



Vital Health Staffing LLC - 4141 38th St S Ste 2D, Fargo, ND 58104

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Professional Conduct & Conflict of Interest Agreement

At Vital Health Staffing, LLC, we are committed to upholding the highest standards of professionalism, ethics, and accountability. As a valued healthcare professional, you represent our mission and values in every interaction. This agreement outlines the expectations we uphold together.

Statement of Accountability

- **Uphold Professional Conduct** - I will treat patients, clients, coworkers, and supervisors with respect and professionalism at all times.
- **Follow Policies & Laws** - I will comply with all Vital Health Staffing policies and the laws, regulations, and ethical guidelines of the healthcare industry.
- **Provide Safe & Competent Care** - I will deliver compassionate, high-quality care and strive to grow my professional skills continuously.
- **Maintain Confidentiality** - I will protect the privacy of all patient information according to HIPAA and related privacy laws.
- **Be Dependable & Responsible** - I will be on time for my scheduled shifts and will notify both the facility and Vital Health Staffing if I am unable to attend.
- **Keep Accurate Records** - I will document my work clearly and report any concerns, incidents, or errors to the appropriate party.
- **Represent VHS with Integrity** - I understand that my actions reflect Vital Health Staffing and will act accordingly in all professional settings.

Conflict of Interest Policy

- **Duty to Disclose** - I will immediately report any personal or financial interest that could interfere with my role at Vital Health Staffing.
- **Review Process** - If a potential conflict is reported, I understand that management may investigate, discuss, and decide on appropriate next steps, which could include reassignment or, in serious cases, termination.
- **Disciplinary Action** - I understand that failure to report a conflict of interest may result in disciplinary action, up to and including termination.
- **Annual Acknowledgment** - I agree to sign this document upon hire and recognize that my compliance is required throughout my time with the company, even if I forget to return this signed copy.

Acknowledgment & Signature - By signing below, I confirm that I understand and agree to the expectations outlined above and will notify Vital Health Staffing of any changes or concerns.

Signature: _____ Date: _____

Printed Name: _____