

**DEPARTMENT OF SPECIAL SERVICES  
TOWNSHIP OF UNION PUBLIC SCHOOLS  
M-E-M-O-R-A-N-D-U-M**

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**TO: Pat Ditri**

**From: Kim Conti** 

**Re: Board Agenda Items**

**Date: October 10, 2013**

**Please place the following on the board agenda:**

**The committee recommends and I so move that approval be given to ATC, Inc (Around the Clock) Healthcare Services Inc to provide Nursing Services, at the rate of \$38.49 not to exceed \$57,735.00. (Acct # 11-000-219-320-01-19) for the School Year 2013-2014.**

# Memo

To: Dr. Patrick Martin  
From: Kim Conti  
Date: 10/10/13  
CC: James Damato  
Re: Rationale for Bid of Nursing Services for the 2013-2014 school year

**Selected Consultant:** ATC Healthcare Services, Inc  
422 Morris Ave. Suite 5  
Long Branch, NJ 07740

**Problem:**

Need nursing services per student's IEP during transportation to/from home/school and during school day that cannot be provided by district staff due to time and scheduling constraints.

**Reasons for Selecting Consultant:**

Lowest qualified bidder

If there are any questions or concerns, please do not hesitate to contact me.

Thank you

## **NOTICE TO BIDDERS**

TOWNSHIP OF UNION BOARD OF EDUCATION  
2369 MORRIS AVENUE  
UNION, NEW JERSEY 07083

### **SPECIFICATIONS FOR BID TO PROVIDE PROFESSIONAL SERVICES IN THE AREA OF NURSING SERVICES FOR THE 2013-2014 SCHOOL YEAR**

The Board of Education of the Township of Union (the "Board") is seeking proposals for nursing services per students IEP for 1500 hours to fulfill this related service. This service will be provided during transportation to and from home/school and each day school is in session. Maintenance of the following is required: student attendance log; daily service provision log regarding services provided; and progress notes. Consultation services are needed. All providers shall be NJ State licensed as a Registered Nurse.

Proposals shall contain: (a) Certificate of Employee Information Report (AA); (b) Business Registration Certificate; (c) W-9 and (d) Insurance certificate in the form required by the Board Attorney of the Township of Union Board of Education.

Proposals must be in writing and must contain fixed rates for all services and fees. All fee proposals shall be fixed for one (1) year from the date of the award and may not change or be withdrawn except by the permission of the Board. Proposals shall be submitted no later than October 8, 2013. Proposals must contain a Curriculum Vitae or resume for all who may be assigned to handle these matters. The award shall be made to a vendor whose response is most advantageous to the Board, price and other factors considered. All providers shall have a criminal background screening of all nurses prior to assignment in the district. The Board shall have the option of terminating this engagement upon thirty (30) days notice to the Provider.

Provider is required to sign a contract to be prepared by the Board Attorney. The Company shall sign a statement that it shall indemnify, defend and hold the district harmless from any and all liabilities for any claims which may arise as a result of the engagement of the Company.

Proposals will be opened and read aloud in the Board of Education conference room at the Administration Building, 2369 Morris Avenue, Union, New Jersey on October 8, 2013 at 11:00 a.m. Your proposal must be received prior to that date and time. Two original proposals shall be submitted by regular or overnight mail, no email proposals allowed. The Board shall not be responsible for late or misdelivered proposals.

Bid specifications are available by request to James J. Damato, Board Secretary/General Counsel, Township of Union Board of Education, 2369 Morris Avenue, Union, New Jersey, 07083; 908-851-6411. Any technical questions or assignment-related questions may be submitted to Kim Conti, Director of Special Services at 908-851-4426.

PROFESSIONAL DEVELOPMENT CONTRACT BETWEEN  
THE TOWNSHIP OF UNION BOARD OF EDUCATION AND  
AROUND THE CLOCK HEALTHCARE SERVICES

This document shall serve as a form of agreement (hereinafter "Agreement") between the independent contractor, Around the Clock Healthcare Services, 422 Morris Avenue, Suite 5, Long Branch, New Jersey 07740 (hereinafter "Contractor") and the Township of Union Board of Education (hereinafter "Board") also collectively known as the "Parties".

Nature of Engagement – Services shall be those identified in the Notice to Bidders, Bid Specifications and as assigned by the Director of Special Services (hereinafter "Board Representatives" as appropriate. The Contractor shall provide any reports and/or updates to the Board Representatives as requested.

Duration of this Agreement – This agreement shall commence on October 16, 2013 and terminate on June 30, 2014. The Board of Education may cancel this Agreement upon thirty (30) days written notice to the other.

Scheduling – Training seminars will be scheduled between the Contractor and the Board Representatives at such locations as designated by the Board Representatives.

Independent Contractor – The Contractor shall in all respects be considered an Independent Contractor as that term is defined in Federal and State Law and regulations. It is expressly understood that no employer-employee relationship exists between the parties by virtue of this Agreement.

Insurance – The Contractor shall provide to the Board proof of insurance in the following form and minimum limits:

Professional Liability	\$ 1,000,000
Workers' Compensation	500,000
General Liability	1,000,000

All insurance policies shall name the Township of Union Board of Education as additional insured and proof of said policy shall be provided on the standard ACORD form.

Indemnification – To the fullest extent permitted by law, the Contractor shall indemnify, defend and hold harmless the Board for any and all claims which may arise as a result of this engagement and the services provided hereunder.

Billing – Invoices shall be provided to the appropriate Board Representatives for approval by the Board. Payments shall be made in accordance with the attached Schedule "A".

Jurisdiction/Forum – The parties agree that any disputes which may arise from the implementation of this agreement shall be referred to Binding Arbitration and not to the courts.

Required State Forms - The Contractor shall provide and attach hereto the following documents:

1. Affirmative action approval form (Certificate of Employee Information Report)
2. NJ Business Registration Certificate
3. W-9
4. Insurance Certificate

Requisite Authority – The undersigned representatives of the Parties have the requisite authority from their respective entities to sign this Agreement and legally bind said respective Parties.

TOWNSHIP OF UNION  
BOARD OF EDUCATION

AROUND THE CLOCK  
HEALTHCARE SERVICES

By: \_\_\_\_\_

By: \_\_\_\_\_

Dated: \_\_\_\_\_

Dated: \_\_\_\_\_



*Presentation to Provide*  
**Nursing Services  
To The  
Union Township Schools**

*Presented by*

**ATC Healthcare Services, Inc  
422 Morris Ave, Suite 5  
Long Branch, NJ 07740**

*And*

**ATC Healthcare Services, Inc  
Government Healthcare Division  
1983 Marcus Avenue  
Lake Success, NY 11042**

**GSA** Contract Holder  
FSS Contract V797P-4615A

**SPECIFICATIONS FOR BID TO PROVIDE  
TOWNSHIP OF UNION BOARD OF EDUCATION PROFESSIONAL SERVICES**

**BID FORM**

Price per hour \$ 38.49

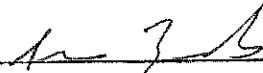
\*Estimated number of hours per year 1100

Maximum number of hours per year 1500

For purposes of bid comparison, the bids will be compared using the following formula:

Price per hour x 1100 (estimated hours) \$ 42,339  
TOTAL ESTIMATED BID

No other charges are permitted, i.e., travel time, etc.

  
AUTHORIZED SIGNATURE

10-7-13  
DATE

\*Estimated number of hours is an **estimate only**. The actual number of hours assigned is in the discretion of the Board and will be assigned by the Board or its authorized representative. The actual number of hours may be more or less than the estimated number, in the discretion of the Board.

## Executive Summary



ATC Healthcare Services, Inc. (ATC) was established in 1982 in Riverdale, Georgia to provide 24-hour staff relief to healthcare facilities and is directed by staff members whose personal commitment to quality allows them to offer distinctive and superior situational staffing services. ATC's focus is developing a partnership with clients to enhance quality care and cost effectiveness based on identification, understanding, and commitment to mutual goals. We want to be your partner in providing quality healthcare to your students.

ATC is not just another staffing agency. We are pioneers in the strategic sourcing and management of medical temporary personnel. We have established an outstanding reputation in the industry by identifying the specific staffing requirements of the healthcare providers we serve and matching these requirements with the Healthcare Associates (licensed and unlicensed employees), who have the appropriate training, credentials, and experience. We will never lose sight of the fact that we are here to provide a flexible, customized service and to help our clients utilize ATC as a positive and beneficial means for cost containment.

With over 5,000 credentialed and experienced Healthcare Associates, ATC provides short- and long-term staffing solutions in specialty areas that include Nursing, Therapists, Technicians and Medical Administrative skills.

Our clients include: hospitals, clinics, nursing homes, insurance companies, physicians, school systems, industry, government, and correctional facilities. We help provide all of our clients with cost-effective solutions to staffing challenges on a national basis.

### ATC Mission Statement

ATC Healthcare Services, Inc. is a diversified service organization comprised of a cohesive team of innovative people dedicated to providing the highest quality situational staffing services with the greatest value. Our goals are to improve current services and develop new services tailored to the needs of the clients, Healthcare Associates, and markets we serve in order to maximize our contribution to the achievement of each individual's or organization's objectives.

### ATC Operating Principles

ATC's corporate values reflect our attitude toward our clients and our employees. We strive to:

- Conduct and manage our business ethically



- ✦ Commit to continuous improvement
- ✦ Foster an environment conducive to maintaining open communication
- ✦ Recruit, develop, reward, and support achievement-oriented people who demonstrate high levels of performance
- ✦ Encourage initiative, creativity, responsibility, and a sense of urgency in each staff member
- ✦ Empower every staff member to take immediate corrective action should client problems occur
- ✦ Provide an acceptable rate of return to our shareholders

### **ATC Commitment to Quality**

ATC commits to maintaining its dedication to quality service. AIG Consultants, Inc., one of the largest underwriters for professional liability insurance, found our credentialing and screening process "to be more comprehensive than that which is in place at many healthcare facilities."

### **The ATC Staffing Process**

ATC's primary goal is to build client confidence and ATC credibility by fulfilling the needs of the clients. The staffing process provides continuous checks and balances through:

#### **◆ *Computer Applicant Tracking and Screening***

The ATC computer system, STAFFMED<sup>®</sup>, monitors the recruitment process and prompts the appropriate action at each phase of the application and hiring process.

#### **◆ *Client Profile***

A client profile is developed through information gathered from the client and on-site visits. This profile contains the client's requirement expectation with regard to experience level, test scores, credentials, physical/health screening, orientation, and any other pertinent information specific to the facility and occupation.

#### **◆ *Healthcare Associate Profile***

A profile for each Healthcare Associate hired by ATC contains the occupation, resume, test scores, credentials, experience, and areas of specialty (as designated by testing). STAFFMED<sup>®</sup> constantly monitors for compliance of credentials, ATC Policies & Procedures, OSHA and JCAHO requirements. STAFFMED<sup>®</sup> automatically places Healthcare Associates on inactive status when their credentials expire.

#### **◆ *Healthcare Associates Availability***

Healthcare Associates availability for work is tracked by STAFFMED<sup>®</sup>, allowing us to meet client needs quickly and efficiently.

#### **◆ *Client Work Order***

The work order includes such information as: date(s), shift(s), work area/department and occupation to match client's needs with Healthcare Associate skills.

◆ **Healthcare Associate and Client Work Order**

STAFFMED® will screen and retrieve the files of Healthcare Associates who meet the qualifications and experience requested by the client and who are available.

◆ **Flexibility**

STAFFMED® allows ATC to identify geographical locations of our Healthcare Associates and match them to clients in the same area.

**Government Contracts Division**

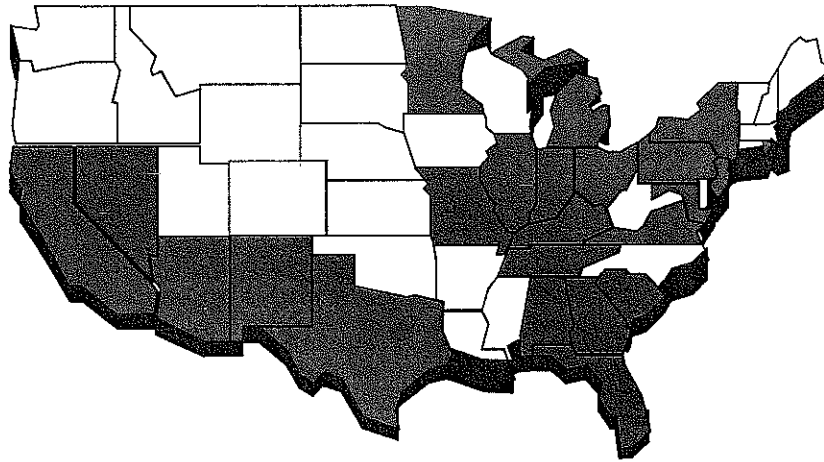


ATC's Government Healthcare Division, one of the newest additions to our medical staffing solutions, is poised to provide medical staffing solutions to government healthcare facilities through traditional contracting methods or via our Federal Supply Schedule contract. Governmental agencies currently staffed by ATC include:

- Municipal Entities
- Federal Institutional Agencies
- State Healthcare Institutions
- State University Medical Centers
- Various State Departments of Health
- Veterans Affairs Medical Centers
- U.S. Military Medical Facilities
- State and Local Correctional Facilities

## ATC Office Locations

ATC's offices are located throughout the country. The vast majority of the offices are independently owned franchises.



### Alabama

Birmingham  
Camden  
Mobile

### Arizona

Phoenix

### California

Culver City  
Fresno  
Modesto  
Orange County  
Riverside  
Sacramento  
San Diego

### Florida

Tampa

### Georgia

Milledgeville

### Illinois

Crestwood

### Indiana

Indianapolis  
Ligonier

### Maryland

Largo

### Michigan

Jackson

### Missouri

St. Louis

### New Jersey

Cherry Hill  
Long Branch

### New Mexico

Albuquerque

### New York

Lake Success

### Ohio

Cleveland  
Columbus  
Dayton  
Portsmouth  
Youngstown

### Pennsylvania

Allentown  
Philadelphia  
Pittsburgh

### South Carolina

Charleston  
Columbia  
Greenville

### Tennessee

Memphis  
Knoxville  
Nashville

### Texas

Houston

### Virginia

Norfolk  
Richmond

## Company Background and Qualifications

### ATC Healthcare



ATC Healthcare is the premier provider of student healthcare and school nursing services for multiple school systems throughout the country. We are recognized in the industry as one of the most reputable healthcare providers in the country. As a result of our long standing track record of client satisfaction, our services are in high demand. Whether students are attending the special education center or one that is fully integrated in traditional schooling, Union Township Schools will be able to count on ATC Healthcare to provide the most cost efficient and quality service in the market.

With ATC, children get the necessary assistance needed at school to have a safe, healthy and happy childhood. Our nursing professionals have extensive pediatric experience and deliver individualized care with a compassionate touch. All of ATC's candidates must undergo a stringent screening process prior to employment. We assess each employee's skills, background, experience, and professionalism prior to assignment.

Committed to quality, ATC strives to maintain high levels of exceptional care through our dependable approach to satisfying the needs of our pediatric clients and their families. ATC's advantage over other pediatric care providers has stemmed from our ability to customize services to meet the individual needs of children we serve.

ATC possesses extensive experience in providing cost-effective services with the intent to prevent re hospitalization and promote family participation. Our healthcare professionals use the following teaching strategies to facilitate learning and progress:

- Utilize positive reinforcement
- Promote calm, quiet, stress free environments
- Actively involve the families in the treatment process
- Utilize vocabulary that can be easily understood

Our staff has also provided excellence in care to pediatric students with the following conditions:

- HIV/AIDS Support
- Behavioral Disorders
- Bronchopulmonary Dysplasia
- Hematology/Oncology
- Hypoventilation Syndrome
- Immunosuppression

- Cardiac Anomalies
- Cerebral Palsy
- Complex Congenital Disorders
- Cystic Fibrosis
- Diabetes
- Failure to Thrive
- Feeding Disorders
- Gastric Esophageal Reflux
- Gastrointestinal Disorders
- Handicaps (mental and physical)
- Metabolic Disorders
- Mitochondrial Disorders
- Neurological Impairments
- Neuromuscular Disease
- Orthopedic Conditions
- Pulmonary Disease
- Post-surgical Disorder
- Seizure Disorder
- Spastic Quadriplegia
- Spina Bifida

ATC will bring this dedication and commitment of quality of care to Union Township School's program and students. We will ensure that each student is treated fairly and with respect at all times. Our medical personnel are professionals who are experienced and dedicated in the provision of providing pediatric care services. They are highly competent individuals, whose sole interest is seeking the improved well-being of your students. With ATC, students will receive the necessary assistance to have a safe, healthy, and happy childhood.

**Past Performance** ATC understands the nature and scope of the services requested by Union Township Schools and has the commensurate experience to provide the highest level of service and satisfaction to you and your students. With more than 27 years of staffing experience, ATC has partnered with numerous organizations in both the public and private sector to provide excellent healthcare services.

We are nationally recognized as an exceptional vendor and are often commissioned by school districts to provide healthcare services to students. Some of the many public schools that have benefited from ATC's service of a similar size and scope to Union Township Schools include

- Homewood City Schools
- Shelby County Schools
- St. Clair County Schools
- Chicago Public Schools

- Berkley County Schools
- Charleston County Schools
- Monmouth Ocean County Schools

**Contact Information** The ATC Healthcare office in Long Branch, NJ will be responsible for the day-to-day operation and oversight of the contract with the Union Township Schools

Mrs. Rita Franklin RN; JD, ATC Director of Quality Improvement will be responsible for oversight of the Quality Improvement program and oversee any Quality Improvement/Quality Assurance issues. His telephone number is (770) 434-6066.

Mr. Aaron Ziraks, ATC's Director of Contracting and Government Healthcare will be responsible for any contractual questions that may arise. He is responsible for proposal preparation and will serve as a consultant to Mr. Beson for contractual administration. His telephone number is (516) 750-1711.

**Insurance Information**

614-340-7944

A copy of our insurance certificate is attached.

**Specific Information**

ATC will ensure that:

- ATC will meet HIPAA and maintain all Joint Commission and licensing requirements and/or standards.
- All contract employees provided for any given skill level would possess at least the minimum credentials for that skill level.
- All contract employees have the required background screening and investigations.
- Coordinate the schedules for each school and their nursing coverage. Also coordinate all one on one care for students in need of assistance in the classroom and on the bus
- Provide 24-hour on-call staff for the purpose of service accessibility.
- Work with the staff at the Union Township Schools to provide unit-specific orientation to the personnel assigned.

- Notify the school administration when one of our employees is sick and find replacement personnel.
- Ensure compliance with the school in meeting the Joint Commission standards regarding the use nursing staff.
- Assume sole and exclusive responsibility for the payment of wages to the staff we provide to the Union Township Schools, including FICA, unemployment insurance, workman's compensation coverage in amounts and under such terms as required by the State of New Jersey.

One of our Consultants will be available during regular business hours via the ATC local office phone number, and by cell phone during non-business hours. ATC also provides coverage 24 hours a day, 365 days a year. ATC's Night Call Coordinator will take over after routine duty hours and will return calls usually within 15 minutes but in no more than 30 minutes. Night Call Coordinators can perform exactly the same staffing functions after business hours that are performed during regular business hours. In addition, at least one of ATC's management staff is on-call at all times to support the night call coordinator.

## Support Services and Training

### *ATC QUALITY ASSURANCE ADVANTAGE*

ATC will be taking a combination of training programs and support models from other school systems to implement with Union Township Schools. ATC is committed to total client satisfaction and commits to maintaining its dedication to quality service. Relentless and uncompromising attention to the needs of client and the dedication to a creative, supportive work environment for our employees is the foundation of ATC's quality philosophy. We feel that quality is achieved through continuous review and improvement of all our business operations. This ensures that we are positioned to satisfy our client expectations, meet the needs of our internal customers, develop and support our Healthcare Associates and provide superior service to the client facility.

ATC's Corporate Clinical and Quality Improvement Department and each individual ATC office are jointly responsible for the administration of ATC's Quality Assurance Program. The Clinical Department develops and maintains the quality improvement policies whose function is to support client patient care standards and to improve processes or outcomes through adherence to quality assurance standards. When an incident is reported or discovered, processes are aimed at analyzing the situation to determine how to maintain or improve quality standards. A plan of corrective action may be developed if indicated by the situation. The Clinical Department is also responsible for maintaining compliance with all applicable JCAHO, OSHA, and governmental regulations. As required, and on an as-needed basis, the Clinical Department also develops programs to address internal and external findings in the healthcare clinical and regulatory arenas.

The focus of ATC's quality assurance standards center upon established screening, hiring, and performance monitoring procedures whose goals are to provide ATC's clients with competent Healthcare Associates that further the quality of the care provided to patients.

As evidence of ATC's continuing commitment to providing quality personnel, ATC received Healthcare Staffing Agency certification, titled Credentialing Advantage. Credentialing Advantage is an innovative certification program administered by Risk Control Services (RCS). The program vigorously analyzes agency's operations, hiring procedures, credentialing and various other business operation procedures.

ATC Healthcare Services values its relationship with its client and employees. As such, ATC has received a certification called Worker's Compensation Risk Certification that promotes employee safety on the job site or client assignment. This certification is renewed on an annual basis and is provided by the American Staffing Association (ASA) in conjunction with RCS. This prestigious certification



is awarded based upon an agency's proven commitment to sound risk management procedures and policies.

**ATC's sophisticated Quality Assurance Program incorporates the following:**

- ATC constantly seeks ways to add value to the service we provide our clients
- ATC encourages each client to advise ATC as to how they define quality
- ATC provides a staffing coordinator 24 hours a day to each client
- ATC provides clients with administrative staff knowledgeable of staffing needs and credentialing requirements
- ATC commits to providing immediate response to any issues or concerns that are reported
- ATC has comprehensive hiring standards
- ATC provides Healthcare Associates with a company orientation that includes information on company policies, infection control, patient care and ethics, and general safety subjects (as mandated by JCAHO, OSHA, and other regulatory agencies)
- ATC coordinates with client facilities the client specific orientation and any client specific needs
- ATC assesses Healthcare Associate competency upon hire and annually by verifying with the issuing body any applicable licensure and by administering skill checklists and written evaluations appropriate to profession and specialty areas
- ATC continuously assesses Healthcare Associate performance by initiating internal and external performance evaluations at set periodic intervals, annually and as needed to assess performance level
- ATC encourages clients to notify the appropriate branch of any incident involving ATC Healthcare Associates so that incidents can be promptly investigated and resolved in a coordinated and efficient manner. ATC has Registered Nurses at the Corporate level that direct and coordinate efforts between all parties to assist and resolve reported incidents
- ATC's Corporate Clinical and Quality Improvement Department monitors and analyzes all incidents reported by branch locations
- ATC encourages all client facilities to communicate policy and procedure changes affecting Healthcare Associates

## **Credentialing of Healthcare Associates**

Each Healthcare Associate presented for assignment is interviewed, completes an application for employment, Workers Compensation Form, Internal Revenue and state tax forms, U.S. Department of Justice (I-9) Form, and any facility specific required forms. An Activation Checklist is completed on each applicant prior to hire and presentation for assignment. ATC Healthcare Services will submit to the client the profiles and required information of Healthcare Associates who meet the hospital's specific request at least seven days prior to assignment start date.

ATC Healthcare Services has an extensive credentialing and quality assurance program that operates on multiple tiers.

Candidates presented for assignment will have at least two years of recent work experience in the area to be staffed.

Our routine credentialing procedures include verification with the applicable state license issuing body or bodies that the licensee holds a current, active, good standing license free of restrictions. Copies of applicable licenses are maintained in the personnel file and updated upon renewal. Re-verification of licenses is performed periodically. Primary educational source verification is performed for independent practitioners, such as advanced practice nurses and physician assistants. Required national organization memberships and licenses are also verified for advanced practice nurses and physician assistants.

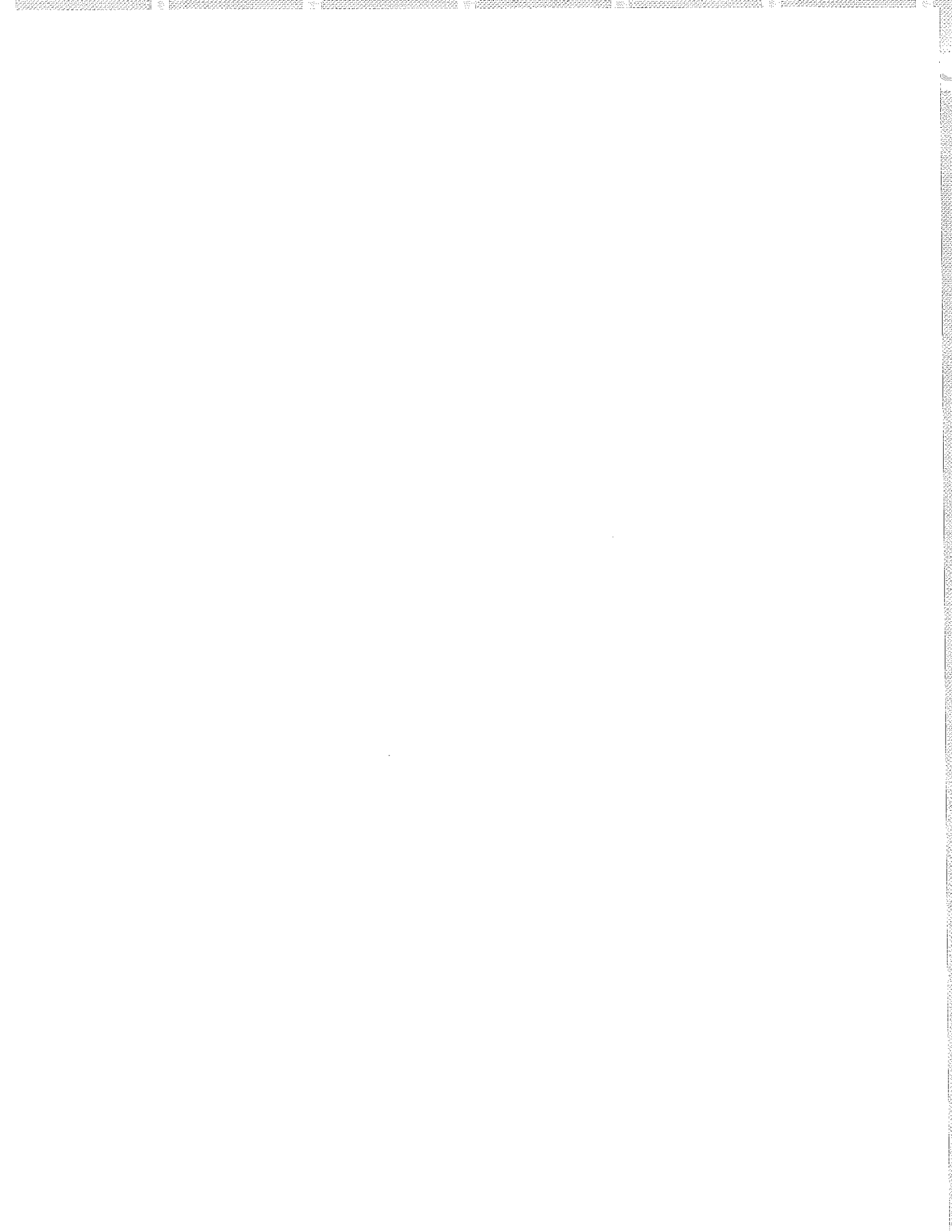
Each applicant must have three satisfactory current/prior work references. All references and other work history information are obtained by primary-sourced telephone or written contact.

Each applicant that will provide direct patient care must provide a current American Heart Association CPR card (BLS, ALS, PALS, NALS depending on specialty) and renewals of the same. The card is copied and placed in the personnel file along with subsequent renewals.

Each applicant completes an area specific self-appraisal skill checklist upon hire and annually. Further, each applicant must achieve a passing grade of 85% on a written area specific knowledge assessment test.

ATC Healthcare Services complies with Joint Commission on the Accreditation of Health Care Organizations initial and mandatory employee training, covering topics such as age specific competency and patient rights.

ATC complies with OSHA initial and annual mandatory training, such as blood borne pathogens, fire, and electrical safety.



Each Healthcare Associate must have a current physical examination, renewed annually, including a current tuberculosis skin test (previously positive applicants must provide medical proof of freedom from active communicable disease). TB skin tests are also renewed annually.

Criminal background checks and drugs screens are obtained as per client and/or federal/state requirements and maintained in the personnel file.

Our credentials staff will work hand in hand with your medical facility to ensure all needed credentialing actions are completed in a timely manner. Additionally, ATC Healthcare Staffing Services performs "preventative maintenance" on all the Healthcare Associate files through the use of a proprietary computer program to audit credential expirations and renewal. Each record will be monitored for licensure and certification expiration.

The focus of ATC's quality assurance program centers upon established screening, hiring, and performance evaluation processes.

Experienced Registered Nurses are present at both the Clinical Department and senior vice president levels to provide state of the art quality assurance direction and innovation to the services. Clinical quality assurance matters reported are individually analyzed and resolved at the different tiers to optimize not only ATC's commitment to patient care, but also that of your unique patient populations.

ATC Healthcare Services works to keep Healthcare Associates in our system and in long-term assignments in many ways. First and foremost is our level of service. We develop a personal relationship with each Healthcare Associate, and then carefully match him or her to appropriate assignments. We maintain continual contact throughout the duration of each job and, if necessary, immediately troubleshoot any problems or concerns that come up.

In addition, we pay for and coordinate the following items for each provider:

- × Licensure in new states, if necessary
- × Long distance travel to the assignment
- × Comfortable housing near the worksite for long-term assignments
- × A comprehensive orientation to ATC Healthcare Services and the facility

### **Identification of Audit Deficiencies**

Various organizations have performed audits at different ATC branch locations during the past twelve months. ATC Healthcare Services is proud to report that no contracts have been terminated during that time due to audit deficiencies. Items found deficient included rare occasions of CPR, immunization, and/or form renewal discrepancies. Any and all deficiencies found were addressed by a

corrective action plan developed specifically for the particular audit findings in accordance with the Quality Assurance Plan previously described.

**Rita Franklin, RN, BSN, JD**  
**Clinical Director of Risk Management/Quality Improvement**

**Clinical Director of Risk Management/Quality Improvement,  
ATC Healthcare Services, Inc.**

Responsibilities include:

- Quality improvement incident review, analysis, and resolution
- Quality standards & clinical employee screening process
- Development of clinical policies/procedures and programs
- Clinical issue follow-up, consultation & direction
- Clinical & HCA qualifications and credentials
- Development of educational programs for HCAs
- Research and compliance initiatives with applicable JCAHO, OSHA and other regulatory body standards and rules

**Previous Experience:**

***Contract Researcher for Centers for Disease Control, Atlanta, Georgia***

Abstracted data from records related to prenatally diagnosed fetal anomalies, compared with anomalies found at birth.

***Public Defender, Neosho and Allen Counties, Kansas***

Defended criminal defendants through court appointments; contract with Neosho County for defense of parent(s) in severance of parental rights proceedings, guardian ad litem per court appointment.

***Labor & Delivery Nurse, Labette County Medical Center***

Total care of laboring patient through all phases of labor.

***Perinatal Nurse, Mercy Hospital, Ft. Scott, Kansas***

Total care of laboring patient through all phases of labor; newborn nursery and neonatal intensive care nursery nurse.

***ICU Nurse, Atlanta Children's Hospital (formerly Scottish Rite Children's Hospital)***

Provided total nursing care to critically ill neonates and children. Member of the NICU air transport team.

***NICU Nurse, Piedmont Hospital, Atlanta, Georgia***

Provided total nursing care to critically ill neonates.

***Medical Surgical Nurse, West Paces Ferry Hospital, Atlanta, Georgia***

Staff nurse in medical-surgical unit.

**Education**

Washburn University, School of Law, Topeka, Kansas, Juris Doctor

Pittsburg State University, Pittsburg, Kansas, Bachelor of Science

Georgia Southwestern University, Americus, Georgia, Bachelors Degree in Nursing

## Client References

*"The best indication of future success is favorable past performance"*

**ATC Healthcare Services** holds this belief dearly as we strive to continually improve our performance in administering every contract we are awarded. We staff over 800 different healthcare facilities nationwide on a daily basis and have only included a representative list of some of those contracts. Other contracts from across the country can be forwarded to you if requested.

**Name:** Shelby County Schools (Alabama)  
**Contact Person:** Ms. Jan Cibulski, Director of Nurses  
**Contact Information:** Tel: (205) 682-6552  
**Email:** Jcibulski@Shelbyed.k12.al.us  
**Services Provided:** School nursing

**Name:** St. Clair County Schools  
**Contact Person:** Ms. Sharon Owens, Director of Nurses  
**Contact Information:** Tel: (205)640-2199  
**Email:** Sharon.owen@sccboe.org  
**Services Provided:** School Nursing

**Name:** Homewood City Schools  
**Contact Person:** Ms. Debra Bowman, Director of Nursing  
**Contact Information:** Tel: (205)870-4203  
**Email:** dbowman@homewood.k12.al.us  
**Services Provided:** School Nursing

**Name:** Charleston County Schools  
**Contact Person:** Ms. Melissa Prendergast, Director of Nurses  
**Contact Information:** Tel: (843)200-2639  
**Email:** Melissa\_prendergast@charleston.k12.sc.us  
**Services Provided:** School Nursing



## STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE

**Taxpayer Name:** ATC HEALTHCARE SERVICES, INC.

**Trade Name:**

**Address:** 200 BARCLAY CENTER SUITE250  
CHERRY HILL, NJ 08034

**Certificate Number:** 0880658

**Effective Date:** May 21, 1996

**Date of Issuance:** September 16, 2008

**For Office Use Only:**

20080916114137606



## Request for Taxpayer Identification Number and Certification

**Give Form to the  
 requester. Do not  
 send to the IRS.**

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return) <b>ATC Healthcare Services, INC</b>	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____  <input type="checkbox"/> Other (see instructions) ▶ _____	Exemptions (see instructions):  Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____
	Address (number, street, and apt. or suite no.) <b>1983 Marcus Ave</b>	Requester's name and address (optional)
	City, state, and ZIP code <b>Lake Success, NY 11042</b>	
List account number(s) here (optional)		

**Part I Taxpayer identification number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number								
				-				

Employer identification number									
5	8	-	1	6	4	2	3	5	6

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

**Part II Certification**

- Under penalties of perjury, I certify that:
- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
  - I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
  - I am a U.S. citizen or other U.S. person (defined below), and
  - The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions:** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶ <b>10-7-13</b>
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**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** The IRS has created a page on IRS.gov for information about Form W-9, at [www.irs.gov/w9](http://www.irs.gov/w9). Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

**Purpose of Form**

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

**Note.** If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

**STATE OF NEW JERSEY**  
Division of Purchase & Property  
Contract Compliance Audit Unit  
EEO Monitoring Program

**EMPLOYEE INFORMATION REPORT**

**IMPORTANT-READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING FORM. FAILURE TO PROPERLY COMPLETE THE ENTIRE FORM AND TO SUBMIT THE REQUIRED \$150.00 FEE MAY DELAY ISSUANCE OF YOUR CERTIFICATE. DO NOT SUBMIT EEO-1 REPORT FOR SECTION B, ITEM 11. For Instructions on completing the form, go to: [http://www.state.nj.us/treasury/contract\\_compliance/pdf/aa302ins.pdf](http://www.state.nj.us/treasury/contract_compliance/pdf/aa302ins.pdf)**

**SECTION A - COMPANY IDENTIFICATION**

1. FID. NO. OR SOCIAL SECURITY 58-1642356		2. TYPE OF BUSINESS <input type="checkbox"/> 1. MFG <input checked="" type="checkbox"/> 2. SERVICE <input type="checkbox"/> 3. WHOLESALE <input type="checkbox"/> 4. RETAIL <input type="checkbox"/> 5. OTHER			3. TOTAL NO. EMPLOYEES IN THE ENTIRE COMPANY	
4. COMPANY NAME ATC Healthcare Services						
5. STREET 1983 Marcus Ave		CITY Lake Success		COUNTY Nassau		STATE NY
						ZIP CODE 11042
6. NAME OF PARENT OR AFFILIATED COMPANY (IF NONE, SO INDICATE) None				CITY		STATE
						ZIP CODE
7. CHECK ONE: IS THE COMPANY: <input checked="" type="checkbox"/> SINGLE-ESTABLISHMENT EMPLOYER <input type="checkbox"/> MULTI-ESTABLISHMENT EMPLOYER						
8. IF MULTI-ESTABLISHMENT EMPLOYER, STATE THE NUMBER OF ESTABLISHMENTS IN NJ						
9. TOTAL NUMBER OF EMPLOYEES AT ESTABLISHMENT WHICH HAS BEEN AWARDED THE CONTRACT						5
10. PUBLIC AGENCY AWARDDING CONTRACT						
Union Township		CITY Union		COUNTY Union		STATE NJ
						ZIP CODE 07083
Official Use Only		DATE RECEIVED		INAUG. DATE		ASSIGNED CERTIFICATION NUMBER


**SECTION B - EMPLOYMENT DATA**

11. Report all permanent, temporary and part-time employees ON YOUR OWN PAYROLL. Enter the appropriate figures on all lines and in all columns. Where there are no employees in a particular category, enter a zero. Include ALL employees, not just those in minority/non-minority categories, in columns 1, 2, & 3. **DO NOT SUBMIT AN EEO-1 REPORT.**

JOB CATEGORIES	ALL EMPLOYEES			PERMANENT MINORITY/NON-MINORITY EMPLOYEE BREAKDOWN										
	COL. 1 TOTAL (Cols. 2 & 3)	COL. 2 MALE	COL. 3 FEMALE	***** MALE *****					***** FEMALE *****					
				BLACK	HISPANIC	AMER. INDIAN	ASIAN	NON MIN.	BLACK	HISPANIC	AMER. INDIAN	ASIAN	NON MIN.	
Officials/Managers	14	8	6						8	1			1	4
Professionals	4	2	2		1				1					2
Technicians	0													
Sales Workers	0													
Office & Clerical	7	2	5						2	1			1	3
Craftworkers (Skilled)	0													
Operatives (Semi-skilled)	0													
Laborers (Unskilled)	0													
Service Workers	0													
<b>TOTAL</b>	<b>25</b>	<b>12</b>	<b>13</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>11</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>9</b>
Total employment From previous Report (if any)														
Temporary & Part-Time Employees	The data below shall NOT be included in the figures for the appropriate categories above.													
	0													

12. HOW WAS INFORMATION AS TO RACE OR ETHNIC GROUP IN SECTION B OBTAINED? <input type="checkbox"/> 1. Visual Survey <input checked="" type="checkbox"/> 2. Employment Record <input type="checkbox"/> 3. Other (Specify)		14. IS THIS THE FIRST Employee Information Report Submitted? 1. YES <input type="checkbox"/> 2. NO <input checked="" type="checkbox"/>		15. IF NO, DATE LAST REPORT SUBMITTED MO.   DAY   YEAR 8   14   13	
13. DATES OF PAYROLL PERIOD USED From: 9/22/2013 To: 9/28/2013					

**SECTION C - SIGNATURE AND IDENTIFICATION**

16. NAME OF PERSON COMPLETING FORM (Print or Type) Aaron Ziraks		SIGNATURE 		TITLE Dir. of Government Ops		DATE MO   DAY   YEAR 10   7   13	
17. ADDRESS NO. & STREET 1983 Marcus Ave		CITY Lake Success		COUNTY Nassau		STATE NY	
				ZIP CODE 11042		PHONE (AREA CODE, NO., EXTENSION) 516 - 750 - 1711	



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/7/2013

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

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

<b>PRODUCER</b> The Odell Studner Group, LLC 100 Matsonford Road Building 3 Radnor PA 19087		<b>CONTACT NAME:</b> Ryan Morris <b>PHONE (A/C, No, Ext):</b> <b>E-MAIL ADDRESS:</b>		<b>FAX (A/C, No):</b> 484-586-3975
<b>INSURED</b> ATC Healthcare, Inc. 1983 Marcus Avenue, Ste E-122 Lake Success NY 11042		<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
		<b>INSURER A:</b> Zurich American Insurance Co		16535
		<b>INSURER B:</b> American Guarantee & Liab Ins.		26247
		<b>INSURER C:</b> Zurich American Insurance Co		16535
		<b>INSURER D:</b>		
		<b>INSURER E:</b>		
		<b>INSURER F:</b>		

**COVERAGES** **CERTIFICATE NUMBER:** 497625728 **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR VWD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
C	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC			PRA585374301	9/1/2013	9/1/2014	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$3,000,000 PRODUCTS - COMP/OP AGG \$3,000,000 \$
C	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			PRA585374301	9/1/2013	9/1/2014	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$10,000			UMB549870401	9/1/2013	9/1/2014	EACH OCCURRENCE \$10,000,000 AGGREGATE \$10,000,000 \$
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below:		Y/N	WC343479810	1/1/2013	1/1/2014	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
C	3rd Party Crime Coverage			PRA585374301	9/1/2013	9/1/2014	Crime Occ \$1,000,000
C	Professional Liability			PRA585374301	9/1/2013	9/1/2014	Per Occ \$1,000,000 \$25k Deductible Ded. 25,000 Agg \$3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 10t, Additional Remarks Schedule, if more space is required)  
Alternate Employer Endorsement is included for Workers' Compensation when required by written contract. Umbrella follows form to underlying Commercial General Liability, Professional Liability/E&O, Hired & Non-Owned Automobile Liability and Employers' Liability policies.

<b>CERTIFICATE HOLDER</b>	<b>CANCELLATION</b>
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 