

Welcome to Sensible Staffing. This handbook provides you with details of the relationship that exists between us and you as a Temporary Worker whilst on assignment. You will find included statements, policies and procedures that are relevant to your work placements and will detail what is expected of you. It should be read in conjunction with your Terms and Conditions. This document is not intended to replace the internal policies and procedures of our clients. We feel that a clear understanding of responsibilities will lead to a successful and safe working relationship. We are committed to providing a quality service to both our clients and yourself, therefore it is essential you familiarise yourself with the contents of this handbook.

Please keep this booklet as you may find the information useful as a source of reference now and whilst working through Sensible Staffing. If any of the sections are unclear, or if you have any questions please speak to your Recruitment Consultant.

Contacting Sensible Staffing

Our Address is:

Sensible Staffing
Churchwood House
116 Cockfosters Road
Barnet EN4 0DR

Telephone: 0208 364 9911
Fax: 0208 364 9966
e-mail: info@sensible-staffing.com

Our normal office opening hours are:

Monday –Thursday: 09.00 – 19.30
Friday: 09.00 – 19.00

Outside of these hours you can still contact our main telephone number as we operate a 24 hour on-call number for emergencies.

Before you start work:

Once you have completed the application process with Sensible Staffing, a consultant will call you to confirm you are ready to start work. Sensible Staffing is unable to offer you work until the recruitment process is completed.

Induction, Mandatory Training & CPD (Continuing Professional Development) As well as briefing you on general issues and procedures, we will provide you with the following mandatory training covering;

Moving and Handling	Basic Life Support
Health and Safety	Fire Procedures
Risk Incident Reporting	Lone Worker Training
Information Governance	Conflict Resolution
Complaints Handling	Safeguarding Children
Safeguarding Vulnerable Adults	Infection Control

It is important that you keep your skills and knowledge up to date. Therefore you are required to take part in regular learning activities and CPD. We will assist you both practically and financially during your time with us. CPD activities include the purchase of relevant books, attending courses and conferences or subscriptions to journals. You must complete mandatory training on an annual basis. We regularly organise courses, please contact your consultant for details of available dates.

You can also source your own training courses and use the CPD allowance to fund it.

Risk Incident Reporting Under the Management of Health and Safety Regulations of 1992 you have a legal duty of care to report all accidents, incidents and near misses. These regulations impose a duty on employers to perform risk assessments on all work activities. If during the course of your work you identify a risk to the health, safety or welfare of your own personal safety, and/or that of your colleagues/patients/clients, you have a duty to report this. In the first instance it should be reported to the person in charge of the department to which you are assigned, and to us. You will then be instructed if further action is required i.e. to complete an incident report form.

Lone Workers Information Lone workers are those workers who work by themselves without close or direct supervision. Lone working is not governed by any specific legislation but a wide range of legislation may apply depending on the nature of the work involved. In all instances the Health and Safety at Work Act 1974 and the Management of Health and Safety Regulations of 1992 will apply. Generally, within the healthcare industry, lone workers can be regarded as those who work on a mobile basis such as community/district nurses, domiciliary homecare workers etc, or those personnel who work outside of normal hours e.g. Domestic, porters, security etc In all cases where a worker is expected to work alone a risk assessment should be performed by the client and steps taken to reduce risk to the lowest practicable level. The risk assessment should address:

- 1) Whether the work can be performed safely by a single person
 - 2) What arrangements are required to ensure the lone worker is at no more risk than employees working together.
- If for any reason you consider yourself to be at risk working in a "lone worker" situation please contact your recruitment consultant immediately so that a further risk assessment can be performed and arrangements can be made to ensure safe systems of work and your personal safety.

Violence and Aggression It has been recognised for some time that workers in a hospital or healthcare setting work within an environment where there is potential for threat, aggression or violence. Violence and aggression can be defined as including the following circumstances:

- 1) Minor assaults including situations where physical contact and/or injuries occur which require first aid treatment
- 2) Threats with an offensive weapon without physical injury
- 3) Aggravated assault resulting in injury requiring medical assistance
- 4) Threatening behaviour which could include verbal abuse or threats, and fear arising from damage to the physical environment
- 5) Assault resulting in serious injury and/or death.

Any violent, abusive or threatening behaviour is unacceptable. You must report any incident immediately to the person in charge and also to us. The establishment where you are working the assignment will have policies for dealing with such incidents, and an incident report form should be completed both at the place of work and by us. Remember, all staff members have an obligation under the Health and Safety at Work Act 1974 to have regard for their own health, safety and welfare at work, and that of others who may be affected by their acts or omissions.

The Caldicott Protocols The Caldicott review was commissioned due to the development of information technology and its capacity to disseminate information about patients/service users both rapidly and extensively. An essential component of the clinical consultation in the provision of health care is confidentiality. All healthcare workers have stringent requirements with regard to confidentiality of patients within their care. However information given about patients underpins the efficient operation of the Health Service, and it is important that confidentiality does not impede upon the provision of effective patient care. Therefore the Caldicott review devised protocols and recommendations, which assume the appointment of a Caldicott Guardian who is created to safeguard and govern the users of patient information within Healthcare organisations. Caldicott guardians are senior health professionals. You are required to familiarise yourself with the local policy on confidentiality within the establishment where you have been placed on assignment.

Complaint Handling From time to time it may be the case that you receive a complaint from a client, patient or other person. If you are on an assignment, please report any complaints to a senior person in the department you are working and document all details of the complaint. You must also report the complaint to us. We operate a detailed complaints policy specifically for use when on assignment, which you will be provided with on request. If you personally are the subject of a complaint you will also be asked to record details as part of an investigation and in some circumstances it may be necessary to suspend you from duty whilst the investigation is in process. We recommend that you should make your defence society aware should be subject to or asked to participate in any complaint or incident investigation. Any complaints of misconduct against individuals may be reported to the relevant Professional Body if deemed appropriate by our Clinical Lead.

MRSA & Infection Control Methicillin Resistant Staphylococcus Aureus (MRSA) is the name given to a range of strains of antibiotic-resistant bacteria. MRSA exists on the hands or in the nose of around one third of the healthy population and is usually harmless. It can however prove fatal if it enters the bloodstream of an already weakened patient. It is usually transmitted by touch. The single most effective measure for preventing MRSA contamination and controlling infection is washing hands before and after every patient contact. In addition, please; 1) Use liquid soap and water or an alcohol-based hand rub when washing hands – make sure it comes into contact with all areas 2) Ensure that you are 'bear below the elbow' during contact with patients or use clinical areas. This means that sleeves should be rolled up and all watches and jewellery must be removed. 3) Wear disposable gloves and aprons when attending to dressings or dealing with blood and body fluids (sterile gloves should only be worn when performing aseptic techniques. 4) Dispose of gloves and aprons after use 5) Cover cuts or breaks in your skin or those of patients/clients with waterproof dressings. If you come into contact with a patient who is later found to be contaminated with MRSA, it may be necessary to attend screening. During this time and before you have been declared clear from MRSA, we may be restricted in the assignments we can offer you due to the risks of infection.

Conduct and Requirements for Assignments We expect all Temporary and Agency Workers to act in a professional manner at all times. We particularly ask you to pay special attention to: 1) Punctuality 2) Standards of Dress and Courtesy 3) Quality of Care and Clinical Procedures 4) Consideration and Respect for patients, colleagues and managers 5) Confidentiality and Integrity.

Please make every effort to ensure you arrive at and leave all bookings at the agreed time, confirmed in your booking confirmation. If, for any reason, you are unable to attend a booking you should contact your consultant as soon as possible. Lateness may have a serious effect on services and achieving important key performance targets. Please attend all bookings with your current photographic ID badge. Please also take proof of registration with your Registered Body as the client may wish to see this prior to your assignment beginning. Mobile phones, unless working in the Community, should be switched off for the duration of your assignment. For assignments you are to dress smartly. The wearing of jeans is not permitted. If in any doubt on what to wear seek advice from your consultant. It is also important that client premises and equipment are treated with respect and left clean and acceptable for use. In particular you are required to ensure that client vehicles are left clean and the desks are left tidy. You are responsible for your own actions when completing assignments, co-operating with colleagues and managers for the care of patients and clients. You should comply with all reasonable requests, using your professional judgement at all times. If you have any questions about your work, please try to resolve these locally at first or seek advice from us. You should not smoke at work or attend work under the influence of alcohol or any illegal drugs.

In addition to the above please abide by your Standards and Code of Conduct from your Regulatory Body (GMC / HPC / NMC / GPhC)

On arrival at a new booking, please take the opportunity to familiarise yourself with the local policies and procedures. In particular, please be aware of the following, where relevant:

- 1) Crash Call Procedure
- 2) Hot Spot Mechanisms
- 3) Violent Episode Policy
- 4) Procedure for Alerting Security Staff
- 5) Policy for Administration & Assistance with Drugs
- 6) Complaints handling.

Where possible, we encourage Members to visit their potential workplace prior to starting work. If you have any queries regarding correct local procedures, or are uncomfortable carrying out any of the duties you have been asked to perform, please raise these issues with your consultant in the first instance. We also expect you to report any accidents, incidents or near misses to your line manager and your Sensible Staffing consultant. If you do not find a particular placement to your liking please let us know so we can find you alternative work.

Availability You can let us know your availability for work by calling the office or e-mailing your consultant. Please give us as much notice as possible of your availability. We will also contact you to discuss placements coming in that suit your skills so please remember to update your contact details with us whenever you change them. If your availability changes for any reason let us know so we can update our database.

Working for Sensible Staffing Rates of pay – Sensible Staffing offer competitive pay rates which will vary according to grade and speciality. Each time you are offered an assignment you will be advised of the applicable pay rate.

Attendance / Punctuality – If you accept a placement you must arrive on time. If you cannot attend you must inform us as soon as practicable. Remember you can contact us on the number above 24 hours per day.

Cancellations – Due to the nature of temporary work our clients requirements may change resulting in cancellation of your placement. In some cases this can occur at short notice. Sensible Staffing will contact you as soon as possible in the event of any cancellations.

Direct bookings with Clients – Occasionally the client may approach you directly to book shifts. If this happens please inform The Sensible Staffing immediately so we can update our payroll system and ensure that any client procedures about bookings can be adhered to so as to prevent issues with timesheets.

Fitness to Practice & Immunisations It is important for your own health and of those in your care that you are fit to practice whenever you attend an assignment. You must declare your fitness to practice or otherwise when you accept an assignment. You **MUST** advise Sensible Staffing if you are or if you become pregnant. If you are concerned that your assignment involves unnecessary risks to your health or fitness, or that of your unborn child, please do not hesitate to contact us. If you are pregnant we are required to perform a health and risk assessment for all expectant mothers. You are required to keep the following immunisations up to date:

- 1) Hepatitis B
- 2) Varicella (Chicken Pox)
- 3) Rubella (German Measles)
- 4) Tuberculosis
- 5) Measles
- 6) Hepatitis C

Any boosters or new vaccinations should be recorded on your Immunisation Record. You need to disclose details on your application form and provide details of any vaccination to us. Documented proof is required for Hepatitis B, Varicella, Rubella, Measles and Tuberculosis. Without proof of immunisation we will be unable to offer you certain assignments.

AIDS/ HIV You should be aware of and abide by the requirements of HSC 1998/ 226 "Guidance on the Management of AIDS/ HIV Infected Health Care Workers and Patient Notification"

- 1) If you believe you may have been exposed to HIV infection in any way you should seek medical advice from your GP or a Occupational Health Department and, where appropriate, undergo diagnostic HIV antibody testing.
- 2) If you are found to be infected, you must again seek guidance from your GP or Occupational Health Department.
- 3) If you are found to be HIV positive and perform or assist with invasive surgical procedures you must stop this immediately and seek advice from your GP or Occupational Health Department regarding what action, if any, should be taken.
- 4) Please be aware that it is the obligation of all health workers to notify their employer and, where appropriate, the relevant professional regulatory body, if they are aware of HIV positive individuals who have not heeded advice to modify their working practice. Please note the above guidance does not supersede current Department of Health Guidelines (in particular HSC 1998/226) or local practices and procedures.

Medicals Because of the importance of your fitness to practice, we reserve the right to request a certificate of fitness to practice from our Occupational Health Service. Our clients may also ask that you undergo a medical examination before commencing work for them. In these cases, future placements may be dependent upon your compliance with this request and its outcome, providing it was made with good reason.

Criminal Convictions It is our policy to obtain a DBS check (Disclosure and Barring Service) or a DS (Disclosure Scotland) for our Temporary Workers. Certain types of employment and certain professions are exempt from the Rehabilitation of Offenders Act 1974 and in those cases particularly where the employment is sought in relation to positions involving working with children or vulnerable adults details of all criminal convictions, both spent and unspent, must be given. The information you provide will be treated in confidence and only taken into account where, in the reasonable opinion of the Company the offence is relevant to the post for which you are applying. Please be aware that our clients may insist we inform them in writing of any criminal convictions you may have before accepting you for an assignment – we will only provide this information with your consent. We cannot be held responsible should clients decline your services following refusal to comply with this request or disclosure of criminal conviction. Our own response to criminal record information will depend upon its nature and seriousness and will be in line with our policy on the recruitment of ex-offenders. This check will be carried out on an annual basis after your initial check. Please ensure that you inform us if you are investigated, cautioned or convicted of any offense between the DBS checks.

Timesheets Timesheets run from Monday to Sunday. Please submit your timesheet to us for each week worked. We run our main payroll on Wednesday and therefore we require your timesheet before this although deadlines may change around Bank Holidays. Payments are made directly into your account by BACS (Please make sure we have the correct details). It is your responsibility to ensure your timesheet is legible, completed correctly and has been authorised and signed by your manager- payment may be delayed if this is not the case. If you have been given a reference number for your shifts please ensure that these are included on your timesheet. Please use a separate timesheet for each working week and each new client you are placed with. Sensible Staffing will treat any attempt to falsify any of the information on your timesheet very seriously. All suspicions of fraud must be reported to your Consultant, your line manager on placement or in confidence to the NHS Fraud and Corruption Reporting Line on 0800 028 4060.

Holiday Pay (PAYE Agency Workers) If you are a PAYE Agency Workers you will start accruing holiday pay as soon as you begin work through us and can request this from your Consultant at any time. Holiday entitlement is the statutory minimum for full time workers, apportioned pro rata for part time workers. Should you be entitled to enhanced holiday under the Agency Workers Directive we will make you aware. The holiday year ends 31st December – please be sure to arrange holiday in advance of this date as it is not possible to carry entitlement over to the following year.

Agency Workers Regulations Agency workers will be entitled to the same basic working and employment conditions as a recruit of the hirer (or a comparable employee) after 12 weeks of service in the same role with the same hirer. The entitlements include pay, duration of working time, night work, rest periods, rest breaks and annual leave. 'Pay' has been specifically defined as "any sums payable to a worker of the hirer in connection with the worker's employment including any fees, bonus, commission, holiday pay or other emolument referable to the employment, whether payable under a contract or otherwise..." The definition of pay includes holiday pay, shift allowances, unsociable hours premia, overtime rates, vouchers with a fixed monetary value (but which are not subject to a salary sacrifice arrangement), stamps and bonuses directly related to quantity and quality of the work carried out.

Appraisals Appraisals give us an opportunity to consider with you your performance at work and will be completed periodically. They are also an opportunity for you to raise any concerns or issues you may have. Appraisals are carried out based on feedback received from clients. We may also require details of any appraisals you have carried out annually by an employer and for Doctors we will also require details of your revalidation date, Designated Body and Responsible Officer. We can assist with arranging appraisals where required.

Framework Agreements and Contracts We supply to a number of organisations including the NHS under various contractual agreements and Frameworks. This means that we are able to offer you a variety of flexible working options. It also means that a contract or Framework may require us as a Supplier to provide certain quality assurance levels. We will make you aware when we are discussing bookings with you what those requirements are so that you understand and can assist us to meet those requirements.

Policies You will find our Health and Safety, Whistleblowing, Environmental and Equal Opportunities policies on the downloads section of our website. Below you will find further information on policies and procedures. These policies and procedures are not intended to replace any policies or procedures issued by any of our clients or organisation on with which you may be placed on assignment.

Medication Policy Please follow the policies and procedures issued by the client or organisation where you are placed on assignment. In addition to this please also ensure you follow the standards set out by your regulatory body.

Equal Opportunities We will offer equality to all our Temporary and Agency Workers and will treat any allegations of discrimination with the utmost seriousness. In accordance with these principles Members may not discriminate on the grounds of:

- 1) Race
- 2) Ethnic Origin
- 3) Nationality
- 4) Colour
- 5) Religion or Belief
- 6) Gender
- 7) Sexual Orientation
- 8) Marital Status
- 9) Disability

Health and Safety Under the Health & Safety at Work Act 1974, it is your duty to:

- 1) Take reasonable care for the health and safety at work of yourself and any other people who might be affected by your acts or omissions
 - 2) Co-operate with your employer and others to enable them to comply with statutory duties and requirements
 - 3) Not intentionally or recklessly misuse anything provided in the interests of health, safety or welfare
- The Management of Health & Safety at Work Regulations 1992 further requires you to:
- a) Use any equipment, etc, provided in the interests of safety
 - b) Follow health & safety instructions
 - c) Report anything you consider to be a serious danger
 - d) Report any shortcomings in the protection arrangements for health & safety.

When on assignment, it is the client's responsibility to familiarise you with their own Health & Safety policy and procedures, and with locations of fire escapes, first aid contact person etc. We cannot, be held responsible for the suitability of workstations used by our clients. If you express concern over the Health & Safety arrangements of your employing client, we will ask the client to investigate and, if possible, to make improvements. If you refuse to work for a Client on Health & Safety grounds, we will attempt to find you other employment without prejudice.

Record Keeping, Data Protection and the Freedom of Information Act Good records are essential to safe and effective patient care and should be;

- 1) Clear, legible and indelible
- 2) Factual and accurate
- 3) Written as soon after the event as possible
- 4) Signed, timed and dated

Records should:

- a) Be written with the involvement of the patient, client or their cares where possible
- b) Be written in terms the patient or client can understand.

Confidentiality Any patient information obtained by you during the course of your duties is confidential and should not be disclosed to any third party if it is not legitimately in connection with their treatment or any other official investigation. Please take care with patient records when on assignment to ensure that they are not in undue danger of being accessed by unauthorized individuals. Patients'/Clients' information should only normally be shared with their consent – you should make sure patients/Clients understand that their information may be shared with various members of the team providing care. It is a patient's/Client's decision what information should be shared with their family or others. Where a patient/Client is considered incapable of giving consent, please consult relevant colleagues. Where a patient/Client has withheld consent, disclosures of information may only be made if:

- 1) They can be justified in the public interest (normally where the disclosure is essential to protect the patient/client or someone else from risk of significant harm).
- 2) They are required by law or court order.

You should act in accordance with local and national policies if there is an issue of child protection.

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- 2) Factual and accurate
- 3) Written as soon after the event as possible
- 4) Signed, timed and dated

Records should:

- a) Be written with the involvement of the patient, client or their cares where possible
- b) Be written in terms the patient or client can understand
- c) Be consecutive
- d) Identify problems that have arisen and action taken to rectify them
- e) Show care planned, decisions made, care delivered and information shared

Please be aware that full records are essential should any questions be raised about the care and standards of care delivered. For more detailed information, please see the relevant professional membership body's guidelines.

In addition to the above, you should adhere to the requirements of the Data Protection Act 1998. In brief, anyone processing personal data must comply with the eight enforceable principles of good practice. Data must be:

- 1) Fairly and lawfully processed
- 2) Processed for limited purposes
- 3) Adequate, relevant and not excessive
- 4) Accurate
- 5) Not kept for longer than necessary
- 6) Processed in accordance with the data subject's rights
- 7) Secure
- 8) Not transferred to countries without adequate protection

For further information, please see: <http://www.dataprotection.gov.uk>, from which the above guidance is reproduced.

Where our clients grant you access to their computer systems, these must only be used as authorised and not to gain access to any other data or programs. In general, please ensure that you:

- 1) Keep any passwords safe
 - 2) Keep to the client's policies and procedures
 - 3) Log off immediately after use
- Specifically, you must:
- a) Observe any local policies and procedures regarding passwords, floppy disks, CD ROMs and data storage/transfer
 - b) Not load or introduce any programs onto the computer
 - c) Not access any information service or bulletin board including the Internet without specific prior authority from your line manager
 - d) Not download any files or connect to any network or other computer equipment without prior authority as above.

The Freedom of Information Act 2000 came into force in January 2005 and gives any person legal rights of access to information which is held by a public authority. This should be taken in to account during records keeping and particular attention paid to notes recorded on computer systems. In addition you must also be aware that recordings of telephone calls may be monitored for training and quality purposes.

Consent In accordance with GMC and relevant professional membership bodies, you must obtain the consent of a patient before giving any treatment or care. Consent must be: 1) Given by a legally competent person 2) Given voluntarily 3) Informed Patients/ clients are assumed to be legally competent (that is they can understand and retain treatment information and use it to make an informed choice) unless otherwise assessed by a suitably qualified practitioner. The exception to this rule is in the case of an emergency where a treatment is necessary to preserve life and the patient/ client is unable to give consent. In all cases, you must be able to demonstrate you are acting in the patient's best interests. If a patient/ client is no longer legally competent, decisions should be based on previous consent/ non-consent in a similar situation providing there is no reason to believe they have changed their mind) or their known wishes. Otherwise, treatment should be in their best interests. In the case of children (those aged under 16 in England and Wales), the involvement of those with parental responsibility is usually necessary – you should be aware of legislation and local protocol. It is not usually acceptable to seek consent for a procedure, that you will not be performing yourself unless you have been specifically trained for that area of practice. All discussions and decisions relating to consent should be documented in the patient's/ client's records. Where consent is withheld, you should follow the policy in force at your assignment location.

Caring for Patients in their Own Homes Please see below for general guidelines relating to assignments carried out in an individual's private home. For further detailed information please refer to the relevant professional membership bodies' guidelines. General Conduct 1) Clients and their families should at all times be treated with dignity and respect and due consideration should be taken of their religion, culture and any other preferences 2) Clients should be addressed using their preferred name 3) Care and support should be offered in the least intrusive manner possible 4) The independence of clients should be supported and encouraged where possible through appropriate communication about, and involvement in, their own care. This independence should only be curbed where it is in the client's best interests and the reasons recorded.

Attending and Leaving a Home Visit; 1) You should announce your identity clearly on arrival and not enter a client's home without invitation. 2) Upon arrival at a home visit, you should check whether your client has any specific needs for this visit. 3) Please take full care securing a client's home when leaving including, where appropriate, doors and windows and the safeguarding of keys.

Carrying out Assignments 1) Medication should be kept in a safe place, known and accessible to the client or to relatives and other carers where appropriate 2) You should not make use of a client's property (including, for example, their telephone) without their express permission 3) You should report any accident or emergency situations as soon as possible to the relevant authorities and to your Consultant 4) All visits, incidents, observations, care and, where relevant, financial transactions should be logged on records kept securely in the Client's home 5) Records are kept for one month, or until the assignment is over, and are made available to the client, their relatives and representatives 6) If you are unable to attend any specific appointment, please notify not only us but also your client and line manager 7) You are not permitted to carry any firearm or offensive weapon with you to any assignment.

Allegations of Abuse We will take seriously any allegations of abuse. If we receive complaints of this sort against you, we may not be able to assign you whilst a full investigation is performed. Ultimately, if allegations are well founded, we may not be able to offer you work in the future. Where allegations are sufficiently serious, we may need to report you to the relevant professional body and/or the police depending on the allegation. Appeals against any decisions made by our staff in these matters can be made to the Director of the Company, whose decision will be final. Should you in the course of duty suspect that abuse is taking place you should inform your line manager immediately. In the case of caring for service users in their own homes, you must report any suspicions of allegations of abuse immediately to the Director of the Company. There are strict guidelines to be followed in reporting abuse under the Department of Health guidance "No Secrets" and a full report will need to be made prior to investigation.

There are many different forms of abuse:

1) Physical, including hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanction 2) Sexual, including rape and sexual assault or sexual acts to which the vulnerable adult has not consented, or could not consent or was pressured into consenting. 3) Psychological, including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks 4) Financial or material abuse, including theft, fraud, exploitation, and pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits 5) Neglect or acts of omission, including ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating 6) Discriminatory abuse, including racist or sexist abuse or that based on a person's disability and other forms of harassment, slurs or similar treatment.

Whistleblowing We operate a “Whistleblowing policy”, which encourages a culture of openness within our organisation and aims to prevent malpractice. With the introduction of the Public Interest Disclosure Act 1998 all workers now have legal protection from any form of retribution, victimisation or detriment as a result of publicly disclosing certain serious allegations of malpractice. The policy will apply in cases where a staff member genuinely and in good faith believes that one of the following sets of circumstances is occurring, has occurred or may occur within their line of duty;

1) A criminal offence has been committed, is being committed or is likely to be committed 2) A person has failed, is failing or is likely to fail to comply with any legal obligation to which he or she is subject 3) A miscarriage of justice has occurred is occurring or is likely to occur 4) The health and safety of any individual has been, is being or is likely to be endangered 5) The environment has been, is being or is likely to be damaged 6) Information tending to show any matter falling within any one of the preceding paragraphs has been, is being or is likely to be deliberately concealed.

Anyone who wishes to raise or discuss any issues which might fall into the above categories he/she should contact their consultant in the first instance who will treat the matter in confidence. It is likely that a further investigation will be necessary and he/she may be required to attend a disciplinary or investigative hearing as a witness. Where the concern involves the member of our own staff then the concern should be raised with the Director of the Company. All complaints will be viewed seriously and treated confidentially. Everyone should be aware that if any disclosure is made in bad faith (for example, in order to cause disruption within the organisation), or concerns information which you do not substantially believe is true, or indeed if the disclosure is made for personal gain, then such a disclosure may constitute gross misconduct for which summary dismissal is the sanction.

Safeguarding Children and Vulnerable Adults Safeguarding is everyone’s responsibility and all staff who, during the course of their employment have direct or indirect contact with children and families and vulnerable adults, or who have access to information about them, have a responsibility to safeguard and promote the welfare of children and vulnerable adults. There is a duty on organisations to make appropriate arrangements to safeguard and promote the welfare of children and vulnerable adults. Also government guidance makes it clear that it is a shared responsibility, and depends upon effective joint working between agencies and professionals that have different roles and expertise. It is your responsibility to undertake the appropriate safeguarding training annually and to make yourself familiar with the safeguarding policies for every placement you attend and abide by them. Any concerns you have about safeguarding must be reported to the appropriate Safeguarding Officer at your placement.

Placement Checklist

For each placement it is essential that you familiarise yourself with the following essential information. Use this checklist to record your answers to the following queries:

Name of Client:.....

Date:.....

Fire safety precautions

Where are the fire exits located?

What number do you need to ring to report a fire?

Where is fire fighting equipment located?

Is there a fire safety policy / procedure? Have you read it?

Cardiac Arrest precautions:

What number do you ring to report a cardiac arrest?

Where is the cardiac resuscitation trolley situated?

Equipment:

Do you know where the sluice is located?

Do you know where to dispose of sharps safely?

Do you know where to dispose of clinical waste safely?

Is there a clinical waste procedure? Have you read it?

C.O.S.H.H:

Are you aware of any hazardous substance at your place of work?

Have you read the product information that accompanies the substance?

Do you know what protective equipment is available to handle or to manage these substances?

Is there a C.O.S.H.H. policy / procedure? Have you read it?

Safe Handling of money / valuables:

Is there a handling of money / valuables policy / procedure? Have you read it?

Is there a safe in which to store valuable items?

Drug Administration:

Is there a drug administration policy / procedure? Have you read it?

Are you aware of the policy of Controlled Drug Administration?

Clinical Procedures:

Is there a clinical protocols manual? Have you read it?

Do you know how to find procedures for tasks that you may be required to perform?

Health & Safety:

If an accident / incident happens, do you know how to report it?

Is there a panic button / alarm system in place?

If you do not know some of the answers to the above questions, it is your responsibility to ask a senior member of staff in the area for guidance and advice. For each new placement please complete a new form.