



HANDBOOK



Candidate Handbook & Confidentiality Receipt

I acknowledge that I have received and read through the Medicure Professionals Limited candidate handbook. I will abide and comply with all procedures stated.

In the course of my employment as a Temporary Worker pursuant to the contract I may acquire some or all of the Confidential Information.

NOW THEREFORE I HEREBY UNDERTAKE to my current and previous employers, that any of the Confidential Information which I may receive or acquire directly or indirectly in the course of my employment as an Temporary Worker will be maintained in strict confidence and will not directly or indirectly be used by me or divulged by me without prior written consent to any person firm company or other organisation except in the proper performance of my duties as a Temporary Worker and then only to persons who shall have entered into a Confidentiality Undertaking in similar terms with my current and previous employer and this Confidentiality Undertaking shall subsist until I can show the Confidential Information (or the relevant part thereof) has come into the public domain or in the event that I should be required by law to disclose it.

This undertaking shall be subject to English Law and I hereby agree to submit to the non-exclusive jurisdiction of the English Courts.

Schedule

Definition of "Confidential Information"

Confidential Information shall include but not be limited to any confidential information that may be provided to me, whether orally or in a written physical or visual form, regarding the structure, finances, operations, budgets, strategies, contracts, including specifications, techniques, manuals, drawings, computer programs, know how and technical information of any kind, whether obtained, provided or otherwise acquiring during my engagement as a Temporary Worker or produced or created by my employer or myself for or in connection with the carrying out of the Services.

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Company Information

Welcome to our team!

We are thrilled you have chosen to join us and look forward to offering you a wide range of positions. We would like to wish you every success and hope that your experience of working for Medicure Professionals will be both positive and rewarding.

We have designed this handbook to give you an idea of what to expect from your time with us. Please read it carefully - it includes a number of guidelines and standards required under the Framework Agreements we have with the NHS. It also includes our rules and regulations and information on policies and procedures relating to your assignment.

If you have any queries about the contents within this booklet, please direct these to your Recruitment Consultant at the address below:

Medicure Professionals Limited
Camperdene House
High Street
Chipping Campden
Gloucestershire
GL55 6AT

Tel: 0203 475 4027

Email: ahp@medicurepro.co.uk

Website: www.medicurepro.co.uk

We will issue amendments to this handbook from time to time and the latest version will always be available from our website.

The Medicure Professionals Core Values

Mission

To provide a supportive, responsive, relentless and expert healthcare recruitment solution.

Values

Professionalism. Providing the finest recruitment solution in the healthcare market. Doing what we say we will, living by our company vision & values.

Healthcare Intelligence. Understanding your needs and providing a tailored solution – catering for individual wants & needs.

Honesty.

We will always do what we say we will and will provide an expert opinion to all candidates and clients, an opinion founded on a deep understanding of market conditions, healthcare professions and the recruitment business.

Partnership. The company will only succeed if we all work together, in harmony with a common purpose, and our clients and candidates will only receive the finest service if we truly work in partnership with them.

Work Ethic. We are relentless in our efforts to provide a superior healthcare recruitment service.

Training & Professional Development

Induction and Mandatory Training

Please keep up to date with all relevant clinical guidance. All temporary workers in assignments with the NHS must provide documentation of annual training in the following subjects:

- Moving and Handling - PRACTICAL
- Resuscitation / Basic Life Support – PRACTICAL
- Fire Safety - PRACTICAL
- Health, Safety and Welfare (including COSHH and RIDDOR)
- Infection Prevention and Control
- Information Governance and GDPR
- Data Protection
- Safeguarding Vulnerable Adults (level 2 or 3)
- Safeguarding Vulnerable Children (level 2 or 3)
- Lone Working
- Complaints Handling
- Conflicts Resolution
- Managing Violence and Aggression / Reducing restraints
- Equality, Diversity & Human Rights
- Preventing Radicalisation
- Counter fraud
- Food Hygiene
- Mental Health Act and Mental Health Capacity
- Clinical Skills

You must have completed these in the 12 months prior to your registration with Medicure Professionals.

Medicure Professionals facilitates a number of training courses for candidates. For further details of these courses and training subsidies available please contact your Compliance Officer.

Should you fail to attend a training course organised by Medicure Professionals without informing the Compliance Officer 48 hours in advance, we will deduct the fee from your wages.

Some clients also require additional training to be undertaken such as Intermediate Life Support, Advanced Life Support, Breakaway Training and Physical Restraint Training.

Your Recruitment Consultant or Compliance Officer will discuss any training requirements with you prior to your first placement and again on an annual basis.

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 and 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 establishment to which you are assigned, and to your Medicure Professionals consultant. An incident report form must be completed at Medicure Professionals.

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 peripatetic 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 employer and steps taken to reduce risk to the lowest practicable level.

The risk assessment should address:

- Whether the work can be performed safely by a single person
- 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 Medicare Professionals 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 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:

- Minor assaults including situations where physical contact and/or injuries occur which require first aid treatment
- Threats with an offensive weapon without physical injury
- Aggravated assault resulting in injury requiring medical assistance
- Threatening behaviour which could include verbal abuse or threats, and fear arising from damage to the physical environment
- 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 your Medicare Professionals consultant. 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 at Medicare Professionals. 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 NHS, 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 NHS organisations. Caldicott guardians are senior health professionals.

All Medicare Professionals temporary workers are required to familiarise themselves with the local policy on confidentiality within the establishment/NHS Trust where they are working.

Complaint Handling

During the course of your work with Medicare Professionals you will come across complaints from patients/clients. It is the policy of Medicare Professionals to deal with any expression of dissatisfaction in a professional and precise manner. If you are on an assignment within an establishment, please report any complaints to a senior person and document all details of the complaint. You must also report the Complaint to your Medicare Professionals consultant or their manager. All complaints must be investigated within a specified time limit and resolved as soon as possible and this is the responsibility of the Medicare Professionals Manager. You may however, be requested to put details of the complaint in writing on a complaint record form and/or attend an interview to investigate details further.

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. Any complaints of misconduct against individuals will be reported to the HCPC or other relevant Registration Body.

If you have any complaints about any aspects of your work at Medicare Professionals please do not hesitate to contact us. Any complaints from individuals will be dealt with in a professional and confidential manner and Medicare Professionals has a “Whistleblowing” policy; please refer to page 24 of this book.

Fitness to Practice

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 also let us know if you are pregnant, have diarrhoea, have been vomiting or have discovered a rash. 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 supply Medicare Professionals with an update of your occupational health questionnaire on an annual basis, as this is a contractual requirement of the various NHS Frameworks.

Immunisation

Please keep the following immunisations up to date:

- Hepatitis B Antibody titre level
- Varicella (Chicken Pox)
- Measles and Rubella (German Measles) / MMR

- Tuberculosis
- Hepatitis B antigen, Hepatitis C, HIV (EPP only)

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

MRSA

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 is washing hands before and after every patient contact.

In addition, please:

- Use liquid soap and water or an alcohol-based hand rub when washing hands – make sure it comes into contact with all areas.
- Remove wrist and preferably hand jewellery at the beginning of each shift where you will be regularly decontaminating your hands.
- 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).
- Dispose of gloves and aprons after use.
- 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 sessions at the hospital's Occupational Health Department. 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.

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".

- If you believe you may have been exposed to HIV infection in any way you should seek medical advice from your GP or Occupational Health Department and, where appropriate, undergo diagnostic HIV antibody testing.
- If you are found to be infected, you must again seek guidance from your GP or Occupational Health Department.
- 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.
- 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, Medicare Professionals reserves the right to request a certificate of fitness to practice from your GP or an 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

NHS policy and the National Contract require Agencies for the Supply of Allied Health Professionals to obtain a Disclosure & Barring Service certificate (DBS) or a Disclosure Scotland (DS) for all our workers, particularly those working in Paediatrics and in the Community. Recent disclosures from previous employers may be acceptable. 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.

Medicare Professionals cannot be held responsible should clients decline your services following refusal to comply with this request or disclosure of a criminal conviction. Our own response to criminal record information will depend upon its nature and seriousness.

We also ask you to complete, sign and date a “Criminal Convictions” declaration as part of your registration form.

Mandatory Notifications

- All workers are immediately required to inform their Medicare Professionals Consultant if they have been subject to a prosecution after their DBS check was undertaken.
- All workers are immediately required to inform their Medicare Professionals Consultant if they are under investigation by the HCPC or are suspended.
- All workers are required to declare themselves fit to practice at the commencement of each assignment; this includes the requirement not to declare fit to practice if suffering from, vomiting, diarrhoea or a rash.
- All female workers are required to inform their Medicare Professionals Consultant if they become pregnant.
- All workers are immediately required to inform their Medicare Professionals Consultant if they become injured or diagnosed with any condition.

Fraud Awareness

All agency workers must be aware of what constitutes fraudulent behaviour and the action that they should take if they are aware of any fraudulent behaviour taking place. Please read the Fraud Act 2006 which can be found by using the following link:

<http://www.legislation.gov.uk/ukpga/2006/35/contents>

If an agency worker suspects any fraudulent behaviour they must notify their line manager and their consultant at Medicare Professionals Limited immediately.

Safeguarding Children and Young People

All agency workers should be aware of the competencies required to safeguard children. Please refer to the following link:

<https://www.gov.uk/government/publications/safeguarding-children-and-young-people/safeguarding-children-and-young-people>

Assignments

Timesheets

Timesheets run from Monday to Sunday. Please submit your timesheet to us by 5:00pm Monday in order to be paid the following Friday. Deadlines may change around Bank Holidays branches will have details and will inform you in advance. Payments are made directly into your bank/ building society/ Limited Company accounts 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.

In particular, please ensure:

- You complete the correct week ending date timesheet.
- The date and times you worked, excluding any breaks taken are correct.
- Please note that you are expected to take meal breaks each day, which are unpaid.
- The total hours and basic pay columns are correct.
- There is the dated signature of the line manager at your assignment.

In completing your timesheet, you are also agreeing with the following counter fraud declaration:

“I declare that the information I have given on this form is correct and complete and that I have not claimed elsewhere for the hours/shifts detailed on this timesheet. I understand that if I knowingly provide false information this may result in disciplinary action and I may be liable to prosecution and civil recovery proceedings. I consent to the disclosure of information from this form to and by the NHS body and the NHS CFSMS for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud.”

If you have any problems with timesheets or payment, please contact your Medicare Professionals Consultant.

Expenses

If you are working in a community based role you may be able to claim expenses for mileage and/or parking. This must be agreed with the client beforehand in writing. If expenses have been agreed upon you must add them onto your timesheet in the appropriate section (Miles) and make sure the timesheet has been signed as usual by your manager.

Holiday Pay (PAYE Workers Only)



Your holiday pay is not paid as a separate payment at the time of your holiday, but is paid to you each week as a 12.07% increase on your hourly rate. For PAYE workers this is shown on your pay slip. For the avoidance of doubt, the hourly rate on your confirmation already includes the 12.07% increase.

Change of Personal Details

If there are any changes to your personal details ie. Address, Contact Numbers, Surname, it is your responsibility to inform us within 5 working days. Please note that this list is not exhaustive and if any other changes occur please inform us as soon as possible.

Working Time Directive

The Working Time Directive states that we (Medicare Professionals) are responsible for taking steps to ensure that you do not work more than an average of 48 hours per week over a 17 week period. You are entitled to choose to work over this limit by opting out of the Working Time Directive.

Permission

If your work placement is in connection with another intermediate organisation please note that you give permission for personal information to be passed onto the HMRC. This is solely to comply with ITEPA compliance purposes.

Agency Worker Regulations (AWR)

The legislation came into force on 1 October 2011, giving agency workers the entitlement to the same basic employment and working conditions as if they had been recruited directly, if and when they complete a qualifying period of 12 weeks in the same job. It is not retrospective and for those agency workers already on assignment, the 12 week qualifying period will start from 1 October 2011.

From the 1 October 2011, agency workers will be entitled to access the facilities at their assignment, e.g. canteen and crèche. After 12 weeks in the same job, agency workers will be entitled to equal pay and other basic working conditions
e.g. annual leave.

For more detailed information about AWR please consult the Department of Business, Innovation and Skills website to view the 51 page document released in May 2011

<http://www.bis.gov.uk/assets/biscore/employment-matters/docs/a/11-949-agency-workers-regulations-guidance.pdf>

Timekeeping

Please make every effort to ensure you arrive at and leave all bookings at the agreed time, confirmed in your booking letter. If you think you might be late, you must call your Hunter HAP consultant as early as possible, so the client can be informed.

Cancellations

If you are unable to work for any reason you must inform your consultant as soon as possible, so that we can let the client know and organise any cover if needed.

Requirements for Assignments

Please attend all bookings with your current Medicare Professionals ID badge. Mobile phones, unless working in the Community, should be switched off for the duration of your assignment. The uniform requirements of some of our clients differ and will be stated prior to the assignment.

If you are on an assignment where a hospital uniform is not required (your branch will inform you) or have any queries regarding dress, please do not hesitate to contact your Consultant.

ID Badges

ID Badges will be issued if you require them – please ensure that you provide photos for this. If you lose your badge, or it is damaged, please contact your Compliance Officer for a replacement. New badges are issued annually.

Arriving for Work

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:

- Crash Call Procedure
- Hot Spot Mechanisms
- Violent Episode Policy
- Procedure for Alerting Security Staff
- Policy for Administration & Assistance with Drugs
- Complaints handling

Where possible, we encourage workers 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 line manager in the first instance.

Direct Bookings

If you are approached directly by the client with work you must immediately inform your consultant. Many clients have clear procedures which must be followed in order for locums to be paid.

Notice Period

When possible, workers should let Medicare Professionals know when their assignment is coming to an end, allowing us time to organise your next assignment if necessary. Workers and clients are asked to give at least 1 week's notice, however this is not compulsory.

At the end of every assignment Medicare Professionals will provide the client with a reference request form requesting the client to provide a reference on the Member.

Workers may be asked to give feedback on the service they have received from Medicare Professionals and also feedback on the assignment. In such cases this information can then be used to advise future locums. Both positive and negative feedback is actively encouraged so Medicare Professionals can act upon it to improve our quality of service.

Appraisals

We will appraise you once a year. Appraisals give us an opportunity to consider with you your performance at work. 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 and cover the following areas:

- General levels of service including punctuality, attitude and ability to carry out practical tasks
- Clinical performance
- Training needs
- CPD
- Any other issues, including progress since the last appraisal

Our Policies

Professional Standards

Whilst this booklet outlines Medicure Professionals 's own policies and standards, these do not supersede the national guidelines of the HCPC and other professional membership bodies such as the GPHC; NMC; GMC, RCOT and similar.

Further information is available from the HCPC website, www.hpc-uk.org, or from your Hunter AHP Resourcing Ltd branch. The HCPC can also be contacted at the address and numbers below: Health & Care Professionals Council
Park House
184 Kennington Park Road
London
SE11 4BU

All candidates working in regulated environment (with professional registration) will have their professional registration checked on a monthly basis. Each check will be saved in your compliance file.

Qualifications

Medicure Professionals Ltd ensures that when recruiting workers the individual is recognised by the appropriate professional body and by confirming this that they should hold the relevant qualification to enable them to carry out their job role. We request to see the original certificates when we are carrying out the face to face interview.

If a candidate cannot provide qualification certificate, but holds a relevant professional registration then copies of their qualification certificate would not be compulsory. However, as part of the recruitment process, our agency would try to verify with the education institution. When looking at the certificates if a candidate has had a change of name you will need to verify this by evidencing the name change along with the certificates if applicable.

If a candidate holds qualification certificates that were issued overseas and not in English, the certificate must be interpreted into English you can contact K International for further information <http://www.k-international.com>.

Detailed comparison can be found using UK NARIC: <https://www.naric.org.uk/naric/>



If the candidate cannot provide the qualification certificate (document was lost), he or she can complete the missing document declaration in the application form providing name of the institution, received qualification, dates attended and country where qualification was obtained. Thereafter, compliance officer contacts the institution directly in order to receive candidate's confirmation of the qualification.

Code of Conduct

Medicure Professionals expects all Locums to act in a professional manner at all times. We particularly ask you to pay special attention to:

- Punctuality
- Standards of Dress and Courtesy
- Quality of Care and Clinical Procedures
- Consideration and Respect for patients, colleagues and managers
- Confidentiality and Integrity

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 judgment at all times. If you have any questions about your work, please try to resolve these locally at first or seek advice from your Consultant. You should not smoke at work or attend work under the influence of alcohol or any illicit substances.

All Temporary Workers are advised of their obligation to be flexible, to work as directed by the Authority and follow all reasonable requests, instructions, policies, procedures and rules of the Authority, including the accepting of alternative work within the Authority that falls within the scope of their clinical competence when requested to do so as required.

Where a Temporary Worker fails to accept alternative work as directed (provided it is within scope of their clinical competence), we operate a "3 strikes" policy. The first time a Temp Worker fails to accept alternative work they will be reminded of their obligation, and notified that we can't continue to support their employment if this continues. If it happens for a second time, they will be given a final notification, making clear if it happens again we will not be able to further support their job search and employment due to our clients being let down. A 3rd incidence means automatic removal from our talent pool.

Maternity

If you become pregnant whilst working for Medicure Professionals you must inform your consultant no later than the end of the 15th week before the expected week of childbirth. You must provide a certificate of expected confinement or equivalent, signed by your doctor or registered midwife. If you are on our PAYE system you may be entitled to Statutory Maternity Pay. For further details or to find out if you are entitled to this please contact the Payroll department.

Medication Policy

Temporary Locums are only allowed to administer medication with the authority of a senior permanent NHS manager. This is very hard to manage.

It is the policy of Medicure Professionals that **NO TEMPORARY WORKER IS AUTHORISED TO ADMINISTER MEDICATION.**

Equal Opportunities



Medicure Professionals seeks to offer equality to all our workers and will treat any allegations of discrimination with the utmost seriousness. In accordance with these principles workers may not discriminate on the grounds of:

- Race
- Ethnic Origin
- Nationality
- Colour
- Religion or Belief
- Gender
- Sexual Orientation
- Marital Status
- Disability

Why Equality and Diversity are important

Not just because it's law, but because...

Every person, whatever their background, should expect to receive the same standard of care from health services. However, evidence suggests that this does not always happen and that the treatment experience of patients from different sections of the community can vary.

Equality is about creating a fairer society where everyone can participate and has the opportunity to fulfil their potential. It is backed by legislation designed to address unfair discrimination based on membership of a particular group.

Diversity focuses on maximising people's potential through valuing people's differences, including the different ethnic, religious and social backgrounds, genders, sexual orientations, ages, disabilities, ages, gender identity, civil partnership / marriage status, maternity / paternity status, abilities, skills and experiences of individuals. It recognises that "one size does not fit all".

For further information please see the following links:

DeafBlind UK – provides support and advice on people who are DeafBlind.

Website: www.deafblind.org.uk, Telephone: 012733 358100

Equality and Human Right Commission – provides advice, guidance and good practice on all issues relating to Equality, Diversity and Human Rights.

Website: www.equalityhumanrights.com, Telephone: 0845 6046610

Friends, Families and Travellers – Useful information about traveller and gypsy communities.

Website: www.gypsy-traveller.org

Stonewall – provide support, guidance and good practice relating to LGB communities.

Website: www.stonewall.org.uk

Absenteeism

If you are absent from work on any day you must inform your consultant at least one hour before you are due to start work, and if applicable your manager. You must inform your consultant of the reason for your absence

and when you expect to return to work. You are required to keep your consultant updated on a daily basis (unless a medical Doctor's certificate has been supplied).

Health and Safety

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

- 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.
- Co-operate with your employer and others to enable them to comply with statutory duties and requirements.
- 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:

- Use any equipment, etc., provided in the interests of safety
- Follow health & safety instructions
- Report anything you consider to be a serious danger
- 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. At a client's request in writing, Medicure Professionals will undertake to train workers to be supplied in standard workstation safety. We cannot, however, 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

Good records are essential to safe and effective patient care and should be:

- Clear, legible and indelible
- Factual and accurate
- Written as soon after the event as possible
- Signed, timed and dated

Records should:

- Be written with the involvement of the patient, client or their carer where possible
- Be written in terms the patient or client can understand
- Be consecutive
- Identify problems that have arisen and action taken to rectify them
- 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 HCPC or relevant professional membership bodies' guidelines.

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 unauthorised 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:

- 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).
- 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.

Audits

On an ongoing basis Medicure Professionals shall carry out both internal and external audits in order to check the compliance of all registered workers. It may be necessary for an external organisation to check individual files for compliance; including (but not limited to) training, fitness to practice, DBS certificates, qualifications, references, ID and right to work documentation.

By signing the staff handbook, you consent to having your file checked for audit purposes.

Data Protection

In addition to the above, you should adhere to the requirements of the Data Protection Act 1998 and the General Data Protection Regulation (GDPR).

In brief, anyone processing personal data must comply with the eight enforceable principles of good practice. Data must be:

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



Medicare Professionals holds files and computer records containing data such as your contact details, application, references, bank details, and other personal details. It may include some sensitive data concerning your health and ethnic origin. It is held for staff administration, payroll purposes, internal accounts and records, to ensure fair treatment and permit Medicare Professionals to comply with its legal responsibilities.

It may, in certain circumstances be necessary to disclose your personal data to customers, suppliers or clients, or third parties who provide services to Medicare Professionals. If this is the case these parties will be contractually obliged to use the data only for the relevant purpose, and cannot be forwarded without your consent.

For further information, please see our [privacy notice](#) and [data protection policy](#). If you have any further queries regarding data protection, please contact ahp@medicarepro.co.uk.

Ownership of Rights

You are not permitted at any time whilst working with Medicare Professionals or at any time after you have ceased working with Medicare Professionals to disclose to any person, company or third party any Confidential Information obtained during the course of any client assignment.

Computer Use

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:

- Keep any passwords safe
- Keep to the client's policies and procedures
- Log off immediately after use

Specifically, you must:

- Observe any local policies and procedures regarding passwords, USB sticks, floppy disks, CD ROMs and data storage/transfer
- Not load or introduce any programs onto the computer
- Not access any information service or bulletin board including the Internet without specific prior authority from your line manager
- Not download any files or connect to any network or other computer equipment without prior authority as above

Consent

In accordance with HCPC and relevant professional membership bodies, you must obtain the consent of a patient before giving any treatment or care.

Consent must be:

- Given by a legally competent person
- Given voluntarily
- 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 HCPC or relevant professional membership bodies' guidelines.

General Conduct

- 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.
- Clients should be addressed using their preferred name.
- Care and support should be offered in the least intrusive manner possible.
- 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

- You should announce your identity clearly on arrival and not enter a client's home without invitation.
- Upon arrival at a home visit, you should check whether your client has any specific needs for this visit.
- 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

- Medication should be kept in a safe place, known and accessible to the client, or to relatives and other carers where appropriate.
- You should not make use of a client's property (including, for example, their telephone) without their express permission.
- You should report any accident or emergency situations as soon as possible to the relevant authorities and to your Consultant.

- All visits, incidents, observations, care and, where relevant, financial transactions should be logged on records kept securely in the client's home.
- Records are kept for one month, or until the assignment is over, and are made available to the client, their relatives and representatives.
- If you are unable to attend any specific appointment, please notify not only us but also your client and line manager.

Safe Handling of Valuables

You should familiarise yourself with any client policies on the safekeeping of patient and service user valuables and money. If you are asked to handle money or valuables always seek guidance from your manager.

Allegations of Abuse

Medicare Professionals will take seriously any allegations of abuse by staff working through us. 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 HCPC and/or the police depending on the allegation.

Appeals against any decisions made by our staff in these matters can be made to the Divisional Director, 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 your Medicare Professionals consultant. 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:

- Physical, including hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanction.
- 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.
- 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.
- 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.
- 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.
- 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



Medicare Professionals operates 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:

- A criminal offence has been committed, is being committed or is likely to be committed.
- A person has failed, is failing or is likely to fail to comply with any legal obligation to which he or she is subject.
- A miscarriage of justice has occurred is occurring or is likely to occur.
- The health and safety of any individual has been, is being or is likely to be endangered.
- The environment has been, is being or is likely to be damaged.
- 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 at Medicare Professionals 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 consultant at Medicare Professionals then the concern should be raised with the Medicare Professionals Divisional Managing Director.

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.

Policy on the Recruitment of Ex-Offenders

Medicare Professionals will use the DBS Disclosure service to assess applicants’ suitability for positions of trust. It complies fully with the DBS Code of Practice and undertakes to treat all applicants for positions fairly. It undertakes not to discriminate unfairly against any subject of a Disclosure on the basis of conviction or other information revealed.

Medicare Professionals is committed to the fair treatment of its staff, potential staff or users of its services, regardless of race, gender, religion, sexual orientation, responsibilities for dependants, age, physical/mental disability or offending background.

Medicare Professionals has a written policy on the recruitment of ex-offenders, which is made available to all Disclosure applicants at the outset of the recruitment process.

Medicare Professionals promotes equality of opportunity for all with the right mix of talent, skills, and potential and welcomes applications from a wide range of candidates, including those with criminal records. Candidates are selected for interview based on their skills, qualifications and experience.



A Disclosure is only requested after a thorough risk assessment has indicated that one is both proportionate and relevant to the position concerned. For those positions where a Disclosure is required, all application forms, job adverts and further details will contain a statement that a Disclosure will be requested in the event of the individual being offered the position.

Where a Disclosure is to form part of the recruitment process, Medicare Professionals encourages all applicants called for interview to provide details of their criminal record at an early stage in the application process. This information is sent under separate, confidential cover, to a designated person within Medicare Professionals, which guarantees that this information is only seen by those who need to see it as part of the recruitment process.

Unless the nature of the position allows Medicare Professionals to ask questions about your entire criminal record it will only ask about 'unspent' convictions as defined in the Rehabilitation of Offenders Act 1974.

Medicare Professionals ensures that all staff who are involved in the recruitment process have been suitably trained to identify and assess the relevance and circumstances of offences. It will also ensure that they have received appropriate guidance and training in the relevant legislation relating to the employment of ex-offenders, e.g. the Rehabilitation of Offenders Act 1974.

At interview, Medicare Professionals aims to ensure that an open and measured discussion takes place on the subject of any offences or other matter that might be relevant to the position sought and could lead to withdrawal of an offer of employment.

Medicare Professionals will make every subject of a DBS Disclosure aware of the existence of the DBS Code of Practice and make a copy available on request.

Medicare Professionals undertakes to discuss any matter revealed in a Disclosure with the person seeking the position before withdrawing a conditional offer of employment.

Complaints Policy and Procedure - Making a Complaint

If you have a complaint about the way you have been treated on assignment or by our staff, please direct this in the first instance to your Consultant or their Manager. If for any reason you are still unsatisfied with the case in point, please call 0203 475 4027 to talk to the Managing Director of Medicare Professionals. Please address all post to:

Medicare Professionals Limited
Camperdene House
High Street
Chipping Campden
Gloucestershire
GL55 6AT

Complaints Timeframes

All complaints acknowledged within 3 working days.



All complaints will be resolved within 15 days unless nature of complaint requires further investigation e.g. HCPC / Police. The details of how the complaint has been resolved will be notified to the Authority within 15 calendar days.

This procedure shall enable the Authority to make complaints quickly and simply and requires Medicare Professionals to investigate and resolve a complaint in accordance with strict timescales. Subject to any restrictions on the Authority relating to confidentiality or the 1998 Act the Authority will participate with Medicare Professionals by providing the necessary information surrounding any complaint made by the Authority, to enable the complaint to be investigated fully by Medicare Professionals.

Gavin Johnstone (“the complaints manager”) is the designated complaints manager for Medicare Professionals and as such is responsible for managing the procedures for handling and considering complaints. The functions of the complaints manager may be performed by her or by any person authorised by Medicare Professionals to act on his behalf.

Where the Authority wishes to make a complaint, he may make the complaint to the complaints manager or any other member of the Staff of Medicare Professionals.

A complaint may be made orally or in writing (including electronically) and:

- where it is made orally, the complaints manager must make a written record of the complaint which includes the name of the complainant, the subject matter of the complaint and the date on which it was made; and
- where it is made in writing, the complaints manager must make a written record of the date on which it was received.

Where the complaint is made in writing it is treated as being made on the date on which it is received by the complaints manager or as the case may be, other member of the staff of Medicare Professionals.

A complaint must be made within -

- six months of the date on which the matter which is the subject of the complaint occurred; or
- six months of the date on which the matter that is the subject of the complaint came to the notice of the complainant.

Where a complaint is made after the expiry of the six-month period mentioned above, the complaints manager must investigate it if he is of the opinion that:

- having regard to all the circumstances, the complainant had good reasons for not making the complaint within that period; and
- notwithstanding the time that has elapsed it is still possible to investigate the complaint effectively and efficiently.

The complaints manager will send to the complainant a written acknowledgement of the complaint within 3 working days of the date on which the complaint was made.

Where a complaint was made orally, the acknowledgement must be accompanied by the written record mentioned above with an invitation to the complainant to sign and return it.

Medicare Professionals shall ensure that the Agency Worker or member of Staff (whosoever is the subject of the complaint) supplied is promptly and fully informed of complaints relating to him and Medicare



Professionals will (and will ensure that the Agency Worker will) take demonstrable action to ensure no recurrence of the action complained of (with the exception of complaints regarding Fraud or a Confidential Reference provided by the Authority to Medicare Professionals).

The complaints manager must investigate the complaint to the extent necessary and in the manner that appears to him most appropriate to resolve it speedily and efficiently.

The complaints manager may, in any case where he thinks it would be appropriate to do so and with the agreement of the complainant, make arrangements for conciliation, mediation or other assistance for the purposes of resolving the complaint, and in any such case the Medicare Professionals will ensure that appropriate conciliation or mediation services are available.

The complaints manager must take such steps as are reasonably practicable to keep the complainant informed about the progress of the investigation.

The complaints manager will prepare a written response to the complainant that summarises the nature and substance of the complaint, describes the investigation and summarises its conclusions.

The response will be sent to the complainant within 15 beginning on the date on which the complaint was made or, where that is not possible, as soon as reasonably practicable.

Medicare Professionals has a procedure in place for reporting Agency Workers to their professional or regulatory body where there is evidence of malpractice and for monitoring such complaints with the professional or regulatory body. Such complaints will be reported to their professional or regulatory body where appropriate by Medicare Professionals within 24 hours of the complaint being received by Medicare Professionals. Medicare Professionals will be responsible for monitoring and following up such complaints until an outcome is reached.

Medicare Professionals, upon receiving poor reports of an Agency Worker's performance in a Confidential Reference written to it by or on behalf of the Authority, shall not assign that Agency Worker to the Authority until the Authority is satisfied that the problems have been resolved and will not recur and has confirmed this to Medicare Professionals in writing.

Medicare Professionals will maintain a full written record of the nature and details of each complaint received and the action take to resolve each complaint.

Medicare Professionals operates a system whereby every 6 months the complaints manager analyses and identifies any patterns of complaint. If any patterns are found, new systems are put in place to eradicate the underlying reason for this pattern.

Child Protection

It is the responsibility of all health professionals if it comes to their attention either directly by a child or indirectly through a disclosure from an adult any concerns relating to child protection. Appropriate action must be taken and referred to the Social Services Department. Agency workers should be familiar with and adhere to local guidelines on child protection.

All agency workers as part of the process must adopt the following:

- Be alert to the urgency of identifying any suspected or confirmed case of child abuse.



- Effective communication – satisfactory and appropriate steps taken.
- Legal requirements – The Children’s Act and Department of Health Guidance.
- Confidentiality – Child abuse and neglect is one of the exceptional circumstances justifying disclosure to an officer of a statutory agency
- Accurate recording – up to date, legible and complete.
- Awareness of all local procedures – referrals carried out as per guidelines. Agency staff should discuss with their Manager to ensure appropriate action is taken throughout the process.

Protection of Vulnerable Adults Policy (POVA)

About POVA

On July 26 2004 the Department of Health (DH) launched a phased introduction of the Protection of Vulnerable Adults (POVA). The POVA scheme has been implemented for registered providers of care homes and domiciliary care agencies. It also applies to employment agencies and businesses that supply care workers to these providers.

The scheme will act as a workforce ban on those professionals who have harmed vulnerable adults in their care and an additional layer of protection in the pre-employment process with the Criminal Records Bureau Checks already taking place to stop known abusers entering the care workforce.

Alongside other initiatives such as ‘No secrets’ and ‘In safe hands’ and other specific measures to prevent and tackle adult abuse; it will complement the Government’s drive to raise standards across health and social care. Raising these standards is the best way of protecting these vulnerable adults who are generally harmed because of care professionals’ lack of knowledge or skill rather than out of malice.

Further information and ‘A practical guide for implementing the protection of vulnerable adults, POVA, scheme’ can be found on the Department of Health website: <http://www.dh.gov.uk>.

Introduction

The characteristics of adult abuse can take a number of forms and cause victims to suffer pain, fear and distress reaching well beyond the time of the actual incident(s). Victims may be too afraid or embarrassed to raise any complaint. They may be reluctant to discuss their concerns with other people or unsure who to trust or approach with their worries.

There may be some situations where victims are unaware that they are being abused or have difficulty in communicating this information to others.

Aim of Policy

The aim of this policy is to ensure the safety of vulnerable adults by outlining clear procedures and ensuring that all workers are clear about their responsibilities.

Definition

A vulnerable adult is a person aged 18 years or over who may be unable to take care of themselves or protect themselves from harm or from being exploited.

This may include a person who:

- Is elderly and frail
- Has a mental illness including dementia
- Has a physical or sensory disability
- Has a learning disability
- Has a severe physical illness
- Is a substance misuser
- Is homeless

What is abuse?

Abuse is a violation of an individual's human and civil rights by any other person or persons. It can take a number of forms:

- Physical abuse e.g. hitting, pushing, shaking, inappropriate restraint, force-feeding, forcible administration of medication, neglect or abandonment.
- Sexual abuse e.g. involvement in any sexual activity against his/her will, exposure to pornography, voyeurism and exhibitionism.
- Emotional/psychological abuse e.g. intimidation or humiliation.
- Financial abuse e.g. theft or exerting improper pressure to sign over money from pensions or savings etc.
- Neglect or acts of omission e.g. being left in wet or soiled clothing, or malnutrition.
- Discriminatory abuse e.g. racial, sexual or religious harassment.
- Personal exploitation – involves denying an individual his/her rights or forcing him/her to perform tasks that are against his/her will.
- Violation of rights e.g. preventing an individual speaking his/her thoughts and opinions.
- Institutional abuse e.g. failure to provide a choice of meals or failure to ensure privacy or dignity.

Reporting Procedures

If the allegation or suspicion of abuse is discovered by you then you should inform your line manager as soon as possible.

If you have been told about the allegation of abuse in confidence, you should attempt to gain the consent make a referral to another agency. However, the gaining of the consent is not essential in order for information to be passed on. Consideration needs to be given to:

- The scale of the abuse
- The risk of harm to others
- The capacity of the student to understand the issues of abuse and consent

If there is any doubt about whether or not to report an issue to Social Services then it should be reported.

In emergency situations (e.g. where there is the risk or occurrence or severe physical injury), where immediate action is needed to safeguard the health or safety of the individual or anyone else who may be at risk, the emergency services must be contacted.

Where a crime is taking place, has just occurred or is suspected, the police must be contacted immediately.

Responsibilities



You have a responsibility to be aware of this policy and to report any suspicions that they might have concerning adult abuse.

Key Contacts

Nursing & Midwifery Council (NMC)

23 Portland Place, London, W1B 1PZ | Tel: 0207 333 9333 | www.nmc-uk.org/

Health and Care Professions Council (HCPC)

Park House, 184 Kennington Park Road, London, SE11 4BU

The HCPC (formerly the Health Professions Council) | Tel: 0845 300 4472 | www.HCPC-uk.org/

General Medical Council (GMC)

3 Hardman Street, Manchester, M3 3AW | Tel: 0161 923 6602 | www.gmc-uk.org/

General Pharmaceutical Council (GPhC)

129 Lambeth High Street, London, SE1 7BT | Tel: 020 3365 3400 | www.pharmacyregulation.org/

General Dental Council (GDC)

37 Wimpole Street, London, W1G 8DQ | Tel: 0845 222 4141 | www.gdc-uk.org

Department of Health - occupational health guidance, including 'The Green Book'

<http://immunisation.dh.gov.uk/category/the-green-book/>

NHS Employers - NHS Employment check standards from NHS

<http://www.nhsemployers.org/Pages/home.aspx>

UK Border Agency

<http://www.ukba.homeoffice.gov.uk/>

Disclosure and Barring Service Code of Practice

<https://www.gov.uk/government/organisations/disclosure-and-barringservice/about>