. Mom makes the statement that she has not given MCHS consent to treat her daughter and will not be cooperating with staff requests. Urine test completed by daughter with mother inside the bathroom. Results of urine show that urine has been diluted with water and mother states that MCHS will never get an accurate urine sample from the patient. Physician responds to the room and advises that discharge of the patient is dependent on blood lab results. Parents consent to the blood draw which shows serious medical concerns and patient is pink slipped for medical conditions and is being transferred to Nationwide Children's Hospital for further evaluation. Mother makes the statement that she will not allow the hospital to put her daughter in a purple gown because she knows what it represents...GO!

9. GSW – Security is sitting post in ER lobby when GSW arrives via private vehicle. Two individuals carry the GSW into the ER lobby and drop him near the entrance. Both individuals flee the ER to their vehicle (Late model Infinity SUV, black with orange wheels with orange Infinity logo on each side). Patient has been shot in the chest. Gather additional information and advise response. Action...

PASS / FAIL

10. Property Search/Overdose - Security called to in-patient room for suspicion of patient using drugs in the room. Upon arrival security speaks with physician who advises that she has spoken with the patient on two occasions today. The first time he was alert and oriented and even energetic. The second time he appeared lethargic and completely out of it, he was having trouble finishing sentences without falling asleep. None of the medications he is receiving would cause the change in behavior. The patient also has a history of IV drug abuse and admitted to using drugs 3 days prior to admission into the hospital. He is there for an abscess that is infected on his arm that he needs to receive surgery for. Please provide steps needed to perform search and explain how these are communicated to the patient. Also state any notifications that are made and any witnesses to the search. Begin...

PASS FAIL

11. Discharged Patient – Security called to ER because discharged patient is refusing to leave the room. Patient states that he is not ready to leave because staff and the doctor has not addressed his concerns. Patient is being passive aggressive with staff and stating that he will not leave until he has had an opportunity to speak with the doctor about his care. Ask any additional questions as appropriate and determine your strategy for his removal from the room. Scenario resumes when ready...

12. Criminal Trespass – Security called to suspicious visitor who was found sleeping in an empty patient room by staff on the unit. Security speaks with visitor upon arrival, but visitor refuses to identify himself to security. He further states that he is homeless, and he needs to be seen because he is having suicidal thoughts. Officer evaluates the situation and determines course of action...Play scenario

PASS / FAIL

Patient checks in to ER for psychiatric evaluation. Case Management and doctor both evaluate patient and determine that he is not suicidal. Patient is discharged from the ER but again refusing to leave...resume scenario PAS\$ / FAIL

* 3- x 7.4 7. 9



A MEMBER OF 🍪 TRINITY HEALTH

Safety and Security Defensive Tactics / OC Repellant / ASP Baton Competency Form

Students Name (print):		
I.D. Number:		
Date: 9/4/2020		
Campus:		
1. Escort Position	Pass	Fai
2. Balance Displacement		
a. At the shoulder	6	gar
b. Friction on the back	Pass	Fail
c. At the hip	Pass	Fail Fail
3. Handcuffing	_	
a. Standing/Prone Position	Page	Fail
b. Removing Handcuffs	Pass	Fail
4. Armbars/Wristlocks		
a. Transport Wristlock	Pass	F-il
b. Transport Wristlock Takedown to Handcuffs	Pass	Fail Fail
c. Straight Arm bar	Dags	ran Fail
d. Straight Arm bar Takedown to Handcuffs	Pass	Fail
5. Weapon Retention Drills		
a. Holstered	Pass	Fail
b. Un-holstered	Page	Fail
c. Stripping Weapon from Subject	Pass	Fail
6. Oleoresin Capsicum (OC)	_	
a. Nomenclature	Pass	Fail
b. Spray Patterns	(ass	Ган
i. Balance/Movement/Verbal Commands/Control	Pass	Fail
ii. Up/Down	Pass	Fail
iii. Side to Side	Pass	Fail
iv. Circular	Pass	Fail
c. Decon Process	Pass	Fail

7. ASP Baton			
a. Balance/Movement/Verbalization/Technique/Targeting	Pass	Fail	
b. Ready Position	Pass	Fail	
c. Closed Mode Weapon Strike	Pass	Fail	
d. Closed Mode Reaction Strike	Pass	Fail	
e. Closed Mode Straight Strike	Pass	Fail	
f. Closed Mode Weapon/Reaction/Straight Strike	Pass	Fail	
g. Opening the ASP Baton	Pass	Fail	
h. Open Mode Weapon Strike	Pass	Fail	
i. Open Mode Reaction Strike	Pass	Fail	
j. Open Mode Straight Strike	Pass	Fail	
k. Open Mode Weapon/Reaction/Straight Strike	Pass	Fail	
I. Closing the ASP Baton/Transitioning to baton holster	1	Fail	
m. Emergency Open Strike/Closing baton/holster	Pass	Fail	
and a series of the series of	rass	rali	
**If an Officer cannot close their baton, a recommendation need	s to be fo	rwarded to #	hoir
Supervisor that an ASP Talon baton be issued to that Officer**	10 10 10	rwarded to g	1611
8. Scenario Based Training			
a. Patient Wanding	Pass	Fail	
b. Code Violet	Pass	Fail	
c. Patient Restraint	Pass	Fail	
d. Combative Patient Restraint	Pass	Fail	
e. Pink Slip Patient	Pass	Fail	
f. Suspicious Person(s)	Pass	Fail	
g. Domestic Dispute	Pass	Fail	
h. Elopement	Pass	Fail	
i. Juvenile Patient Elopement via Parent/Guardian	Pass	Fail	
j. GSW Patient	Pass)	Fail	
k. Property Search	Pass	Fail	
I. Discharged Patient Refusing to Leave	Pass	Fail	
m. Criminal Trespass	Pass	Fail	
Grading Scale: Passing = performs w/out prompting Failed = needs prompting / repeated instruction, or c	annot perfoi	rm task	
	-		
Student Signature and ID Number:			
Illi, Ital.	-		
Instructors Signature and ID Number:	27326	7	
Charle 1			

Instructors Signature and ID Number:_____

Aug. 19, 2020

MOUNT CARMEL HEALTH SAFETY AND SECURITY Policy

SUBJECT: Use of Force

PURPOSE

To provide guidelines for Security Officers in using force to control hostile persons and to provide guidelines for the use of defensive weapons.

POLICY

Security Officers must be prepared to perform assigned duties at all times. When using force to control a subject or to overcome resistance, the force must be based on the actions and behavior of the subject and be reasonable for the situation. The level of force used must be balanced against the likelihood of injury to the subject and/or officer.

The Safety and Security Department will use the USE OF FORCE CONTINUUM as a guide when dealing with an uncooperative subject. The USE OF FORCE CONTINUUM is a general guideline to be used in subject control and officer defense. Since confrontation is dynamic and is often unpredictable, an officer may be forced to escalate, de-escalate, or go from minimum to maximum use of force without resorting to each intermediate step. The Department's Use of Force Continuum is designed to aid and assist officers in the decision-making process.

Use of Force continuum and training in defensive weapons will take place within the first 90 days of employment for Safety & Security Officers and annual thereafter. Competencies/methodology of training will be tracked. Safety & Security will provide training on OC repellent, ASP Expandable Baton, and Defensive Tactics annually. In addition, Security Officers will have initial 20-hour security firearms training authorized by the State of Ohio and annual re-qualifications thereafter.

USE OF FORCE CONTINUUM

- Physical Presence of the Officer
- 2. Issuance of Verbal and Physical Directions or Commands
 - a. To direct subject
 - b. To inform bystanders
 - c. To create a voice stunning value
 - d. To calm subject
- 3. Empty Hand Control
 - a. Soft
 - 1. Assistance from other officers
 - 2. Escort Position

- b. Hard Defensive Tactics
 - 1. Joint Manipulations or pressure points, takedowns,
 - 2. Handcuffing

Mar & Parks

Use of Non-Lethal Defensive Weapons

A. OC Repellent-Chemical

- 1. The OC repellent is a liquid or foam irritant. It requires direct application to the subject's face to be effective.
- 2. The application of the agent should be made ideally from a range of 6-12 feet. This distance also provides safety for the officer. If the agent is applied at a closer range it may affect the officer. When spraying the subject, the spray should be directed at the eyes for maximum effect. If the subject is wearing glasses spray at the top of the glasses and allow the agent to splash into the eyes. The agent should take full effect in 2-5 seconds.
- 3. Officers using the agent should not touch their face until they have had the opportunity to wash their hands with soap and water.
 - After spraying a person, afford that person an opportunity to wash the contaminated areas and remove any saturated clothing. The most effective antidote is a large amount of air. The subject should be taken to the Emergency Department to be checked.
 - if the agent is used in an enclosed area, such as a small room or vehicle, open all windows and allow the area to ventilate.
- 4. The OC agent should only be used when a physical confrontation is occurring or is about to occur.

B. Canine (K9)

If a perpetrator becomes violent and physically assaulting by way of non-deadly measures, K9s can be deployed to get the perpetrator(s) under control to prevent bodily harm/physical assault.

The second

C. Expandable Baton

- The expandable baton is to be primarily used as a defensive weapon. Striking a person with the baton is justified when an officer is:
 - a. Protecting him/herself or another from assault
 - Attempting to stop an individual's aggression or to overcome resistance or violent behavior where lessor means of physical force are ineffective.
- The primary target areas for applying non-lethal force with the baton are the large muscle groups or bones. Light strikes to these areas will cause pain and minor bruising, although such a strike can potentially disable an assailant and bring the attack to an abrupt halt.
- 3. It is important to avoid striking the head, temple, throat, and the back of the neck. Even light strikes or pressure these areas could inflict serious or possibly fatal injuries.
- 4. If an officer strikes a person with the baton that person will be taken to the Emergency department to be checked.

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Lethal/Deadly Force

Firearms

Select officers/ supervisors carry firearms and the use of firearms on a person is considered lethal and deadly force. The use of deadly force will be in accordance with Ohio State Laws (ORC) – and will only be used on a perpetrator for the protection of life from substantial risk of death or serious bodily injury to self or others. Officers/supervisors that carry firearms have gone through the OPOTA Security Firearms training program and have met proficiency/competency and will re-qualify on an annual basis. Armed security must make sound judgment when using fire arms in the above circumstances, but be cognizant to their action as it relates to the potential of bullets hitting and wounding innocent bystanders. Firearms should not be discharged on moving vehicles unless it is a situation that is life-threatening. Only authorized department firearms will be used.

SPECIAL PROVISIONS

Anytime that an officer uses the OC repellant, K9, baton, handcuffs, or firearm on any individual an Incident Report will be completed by the Officer's Supervisor/In Charge Officer. Local Law Enforcement Agency will also be contacted for possible charges on subject that OC repellant, K9, handcuffs, baton, firearm was used on. This report will be forwarded to the Regional System Manager of the Safety and Security Department. All Use of Force Incidents will be investigated by the Defensive Tactics Instructors.

Raviewed 09-2011 Revised 12/2012 Reviewed 08/2014 Reviewed 08/2016 Revised 11/2016, 12/2016 Firearms effective: 2///17

DEFINITIONS:

- 1. Active Resistance Behavior that consists of non-threatening physical opposition to being controlled.
- Assaultive Behavior Aggressive physical opposition directed towards the officer or others by a subject. Assaultive behavior can be either an actual attack, or threat of attack conveyed through body language and assaultive verbalization.
- 3. Controlling Force Usually the minimal amount of physical force needed to control a subject who will not submit to verbal commands. Generally, this level of force involves the application of pain without injury. Controls techniques are used to encouraged a subject to go in a desired direction, and usually are applied to subjects that are either passively or actively resisting the officer's attempt to control them.
- 4. Deadly/Lethal Force Any force which carries a substantial risk that it will proximately result in the death or serious bodily injury of any person.
- Reasonable Belief That belief by an officer, acting on personal knowledge of facts and circumstances which are reasonably trustworthy, that would justify a person of average caution to believe that a crime has been or is being committed. Similar to the probable cause standard.
- 6. Reasonable Force Force that will likely lead to a safe control of the subject. If a lesser force would likely lead to safe control the lesser force should be used.
- 7. Serious Physical Injury Injuries being inflicted or about to be inflected which could cause the death of any person.

MOUNT CARMEL

Aug. 19, 2020

POLICY/PROCEDURE

SUBJECT: INVOLUNTARY HOLD FOR MEDICAL EVALUATION

DEPARTMENT OVERSIGHT & MAINTENANCE: Emergency Department (ED)

POLICY:

Mount Carmel Health System has the duty to exercise reasonable care for the safety of its patients and may, under certain circumstances, have a duty to protect third parties from harm that could be caused by patients leaving the Hospital. Holding a patient who lacks decisional capacity in the Hospital may be the most appropriate option.

RESPONSIBLE PERSONS: ED Physicians, ED Registered Nurses (RNs), Licensed Independent Provider (LIP) - Physician Assistant (PA), Advanced Practice Registered Nurse (APRN)

PROCEDURE:

1. The ED physician shall determine if there is reason to believe that the person (a) represents a substantial risk of physical harm to self or others if allowed to remain at liberty pending examination and (b) is a mentally III person who, because of the person's illness:

a. Represents a substantial risk of physical harm to self as manifested by evidence of

threats of, or attempts at, suicide or serious self-inflicted bodily harm;

b. Represents a substantial risk of physical harm to others as manifested by evidence of recent homicidal or other violent behavior, evidence of recent threats that place another in reasonable fear of violent behavior and serious physical harm, or other evidence of present dangerousness;

c. Represents a substantial and immediate risk of serious physical impairment or injury to self as manifested by evidence that the person is unable to provide for and is not providing for the person's basic physical needs because of the person's mental illness and that appropriate provision for those needs cannot be made immediately available in the community; or

d. Would benefit from treatment for the person's mental illness and is in need of such treatment as manifested by evidence of behavior that creates a grave and imminent

risk to substantial rights of others or the person.

if the person meets these criteria, the physician may order that the person be held involuntarily pursuant to Ohio Revised Code 5122.10.

- 2. If the person does not meet the criteria listed in section 1 above, and has decisional capacity, the person may refuse treatment or refuse to remain at the Hospital. If by leaving the person is leaving against medical advice, follow the Administrative policy/procedure A.M.A (Against Medical Advice) Discharges/Eloped/Missing Adult Patient.
- 3. If the person does not meet the criteria listed in section 1 above, and does NOT have decisional capacity, but is seeking to leave the Hospital against medical advice, the following procedure shall be followed:
 - a. Attempt to get the person to agree voluntarily to remain at the Hospital. Explain the risks to the person if he or she leaves.

MOUNT CARMEL POLICY/PROCEDURE

SUBJECT: INVOLUNTARY HOLD FOR MEDICAL EVALUATION

- b. Attempt to contact the person's legal representative or a family member to have that person assist with convincing the person to remain at the Hospital or to provide a safe method for the person to leave the Hospital (when discharge to care of family is appropriate).
- c. If the less restrictive methods listed in section 3(a) and 3(b) are unsuccessful, the attending or treating physician may issue an order to hold the person at the hospital involuntarily for medical evaluation. This may be ordered only if the physician believes in good falth and in the exercise of his or her professional judgment that person would pose a substantial risk of harm to himself/herself or others if permitted to leave the hospital. In this case the following are required:

i. The reason for the order shall be explained to the patient.

ii. The ordering physician shall document the order and an explanation for why the order was necessary, including the risk(s) to the patient if the patient were to leave the Hospital, in the medical record.

iii. The patient must be held in the less restrictive manner possible and in accordance with the Restraint/Seclusion Use Policy if applicable.

iv. The person must be released as soon as safely possible once the physician has determined that decision making capacity exists.

REFERENCES

Administrative Policy/Procedure A.M.A (Against Medical Advice) Discharges/Eloped/Missing Adult Patient.

Ohio Revised Code 5122.10

DEVELOPED BY: Patient Safety/Risk Management Department ORIGINAL DATE: 3/18

REVIEW/REVISION DATE:

REVIEWED BY:

Mount Carmel Health System Legal Services 2/2018 Emergency Department System Collaborative 2/2/18

REVIEWED AND APPROVED BY:

Joni Lutman, MSN, APRN-C, MCHS Regional Director of Nursing Practice and Innovation Date: 3/22/18

Gina Matthias, MSA, BSN, RN Director Patient Care Services MCNA Date: 3/12/18

Rachel Wright, MBA, BSN, RN, CCRN Director of Nursing Practice and Performance Date: 3/9/18

MOUNT CARMEL POLICY/PROCEDURE

SUBJECT: INVOLUNTARY HOLD FOR MEDICAL EVALUATION

APPROVAL FOR IMPLEMENTATION BY:

Linda Breedlove MBA, BSN, RN, NEA-BC, FACHE Vice President of Patient Care Services and Chief Nursing Officer. MCE

Date: 3/23/18

· e ·

Dina Bush, MHA, BSN, RN Vice President of Patient Care Services and Chief Nursing Officer MCW

Date: 3/22/18

Donald LaFollette, MBA, BSN, RN Vice President of Patient Care Services and Chief Nursing Officer MCSA

Date: 3/30/18

Susan Schultz, MSN, BSN, RN, FACHE RN Vice President of Patient Care Services and Chief Nursing Officer MCNA

Date: 3/23/18

Instructor Copy
Aug. 19, 2020

Oleoresin Capsicum

HISTORY

The first use of pepper as a defensive or offensive weapon dates back to approximately 2000 BC during the wars between India and China.

The first use of <u>OLEORESIN CAPSICUM</u> as a weapon was 1540 by the Aztec Indians against the Spanish. A field of peppers was burned to create an irritant smoke cloud to stop the Spanish invaders.

In 1930, the U.S. military developed an <u>OLEORESIN CAPSICUM (OC)</u> compound, but found no effective method of delivery suitable for military use.

In 1974, the first commercial <u>OC</u> product for law enforcement was developed.

In 1987, the Firearms Training Unit of the FBI began a study of OC with the intention of supplementing their CN/CS munitions. It concluded with the adoption of OC for use by their Special Agents in January 1990.

During the early 1990's Aerosol Companies throughout the US experienced a dramatic increase in the demand for OC aerosol projectors, attributes primarily to two factors:

1.) The high profile of the Rodney King incident and the concern over the public's perception of excessive force, which ultimately increased the need for alternative force options.

2.) The Law Enforcement community's awareness of blood borne pathogens, and the need to reduce the potential for exposure.

DEFINITIONS

Oleoresin: a mixture of an essential oil and resin found in nature.

<u>Capsicum</u>: any solanaceous plant of the genus capsicum, as C. Frutescent, the common pepper of the garden, occurring in many varieties that range from mild to hot, having pungent seeds, also ranging from mild to hot, enclosed in a podded or bell-shaped pericap.

Oleoresin Capsicum: oil of capsicum

Pungency: the heat or intensity of the pepper

<u>Capsaicinoids</u>: a group of compounds, naturally occurring within the fats, oils, and waxes of the pepper plant.

<u>Capsaicin</u>: the most prevalent of the seven compounds found within the Capsaicinoids and considered to be <u>the ACTIVE ingredient in OC</u>.

Scoville Heat Units (SHU): a measurement of heat as perceived from the burning sensation when peppers are placed on the tongue.

<u>Solvents</u>: a liquid substance capable of dissolving or dispersing one or more other substances.

Emulsifier: a substance that creates an emulsion, or a mixture of mutually insoluable liquids in which one is dispersed in droplets throughout the other-bonds two or more liquids together.

<u>Carrier</u>: the ingredient, or ingredients, other than the OC, which compromise the OC Formulation-carries the OC from the canister to the target.

<u>Propellant</u>: the gas or liquid, which pressurizes the canister and propels the carrier and agent to the target

WHAT IS OLEORESIN CAPSICUM AND HOW DOES IT WORK?

Oleoresin Capsicum (Pepper Spray) or OC, is derived from <u>Cayenne</u>
<u>Peppers</u>. Unlike Mace or Tear Gas, which are irritants, Pepper Spray (OC) is an <u>Inflammatory Agent</u>. Contact with mucous membranes (eyes, nose, throat, and lungs) causes immediate dilation of the capillaries. This can result in temporary blindness, and inflammation of the breathing tube tissue and systematically cut off all but life support breathing.

OC also will create an intense burning sensation on the surface of the skin. However, OC WILL NOT cause any lasting effects. The effects will last from <u>FIFTEEN MINUTES</u> TO <u>SIXTY MINUTES</u> in length or duration. However, depending on the individual, the effects may be lesser or greater depending on an individuals tolerance level.

Because <u>OC</u> is an <u>INFLAMMATORY AGENT</u> and not an irritant, it is effective on those who feel no pain such as psychotics and those under the influence of narcotics or alcohol.

When using your <u>OC</u> make sure you have a safe distance between you and the threat if at all possible. Aim the unit at the <u>FACIAL region</u> of the threat and release a <u>1-2 second burst from the unit</u>. After deploying your unit step away from the threat however, keeping visual contact on the threat.

OC like any other product will lose its strength over time. It is recommended that it be replaced every 3 to 4 years. The OC should be tested every 90 days to insure proper spray strength. This should be done outside with you being down wind to prevent self contamination.

Considerations for Deploying O.C.

Use of Force Continuum Considerations

- 1. Presence
- 2. Verbal
- 3. Soft Physical Techniques
- 4. Hard Physical Techniques
- 5. Deadly Force

Deploying Formula

- 1. Spray (One to Two second bursts)
- 2. Command
- 3. Evaluate
- 4. Control

Securing Subject(s)

- 1. After subject has been sprayed, secure into handcuffs.
- 2. Goal Oriented Subjects can still fight and attack an Officer even after being sprayed several times.
- 3. Nothing is failsafe! Always use caution.

CARRY POSITIONS

One Hand Carry:

Canister held in hand with the bottom of the canister over the Officer's front foot. Do not fully extend the arm holding the canister. Empty hand is positioned either with the fingertips lower than the cheekbone and forward of the nozzle or behind the nozzle, in either position do not extend the canister any further than 3-6 inches from the chest.

Advantage: Presents a dominant and authoritative appearance allowing for easy transitioning between weapons and provides a clearing or checking hand.

<u>Disadvantage</u>: The possibility exists that during the deployment of OC might contaminate the Officer's free hand.



Two Hand Conceal Carry/Front Position:

Officer assumes a good stable interview position, strong leg back, canister held in front and close to the body by either strong or weak hand. Both elbows above the Officer's duty belt, placing the free hand over the unit to conceal it from view, keeping the thumb off the actuator or on the safety cap. Primarily for the second responding Officer at the scene.

Advantage: Presents a professional appearance and a low profile approach for the Officer and will not alert other bystanders that the Officer is ready to deploy OC. Designated finger needs to be above the flip top safety to prevent accidental discharge.

The benefits of using the thumb are often favored as it allows the user to apply direct pressure downward on the actuator for quick and smooth release of the aerosol.

<u>Disadvantage</u>: Some thumbs may not be able to fit in the actuator housing to allow the Officer to safely discharge the unit.

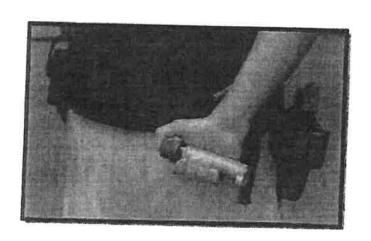


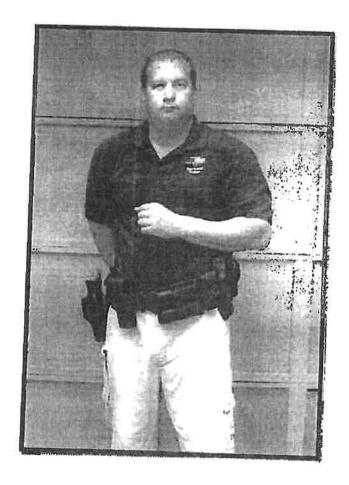
Low Profile/Rear Carry:

Canister held in hand with the arm extended downwards to the Officer's side, and the thumb is on top of the flip top safety.

Advantage: Presents a low profile, hiding the unit from immediate view, presenting a professional, but tactically ready position.

<u>Disadvantage</u>: If the subject attacks the Officer at the rear, subject may be able to grab the unit.





PROPER GRIP



- Fingers extended and joined
- Index finger below the nozzle guard
- Thumb on top of the flip top safety

PROPER GRIP



- Keep fingers extended and joined
- Thumb firmly on actuator
- Slow steady pressure directly down on the actuator

IMPROPER GRIP



DECONTAMINATION OF SUBJECTS

Step 1

Remove subject from contaminated area. (Physically)

Step 2

Verbal rapport advising subject of anticipated effects of the spray.

Step 3

Provide physical relief - Expose subject to fresh air and face into wind, have subject stay still, breathe normally and relax as much as possible.

Step 4

When a viable water source is available, have subject flush eyes (strobing, repeated opening/closing of the eyes) out with copious amounts of water.



Memorandum

To:

MCHS Colleagues, MCHS Medical Staff

From:

Nicholas Kreatsoulas, DO, Chief Clinical Officer, MCHS

Date:

March 26, 2020

Subject:

Enforcing Policy Regarding Facial Hair

Mount Carmel's current policy for colleagues calls for the removal of any facial hair that could impact the ability to pass a fit-test for an N-95 respirator mask. For the safety of our patients, visitors, colleagues, their families and our community, we will begin enforcing this policy immediately.

All staff who interact with patients must remove facial hair that could come into contact with a sealing surface of a respirator. Only those who are not permitted to shave due to religious beliefs are exempt.

We are enforcing this policy in an effort to conserve our inventory of PAPRs, which are used when an individual cannot be fit-tested for an N-95 respirator.

Mount Carmel's Respiratory Protection Plan is available in PolicyTech.

Aus-19", 2000

MOUNT CARMEL HEALTH SAFETY AND SECURITY Policy

SUBJECT: Detainment of Individuals

PURPOSE

To provide guidelines for the detention of persons on Mount Carmel Health property by Security Officers.

POLICY

There are three instances when a Security Officer may detain a person on Mount Carmel Health property. They are:

- 1. When there are reasonable grounds to believe that a person has committed a felony pursuant to section 2935.04 of the Ohio Revised Code.
- 2. When there is probable cause to believe that a person has unlawfully taken items offered for sale at a mercantile establishment pursuant to section 2935. 04.1 of the Ohio Revised Code.
- When a psychiatrist, licensed clinical psychologist, licensed physician, health
 officer designee has taken a person into custody and has reason to believe that
 the person is mentally ill pursuant to sections 5122.10 and 5122.01 of the Ohio
 Revised Code.

PROCEDURE

Security Officers in the detention of persons will follow the following procedures.

- A. Section 2935.04 ORC Detention of a person when a felony has been committed.
- Section 2935.04 of the Ohio Revised Code (ORC) allows any person to make an
 arrest without a warrant if there are reasonable grounds to believe that the person has
 committed a felony. In main an arrest under this section the Security Officer has two
 additional requirements:
 - a. Section 2935.07 ORC requires that the person making the arrest must, before making the arrest, inform that person of the intention to make the arrest and the cause of the arrest.

SUBJECT: Detainment of Individuals (Con't)

- Section 2935.06 ORC requires that the arrested person be delivered to a judge, clerk of courts, or an officer authorized to execute criminal warrants (law enforcement officer) without unnecessary delay.
- 2. Security Officers will follow the above sections of law in detaining a person that has committed a felony. The local police department will be called immediately to respond to the hospital. When the police officer arrives the Security Officer will brief the officer on the incident. The entire incident will be turned over to the local police department for investigation. The Security Officer will cooperate with the Police Department during the investigation. The Security Officer will be available to file charges and to testify in court if necessary.
- B. Section 2935.04.1 ORC Detention of a Shoplifter.
- 1.Section 2935.04.1(A) permits the agent of a merchant who has probable cause to believe that items have been taken from the merchant unlawfully. Probable cause is defined as reasonable grounds to believe that the person is guilty of the theft. Other sections that apply are:
 - a. Section 2935.04.1(D) prohibits the search of the person or to seize property belonging to the person without the person's consent.
 - b. Sections 2935.06 and 2935.07 ORC applies to this section of the ORC. The person must be told of the intention to arrest and must be delivered to an officer without unnecessary delay.
 - 1. When a Security Officer stops a suspected shoplifter there needs to be probable cause. This may be established by the Security Officer witnessing the crime or have a witness to the crime. The Security Officer will request that the local police department respond to the hospital. The Security Officer may ask the person for the merchandise that was taken. If the person refuses, the Security Officer will keep the person under surveillance until the police arrive. When the police arrive the incident will be turned over to them. The Security Officer will cooperate with the investigation. The Security Officer will be available to file charges and to testify in court if necessary.

C. Section 5122.10 ORC - Detention of mentally ill person.

 Section 5122.10 ORC permits the emergency/temporary detention of persons believed to be mentally ill by various licensed professionals. These professionals are psychiatrist, licensed clinical psychologist, licensed physician and health officers. Health officers are defined in section 5122.01(J) ORC as any public health physician, public health nurse, or other authorized or designated person.

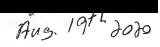
SUBJECT: Detainment of Individuals (Con't)

- a. The Emergency Department's Licensed Independent Social Worker (LISW) and Licensed Professional Clinical Counselor (LPCC) have been designated as "health officers" as referred to in section 5122.01(J).
- When a patient has been determined to be mentally ill by a person listed in section 5122.10 ORC and this person is attempting to leave the hospital, a Security Officer should be called immediately.
 - a. If the person is located on Mount Carmel property the Security Officer should attempt to persuade the person to return to the hospital. If the person refuses the Security Officer should restrain the person and return the person to the hospital.
 - b. If the person can not be located on Mount Carmel property the local police department will be notified. Once the person is located the police department should transport the person to a mental health facility.

SPECIAL PROVISIONS

- A. In all incidents the Security Officer will initiate an Incident Report. The Safety and Security Department should request either a "run number" or report number of the Police responding to the incident and include it with the Incident Report.
- B. Any use of force used to detain a person must be within the Safety and Security Department policy on Use of Force.
- C. The safety of visitors, patients, and employees must be considered in detaining persons by force. Should the situation present an unsafe condition the Security Officer should refrain from using force.

MOUNT CARMEL HEALTH SAFETY AND SECURITY Policy



SUBJECT: Use of Firearms by Security Personnel

PURPOSE

Policy to ensure the effective deployment, handling, and use of assigned or designated firearms by private Mount Carmel Armed Safety and Security Officers/Supervisors and are within legal parameters for the State of Ohio as well as in-line with the organization's mission, core values and guiding behaviors adhering to all safety rules and organizational policies, which includes the Mount Carmel Safety & Security Use of Force continuum. Firearms are deadly force weapons and would never be used unless there is an immediate threat to life or great bodily injury based on justification of deadly force as outline in the Ohio Revised Code (ORC). No Armed Safety and Security Officer/Supervisor will ever use a firearm without legal justification and the appropriate training and competency. Mount Carmel Armed Safety and Security Officers/Supervisors are authorized to carry firearms as representatives of Mount Carmel Health System while on Mount Carmel owned property, having proprietary jurisdiction.

POLICY

The Safety and Security Department will maintain assigned or designated firearms in clean and working order while conducting duties at Mount Carmel owned facilities. All Armed Officers/Supervisors are expected to have the appropriate training as well as updated annual renewal for competency based on established criteria from the Ohio Peace Training Academy (OPOTA) and authorized vendors. Armed Officers/Supervisors are expected to be familiar with local laws, ordinances and policies regarding the carrying and use of firearms. Mount Carmel is not liable for use of firearm "outside course and scope of employment." Firearms protocol is as follows:

- Use of deadly force based on Use of Force Continuum and immediate threat to life or great bodily harm. Firearm use by Armed Officers/Supervisors to neutralize this kind of threat or action to protect life.
- Armed Officers/Supervisors will be alert to their surroundings and fully aware of any actions that may injure or kill innocent bystanders in the event of firearm use. Using restraint if necessary based on their professional judgement and self-defense expectations.
- Armed Officers/Supervisors will not discharge their weapon when lessor means of force is justified.
- 4. The firearm would never be un-holstered during the performance of duties or used absence of a threat to life or great bodily harm. Other exceptions: clearing, loading, cleaning, storing or training situation.

- 5. All firearms will be loaded and cleared in a designated clearing barrel.
- Firearms in transport off property will be in accordance with Ohio Revised Code- ordinances and law.
- Warning shots shall never be fired and firearms will never be pointed at someone unjustifiably. Horseplay will NOT be tolerated. Professionalism at all times.
- Supervisor, Manager, Director or designee will be notified as soon as
 possible of any discharge (intentional or accidental) incident as well as unholstering in an encounter situation. A Security Incident Report will be
 documented.
- In the event of an intentional or accidental discharge resulting in injuries
 or death- Medical personnel will be summoned immediately as well as
 local jurisdictional law enforcement. Emphasis on safety and preservation
 of potential crime scene.
- Only authorized firearms and equipment (web gear- safety holster, ammo pouch, etc.) will be used. Armed officers are expected to have this with appropriate ammo on duty and will be inspected for compliance prior to each shift by Supervisor or In-Charge. Officers are required to be uniformed- exception, System Manager
- Firearms will be under the control of the Officers/Supervisors assigned to while on duty at all times or properly secured. Never unattended.
- Armed Officers/Supervisors will carry three loaded magazines with one of the three inserted in the firearm with round in the chamber while on-duty.
 Level Three holsters are the only holsters authorized.
- Armed Officers/Supervisors will not loan their assigned firearms to any
 other officer or person and will always be cognizant of their surroundings
 protecting the holstered firearm at all times.
- 14. Designated Officers/Supervisors will report fit for duty with designated firearms or obtain from the on-site safe in the designated security office. If not fit for duty (evidence of non-compliance, alcohol/drug use, etc.). The officer will be removed from duty and the firearm secured.
- Officers/Supervisors will report any OTHER related firearm incidents to their supervisor or in-charge as well as the Nursing Supervisor immediately.
- Officers/Supervisors will be in possession of appropriate PPE while carrying firearms and use as appropriate (i.e. protective vests, and hearing and eye protection for training).

- 17. There may be certain times when Armed Officers/Supervisors will be asked by management to surrender their firearm/ammo due to circumstances (i.e. certain meetings/functions, other training not related to firearms, administrative hearings/internal investigations/disciplinary, etc.). In these cases supervisory/management will ensure proper unloading and clearing of the firearm and securing on site- property receipt issued.
- Armed Officers/Supervisors will make all required training and competencies.
- 19. Armed Officers/Supervisors responding to Psychiatric Behavioral Unit (3W MCW) will ensure firearms are stored in designated cabinet before entering the resident area.
- Armed Officers/Supervisors will report to their Supervisor any potential
 conflict that arises in carrying said firearm (criminal charges, convictions,
 domestic violence, mental health changes, etc.)
- Non-conformance with organizational policies and state law regarding firearm use will result in disciplinary actions up to termination of employment.

FIREARM DEPLOYMENT REVIEW BOARD

A Firearm Deployment Review Board will convene within 72 hours of ANY firearm deployment on a person(s). Reports will be made available to the review board and use of firearms may result in administrative leave and if warranted-counseling. The incident review board will consist of the following:

- System Director of Safety & Security
- System Manager of Safety & Security
- Officer's immediate supervisor
- Senior Vice President of Human Resources or designee
- Legal Counsel
- Director of Regulatory and Risk Management or designee
- Potentially a Law Enforcement Rep (if investigated and appropriate)
- Certified Firearms trainer as appropriate

The Firearm Deployment Review Board will convene no less than four (4) members and will critique and carefully examine the event for justification. Looking at the following as a minimum:

- Was the deployment appropriate within laws and policies
- Thought process- Use of Force continuum was a lessor means justified
- Policy adherence
- Through examination of circumstances leading up to the event, during event and post event
- Code Silver protocols

Training- current and is additional guidance needed

Upon completion of the review board- findings and recommendations will be placed in writing. This will be shared with the affected Officer/Supervisor as well as any warranted disciplinary action up to and including termination based on the review.

Michael	L	ang	peline
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Date: 1/13/17

Michael L. Angeline, Director Mount Carmel Safety & Security Developed 12/2016

Evaluation/Safety Test/Competency Awards Application/Transfers

Evaluation/Safety Test/Competency

HANDCUFFING TEST

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
 - D.) ALL OF THE ABOVE
 - BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?

A.)TRUE

B.)FALSE

- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - C. SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?

A.) TRUE

B.) FALSE

OC Test Mount Carmel Health System Safety and Security

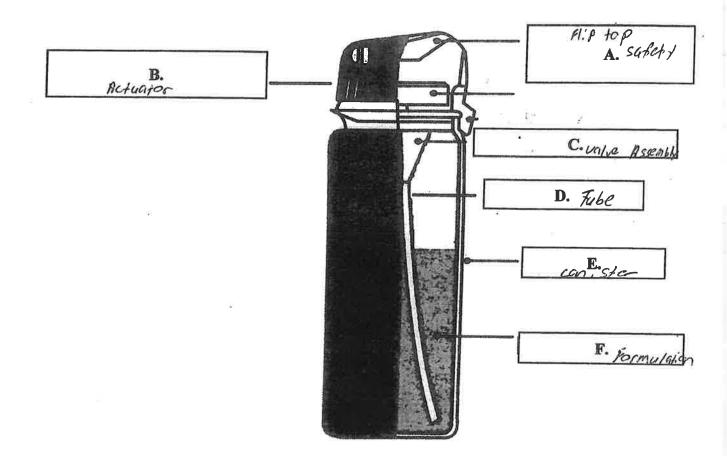
	Safety and Security
	100%
	% . I
	What does OC stand for? A. Orange Crush
1.)	What does OC stand for?
	A. Orange Crush
	B. Ocean Crust
	Oleoresin Capsicum
2.)	What is the average expiration date on an OC canister?
	A. 1-2 years
	® 3-4 years
	C. 4-5 years
3.)	How often should you check your OC spray for adequate spray strength?
	A. 30 days
	B. 60 days
	© 90 days
	•
4.)	How long of a burst should you use on a threat?
	(A) 1-2 seconds
	B. 2-4 seconds
	C. Empty the entire can
5.)	What is Oleoresin Capsicum commonly known as?
	A. Mace
	P. Pepper Spray
	C. Gas
6.)	When deploying OC, what area of the body should you deploy the OC
	towards?
	A. Arms
	B. Chest C. Face and eyes
(Face and eyes
7)	After 1 O.C.
7.)	After using OC on a subject, what should you immediately do with the
	subject:
,	A. Leave lying on the ground.
(B. Remove from contaminated area

C.

Spray again

	What is the second step in the decontamination process?
8.)	What is the second step in the decontamination provided
	A. Spray them again
	B. Tell them to stop crying like a baby
	C. Offer verbal rapport to the subject
0)	What is the third step of the decontamination process?
9.)	A Expose subject to fresh air
	- I to the beattle of weater
	B. Throw the subject a bottle of water C. Stand there and record them with your cellphone
	4
10.)	What is the best way to flush the eyes?
,	A. Using milk
	B. Rubbing eyes continually
	C.) Water
	TTT 14 as af a gent is OC?
11.)	What type of agent is OC?
	A. Glue
	B. Cleaning Fluid
	C. Inflammatory
12.)	What is the main ingredient of OC?
12.)	A. Water

13.)	Does CMS (Center for Medicaid/Medicare System) guidelines allow for OC to be used on a PATIENT?
	B. No C. Only if they deserve it.
14.)	List the nomenclature of a canister of OC
	A. FI.P TOP Safety
	B. Actuator
	B. Mc hunter
	C. value Assembl
	D. Tube
	E. cgn.'ster
	F. Focasistica





Box 1794 Appleton, WI 54912 (920) 735-6242 - Fax (920) 735-6245 asp-uea.com

ASP Basic Certification (ABC) EXPANDABLE BATON TRAINING

Information Sheet

		Date 3/5/21
☐ Initial Certification	☑ Recertification	
First Name	Last Name	
Home Address		
City Lithapolic	State <u>G //</u> Province	Zip 43/3 6
Telephone	E-mail Address	
Employing Agency Mayor Cacaci		
Agency Address Coc South (1)	leveland Ave.	
	State Province	
Agency Telephone (780) 898 40	COS E-mail Address	ZIP 92081
Duty Status: Full Duty Restrict	ed Duty	
las your agency adopted or authorized	the use of the ASP Baton?	
How many officers are in your agency?	20	
leight s'e Weight 180	Age 36 Date of Birth /)	109/24
lave you been exercising? No		
Oo you have any knee, back or health or	roblems? No	
tre you on any medication?	opiniot_w ₀	
Name _ Phone (Alternate ()_	
Relationship		
riefly describe any health problems: //	Via PP	
mony describe any negati problems.	nge SP	Injury Check: 1A
	WAIVER	
Rele	sase from Liability and Assumption of Risk Agreement	
1) Intending that this Agreement be legally	ease from Liability and Assumption of Risk Agreement v binding upon me, my heirs, executors, administrators	and assigns. I hereby writes release
Intending that this Agreement be legally rever discharge Armament Systems and Process	sesse from Liability and Assumption of Risk Agreement y binding upon me, my heirs, executors, administrators dures. INC. and all of their agents representatives b	olio nyanitam administratam avanas
Intending that this Agreement be legally rever discharge Armament Systems and Proceed assigns, of and from any and all claims, demand assigns, of and from any and all claims.	passe from Liability and Assumption of Risk Agreement y binding upon me, my heirs, executors, administrators dures, INC, and all of their agents, representatives, hands, rights and causes of action of whetsomer kind	eira, executora, administratora, success
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ASP Basic Certification

WRITTEN EXAMINATION

- 1. A defensive tactic is evaluated by it's ability to:
 - (a) Control v Injure
 - b. Maim v Destroy
 - c. Threaten v Control
 - d. React v Act
 - Demonstrate the Officers skill
- 2. The primary striking surface of an open ASP Baton is the:
 - a. Cap
 - b. Center of the shaft
 - (c) Last 3" of the baton
 - . First joint
 - e. Handle
- 3. The hand using the service firearm is the:
 - a. Weak hand
 - b. Contact hand
 - (C) Weapon hand
 - d. Reaction hand
 - e. Support hand
- 4. The ASP baton should not be opened:
 - a. To the sky
 - b. To the ground
 - c. During a strike
 - To the side
 - e. Towards the threat
- 5. The two baton modes are:
 - Open and Closed
 - b. Interview and Combat
 - c. Weapon and Reaction
 - d. Concealed and Loaded
 - e. Ready and Extended
- Which is not an ASP target area:
 - a. Center mass of the arms
 - b. Center mass of the legs
 - c. Center mass of the body
 - Groin or Sternum
 - e. The Weapon Delivery System
- Targeting specific points violates which training principle:
 - Forgiving techniques
 - b. Fine motor skills
 - c. Spaced practice
 - d. Static training
 - e. Complex techniques

- 8. The ASP baton is always carried:
 - a. On the right side
 - b. In the front
 - c. On the reaction side
 - Tip down
 - e. Left side
- 9. The Reaction Strike is primarily a:
 - a. Strong strike
 - b. Closed strike
 - Clearance strike
 - d. Offensive strike
 - e. Initial strike
- 10. The most frequently used ASP strike is the:
 - a. Reaction strike
 - Weapon strike
 - c. Straight strike
 - d. Clearance strike
 - e. Reverse strike
- 11. When performing an Open Straight Strike, the
 - Reaction Hand Is:
 - a. Palm up on the shaft
 - b. Maintaining distance
 - c. Guarding the face
 - Palm down gripping the shaft
 - e. Executing a downward block
- 12. If the baton opens too easily:
 - a. Make the retaining clip smaller
 - b. Replace the o-ring
 - Widen the retaining clip
 - d. Remove the retaining clip
 - e. Lubricate the baton
- 13. The most common problem in opening the baton is:
 - a. Grip of the baton
 - b. Loose o-ring
 - c. Broken retaining clip
 - Operator error
 - Loose handle cap
- 14. Special Circumstances include:
 - a. Age
 - b. Size
 - Weapon proximity
 - d. Skill level
 - e. Mutiple Officers

	e.	Both hands
17.	Officer	/Subject factors include:
	a.	Special knowledge
	b.	Imminent danger
	C.	Injury or exhaustion
	(d.)	Size
	e.	Officer on the ground does
18.	if the su	ibject compiles, the Officer-doesn't not
	advance	
	(a.)	
	b.	False
19.	The ASP	Baton is designed to be
	a.	An offensive weapon
	b.	A comealong device
		A defensive weapon
	d.	-
	e.	A restraining device
20.	The princ	ciple goal of any arrest or physical
	confront	
	(B)	Establishing control
	b.	
	C.	Subject safety
	d.	•
	e.	Punishment
	-	
Graded	Rv-	
or oucu	Эу.	
SP Wri	tten Exa	nm: Pass / Fail
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ate:	3151	U

15. ASP Weapon Side Strikes are intended to be

16. When striking the ASP Baton is gripped with:

a. The index finger and thumb

b. A loose flexible grip

c. Two fingers and the thumb

45 degree angie
180 degree angie
Horizontal angie
90 degree angie
Vertical angie

Full hand grip

performed at a:

Baton Basic Certification

TECHNIQUE PROFICIENCY CHECKLIST

1) Check:	Pass:	ran:
2) Redirection:	Pass:	Fail:
3) Closed Mode Weapon Strike	Pass:	Fail:
4) Closed Mode Reaction Strike	Pass: 🔟	Fail:
5) Closed Mode Straight Strike	Pass:	Fail:
6) Opening the Baton	Pass:	Fail:
7) Open Mode Weapon Strike	Pass:	Fail:
8) Open Mode Reaction Strike	Pass:	Fail:
9) Open Mode Straight Strike	Pass: 🗸	Fail:
10) Closing the Baton	Pass:	Fail:
20, 0.001.18 1.10	9	
	Ar /	
TECHNIQUE PROFICIENCY	PASS:	FAIL:
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COUNSELED:		
CERTIFICATION APPROVED:	CERTIFICATION I	DENIED:
I had to	1 R-41764	
INSTRUCTOR:	P 1/1/01	
3/6/2/		

DT Training Scenarios

1. Patient Wanding – Patient arrives at the hospital via private transport. Patient checks in stating "I do not wish to live anymore" and is immediately taken to the triage area for further evaluation. Patient is carrying a small bag and has on street clothes. Charge RN contacts Safety and Security regarding wanding the patient due to the statements made by the patient. Verbalize response and next steps prior to intervention with patient.

PASS/ FAIL

- 2. Code Violet Security is called STAT to ER for verbally aggressive patient. While responding to STAT call, Security hears "Code Violet ER #9" paged overhead. Security arrives to find staff attempting to hold patient down in bed. Patient is making verbal threats while trying to bite, spit, kick, and punch at staff who are attempting to control patient. Verbalize response to code violet and further information needed before scenario resumes.
 PASS FAIL
- 3. Restraint Security is responding to call for service on in-patient unit. Not much information is given prior to responding. Upon arrival Security witnesses several staff members attempting to keep confused patient in bed. Patient is flailing his arms and legs attempting to "escape" from the hospital. Patient recognizes Security as law enforcement and begins to focus on officers. Patient is begging Security to take him with them because he is not safe around nursing staff. Verbalize response and de-escalation efforts needed before scenario resumes. Obtain additional information as needed.

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PASS / FAIL

4. Pink Slip — Security responding to disturbance in ER. Upon arrival Security intercepts patient attempting to leave the hospital. Staff is stating that the patient cannot leave. What is the response by Security at that exact moment? Patient becomes verbally aggressive with Security stating "you cannot hold me!" Verbalize efforts to get the patient back to his room and information needed to make appropriate decisions during the incident. What factors are important to consider? Resume scenario...

PASS/ FAIL

5. Suspicious Person – Security receives a call from a visitor stating that they have observed a vehicle on campus that appears to be occupied sitting at the edge of property near connex boxes that contain contractor tools and equipment. This box has already been broken into previously and several thousands of dollars in equipment was stolen. Describe steps taken when dispatched and actions on-scene. Start scenario...

PASS / FAIL

6. Domestic Situation – Security responding to a disturbance in Maternity unit. Upon arrival security speaks with RN who advises that she has heard yelling and screaming coming from inside the room. She further advises that the only people inside the room are the patient and the father of the baby. Security responds to the room and finds patient in tears stating that she has been physically assaulted by the male party. Male party states that is not leaving his baby! Start scenario...

RASS / FAIL

7. Elopement – Security receives frantic call from ER staff stating that the patient in ER #9 is running out the squad bay doors. Security responds and sees patient attempting to run off property. Describe steps taken and ask for any additional information needed at that time. Security catches up to patient just before he leaves property but are unable to stop and hold at that point. Describe next steps needed at that time. Begin scenario....

PASS / FAIL

8. Security is advised of a juvenile patient who arrived at the hospital due to an overdose. Patient took multiple prescription pills as an attempt to end her life. She had made comments that she does not wish to live anymore and wants the pain to go away. Patient's parents show up to the hospital and demand to be reunited with their daughter immediately. Mom makes the statement that she has not given MCHS consent to treat her daughter and will not be cooperating with staff requests. Urine test completed by daughter with mother inside the bathroom. Results of urine show that urine has been diluted with water and mother states that MCHS will never get an accurate urine sample from the patient. Physician responds to the room and advises that discharge of the patient is dependent on blood lab results. Parents consent to the blood draw which shows serious medical concerns and patient is pink slipped for medical conditions and is being transferred to Nationwide Children's Hospital for further evaluation. Mother makes the statement that she will not allow the hospital to put her daughter in a purple gown because she knows what it represents...GO!

PASS / FAIL

9. GSW – Security is sitting post in ER lobby when GSW arrives via private vehicle. Two individuals carry the GSW into the ER lobby and drop him near the entrance. Both individuals flee the ER to their vehicle (Late model Infinity SUV, black with orange wheels with orange Infinity logo on each side). Patient has been shot in the chest. Gather additional information and advise response. Action...

PASS / FAIL

10. Property Search/Overdose - Security called to in-patient room for suspicion of patient using drugs in the room. Upon arrival security speaks with physician who advises that she has spoken with the patient on two occasions today. The first time he was alert and oriented and even energetic. The second time he appeared lethargic and completely out of it, he was having trouble finishing sentences without falling asleep. None of the medications he is receiving would cause the change in behavior. The patient also has a history of IV drug abuse and admitted to using drugs 3 days prior to admission into the hospital. He is there for an abscess that is infected on his arm that he needs to receive surgery for. Please provide steps needed to perform search and explain how these are communicated to the patient. Also state any notifications that are made and any witnesses to the search. Begin...

PASS FAIL

11. Discharged Patient – Security called to ER because discharged patient is refusing to leave the room. Patient states that he is not ready to leave because staff and the doctor has not addressed his concerns. Patient is being passive aggressive with staff and stating that he will not leave until he has had an opportunity to speak with the doctor about his care. Ask any additional questions as appropriate and determine your strategy for his removal from the room. Scenario resumes when ready...

PASS /FAIL

12. Criminal Trespass – Security called to suspicious visitor who was found sleeping in an empty patient room by staff on the unit. Security speaks with visitor upon arrival, but visitor refuses to identify himself to security. He further states that he is homeless, and he needs to be seen because he is having suicidal thoughts. Officer evaluates the situation and determines course of action...Play scenario

PASS / FAIL

Patient checks in to ER for psychiatric evaluation. Case Management and doctor both evaluate patient and determine that he is not suicidal. Patient is discharged from the ER but again refusing to leave...resume scenario

PASS / FAIL

San Francis &



A MEMBER OF 🍪 TRINITY HEALTH

Safety and Security Defensive Tactics / OC Repellant / ASP Baton Competency Form

Students Name (print):		
I.D. Number:		
Date: 3/5/3/		
Campus: _mcsa		
1. Escort Position	0	
1. Escort Position	Pass	Fail
2. Balance Displacement		
a. At the shoulder	(Pass)	Fail
b. Friction on the back	Pass	Fail
c. At the hip	Pass	Fail
3. Handcuffing		
a. Standing/Prone Position	(Dage)	Fail
b. Removing Handcuffs	Pass	Fail
4. Armbars/Wristlocks	_	
a. Transport Wristlock	(Page)	Fail
b. Transport Wristlock Takedown to Handcuffs	Pass	Fail
c. Straight Arm bar	Pass	Fail
d. Straight Arm bar Takedown to Handcuffs	Pass'	Fail Fail
5. Weapon Retention Drills		
a. Holstered	(000)	Fair
b. Un-holstered	Pass	Fail
c. Stripping Weapon from Subject	Pass	Fail Fail
6. Oleoresin Capsicum (OC)		
a. Nomenclature	Pass	Fail
b. Spray Patterns	Pass	ran
i. Balance/Movement/Verbal Commands/Control	Dage	Fail
ii. Up/Down	Page	Fail
iii. Side to Side	10300	Fail
iv. Circular	Dago	Fail
c. Decon Process	Pace	Fail

7. ASP Baton a. Balance/Movement/Verbalization/Technique/Targeting Fail Fail b. Ready Position Fail c. Closed Mode Weapon Strike Fail d. Closed Mode Reaction Strike Fail e. Closed Mode Straight Strike Fail f. Closed Mode Weapon/Reaction/Straight Strike Fail g. Opening the ASP Baton Fail h. Open Mode Weapon Strike Fail i. Open Mode Reaction Strike Pass Fail Pass j. Open Mode Straight Strike Fail k. Open Mode Weapon/Reaction/Straight Strike Pass I. Closing the ASP Baton/Transitioning to baton holster Fail m. Emergency Open Strike/Closing baton/holster Fail

If an Officer cannot close their baton, a recommendation needs to be forwarded to their Supervisor that an ASP Talon baton be issued to that Officer

8. Scenario Based Training	0	E. 9
a. Patient Wanding	(Pass)	Fail
b. Code Violet	Pass	Fail
c. Patient Restraint	Pass	Fail
d. Combative Patient Restraint	Pass	Fail
	Pass	Fail
e. Pink Slip Patient		Fail
f. Suspicious Person(s)	Pass	
g. Domestic Dispute	Pass	Fail
h. Elopement	Pass	Fail
i. Juvenile Patient Elopement via Parent/Guardian	Pass	Fail
	Pass	Fail
j. GSW Patient	Pass	Fail
k. Property Search		Fail
I. Discharged Patient Refusing to Leave	Pass	
m. Criminal Trespass	Pass	Fail

Grading Scale: Passing = performs w/out prompting

Failed = needs prompting / repeated instruction, or cannot perform task

Instructors Signature and ID Number:

Instructors Signature and ID Number:

For: 00210846 Armed Safety and Security Officer - Security - Mount Carmel St. Ann's

Phone Number

Phone Number Email

Location

io.com

Lithopolis, OH 43136 United States of America

Verview

Resume.pdf

Overview

Current Job 5 years

Total Jobs

Total Experience 11 years

summary

OhioHealth

Experience

Summary

Protective Services officer
April 2015 - July 2020 (5 years, 4 months)

Pickerington

Maintained the safety and security of all associates, patients, visitors, and properties.

Utilization of de-escalation/physical control for high stress/psychological patients. Maintained and tested all emergency notification systems. Conducted investigations for criminal activities.

Valor Security Services

Security officer October 2010 - April 2015 (4 years, 7 months)

Dublin

Maintained the safety and security of The Mall at Tuttle Crossing and its guest by providing first aid for medical issues, performing regular checks throughout the mall and its property, providing stores assistance with shoplifting incidents. Monitoring of the fire system along with using CCTV to help in the prevention/aid of any illegal or dangerous activity.

Chillicothe Correctional Institution

Corrections Officer January 2007 - July 2008 (1 year, 7 months) Chillicothe

Maintained the safety and security of persons and property of the institution by supervising

inmates at all times and enforcing state and institutional rules of conduct. References

Available upon request

Websites

none entered

Resume / Cover Letter s Resume.pdf

Skills

Education

Nelsonville York High School High School Diploma

CCTV, Monitoring, Shoplifting, Correctional, De-Escalation, Investigations, Emergency Notification, Supervising

Adult career center Certificate of Attainment

Ohio Department of Rehabilitation and CorrectionsAcademy Certificate of Attainment

Candidate Information

Added By

External Career Site

Screening

Assessments

none entered

Background Check History

none entered

Interview

Interview Feedback

none entered

Attachments

Progressive Counseling Chronologicals Attendance/Pit

Progressive Counseling

Name: Campus: St Anns

Date: 9/4/20

HANDCUFFING TEST

- 1.) WHEN TO USE HANDCUFFS?
 - A.) ON A VIOLENT PATIENT
 - B.) AFTER COMMITTING A FELONY IN YOUR PRESENCE
 - C.) ON VIOLENT INDIVIDUALS WHO POSE AN IMMEDIATE THREAT TO STAFF, VISITORS, PATIENTS, OR YOURSELF
 - D.) ALL OF THE ABOVE
 - (E) BOTH B AND C
- 2.) CMS ALLOWS YOU TO HANDCUFF PATIENTS?

A.)TRUE (B) FALSE

- 3.) WHAT ACTIONS NEED TO OCCUR AFTER THE USE OF HANDCUFFS?
 - A.) INCIDENT REPORT AND VOICE
 - B.) LOCAL POLICE, SIR, AND VOICE
 - (C.) SUPERVISOR, LOCAL POLICE, SIR, AND VOICE
- 4.) SECURITY IS ABLE TO HANDCUFF TO A STATIONARY OBJECT?
 - A.) TRUE
 - (B) FALSE

OC Test Mount Carmel Health System Safety and Security



- 1.) What does OC stand for?
 - A. Orange Crush
 - B. Ocean Crust
 - C Oleoresin Capsicum
- 2.) What is the average expiration date on an OC canister?
 - A. 1-2 years
 - B 3-4 years
 - C. 4-5 years
- 3.) How often should you check your OC spray for adequate spray strength?
 - A. 30 days
 - B. 60 days
 - © 90 days
- 4.) How long of a burst should you use on a threat?
 - 4 1-2 seconds
 - B. 2-4 seconds
 - C. Empty the entire can
- 5.) What is Oleoresin Capsicum commonly known as?
 - A. Mace
 - B Pepper Spray
 - C. Gas
- 6.) When deploying OC, what area of the body should you deploy the OC towards?
 - A. Arms
 - B. Chest
 - C. Face and eyes
- 7.) After using OC on a subject, what should you immediately do with the subject?
 - A. Leave lying on the ground.
 - B Remove from contaminated area
 - C. Spray again