



STAFF HANDBOOK

Issued: November 2023

Welcome to CareJoy Healthcare.

Within this Staff Handbook you will find our company policies, procedures, and statements that we hope you find informative and of assistance to you throughout each assignment you undertake with CareJoy Healthcare.

If of course there is a subject of which you need guidance with, please do not hesitate to contact a member of the CareJoy Healthcare team who will be happy to assist you.

Please keep this handbook on file and read it thoroughly to familiarise yourself with the information provided. It is of utmost importance that you fully understand everything covered within.

CareJoy Healthcare work alongside Healthcare accrediting bodies, and while our guide does take guidance from the NMC, HCPC and NHS Employers Standards, our policies and procedures do not supersede the national guidelines.

As a framework agency, CareJoy Healthcare receive updates regarding legislations, and as such parts of the Handbook, and our policies will be updated from time to time to reflect any changes to continue our framework standards. Whenever this happens, we will give you notification and send you the necessary updates to keep you informed you may also find these on our website: www.carejoy.co.uk

Again, if you do not understand any of the updates, contact a member of the CareJoy team for further information.

On behalf of the other Directors we would like to take this opportunity to welcome you to CareJoy Healthcare and we hope you enjoy working with us.



Darren Stubbs
Managing Director
CareJoy Healthcare Ltd

Useful Contacts Information:

Main Phone Number: 0203 773 4144
Theatres Team: theatres@carejoy.co.uk
Nursing Team: nurses@carejoy.co.uk

Agency Worker Handbook Declaration

Please declare within your application form declarations via the Credentiaally.io system, that you have received and read a copy of this Agency Worker Handbook which outlines the goals, policies, benefits and expectations of CareJoy Healthcare and its Clients.

You will also be declaring as well your responsibilities as an Agency Worker, that you have familiarised yourself with the contents of this Handbook, you acknowledge, understand, accept and agree to comply with the Worker Handbook provided by CareJoy Healthcare.

You are further confirming that you are aware that you must notify CareJoy Healthcare about any changes regarding your Fitness to Practice and/or to Professional Registration immediately.

Please note: This CareJoy Healthcare Agency Worker Handbook is not a contract of employment and should not be deemed as such.

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1. UPDATES

This handbook will be reviewed on an annual basis, we will ask you annually to ensure that you are updated with any changes to the handbook and continue to consent to data protection and declare agreement with the handbook.

To save you the time of reading the whole Handbook again, we will ensure to provide you with a list of updates or changes together with the section numbers.

Updates to this Handbook from previous Handbook dated October 2021:

- Introduction
- 2 Compliance Processes
- 3.8 Holiday
- 5.4 Overseas Police Checks
- 5.10 Right to Work Obligations
- 6.2 Clinical Interviews
- 9 Complaints Procedure
- 15 Revalidation
- 16 SaferJobs Commitment

Working for Carejoy Healthcare & Compliance

2. COMPLIANCE

The process of reaching and maintaining compliance with government legislation and Client requirements are managed for you by Carejoy Healthcare's Team. We ensure that all new applications are processed efficiently and accurately and to maintain each Agency Workers' records at full compliance, ensuring that you never find that you are unable to work in a particular area because an item in your file is missing or has lapsed.

Once your recruitment file, including qualifications, references, health and training has been established, you will be offered work. We will alert you whenever any of your documentation requires updating and you should immediately take steps to ensure that these items are updated. In most instances many of our contracts do not offer any grace period so once a document has expired, you will be required to immediately stop working. In the case of annual training, a refresher course should be booked in good time to ensure no gaps in your work offerings.

Your timesheet is crucial document that generates the invoice to the Client and our payroll department. You must ensure that the information on these timesheets is accurate and a true reflection of hours worked. Timesheets are subject to scrutiny and audit by our own company and the Client. Any discrepancies will be noted and investigated accordingly. The following guidelines will help ensure you are paid correctly and on time.

2.1 Supporting our Clients

As a recruitment agency, CareJoy Healthcare are tightly regulated and comply with a series of statutory rules set out by the department of health, skills for health, the national frameworks including CPP & HTE. Often these framework managers will audit our agency.

With any client, your Recruitment Consultant will complete an "Agency Worker Checklist" which will outline all aspects of the role you are due to undertake including your pay rates, accommodation requirements and all compliance information as required by the client.

As part of the registration and compliance procedure you will have provided the original documents of your Qualification certificates, proof of professional registration to be copied and retained on your file. Your compliance officer will have ensured your CV and relevant experience is up to date with you, and in the correct format and your recruitment consultant will have used the referee contacts provided to ensure we have references to match your work history on file and confirm your experience and competence is current.

During your registration, your qualification and professional registration will be verified via the appropriate membership websites (HCPC or NMC) and a check will be saved on your file.

On a monthly basis thereafter, the compliance team will complete checks on your professional registration and continue to store these checks on your file throughout the duration of your registration with CareJoy Healthcare.

Along with these monthly checks, further registration body checks will be added to your file prior to any new appointment along with the Agency Worker Checklist to the contracting authority.

Upon execution of your role with the contracting authority, you may at times need to be flexible to the requirements of the client and move from department to department - as long as this is in scope of your qualifications, experience and clinical competence. Failure to accept alternative work within the contracting authority as directed or required, (and provided it is within scope of your clinical competence) may result in remedial action by CareJoy Healthcare as per the contracting authority's wish.

Following our complaints procedure, you will be requested to provide a statement of events, and if deemed necessary may receive a verbal warning, disciplinary action or in some circumstance's termination of your registration with our agency.

3. TIMESHEETS, PAYMENT, TAX AND NATIONAL INSURANCE, SICKNESS BENEFIT, WORKING TIME REGULATIONS AND HOLIDAY ALLOWANCE AND INSURANCE GUIDELINES

3.1 Timesheets

- Please complete timesheet in full.
- Print your name, hours worked, week ending, and name of hospital clearly
- Ensure to have your timesheet authorised by a senior member of staff with their signature
 - If timesheet is not signed then it cannot be processed.
- Date every timesheet
- Pay is weekly on a Thursday depending on who you bank with
- All timesheets must be sent in by 10am on Monday to ensure you are paid by that week Thursday/Friday
- You can download extra timesheets from www.carejoy.co.uk or ask a member of the CareJoy team to post you more if you run low

Any payroll queries need to be called into the office, and we will try to assist you or pass your call onto the accounts team.

3.2 Rates of Pay

- Different pay rates apply to different assignments.
- Details of pay rates will be given to you prior to your booking. Please make sure you are aware of your pay rate prior to attending any shift.
- Rates of pay are not to be discussed with colleagues, as they are between yourself and your recruitment consultant.
- Should rates of pay be discussed, this discrepancy will be passed onto the managing director to investigate.

3.3 Travel

CareJoy Healthcare will take travel allowance into consideration on a placement-by-placement basis.

Allowance may be included in your pay rate, or reimbursed via receipts if agreed you're your recruitment consultant.

Agency Workers are first informed of the most local contracting authorities to ensure that the Agency Worker has appropriate access to the Hospitals prior to requests for further travel/staying in accommodation.

3.4 Method of Payment

When you join CareJoy Healthcare, you will be asked your preferred payment method – PAYE or Umbrella company.

CareJoy Healthcare adhere to the use of IR35 approved Umbrella companies for your placement payment.

Our accounts team hold a preferred list of companies to use, but we will discuss the use of any company, as long as they pass our internal auditing.

You will then receive an emailed payslip detailing how your pay has been calculated and showing any deductions made.

Should you have any change to your personal circumstances such as change of address or change of bank/ building society then please inform us and your Umbrella company immediately to ensure no delayed payments.

3.5 Tax and National Insurance

Depending on your chosen payment method your tax and NI will be deducted by CareJoy Healthcare's accounts team for PAYE payment, or by your Umbrella company.

Agency workers are required to pay income tax on your earnings if they exceed the standard threshold for the current financial year.

If you have any queries regarding your tax code or feel that you may be entitled to additional allowances, please contact CareJoy Healthcare to speak to the accounts team or the tax office directly.

If CareJoy Healthcare is not your main source of work for tax purposes and there are issues with overpayment of tax and other income issues, it is also advisable to discuss these with the Inland Revenue direct or via their website.

If you are entitled to pay reduced National Insurance or are exempt from paying contributions, you must produce the appropriate certificate, before undertaking any assignments.

3.6 National Insurance Benefits

Sufficient NI contributions may make Agency Workers eligible for certain Social Security Benefits:

- Statutory Maternity Pay in certain circumstances, whereby pregnant Agency Workers may be eligible for Statutory Maternity Pay through Carejoy Healthcare or Maternity Allowance from their local Social Security Office
 - If you are pregnant you must inform Carejoy Healthcare that you are pregnant and we will arrange for Risk Assessment of your working environment to be undertake in order to identify the type of assignments you can or cannot do.

3.7 Statutory Sick Pay/ Sickness Benefit

Because yours is a Contract for the period of each day, Carejoy Healthcare does not usually pay sick pay. You should make enquiries at your local DSS office regarding sickness benefits.

You must inform your recruitment consultant as soon as possible before your assignment is booked if you are unable to complete the placement due to sickness so that replacement Agency Worker can be supplied.

3.8 Working Time Regulations and Statutory Allowance

Under the Working Time Regulations (WTR), Agency Workers' working time (including Placements and services provided personally to anyone else) should not exceed 48 hours per week (averages over a period of 17 weeks).

Night duty hours must not exceed 8 hours in 24 hours (averaged over 17 weeks). However, Agency Workers who wish to waive this right, are required to declare this on joining the agency. This can be done in your application form and updated at any point during your time with CareJoy Healthcare – agency workers can withdraw the option to work in excess of 48 hours per week at any time.

Working time shall include only the period of attendance at each individual Placement. It does not include travelling time to or from the placement.

3.9 Holiday

The holiday year runs from 1st April to 31st March. As an Agency Worker you start accruing holiday pay as soon as you begin work through us and can request this from us at any time. Holiday entitlement is up to 5.6 weeks in any holiday year, pro-rata, for workers who work less than full time hours. Any holiday pay that you accrue must be taken before the end of September, as the holiday year runs from 1st April to 31st March. (any outstanding balance of holiday pay not claimed by this date will be lost).

Holiday pay rate is calculated as an average of the pay rates you have received over the previous 12 weeks. It is each Agency worker's responsibility to claim his or her holiday pay and Carejoy Healthcare will not send reminders, nor will Carejoy Healthcare be responsible for loss of holiday payments.

You may not work whilst on holiday.

You may not claim holiday for weekends unless these are usual working days for you.

To claim Holiday Pay please contact your Consultant.

Holiday Pay is not applicable to any Agency Worker registered as a Limited Company as it is already included in the rate of pay.

3.10 Insurance Guidelines

All Carejoy Healthcare Agency Workers are self-employed and are responsible for their own actions, errors or omissions at work.

You are therefore strongly encouraged to take out Personal Accident, Professional Indemnity/ Malpractice and Public Liability insurance policy appropriate to your needs, which will provide adequate cover.

As part of the registration, compliance and maintenance process, you will be asked to provide proof of valid insurance to the compliance team and this will need to be updated on an annual basis to confirm current membership remains.

Please note, the HCPC & NMC no longer cover your indemnity insurance, but you should check for any cover that may be included within your membership.

3.10.1 Insurance Against Personal Accident and Illness

Agency Workers will only be paid for work that has been undertaken so, if for any reason you are unable to undertake work, you may well suffer financially as a result.

The normal risks, which prevent Agency Workers from working, are accidents or illness. You are advised to seek and obtain insurance cover against such risks and at a level that protects your income during periods when you cannot work.

Carejoy Healthcare advises all Agency Workers to seek the services of an independent Financial Advisor in the first instance to ensure that they are covered in such an event.

3.10.2 Recording an Accident/ Incident and Insurance

If any accident/ incident occurs, which could give rise to a claim, the incident must be recorded accurately in the Client's Accident Book.

You are also strongly advised to complete an incident report/statement and forward evidence of it to your Consultant.

CareJoy Healthcare always advise you to ensure you have the appropriate level of insurance desired.

4. BOOKING SHIFTS, COMMUNICATIONS, ATTENDANCE, TIMEKEEPING AND CANCELLATIONS

4.1 Booking shifts

Please book your shifts by telephoning your personal consultant.

Make sure you keep your availability current either through the Credentilly.io profile or through communication with your consultant.

4.2 Communication

Your consultant will try to keep regular contact with you as vital to find you the work you want.

Please ensure you check your voicemail, respond to text messages and emails promptly to avoid compliance falling out of date and or missing shifts available.

4.3 Attendance, Timekeeping and Cancellations

As an agency that provides a quality last minute shift requirement service, our Clients rely on our company to source quality staff to fill shortfalls in their staffing needs.

When we fill a shift we need to ensure we can rely on our candidates to deliver the services required so as not to leave our Client short staffed and patients at risk.

You are expected to arrive early for your shift to be briefed.

If you are unable to make a shift for whatever reason, you must tell us straight away so that we can provide other suitable cover.

We appreciate that sometimes unavoidable things do occur however you must always try and give us as much notice as possible if you have to cancel a shift.

If you feel slightly unwell but are unsure if you will need to cancel the shift still advise us of the situation so we can be prepared if a replacement is needed.

To cancel a shift you have already accepted, please phone your Consultant immediately. All cancellations must be done at least 24 hours prior to your shift.

Please ensure you always arrive for work at least fifteen minutes before the shift is due to start. This will allow you to find your ward, store your belongings and introduce yourself to the Nurse in Charge or Manager.

If running late for work, please contact your Consultant immediately. Always call before the shift is due to start and please give a realistic estimated time of arrival. If your journey is further delayed, please update us again. It is always better for us to call ahead and inform a Client of lateness rather than the Client calling us looking for a worker running late. This will look unprofessional and may affect future work allocation from that Client. Allow plenty of

time to travel to work, particularly if travelling by bus or tube, which are frequently subject to disruptions.

When travelling to new establishment, please plan out your route carefully and ensure you have all the travel information you need before you leave home, if you need assistance planning your journey, your Consultant will be happy to do this for you.

It is not acceptable if you fail to inform us of your delayed arrival due to no mobile phone credit or no number of Carejoy Healthcare. Please make sure that you always have phone credit and you have Carejoy Healthcare's number saved: **0203 773 4144**.

Continuous failure to attend bookings due to sickness or last minute cancellation or non-attendance for bookings that you have previously accepted, could result in either or both of the client no longer accepting you for future bookings, and or disciplinary action via CareJoy Healthcare.

5. Before You Start Work

5.1 General Obligations

As an Agency Worker to be deployed in the provisions of the Services you always need to be aware that whilst on the Client's premises you:

- a) Are under the direction of the Client, and patient requirements always.
- b) Must work as directed by the Client and follow all reasonable requests, instructions, policies, procedures and rules set out by the Client;
- c) Shall not neglect your post, nor without due and sufficient cause omit, to discharge promptly and diligently a required task within the terms of the engagement;
- d) Shall not make unnecessary use of authority in connection with the discharge of the provision of the Services and engagement instructions;
- e) Shall abide by the Working Time Regulations 1998 and where applicable, New Deal requirements;
- f) Shall not act in a manner likely to bring discredit upon the Client;
- g) Shall not unlawfully discriminate for any reason;
- h) Shall not falsify records, timesheets, expenses or attempt to de-fraud the Client in any way;
- i) Shall not corruptly solicit or receive any bribe or other consideration from any person, or fail to account for monies or property received in connection with duties performed under the provision of the Services on an engagement;
- j) Shall observe the highest standards of hygiene, customer care, courtesy and consideration when working in a health service environment;
- k) Shall keep confidential information howsoever acquired whether relating to the Client, its business or relating to patients, including but not limited to patient identity, clinical conditions and treatment;
- l) Shall be competent in understanding and using both written and oral English;
- m) Shall be able to communicate effectively with the Client's staff, other healthcare workers, patients, carers and the general public;
- n) Be helpful, pleasant and courteous;
- o) Have good telephone skills;
- p) Shall have legible handwriting;
- q) Shall be confident and able to deal with Client's staff and patients at all levels;
- r) Shall be able to work with minimum supervision, where appropriate;

- s) Shall be prompt and punctual;
- t) Shall maintain proper standards of appearance and deportment whilst at work;
- u) Shall be properly and presentably dressed in such uniform and protective clothing, or otherwise, as agreed between the parties;
- v) Shall always display your photo ID badge on your clothing during an engagement when they are on the Client's premises.
- w) Shall not wear the uniform, protective clothing, photo ID badge or use the equipment on the Client's premises unless fulfilling the terms of the agreed engagement;
- x) Shall not engage in any form of physical or verbal abuse, threatening behaviour, harassment/ bullying or be otherwise uncivil to persons encountered in the course of work;
- y) Shall not anytime be or appear to be, on duty under the influence of alcohol or drugs;
- z) Shall not be at any time be or appear to be in possession of firearms or other offensive weapons.

5.2 Fitness for Practice

As an Agency Worker with Carejoy Healthcare you are required to sign a declaration at recruitment registration confirming that you are aware that you must notify Carejoy Healthcare about any changes to your professional registration immediately including your fitness to work.

Equally, you must keep CareJoy Healthcare informed that you are fit to practice throughout your deployment. Should you not be able to give this declaration truthfully, then Carejoy Healthcare will be required to provide an alternative Agency Worker, and may terminate your registration with our agency to safeguard our clients and their patients.

Please note: Any Agency Worker failing to maintain appropriate up to date, current professional registration will be withdrawn from active assignments until professional re-registration is effective.

Registered Nurses failing to maintain current professional registration will not be allowed to work as a healthcare assistant during this period of non-registration.

You should not declare yourself to be fit to practice if you are suffering from any of the following conditions:

- Vomiting
- Diarrhoea
- A rash
- Respiratory virus
- Flu-like symptoms

You should inform the Client and Carejoy Healthcare if you become injured or diagnosed with any medical condition prohibiting you from effectively delivery health care.

You must also let us know if you are pregnant.

As part of the registration and compliance process, your occupational health certificate with CareJoy Healthcare will be renewed on an annual basis and you will be requested to provide proof of immunity to the appropriate level (EPP / Non-EPP).

The Client you are placed with may also request that you undergo a medical examination before any occasion on which you are involved in the provision of the Services. If this is the case, the Client shall instruct you of the circumstances and reason for the medical examination.

The Client shall be entitled to refuse to allow you to be involved in the provision of the Services unless the medical examination demonstrates that it is safe for you to work in the safety of patients and other healthcare workers.

The Client shall also be entitled to refuse to allow you to be involved in the provision of the Services if you decline to be examined.

5.3 Electronic DBS Process for England- Enhances Disclosure and Barring Services (DBS)

The nature of the work undertaken by Carejoy Healthcare Agency Workers is likely to have regular and ongoing contact with young people and vulnerable adults.

For this reason, it is necessary for us to carry out Enhanced Disclosures, including check of the Children's and Adult's Barred Lists, as part of the recruitment process.

As an organisation using DBS Disclosure services to help assess the suitability of applicants for positions of trust, Carejoy Healthcare complies with the DBS Code of Practice, Data Protection Act and any other relevant legislations regarding the correct handling, use, storage, retention and disposal of Disclosures and Disclosure information.

If you have a DBS disclosure, which is registered to the update service, you will be asked to provide the full certificate for verifying as part of the registration and compliance process. The compliance team will use this certificate information to conduct quarterly DBS update service checks, or as and when prompted by the contracting authority.

If you do not hold a currently subscribed DBS Certificate, Carejoy Healthcare can process an application for you electronically via E-Safeguarding. The cost of this service is £45.80 which is payable to

ACCOUNT NAME: CAREJOY HEALTHCARE
SORT CODE: 60-24-20
ACCOUNT: 89819519

Please ensure you inform your compliance officer or recruitment consultant if you have made a payment for a DBS application.

This ensures that your initial DBS and any other subsequent renewals are processed promptly, usually within a few weeks or so (assuming no issues with your application).

5.4 Overseas Police Checks

If you have spent any significant time outside the UK, you may be required to provide an Overseas Police Check.

You may be asked to consent to CareJoy applying for one on your behalf.

5.5 Renewal of Enhanced Disclosure

Agency Workers are required to subscribe their DBS to the update service and ensure they renew their subscription annually. This is the responsibility of the agency worker.

If you fail to subscribe to the update service or remain subscribed to the update service, you will need to pay again for a full DBS application again and wait for the disclosure to come through prior to accepting any work with CareJoy Healthcare.

CareJoy Healthcare are audited frequently to ensure that we are providing our clients quality workers, the DBS is part of our quality assurance guarantee and without a current in date subscribed DBS on file we will be unable to provide you work.

5.6 Rehabilitation of Offenders Act (1974)

By virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975, the provisions of Sections 4.2 and 4.3 of the Act do not apply to “nurses and midwives and any employment which is concerned with the provision of health services, and which is of such a kind as to enable the holder to have access to persons in receipt of such services in the course of his or her normal duties”.

This means that if you have any conviction or caution, as a healthcare worker it is not considered spent, and will need to be declared to CareJoy Healthcare as part of your registration process.

We kindly ask that you provide a statement to coincide with your DBS disclosure outlining the events that took place to receive the conviction or caution and this will be kept on your file.

This requirement also includes convictions, cautions etc. which may occur during the Agency Workers registration with CareJoy Healthcare including between annual disclosure checks, or indeed any changes to your disclosure.

5.7 Criminal Convictions/ Cautions

Carejoy Healthcare is an Equal Opportunities organisation and as such, undertakes to treat all Agency Workers fairly and not to discriminate based on conviction or other information revealed.

Having a criminal record will not necessarily debar any individual from working with the company. Denial or non-disclosure of any conviction or caution, which is subsequently shown to exist, will however lead to the immediate removal of the Agency Worker from Carejoy Healthcare Register.

We hope to work with honest candidates and will strive to provide the NHS and our private hospitals with the honest conscientious and discreet candidates.

Any Agency Worker with convictions/ cautions will be asked to prepare a “Confidential” Statement of Events surrounding each convictions/ caution. Disclosures are reviewed by the Company’s Directors. Due consideration is given to the nature of the role, together with the circumstances and background of any offence and over-riding consideration is to care, safety and protection of Clients. Carejoy Healthcare is bound by the Disclosure body’s Code of Practice and we guarantee that the information will be treated confidentially.

Please be aware that our Clients do request to see a copy of your DBS from time to time.

5.8 Agency Worker Regulations (AWR)

Agency Worker Regulations came into force on 1st October 2011.

The regulations are designed to ensure that you, the agency worker, receives treatment no less favourable than the clients full time employed equivalents.

This is usually based on a qualifying period of time with the client.

Detailed guidance on the regulations is available online <file:///C:/Users/Admin/Downloads/AWR-Client-Briefing-2015.pdf>, for any other information please do not hesitate to contact your consultant.

A brief outline of your entitlements as an agency worker are as outlined below:

- a) Immediate access to facilities, etc. provided by the Client to equivalent employed workers at the Client, and,
- b) After a qualifying period of twelve weeks, equal basic working conditions. The working conditions referred to are principally pay, holiday pay and other entitlements that the establishment offers to their permanent staff such as vouchers which will be declared upon request of any candidate.
- c) For the purpose of entitlement to equal working conditions the definition of twelve week “Qualifying Period” is important so when calculating whether any weeks completed with the Client count as continuous towards the Qualifying Period, where:
 - i. The Agency Worker has started working during an assignment and there is a break, either between assignment or during an assignment, when the Agency Worker is not working;
 - ii. The break is:
 1. For any reason and not more than six Calendar Weeks;

2. Wholly due to the fact that the Agency Worker is incapable of working in consequence of sickness or injury and the break is 28 Calendar Weeks or less; (iii) does not apply; and if required to do so by the Employment Business, the Agency Worker has provided such written medical evidence as may reasonably be require;
 3. Related to pregnancy, childbirth or maternity and is as a time in a protected period, being a period beginning at the start of the pregnancy and ending at the end 26 weeks beginning with childbirth (being the birth of a living child or the birth of a child whether living or dead after 24 weeks of pregnancy) or if earlier, when the Agency Worker returns to work;
 4. Wholly for the purpose of taking time off leave, whether statutory or contractual, to which the Agency Worker is otherwise entitled which is: ordinary, compulsory or additional maternity leave; ordinary or additional adoption leave; additional paternity leave; time of or other leave not listed in the paragraph.
 5. Wholly due to the fact that the Agency Worker is required to attend at any place in pursuance to being summoned for service as a juror and the break is 28 Calendar Weeks or less;
 6. Wholly due to a temporary cessation in the Client's requirement for any worker to be present at the establishment and work in a particular role for a pre-determined period of time according to the established custom and practises of the Client;
 7. Wholly due to a strike, lock-out or other industrial action at the Client's establishment;
- iii. The Agency Worker returns to work in the same role with the Client. Any weeks during which the Agency Worker worked for the Client before the break shall be carried forward and treated as counting towards the Qualifying Period with any weeks during which the Agency Worker works for the Client after the break. In addition, when calculating the number of weeks during which the Agency Worker has worked, where the Agency Worker has started working in a role during an Assignment and is unable to continue working for a reason described above paragraph (b, iii or b, iv) for the period that is covered by one or more such reasons, the Agency Worker shall be deemed to be working in that role with the Client for the original intended duration or likely duration of the relevant Assignment, whichever is the longer.

5.9 AWR and Statutory Leave

As noted in the terms of engagement agency workers under PAYE are entitled up to 5.6 weeks leave or a proportion thereof pro-rata according to your levels of agency work.

The terms of engagement also state the basis on which this leave is to be claimed by you and paid to you.

In the event of you meeting a qualified period there is a possibility that you might, depending on the Client concerned, be entitled to annual leave at a higher rate than the equivalent of 5.6 weeks per year.

If this is the case then any leave entitlement over and above the 5.6 weeks due to you will not be added to your leave entitlement but will be paid to you as it is earned and will be included in your standard hourly rate of pay.

5.10 Right to Work Obligations

You must have the right to work in the UK before being placed in a role with CareJoy Healthcare.

The legal right of the individual to work in the UK through an agency is checked at the same time as the identity check.

Carejoy Healthcare Ltd will assess the eligibility of an individual's right to work in the UK by verifying the specified documentation from List A and B.

The Home Office defines these as follows:

List A contains the range of documents which you may accept for a person who has a permanent right to work in the UK. If you conduct the right to work checks correctly before employment begins, you will establish a continuous statutory excuse for the duration of that person's employment with you. You do not have to conduct any further checks.

List B contains a range of documents which may be accepted for a person who has a temporary right to work in the UK. If you conduct the right to work checks correctly, you will establish a time-limited statutory excuse. You will be required to conduct a follow-up check in order to retain your statutory excuse. This will generally be when the permission to be in the UK comes to an end.

- If a document or combination of documents is provided from List A, there is no need to ask for documents from List B.
- Documents are only required from List B if the individual cannot provide a document or combination of documents from List A. The frequency of any follow-up checks depends on whether the documents presented are from Group 1 or Group 2 in List B, as follows.
 - Group 1 Time-limited Before employment starts and again when permission expires (as indicated within the document presented).
 - Group 2 Time-limited Before employment starts and again after six months, as set out in the Positive Verification Notice.

All interviewed candidates are required to bring satisfactory documentation with them to the face-to-face interview or provide via secure digital methods if interview is on-line. A picture should be taken during the interview of the applicant together with their ID. Where any documents are sent digitally, CareJoy will require a declaration to confirm that the documents have been sent by the applicant.

Following the interview, and decision to register the candidate with Carejoy Healthcare Ltd, the compliance team will validate right to work documentation, as detailed above, from all prospective workers to ensure they are eligible to work in the UK.

There is multi-step process for validating an individual's right to work will be adopted, namely:

- Obtain original versions of one or more acceptable documents;
- Check the validity of the documents in the presence of the holder;
- Make and retain a clear copy, recording the date the check was made.

- Utilise the TrustID On-line check to confirm.

The manual checks required to validate the documents are listed below and outlined in the CareJoy Healthcare identity checks policy.

The documents or combinations of documents that can be presented and will be checked, in accordance with Home Office and NHS Employers Check guidelines, are detailed within the following guidance NHS Employers Right to Work standard and the Home Office Right to work checks: an employer's guide.

NHS Employers Right to work check standard: <https://www.nhsemployers.org/your-workforce/recruit/employment-checks/right-to-work-checks>

Home Office. Right to work checks: an employer's guide: <https://www.gov.uk/government/publications/right-to-work-checks-employers-guide/an-employers-guide-to-right-to-work-checks-6-april-2022-accessible-version>

The Head of Compliance is responsible for keeping up to date with the Home Office Guidelines and reviews the requirements on an annual basis, or sooner if required, to ensure checks are being performed in accordance with statutory legislation.

Follow up checks:

Work-seekers who have a permanent right to work will be set up on the Carejoy Healthcare Ltd system and will not require follow up.

Work-seekers who have a time-limited right to work will be set up on the Carejoy Healthcare Ltd system and assigned a flag, which will notify the branch team of when to perform a follow up check. The worker will not be placed until this has been completed, in accordance with Home Office guidelines and this policy.

Once Carejoy Healthcare Ltd is satisfied that the candidate has an outstanding application with the Home Office that was made before their previous leave expired or has an outstanding appeal against a Home Office decision, a Positive Verification Notice from the Employer Checking Service will be obtained.

Where necessary Carejoy Healthcare Ltd will ask the Home Office to check a candidate's immigration status. This will usually be when:

- The candidate can't show you their documents e.g. they have an outstanding appeal or application with the Home Office
- The candidate has an Application Registration Card
- The candidate has a Certificate of Application

Where required further advice and guidance is sought from the Home Office: <https://www.gov.uk/government/publications/right-to-work-checks-employers-guide>

Online Checks

Since 28 January 2019, employers have been in certain circumstances been able to perform an online right to work check; which will provide a statutory excuse. It is not possible to conduct an online right to work check in all circumstances, as not all individuals will have an immigration status that can be checked online.

Currently, the online checking service supports checks in respect of those who hold the following:

- a biometric residence permit;
- a biometric residence card; or
- status issued under the EU Settlement Scheme (alternatively, these individuals continue to be able to demonstrate their right to work by presenting their EU passport or ID card until the end of the planned implementation period).

Government guidance sets out what information needed. In circumstances in which an online check is not possible, Carejoy Healthcare will always conduct the manual check.

This policy does not outline the checks or documentary evidence required to assess a candidate's identity. The checks required to verify an individual's proof of identity are outlined within the Identity Checks Policy.

5.11 Registration checks

All Agency worker will be annually checked within their regulatory body for proof of registration and any reports that have been reported accordingly.

Anyone found with a report will be reported immediately to the client and will cease any further services provided as this may harm vulnerable patients and other clinical and non-clinical staff.

5.12 Healthcare Professional Alert Notices

As we deal with vulnerable adults and children, it is important to check that we are not sending any healthcare professionals that may pose further danger to vulnerable adults and children.

We shall perform annual checks with healthcare professional alert notices checking whether you may have records and shall act accordingly upon receiving results.

6. Documentation, ID Badge, Uniform, Assignments, Engagement/ Employment by a Client and Client Policies and Procedures

Upon starting any assignment, you may be required to produce proof of identification in the form of your passport or UK photo card driving license.

In addition, you must ensure that you are wearing your CareJoy Healthcare ID Badge – which will be provided to you when you have been signed off as compliant.

The badge will contain:

- Your photo
- Registration number
- Job title
- Company contact details

You must always ensure you have a timesheet with you to complete at the end of your assignment.

Failure to comply with any of these requirements could result in you being refused permission to the shift by the Client.

6.1 Uniform and Dress Code

All Agency Workers are required to wear the full Carejoy Healthcare uniform or alternative dress code as specifically advised at the time of booking. This will apply to all hours spent on duty. Please ensure when you accept an assignment that you are aware of the appropriate dress code/ uniform required and that you are able to accommodate this requirement.

The full Carejoy Healthcare uniform consists of:

- White Tunic: Cleaned and Ironed at all times.
- Smart Black or Navy Blue Trousers: no jeans or combats
- Smart and Practical Black Shoes: Flat, Waterproof and Closed-Toe
- Carejoy Healthcare's ID Badge

Your clothing should at all times appear professional and acceptable to represent Carejoy Healthcare and suit the Client. Your ID Badge should be visible at all times.

Your uniform should only be put on once you are on the facility premises due to infection control purposes. This is requirement of most Clients.

Health and Safety must be considered at all times. Shoes should not have a heel higher than one inch unless medically required in the circumstances of a disability. Open toe sandals are considered as a hazard as spillage could injure. **No jewellery other than plain wedding bands and small stud earrings are acceptable. Watches are not to be worn on the wrist. Nail varnish and false nails are not permitted for clinical work due to infection control concerns. Nails should be kept clean, bare and cut down/neat.**

Personal Protective Equipment is supplied where appropriate within most units; please ensure that you wear the necessary PPE to eliminate/ lower any risk to your personal health.

Carejoy Healthcare operates an anti-discriminatory policy and would consider it a disciplinary offence for anyone to wear offensive slogans political or otherwise where there is the possibility of offending a Client or colleagues with whom you are working.

It is your responsibility to ensure your uniform is kept clean, laundered, ironed and neat at all times. Please take care with your personal hygiene at all times.

You should ensure you have enough uniforms to cover the amount of shifts you work.

- If you are part-time you should have at least 2 uniforms
- If you are full-time then ensure you have at least 4 uniforms

6.2 Clinical Interviews

CareJoy Healthcare requires all agencies workers to be undertake a Clinical Interview with a member of our Clinical Assessment Team, prior to your first placement.

6.3 Acceptance of Assignments

You are required to work competently; you must possess the knowledge, skills and abilities required for lawful, safe and effective work without direct supervision. You must acknowledge the limits of your professional competence and only undertake roles and accept responsibilities for those activities which you are capable to undertake. In view of this, please ensure that prior to agreeing to accept an assignment, you are satisfied that you have the skill level and competence to perform the role safely.

Please note that even if you feel you are competent to undertake a particular task you must check that the Client's Policy and Procedure enables you as an Agency Worker to complete the required task. The Client may ask Carejoy Healthcare to provide a copy of your CV before accepting you as an Agency Worker. The Client also reserves the right to accept or decline a Carejoy Healthcare Agency Worker for an assignment.

6.4 First Assignment with New Clients

Please ensure that you arrive in good time and meet with the specified contact person as agreed. At the start of each assignment in an establishment, ward or department with which you are unfamiliar you must request and receive a comprehensive orientation including the following:

- Fire policies relating to the establishment.
- Security issues relating to the establishment.
- Moving and handling policies relating to the establishment.
- Any "Hot Spots" and "Violent Episodes" to be aware of and the establishment's policies for this.
- Any Health and Safety issues relating to your placement in the establishment.
- Additional relevant policies, eg. Relating to information Security/ Confidentiality.

It is your responsibility to ensure you are aware of any emergency telephone numbers for the area in which you have accepted your shift.

When you attend a booking with a Client for the first time, we will on first completion of the first shift, contact both yourself and the Client to monitor the success of the placement. This forms part of our quality assurance and monitoring process, ensuring that a professional service is provided at all times.

Upon being offered an assignment you will be advised of the grade and type of work you will be expected to perform. We will clarify the extent of responsibility you will be expected to fulfil. If possible we will provide you with a job description from the Client. Failing this we will obtain as much information concerning the placement as possible, in order for you to be able to judge whether the assignment being offered is suitable.

6.5 Engagement/ Employment by a Client

Our terms of business with our Clients include a requirement that the Client pay us appropriate recruitment fee in certain circumstances, if they employ directly any Carejoy Healthcare Agency Worker, who has worked for them previously through Carejoy Healthcare. This applies equally to agency or permanent posts, full or part-time. You are required by your Terms of Engagement for Agency Workers to notify your Consultant take up any post with a Client of Carejoy Healthcare for whom you have worked previously, even if you have terminated your registration with Carejoy Healthcare.

6.6 Completing an Assignment

At the end of every assignment Carejoy Healthcare provides Evaluation of Service to Clients. Clients are asked to supply feedback on the service they have received from Carejoy Healthcare and also to provide a reference on the Agency Worker. Agency Workers are also asked for feedback on the assignment. Both positive and negative feedback is actively encouraged so Carejoy Healthcare can act upon it to improve its quality of service.

6.7 Client Policies and Procedures

You are required to adhere to the policies and procedures issued by the Client. Please ensure that you are advised at induction of where these are kept. You should also be made aware of any significant changes in policy at the commencement of any duties. Carejoy Healthcare also has a range of key policies and procedures, in addition to those outlined in this Handbook. If you have any questions about policies and procedures please discuss these with your Consultant as appropriate and soon as possible.

Should any conflicts or confusions arise during your working assignment with regard to the interpretation of policies and procedures we strongly urge you to seek advice from Senior Member of Staff or contact us at the time the conflict is occurring. Equally, should an occasion arise whereby you believe that you are being compelled to compromise your integrity and are instructed to breach your Code of Professional Conduct, we would instruct you to seek guidance immediately. Always remember that you are personally and professionally accountable for your practice. This means that you are answerable for your actions and omissions, regardless of advice or direction from another professional.

In the event that a more general conflict arises, you have a professional duty to make all reasonable attempts to resolve any difficulties. As a professional you are expected to co-

operate with others in the team. In the event of difficulties, please contact us and we will do all we can to help to negotiate a satisfactory solution.

6.8 Record Keeping

Record keeping is a professional requirement of all Agency Workers. Failure to maintain a record would cause considerable difficulties in respect of any legal proceedings, e.g. allegations of negligence. Information is essential to the delivery of high quality evidence-based health care on a day-to-day basis. Records are a valuable resource because of the information they contain. This information can facilitate clinical decision making, improved patient care through clear communication of the treatment rationale and progress, and facilitate a consistent approach to team working.

However, a record is only of use if it is correctly recorded in the first place, regularly up- dated, and easily accessible when it is needed. Everyone working in healthcare that records, handles, stores or otherwise come across information, has a personal common law duty of confidence to comply with this. All patient treatment and refusal of treatment and advice must be noted. It is advisable to note when telephone contacts are made. All patient records should be kept confidential in line with the Data Protection Act 1998. Ensure your clinical documentation complies with NMC and HPC guidelines and industry requirements. If you require further information on this, please refer to the NMC or HPC websites or contact our Nursing Department.

7. IMPORTANT OPERATIONAL POLICIES AND PROCEDURES

7.1 Codes of Conduct

All registered Nurses, Midwives and ODPs working with Carejoy Healthcare will be required to adhere to the respective Codes of Professional Conduct, which contain full details of the codes of practice, in respect of all agency work undertaken. You will have been provided with these publications directly by your professional body. Additional copies can be downloaded from the NMC websites. Please ensure that you behave in a manner that upholds the reputation of your Profession. Behaviour that compromises this reputation may call your Registration into question even if it is not directly connected to your professional practice.

Carejoy Healthcare code of conduct informs All Agency Workers of our Clients' expectations about their general conduct and approach to tasks, emphasises the importance of a professional approach to all Clients and service users, and highlights situations that Agency Workers may have to deal with.

You are required to adhere to the following:

Discrimination: Agency Workers should not discriminate between people on the grounds of Creed, colour, race, political preference, sexual preference, ethnic background, Disability of whatever nature, age, marital status or gender.

Reputation: Agency Workers are ambassadors of the Carejoy Healthcare and must not say or do anything that may harm our reputation.

Own duties: Agency Workers must never attempt to perform any duties of care or otherwise that may fall outside their expertise/ and or qualifications. Specifically, care staff must not attempt to perform the duties of nursing staff.

Confidentiality: Agency Workers will at times become privy to information concerning a Client or service user, this information must be treated with respect and remain confidential at all times. At no time may any Agency Worker discuss the confidential affairs of Carejoy Healthcare, a Client or a service user without specific written permission to do so. The only exceptions to this requirement are cases where the law dictates otherwise or if silence may negatively affect a service user's wellbeing.

Dignity: Agency Workers must not do or say anything that may put the dignity or health of their service users at risk.

Professionalism: Agency Workers must at all times remain professional whilst on assignment, even if regular contact with service users or other workers may engender Personal relationships. Agency Workers must take specific care to keep the professional nature of the relationships intact in the working environment.

Keep updated: Agency Workers must at all times keep up to date with policies and procedures and changes to legislation that may affect them.

Respect: Agency Workers must always respect the working practices and demands of service users unless unreasonable or if a working practice may breach health and safety.

Keep to plan: Agency Workers must always, whenever applicable, keep to the requirements of a care service plan and/ or any other agreed role requirement.

Best interests: Agency Workers must always act with the best interests of the service user in mind.

Notifications: Agency Workers should always in the first instance notify the manager of the Institution where they are working, of any concerns, followed by a telephone call to Carejoy Healthcare.

Own decisions: Agency Worker must always allow the service user to make the decisions about what is best for them. This includes decisions about treatment and personal affairs.

Complaints: Carejoy Healthcare has a detailed policy on how to report complaints, in the event of a complaint that may affect your duties and obligations please refer to our policy and notify us immediately.

7.2 Substance Abuse

You must not arrive on duty intoxicated by either alcohol or drugs prior to shift. Clients may request that you undertake an alcohol breath test if they suspect that your performance may be affected. Each trust will have a policy regarding dealing with suspected intoxication. Any Agency Worker arriving for or suspected of arriving for duty intoxicated who is sent home will not be refunded travelling or time expenses.

7.3 Confidentiality

All Agency Workers, whilst undertaking assignments, will at some point encounter information, which is of a confidential nature. Client details are a matter of a very high level of confidentiality and must not be disclosed to any third party. Clients have an absolute right to confidentiality and privacy regarding the services they are receiving in accordance with the Data Protection Act 1998 and Human Rights Act 1999 and your agreement with Carejoy Healthcare. Any concerns you may have regarding confidentiality should be discuss with Carejoy Healthcare Manager.

7.4 Data Protection/ Access To Records

Carejoy Healthcare is a “data controller” for the purposes of the Data Protection Act 1998. This is because Carejoy Healthcare holds and uses both “personal date” and “sensitive personal data” about its employees, Clients, Agency Workers and other individuals. Carejoy Healthcare processes data, including your records and Client/patient records. The information contained in your Agency Worker records is taken from your application form, aswell as Disclosure and Barring Service, references and Terms and Conditions for Agency Workers. There may be occasions when your records are disclosed to Regulators and Inspectors and Clients.

Carejoy Healthcare will use your personal details and information we obtain from other sources for assessing your suitability for employment with us and if your application is successful we will use your information for personal administration and management purposes including carrying out appropriate security or financial checks. We may need to share out your information for these purposes with our associated companies, and our Clients. You consent to our processing sensitive personal data about you, for example your health information or racial or ethnic origin information, for the purposes of your placement with us and to the transfer of your information abroad where necessary. You should refer to

the Data Protection Compliance Officer if you are in any doubt about any of Carejoy Healthcare's obligations under the Act.

Rights of Access (Subject Information): The Act gives you the right, on application in writing (and payment of a fee as appropriate), to ask for a copy of the information we hold on you and to correct any inaccuracies. For quality control, training and security purposes, we may monitor or record your communications. Carejoy Healthcare is not obliged to provide information to you in all circumstances.

A number of exemptions apply and Carejoy Healthcare may in certain circumstances be unable to disclose information, where that information also relates to another individual who could be identifiable from the information disclosed. However, in these circumstances Carejoy Healthcare will provide you with reasons why we believe such a decision to be necessary. All requests for disclosure received from you or those who claim to be data subjects will be submitted to the Directors for action and they will normally respond within two weeks.

Upon receipt of such data, you should check its accuracy and inform the Director of any amendments required. It is in the interests of everyone that all information is accurate and up-to-date. Your co-operation and assistance are greatly appreciated. It is assumed that you will only need to verify personal data on one occasion. There will be no charge made for the first application in any calendar year; however additional requests will normally attract a charge of £15 per application.

7.5 Computer Use

The Client may at its discretion authorise you to gain access to certain computer systems and certain programmes and data within those systems. You shall not attempt to gain access to data or programmes to which authorisation has not been given. Agency Workers deployed in the provision of the Services, must at all times when using such computer systems:

- 1) Observe the Client's computer security instructions in respect of the proper use and protection of any password used in connection with such computer systems or any computer any floppy disk, CD-ROM disk, removable hard drive or any other device for the storage and transfer of data or programmes;
- 2) Not load any program into any computer via disk, typing, electronic data transfer or any other means;
- 3) Not access any other computer or bulletin board or information service (including, without limitation, the Internet) except with specific prior consent of the Client or as the case be from the Client's representative; and
- 4) Not download any files or connect any piece of computer equipment to any network or other item of computer equipment except with the prior consent of the Client or the Client's representative.

The Client shall provide copies of its written computer security policy to Carejoy Healthcare and if supplied, will be available to you on reasonable request.

7.6 Security

Whilst on the Client's premises, you must comply with all security measures of the Client. The Client shall provide copies of its written security procedures to Carejoy Healthcare and these are available to you on reasonable request. The Client shall have the right to carry out

any physical searches, or your possessions or of vehicles used by you at the Client's premises. The Client or any person, firm or organisation who is responsible to the Client for security matters shall, when carrying out such searches, comply with the Human Rights Act 1998.

7.7 Professional Indemnity Cover

Whilst working within the NHS you are covered under the Clinical Negligence Scheme for Trusts (CNST). It is important to realise that the cover offered by the CNST is by no means sufficient to cover all the situations in which you may find yourself. Carejoy Healthcare would therefore advise you to take out your own personal PI cover. Medical Professionals working outside the NHS should have their own PI cover.

7.8 Medicines Management

You have been provided with a copy of the NMC Standards for Medicines Management 2008. Carejoy Healthcare Medicines Management policy reflects the guidance contained with that publication and you are expected to fully apprise yourself of the contents of both these documents and practise in accordance with the guidance contained therein.

The Medicines Management policy sets down minimum acceptable standards and behaviours expected of an Agency Worker placed through Carejoy Healthcare in acute and community settings, where they are involved with Medicines Management for the adult client or patient and aims to safeguard the best interests of Clients and patients, clarify the scope and limitations of the responsibility of the Agency worker, support Clients/ patients with their medications, clarify the role of the unqualified Agency Worker, encourage safe systems for handling, storing, assisting and administering medicines, minimise risk, identify communication structures for concerns, errors and risks, define "assistance with medicines" and "administration of medicines", ensure that recording and control of medicines is correctly performed to prevent loss, inappropriate access to and misuse of medicines by patients/ carers, residents, staff or any member of the general public, and support the Agency Nurse to work to the highest standard when involved in the prescribing and administration of medicines.

Practitioners involved with the delivery of care carry responsibility for their actions. Signatures and initials must be capable of identification. Whilst the policy focuses on clarity for Agency Workers regarding their role and scope of practice for medicines management in the Acute and Independent Hospitals and hospices the principles in this medicines management policy are to be understood to cover all settings.

Please note: A further comprehensive Medicines Management Policy is available focusing primarily on clarity for Agency Workers within the Community Setting. Please ask your Consultant or the Nursing Department for a copy. Medicines Management should ensure a patient/ client receives maximum clinical benefit from the prescribed medication in safe way, which minimises any potential harm.

Suitably qualified Agency Workers will provide patient/ clients with supervision and support to ensure that they receive their medications in an appropriate manner: as they are

prescribed and in accordance with dispensing instructions; and in a timely manner to ensure an effective clinical outcome.

Suitably qualified Agency Workers may administer prescribed medication, including controlled drugs, provided the patient/ client has consented and this is recorded as part of their care (Signatures and initials must be capable of identification). Any medicines given must be given as directed by the prescriber.

Intravenous Medications/ Blood products/ transfusions

In the situation that a qualified Agency Worker has received previous training in the area of the administration of Intravenous Medications, it is possible to administer such medications under the scope of professional practice, NMC. However, organisations vary and some do not permit Agency Workers to undertake such tasks until such time that they have assessed the Agency Worker's skills and deem that they have achieved competency in accordance with Organisational Policies and Guidelines. Please ensure you are fully apprised of the organisation's policies and procedures in relation to the above.

Definition of a Medicinal Product

Medicinal Product: "Any substance or combination of substances presented for treating or preventing disease in human beings or animals. Any substance or combination of substances which may be to human beings or animals with a view to making a medical diagnosis or to restoring, correcting or modifying physiological functions in human beings or animals is likewise considered a medicinal product." Council Directive 65/65/EEC.

Blood and Blood Products: Blood is not classified as a medicinal product although some blood components are. Products derived from the plasma component of blood such as blood clotting factors, antibodies and albumin are licensed and classified as considered to be medicinal products. For the purpose of the administration of medicinal products registrants would be expected to apply the standards for medicines management to all medicinal products but should consider additional guidance by the **National Patient Safety Agency: Right Patient, Right Blood, November 2006** (available at www.npsa.nhs.uk). **A key requirement of this guidance is that all staff involved in blood transfusion undergo formal competency assessment on a three yearly basis.**

Procedure: Assistance and Administration of Medicines

Adults, who are supported in the community setting in their own homes by a Carejoy Healthcare Agency worker, will normally be responsible for their own medicines both prescribed and non-prescribed.

Definition of Assisting

The definition of assisting is (Care Workers in the Community setting should also refer to training level1 in the Medicines Management for Agency Nurses within the Community Setting Policy) when a care worker or nurse assists someone with their medicine, the Client or patient must indicate to the care worker or nurse what actions they are to take on each occasion.

Definition of Administration

If the Client or patient is unable to do this or if the care worker or nurse gives any medicines without being requested by the Client or patient to do so, this activity is interpreted as administering medicine (Care Workers in the Community setting should also refer to training

level 2 in the Medicines Management for Agency Nurses within the Community Setting Policy).

To administer medicines means “to give a medicine either by the introduction into the body, whether by direct contact e.g. orally or by injection, or by external application e.g. a transdermal patch for analgesia or an impregnated wound dressing”.

Procedure: Qualified Nurse and ODP Agency Worker professional responsibilities

The Nurse’s and ODP’s role in medicines management is the safe handling and administration of medicines and the provision of support to the Client/ patient receiving them. Part of this responsibility is to ensure that the patient/ Client understands the reasons for the medication, the likely outcome and any potential side-effect.

Agency Nurses and ODPs placed in organisations must work with local policies, procedures and directives and within the limits of their competency and experience. Carejoy Healthcare expects all agency workers, at the commencement of each assignment, to familiarise themselves with the local policies and procedures that they are working in. If these policies are not made available to you, it is your responsibility to inform the Departmental Manager and the Clinical Nurse Manager of Carejoy Healthcare.

Nurses are strongly advised to be fully appraised of the Nursing and Midwifery Council (NMC) “Standards for medicines management”, 2008.

This framework provides the minimum standards by which their practice should be carried out and it is against these standards that their conduct will be measured. Carejoy Healthcare expects all qualified nurses working through the agency to follow these standards strictly and to use this to apply their professional expertise and judgement when supporting Clients/patients with their medicines in all care settings.

Key points of these are that the nurse must:

- Know the therapeutic uses of the medicine to be administered, its normal dosage, side effects, precautions and contra- indications
- Be certain of the identity of the patient to whom the medicine is to be administered
- Be based, whenever possible, on the patient’s informed consent and awareness of the purpose of the treatment
- Be aware of the patient’s care plan
- Check that the prescription, or label on medicines dispensed by a pharmacist, is clearly written and unambiguous
- Have considered the dosage, method of administration, route and timing of the administration in the context of the condition of the patient and co-existing therapies
- Check the expiry date of the medicine to be administered
- Check that the patient is not allergic to the medicine before administering it
- Contact the prescriber without delay where contra-indications to the prescribed medicine are discovered, where the patient develops a reaction to the medicine,
- Or where assessment of the patient indicates that the medicine is no longer suitable
- Make a clear, accurate and immediate record of all medicine administered, intentionally withheld or refused by the patient, ensuring that any written entries and the signature are clear and legible
- Ensure that a record is made when delegating the task of administering medicine
- Where supervising a student nurse in the administration of medicines, clearly countersign the signature of the student.

ODPs are strongly advised to be fully appraised of the HPCs Standards of Proficiency- Operating Department Practitioners, 2008, and the Standards of Conduct, Performance and Ethics, 2008.

This framework provides the minimum standards by which their practice should be carried out and it is against these standards that their conduct will be measured. Carejoy Healthcare expects all ODPs working through the agency to follow these standards strictly and to use this to apply their professional expertise and judgement when supporting Clients/ patients with their medicines in all care settings.

In addition to local policy and specifically with regard to Medicines Management ODPs must be familiar with the several agencies and different Government Legislation which governs their practice: The Medicines and Healthcare Products Regulatory Agency (MHRA) provides information about medicines regulation, The National prescribing centre provides information about prescribing and patient group directions, The Department of Health produces a helpful publication 'Medicines Matters'.

The relevant legislation is available from the Office of Public Sector Information's website.

Procedure- Medicines- Unqualified Agency worker' Role in Medicines Management Carejoy Healthcare Unqualified Agency worker's responsibilities:

When working in organisations such as Hospitals, Nursing Homes and Hospices it is unlikely that an unqualified Agency Worker will be involved in medicines management. In a Care-Home or in the Community in client's home an Agency Worker may be required to assist a client with their medications Unqualified Agency Workers must clarify with their Consultant or Carejoy Healthcare Clinical Nurse Manager the extent of their responsibilities for medicines when placed in the community or care setting. In a Care-Home an unqualified Agency Worker may be asked to be a second witness to medication administration when no second qualified nurse is available. If an Agency Worker considers that they are not competent to do this they must inform the person in charge of the shift. Any unqualified Agency Worker required to be a second witness must have received appropriate training in the management and Safe Handling of Medicines. **All care workers involved with medicine management must be able to evidence accredited training.**

Please note: A further comprehensive Medicines Management Policy is available focusing primarily on clarity for Agency Worker within the Community Setting. Please ask your Consultant or the Nursing Department for a copy.

Procedure- Medicines- Acute & Independent Hospitals and Hospices

All medicines administered in a hospice or acute hospital must be considered prescription only. In this setting, whether administered by a nurse/pharmacist or self-administered by the patient himself, medicines administration can only occur when a written prescription exists or a Patient Group Direction (PGD) is available.

Agency Workers must establish when they have responsibility for administering medicines. They can do this as a single-administration or if a second check by another qualified practitioner is required.

Self-administration in Acute and Independent Hospitals and Hospices:

In some circumstances, patients retain responsibility for the whole or part of the process for their medicines management. Agency Workers should establish local policies, procedures and means of recording this when they are responsible for these patients.

Self-administration of medicines by a patient does not discharge a nurse's responsibility for supervision, assessment and documentation of medicines taken.

Procedure- Medicines- Advice Giving

The Agency Worker must not offer advice on specialist treatments e.g. a subcutaneous syringe driver, used for palliative care or a cancer drug, unless they have the specialist knowledge to do so.

In the community setting Carejoy Healthcare Agency Worker will not influence:

- How the Client chooses to obtain his medicines
- How and where the Client chooses to keep medicines in the home (unless this affects the efficacy of the drug)
- How medicines, which are no longer needed, disposed of

Procedure- Medicines- Consent

A Client's consent for medicines to be administered must be checked, documented and dated in the Care Plan. This documented consent should confirm his/her understanding:

- Of the intended effect of the medicine
- Of potential side-effects
- That he/she has the right to refuse the medicine

Consent is dynamic and therefore must be established at every medication administration event. Agency Worker must obtain Clients consent before administering or assisting with their medicines.

Procedure- Medicines- Refusal of Medication

When a Client refuses to take their medication, or to receive it from the Agency Worker, the refusal and the reason for this must be recorded. The patient's right to decide whether to receive medications must be respected. Appropriate encouragement to take or receive the medication is acceptable, however forcing a Client to take the medicine through physical or verbal coercion is not acceptable and is abusive.

Agency Workers must be aware that sometimes, even the act of standing over a Client may be seen as intimidator.

Procedure- Medicines- Unqualified Agency Worker- Assisting, Prompting and Administering

Healthcare assistants/ care assistants/ auxiliaries and support workers may not administer medicines and healthcare products unless they have had appropriate and recognised training to enable them to administer medicines.

An unqualified Agency Worker's competence to administer medicines must be supported with verified documentary evidence, which is clear about the scope of their training and its outcome, e.g. qualifies the individual to administer specific medicines to name patients. Competence to administer medicines in a specified setting does not give an unqualified Agency Worker the authority to do so in others.

An unqualified Agency Worker must not administer any medication through interventional techniques, unless specially trained by a qualified healthcare professional. The professional may delegate the task to the unqualified Agency Worker but remains responsible for his/her competence to undertake this.

Procedure- Management of Medication Errors

At any point of the medication process a mistake can occur.

Reporting an Error: The Agency Worker must inform the supervisor or unit manager if on placement in an establishment and follow the local policy and guidelines for reporting and documenting a medication error. Depending on the situation and its severity, the prescriber must be informed immediately or the “out of hour’s doctors” contacted if in the community. If an error occurs in the Client’s home they must be informed or if they unable to understand, their main carer/ guardian must be contacted. The Client’s GP must also be informed. The Client must be monitored for any adverse reactions and the situation documented clearly and at the time of the event.

Qualified and unqualified Agency Workers must report any medicine errors to their office.

If the Agency Worker made the error, he/she must provide all details to the Office and document clearly on an incident report. If the Agency Worker has been personally involved in a medication error, an investigation will be carried out by the Office. The Agency Worker will be kept informed of the progress of the investigation and support will be given to achieve a satisfactory conclusion for both the Client and the Agency Worker. Depending on the circumstances and severity of the error, further action may be taken.

The Agency Worker is expected to cooperate with any investigation and may request an independent assessment of the investigation if they do not accept the outcome.

Procedure- Disposal of Medicines

Agency Workers must follow establishments, written policies for the safe disposal of unwanted medicines. Records must be made and kept.

Clients in their own homes are responsible for the disposal of their own medicines. However, in some situations, the Agency Worker will be required to do this on their behalf. Best practice is to return unwanted medicines to the dispensing pharmacist. Controlled drugs must be treated in this way and returned to the Pharmacist or GP. A record and a signed receipt that this has happened are essential to protect the Agency Worker from any misunderstanding.

Procedure- Medicines- Patient Group Directions (PGD)

A PGD refers to written instructions for the supply or administration of medicines to a group of patients who may not be individually identified prior to presenting for treatment. A PGD will cover approved practitioners in supply and administration of medicines under this directive and authorised by the individual hospital Trust. The PGD does not allow practitioners to prescribe.

An Agency Worker may not be covered to administer medications under a PGD, as each person who administers the medications must be named on PGD. Written evidence of formal assessment of competence in the management of these medications usually accompanies the PGD.

If an Agency Worker is required to administer medicines under a PGD, advice and/or consent must be sought from the unit Manager/shift supervisor at the organisation. The Agency Worker must understand the scope or limitation of their responsibility when administering medicines under a PGD. The Agency Worker must use their personal and professional judgement as to whether they will accept the responsibility this extended role will place upon them. An Agency Worker should not accept this role on delegation from a practitioner authorised to use PGD's.

Procedure- Medicines- Nurse Prescribing

Nurse prescribing is a recordable qualification following specialist training.

If a qualified Agency Worker is on placement where he/she is required to use this extended role as part of the placement they must contact the Hospital Trust, PCT or organisation's Nurse Prescribing Lead to make necessary arrangements. The Agency Worker is strongly advised to familiarise themselves with the local policy and procedures for nurse prescribers. An Agency Worker must not undertake any "nurse prescribing" activities unless their placement has specifically requested this.

Procedure- Medicines Management- Trouble Shooting

The Agency Worker should not make decisions on medicine management unless competent to do so.

Agency Workers should access up-to date information about the use of medicines when they do not know or are unsure of the use and benefit of specific medications. The British National Formulary (BNF) should be available in hospitals, hospices and Nursing Homes.

Any concerns regarding medication should be referred to the patient/ client's key clinician or visiting specialist team. E.g. Hospice or the community pharmacist who dispensed the medicine for the Client can be contacted for advice.

If a qualified Agency Worker has concerns about their or others competence in medication administration, it is essential to contact the office. Qualified nurses are advised to act promptly if they identify poor practice or errors in medication administration.

Procedure- Witnessing in Medication Management

It is important to understand that witnessing the administration of a drug carries the same responsibility as doing it and careful checking is required.

Witnessing is not to be treated as a rubber-stamping exercise. Where two people sign that they have witnessed the administration of a drug, both are equally responsible only if both are registered nurses- unqualified Agency Workers cannot be held responsible for the administration of a drug.

Procedure- Medicines- Registered Nurse in Sole Charge of an Establishment

Where Agency Registered Nurse is in sole charge of an Establishment, e.g. Nursing Home and is required to administer controlled drugs, he/she should refer to the policy of the Nursing Home. It is best practice that, where this occurs, the controlled drugs and Medication Log are checked at handover so there can be no dispute later as to what has been done. When the time comes to administer the controlled drug, a second Agency Worker should be present to act as a witness.

7.9 NHS Counter Fraud Service: NHS Executive Directorate for the Prevention of Fraud

In 2006 the Fraud Act came into effect, which recognises Fraud as a criminal offence. A person is guilty of fraud if they are in breach of the following:

- Fraud by false representation
- Fraud by failing to disclose information
- Fraud by abuse of position

Types of Fraud within the NHS:

Payroll Fraud- payments made to fictitious employees or fraudulent manipulation of payment; false or inflated travel, expense claims, overtime or unsocial hours claims, timesheet fraud claiming for hours that have not been worked or putting in duplicate timesheets.

Requisition and Ordering Fraud- People not resident in the UK who come to the NHS for treatment must pay for their treatment before they leave the UK.

What to DO:

If you suspect fraud, the following are some simple guidelines to help you in what you should do.

DO make an immediate note of your concerns

DO report your suspicions confidentially to someone with the appropriate authority and experience

DO deal with the matter promptly if you feel your concerns are warranted

DON'T do nothing

DON'T be afraid to raise your concerns **DON'T**

approach or accuse individuals directly **DON'T**

try to investigate the matter yourself

DON'T convey your suspicions to anyone other than those with the proper authority

7.10 Equal Opportunities

Carejoy Healthcare recognises that discriminatory attitudes held by both institutions and individuals are widespread in our society, and that such attitudes hinder both equal opportunities for work and the effective provision of services to minority groups and communities. In all aspects of work, Carejoy Healthcare operates a policy of equal opportunity and equal access to service. Information may be requested from staff, Agency Workers, applicants or Clients, enabling Carejoy Healthcare to monitor the success of this policy. The giving of such information will be voluntary and it will be used solely for monitoring purposes. Individual details will be kept confidential; however group statistics may be released to relevant authorities.

Carejoy Healthcare Agency Workers:

Equality of opportunity extends to all aspects of Carejoy Healthcare registration, including recruitment and selection, assignment of work, pay rates, assessment of performance, and action in response to complaints by Clients. Equality of opportunity covers all Agency Workers/ potential Agency Workers and you will be treated equally regardless of your sex, age, marital status, racial, ethnic or national origin, physical or mental disability, political or religious beliefs, sexual orientation or gender reassignment status. Agency Workers are encouraged to make known all special skills and/ or knowledge, which may make you particularly suited to care for Clients from specific ethnic or cultural groups. Agency Workers have the right to accept or refuse individual assignments but any indication that an Agency Worker has not acted, or will not act, in accordance with this policy will be investigated and this may result in removal from the staffing Register.

7.11 Harassment/ Bullying

Carejoy Healthcare is committed to creating a working environment where every Agency Worker is treated with dignity and respect and where each person's individuality and sense of self-worth within the workplace is maintained. All Agency Workers have a duty to treat those alongside whom they work with respect and dignity and to take all steps necessary to ensure that harassment does not occur. Whatever the form of harassment (whether by direct contact, written correspondence, the spoken word or by use of email/intranet) behaviour of this nature can be objectionable and will not be tolerated by Carejoy Healthcare or any of the institutions we service. Any Agency Worker, who is considered, after proper investigation, to have subjected a Client, another Agency Worker or anyone else alongside whom they work to any form of harassment or bullying will be dealt with in an appropriate manner under Carejoy Healthcare complaints procedure. This includes removal from our Staffing Register.

7.12 Dealing with Allegations of Abuse

Guidelines on dealing with suspicions or allegations of abuse in relation to Safeguarding Children, Young people and Vulnerable Adults.

1. Definitions of Abuse

Abuse under the policy on safeguarding children, young people and vulnerable adults includes:

Physical abuse, including hitting, slapping, pushing, kicking or inappropriate sanctions;

Sexual abuse, including encouraging relevant individuals to look at pornography, harassing them by making sexual suggestions or comments, or sexual acts where the individual has not consented, or could not consent or was pressured into consenting;

Psychological abuse, 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;

Neglect and 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;

Financial or material abuse, including theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits;

Discriminatory abuse, including racist, sexist, that based on a person's disability, and other forms of harassment, slurs or similar treatment.

2. Detecting Abuse

There are number of ways in which suspicions of abuse may be raised or actual abuse brought to your attention:

- A child/ young person/ vulnerable adults may confide you that they are being abused
- A colleague may report to you that a child/ young person/ vulnerable adult has confided in them that they are being abused or that they have a suspicion that a child/ young person/ vulnerable adult is being abused
- A child/ young person/ vulnerable adult may display signs of physical abuse
- The behaviour of, or a change in the behaviour of a child/ young person/ vulnerable adult, may suggest that they are being abused
- A colleague may confide in you that they have abused a child/ young person/ vulnerable adult
- The behaviour of, or change in a behaviour of a colleague, may suggest that they are abusing a child/ young person/ vulnerable adult

3. Dealing with a Suspicion or Awareness of Abuse

If you have a suspicion or are aware that a child/ young person/ vulnerable adult are being abused you must act quickly but appropriately and professionally. To assist in the reporting procedures please ensure that you:

DO:-

- Be accessible and receptive
- Listen carefully
- Ask open questions
- Take it seriously
- Reassure the child/ young person/ vulnerable adult that they are right to tell
- Explain what happens next
- Negotiate getting help
- Find help quickly
- Make careful records of what was said using the child's/ young person's/ vulnerable adult's own words as soon as is practicable following the disclosure. Date, time and sign the record. This record would be used in any subsequent legal proceedings.

DO NOT:-

- Jump to conclusions
- Directly question the child/ young person/ vulnerable adult or suggest words for him/her to use
- Pressure the child/ young person/ vulnerable adult to disclose all the details

- Speculate or accuse anybody
- Make promises you cannot keep
- Give your opinion; just state the facts as reported to you
- Gossip or discuss the issue with people that are not involved in the care of the child/ young person/ vulnerable adult
- Destroy evidence
- Panic

If you suspect abuse has taken place or abuse has been brought to your attention you are obliged to take action but you must also ensure at all times that the welfare of the child/ young person/ vulnerable adult is paramount and the interests of the person against whom the allegation has been made are protected.

Where practicable you should obtain the following information:

- Contact details for the child/ young person/ vulnerable adult
- Details of the allegation or suspicion including where known the name of the alleged abuser and the circumstances, which brought the alleged abuse to your attention

4. Reporting Suspicions or Allegations of Abuse

You should immediately report any suspicion or allegation of abuse to Carejoy Healthcare. Do not attempt to assess yourself whether or not the allegation are true and do not attempt to deal with any suspicion or report of abuse yourself.

Carejoy Healthcare may:

- Provide appropriate support for the child/ young person/ vulnerable adult
- Report the suspicion or allegation to the relevant agencies that may include the Police and Social Services
- Make a written record of the contact at any of these agencies to which the case is reported
- Provide appropriate support for the person against whom the allegation has been made
- Confirm to the person who originally reported the allegation that action has been taken

5. Follow up Procedures

Carejoy Healthcare will confirm to you the action that has been taken. If you feel that insufficient action has been taken and you still have concerns for the safety and welfare of the child/ young person/ vulnerable adult you should report your suspicions or allegations again explaining why you feel the action taken to date is insufficient.

6. Data Protection

Under the Data Protection Act 1998, individuals have the right of access to personal data that relates to them. This right of access may include a right to request access to records (inwhole or in part) relating to suspicions or allegations of abuse involving the person making the request. All such requests will be handled according to the Data Protection Act 1998.

7.13 Gifts and Gratuities

Nursing and care services are provided in return for agreed fees. Under no circumstances should you seek any other money, gifts, favours, or rewards for services rendered, either for yourself or for any third party. It is not uncommon for a Client, their friend or relative, to offer a voluntary gift as a mark of appreciation for care they received. Carejoy Healthcare believes that giving and receiving such gift is not generally appropriate to the provision of professional care. Wherever possible, any offer of a gift should be politely refused; with an explanation that acceptance would be against Carejoy Healthcare policy. Furthermore, for people holding a PIN number, it should be noted that accepting gifts is a violation of NMC Code of Conduct.

8. TRAINING AND DEVELOPMENT

8.1 Induction

After you have completed the application, and before starting your first placement, you will be required to undertake an Induction with your Consultant. They will explain what is required in your working time with CareJoy, how to submit timesheets, check that you have the appropriate uniform and ID Badges etc and be provided with any documentation specific to the placements you will be working in – such as safe department practices.

Please check with your Consultant if you are not sure what is needed. This could include:

- Control and Restraint- Working in a mental health facility
- Resuscitation of the Newborn- Midwives
- Interpretation of Cardiotocograph Traces- Midwives
- Epilepsy
- Protection of Vulnerable Adults (POVA) Protection of Vulnerable Children and Young Adults (POCA), Safeguarding Children and Young Adults Level 3

In addition to the above and on arrival to a new ward/ unit/ placement, it is imperative that as a Carejoy Healthcare Agency Worker you receive an orientation and induction to the ward. This should include location and information of safety protocols, fire exits, emergency equipment and phone numbers, manual handling equipment and procedures, hot spot and violent episode handling.

Please record this on your first timesheet.

8.2 Annual Training and Development Requirements

The following annual training is required by all Agency Workers continuing to undertake agency healthcare work through Carejoy Healthcare. Training must be updated before expiry of previous training certification:

Additional Training Appropriate to your qualifications:

- Basic Life Support- Adult and Paediatric that is compliant with the Resuscitation Council of the UK guidelines.
- Moving and Handling
- Lone Worker Training
- Equality and Diversity and Human Rights
- Conflict Resolution
- Health and Safety, including COSHH & RIDDOR
- Infection Prevention and Control, including MRSA and Clostridium Difficile
- Information Governance
- Complaints Handling
- Fire Safety
- Food Hygiene
- Safeguarding Vulnerable Adults/ Safeguarding Children and Young People Level 2

Please check with your Consultant if you are not sure what is needed.

- Control and Restraint- Working in a mental health facility
- Resuscitation of the Newborn- Midwives
- Interpretation of Cardiotocograph Traces- Midwives
- Epilepsy
- Protection of Vulnerable Adults (POVA)

Written confirmation of certain training received at another employer or Carejoy Healthcare validated organisation is also acceptable. Please contact your Consultant if you are unsure as to whether this is applicable to you.

You must keep your knowledge and skills up to date throughout your working life. In particular you should take part regularly in learning activities that develop your competence and performance. Carejoy Healthcare conducts regular training sessions in our office. Please contact your Consultant to book your training update before your previous certificate expires.

8.3 Performance Monitoring and Appraisal

We actively seek feedback from Clients upon introducing a candidate to them for the first time, and periodically thereafter. We will enquire about performance, levels of competence, practice and standards, teamwork, time keeping and training needs that may have been identified. We will provide Agency Workers with feedback on their progress.

Performance appraisals are an integral part of ensuring quality standards are met. Carejoy Healthcare ensures that job performances are routinely formally assessed against expected clinical standards and identifies opportunities to enable workers to improve their professional skills. For ongoing work as Agency Workers are required to be annually appraised. Each Agency Worker will undergo a formal review of job performance within the first 6 months of registration and commencing assignments with Carejoy Healthcare and thereafter every 12 months.

Your appraisal will be carried out by a senior practitioner of the same discipline. (“Appraiser”), who will be appropriately trained in the conduct of appraisals, and regularly re-trained as appropriate. We are required to take into account when assessing your clinical practice, the results of any quality assessment questionnaires completed by our Clients and the results of any review by Carejoy Healthcare of your clinical practices.

In addition to the above Carejoy Healthcare will request feedback from our Clients. This feedback will cover the following areas:

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

Copies of the completed feedback requests will be given to you to raise any concerns or issues you may have. All Carejoy Healthcare Agency Workers are requested to maintain a written portfolio of professional experience and attendance at professional development courses, which should also include a written and agreed Personal Development Plans as agreed at the appraisal. Please note: The results of the appraisal will be recorded on your electronic data file, updated on an annual basis, and will form the basis of assessment for future job placement, training requirements and complaints handling.

9. COMPLAINTS REPORTING, HANDLING AND MANAGEMENT

There may be also cases when the Client requests that a particular worker no longer be placed within an assignment. In such cases the Client has the right to exercise this request under the terms of their contract. An Agency Worker may also take this course of action, in that they may wish to terminate an assignment.

You are advised to read both your Terms of Engagement for Carejoy Healthcare Agency Workers and this Handbook in full, to ensure you fully understand what we ask of you.

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 assignment, please report ANY complaints to a senior person in the department where you are working and document all the details of the complaint.

You must also report the complaint to Carejoy Healthcare. If you personally are the subject of a complaint you will be asked to record details as part of an investigation and in some circumstances it may be necessary to suspend you from assignments whilst the investigation is in process.

Any complaints of misconduct against you will be reported to the NMC or other relevant Registration Body. Carejoy Healthcare complaints procedures are in accordance with appropriate current regulatory, NHS and NHSLA Risk Standards, and requirements.

This will enable the Client to make complaints quickly and Carejoy Healthcare shall be required to investigate and resolve a complaint within the prescribe timeframes. The Client will, with due regard to the Data Protection Act 1998, provide to Carejoy Healthcare with the necessary information in order for Carejoy Healthcare to thoroughly investigate the complaint.

The complaints procedure is as follows:

1. Within five working days of receipt of a complaint from the Agency Worker, Carejoy Healthcare will acknowledge receipt of the complaint. The complaint should be made in writing on Carejoy Healthcare complaints form, but will be accepted in other written form.
2. All reasonable endeavours will be made by Carejoy Healthcare to ensure that all complaints are resolved within fifteen days of the complaint being notified to Carejoy Healthcare.
3. Carejoy Healthcare shall ensure that in the event of the complaint being against an Agency Worker that the Agency Worker is fully informed of complaints relating to him/her. The Agency Worker shall be entitled to receive a copy of the complaint referred to in paragraph 1.
4. The Agency Worker will be afforded the opportunity to state his/her version of events and will be given seven days to respond to Carejoy Healthcare in writing.
5. All responses will be shared with the complainant and if appropriate, Carejoy Healthcare will take demonstrable action to ensure there is no recurrence of the act or omission complained of.
6. The Client may at any time request Carejoy Healthcare to provide the Client with an update as to the progress of the resolution of the complaint.
7. The Client will receive a written response from Carejoy Healthcare, detailing how the complaint has been resolved.

8. Where there is evidence of malpractice or the complaint is an event that requires notification, Carejoy Healthcare will immediately notify the Care Commission, The Police, Protection of Vulnerable Adults or Children and where applicable alert the temporary Workers professional body.
9. Carejoy Healthcare where necessary will immediately exclude the Agency Worker from its register whilst an investigation is in progress.
10. Carejoy Healthcare undertakes to work with all parties applicable to an investigation and where necessary share findings of such investigations.
11. A full written record of the nature of each complaint and details of the action taken as a result of the complaint, is kept on a database for easy access;
12. Carejoy Healthcare has a quality assurance system in place to analyse and identify any patterns in complaints and trend analysis is conducted continuously.
13. The complainant at any time has the right to refer this matter for review to the Care Quality Commission, The Scottish Care Commission or The Regulation and Quality Improvement Authority- Northern Ireland.

10. Disciplinary Procedures and Removal from Carejoy Healthcare Register

The matter of a disciplinary procedure for Agency Workers is more complex than when the Worker is a direct employee. Contractually the agreement between the Agency Worker and the agency is a “contract for services” agreement. This effectively suggests that the Agency Worker is working on a freelance basis.

In the event of “disciplinary” matters arising, each situation will need to be judged on its own merits. There may be cases whereby a Client will be required to apply their disciplinary procedure in order to comply with legislation. Likewise there may be occasions when it is necessary for Carejoy Healthcare to use our procedure. This cannot be an arbitrary decision, but needs to be made in full consideration of the changing legislation and in context with the circumstances of the problem/ complaint. Carejoy Healthcare operates comprehensive Disciplinary Policy and Procedures, please contact your Consultant for full details.

10.1 Removal from Carejoy Healthcare Register

Agency Workers may be removed from the Register in the following circumstances:

- Where an Agency Worker’s conduct or standard of work has seriously fallen below the level required by Carejoy Healthcare Code or Code of Professional Conduct.
- If it is believed that an Agency Worker has acted in an unprofessional manner, Carejoy Healthcare reserves the right to remove you from your assignment and not re-assign until the matter has been investigated and resolved.
- If an Agency Worker has a reason to be put onto the Carejoy Healthcare Alert List
- If Carejoy Healthcare has been alerted by the NMC, GMC or other regulatory bodies with regard to practicing Agency Workers.

Examples of such conducts are as follows. This list is not exhaustive:

- Failure to attend a Client having accepted an assignment or repeated lateness.
- Failure to provide care in a fashion consistent with the Agency worker’s professional Code of Conduct or in a caring and appropriate manner
- Failure to carry out reasonable instructions of the Client or Carejoy Healthcare
- Breach of trust involving Carejoy Healthcare or the Client
- Disclosure of confidential information to a third party relating to either a Client or Carejoy Healthcare
- Misconduct and/ or gross misconduct- any behaviour which potentially puts any Client, individual or vulnerable person at risk or puts Carejoy Healthcare at risk including the following non-exclusive and non-exhaustive list:
- Being under the influence of alcohol or any substance that will adversely affect your performance
- Possession, custody or control of illegal drugs while on duty, or the supply of illegal drugs to Clients, their families or representatives
- Theft or stealing from Clients, colleagues or members of the public
- Other offences of dishonesty
- Abusive or violent behaviour including physical, sexual, psychological, emotional, financial abuse of a Client, a member of their family, or their representative or deliberate act of omission which leads to harm or potential for harm to someone from this group
- Fighting with or physical assault on other workers, Clients or members of the public

- Harrassment, bullying and/ or discrimination
- Sexual misconduct at work
- Gross insubordination, aggressive/ insulting behaviour or abusive/ excessive bad language
- Falsification of a qualification which is stated requirement of the Worker's employment/registration or which results in financial gain to the Worker
- Falsification of records, reports, accounts, expense claims or self- certification forms whether or not for personal gain
- Failure to observe Carejoy Healthcare procedures or serious breach of Carejoy Healthcare's rules
- Unsatisfactory work
- Damage, deliberate or otherwise, to or misuse of a Client's or Carejoy Healthcare's property
- Gross negligence which covers acts of neglect, misuse or misconduct and/ or not following requirements of the care plan or care instruction (deliberate or otherwise) which exposes Clients, patients, their representatives, colleagues or branch staff to unacceptable levels of risk and/ or danger
- Conviction of a criminal offence, caution by a police constable or being bound over by a court where this is relevant to the worker's employment/ registration or failing to disclose a criminal offence, caution or bind over (including those which would be considered 'spent' under the Rehabilitation of Offenders Act 1976)
- Inappropriate relationship with Client or customer
- Other acts of misconduct may come within the general definition of gross misconduct.

You are advised to read both your Terms of Engagement for Carejoy Healthcare Agency Workers and this Handbook in full, to ensure you fully understand what we ask of you. Agency Workers cannot work if their health or physical ability impedes them from carrying out their duties effectively. Whilst Agency Workers will not be required to relinquish registration at the normal retirement age of 65, they must, like any other Agency Worker, be in good physical and mental health. They may be requested to undertake a medical examination/ assessment, at their own expense, to confirm their fitness for work.

In the event that you are unsatisfied with the manner in which a complaint has been handled, please contact your consultant.

11. Whistle-Blowing Policy

Concerns may relate to something which:

1. Is against NMC/HPC codes of Professional Conduct
2. Is against Carejoy Healthcare Agency Workers Terms and Conditions
3. Is against Carejoy Healthcare company handbook
4. Amounts to improper conduct, including things believed to be
 - a. Against the law
 - b. Abuse of Clients of service users
 - c. A health and safety hazard
 - d. Damaging the environment
 - e. A misuse of public money
 - f. Corruption or unethical conduct

Concerns may be raised to anyone within Carejoy Healthcare. All concerns will be treated in confidence and every effort will be made to protect your identity if they you wish. At the appropriate time however, individuals may need to provide a statement or act as a witness.

12. Health and Safety Policy

It is the policy of Carejoy Healthcare to ensure, as far as is reasonably practicable, the health, safety and welfare of all our Employees, Agency Workers, Service Users and Members of the Public, accepting our statutory responsibilities in this area. This involves working in partnership with our Clients who for the purpose of Agency Workers provide the physical setting for the work undertaken by the Carejoy Healthcare Workers.

12.1 Health and Safety Guidance

Carejoy Healthcare seeks to ensure the following in relation to Health and Safety:

- That you have the necessary qualifications, experience, skills and capability to carry out the assignments that you will be undertaking.
- That any risks to health, in connection to the use, storage and handling of substances hazardous to health, are identified through an assessment of their potential effects, as required by the latest edition of The Control of Substances Hazardous to Health (COSHH) Regulations, and that necessary control measures are implemented.
- That you are given sufficient information, instruction and training to ensure your own Health and Safety.
- That consideration is given to Health and Safety factors when equipment is procured or new services obtained, or when changing procedures or work patterns and that all necessary safety precautions are taken and that necessary safety instructions have been understood.

You are responsible for your own personal Health and Safety and you have a duty of care to your fellow workers. Your responsibilities include:

- The duty to comply with all safety instructions and directions laid down.
- The duty to use the means and facilities provided for health and safety in proper manner.
- The duty to refrain from the wilful misuse of, or interference with, anything provided in the interests of health, safety and welfare and any action that may cause harm to others.

12.2 Safety Requirements

- Always familiarise yourself with the Health and Safety policies and procedures for the environment in which you are working and pay particular attention to fire and emergency procedures.
- Never attempt a task without first ensuring that you understand the instructions and can carry them out safely.
- Always maintain a clean and safe work area.
- If you see, or believe you see, an unsafe act or condition, report it to your branch as soon as possible, taking immediate steps to correct it or ask your branch to rectify it. You may be assumed to have agreed to an unsafe condition if you do not comment on it and if you continue working.
- Certain jobs require you to wear protective clothing or to use equipment. If you are unsure, ask for advice before you start working.

- You must ensure that all cleaning materials or other potentially hazardous substances are correctly stored, labelled and are used in compliance with the manufacturer's instructions in order to reduce the risk of injury or danger to health. All waste or by-products must be properly disposed of.
- Only use, adjust alter or repair equipment if you are authorised to do so.
- If you, or the equipment you operate, are involved in an accident-regardless of how minor- report it immediately to your branch. If necessary, get First Aid attention immediately. You should also report near misses to your branch.
- Ensure that all equipment (e.g. hoists) has been maintained properly and that documentary evidence is supplied.
- Obey all health and safety rules, signs and instructions. If you are unsure as to what they mean- ask.

12.3 Identifying and Reporting Hazards

Although within establishments, a Risk Assessment will have been carried out by a designated competent person. All Agency Workers need to look out for hazards at the establishment where they have accepted an assignment and report back to their local branch, via the complaints procedure, anything they feel may present a risk to an individual's Health and Safety.

A suitably trained Assessor will carry out a Risk Assessment for each client. Any Agency Worker, undertaking assignments in the community and therefore in Service User's own homes, should also look out for hazards and should report them immediately. Hazards can occur at any time and can include broken doors and windows, carpets or rugs that present a tripping hazard, dangerous chemicals, and faulty electrical equipment such as exposed wires. Call your consultant and described the hazard that you have identified. You may be asked to complete a Risk Assessment Form, which will be provided for the purpose.

12.4 Accident and Incident Reporting

Agency Workers are responsible for ensuring that all incidents or accidents that relate to the provision, control and maintenance of Health and Safety in the workplace are reported to the Client and your local Branch (and/or to the Local Authority in the case of serious accidents and/or dangerous occurrences). It is also important that the internal reporting procedure of the establishment is carried out e.g. recording the accident in the accident report book. If you accept assignments within the community setting and are working in a Client's home, a written record (in the care plan and service records) must be kept of any accident or occurrence that happens in the workplace, however minor. In addition to internal reporting through the accident report/service records, the establishment/ client must ensure that the following are reported to the appropriate enforcing authority, e.g. the local Environmental Health Officer:

- Fatal accidents
- Major injury accidents/ conditions
- Dangerous occurrences
- Accidents causing more than three day's incapacity for work
- Certain work-related diseases
- Certain gas incidents

If you suffer a needle stick injury you must attend for treatment immediately and report the incident. If possible take note of the patient's details in order to help identify potential risks. As soon as a needle stick (sharp) injury occurs you should do following:

-
- Encourage bleeding by squeezing site of puncture wound, do not suck
 - Wash the wound with soap and water, do not scrub
 - Cover wound with waterproof dressing
 - Report incident to the Branch
 - If the injury happens out of office hours report to A&E and inform the Branch the next day.
 - Document the circumstances that led to exposure
 - Counselling is available following these blood tests. Always report a needle stick injury even if it occurs with a 'clean' needle, via an incident report or accident book according to protocol.

13. REPORTING OF INJURIES, DISEASES AND DANGEROUS OCCURRENCES REGULATIONS (RIDDOR)

As a self-employed person you have legal duties under RIDDOR that require you to report and record some work-related accidents.

Over-seven-day injuries

As of 6th April 2012, the over-three-day reporting requirement for people injured at work changed to more than seven days. Now only injuries that lead to an employee or self-employed person being away from work, or unable to perform their normal work duties, for more than seven consecutive days as the result of an occupational accident or injury (not counting the day of the accident but including weekend and rest days) are reportable. The report must be made within 15 days of the accident.

Over-three-day injuries

However, a record of the accident must still be kept if a worker has been incapacitated for more than three consecutive days. You are legally required to inform us of any over three day injury so that we may keep an accident book and fulfil our legal responsibilities under the Social Security (Claims and Payments) Regulations 1979.

Occupational diseases

Employers and the self-employed must report the following listed occupational diseases <http://www.legislation.gov.uk/ukxi/1995/3163/schedule/3/made> when they receive a written diagnosis from a doctor that they or their employee is suffering from these conditions and the sufferer has been doing the work activities listed.

You have legal duties under RIDDOR that require you to report and record other work related accidents. These include for example, deaths, major injuries, fractures, amputations, dislocations, loss of sight.

Reportable major injuries are:

- Fracture, other than to fingers, thumbs and toes;
- Amputation;
- Dislocation of the shoulder, hip, knee or spine;
- Loss of sight (temporary or permanent)
- Chemical or hot metal burn to the eye or any penetrating injury to the eye
- Injury resulting from an electric shock or electrical burn leading to unconsciousness, or requiring resuscitation, or requiring admittance to hospital for more than 24 hours;
- Any other injury leading to hypothermia, heat-induced illness or unconsciousness, or requiring resuscitation, or requiring admittance to hospital for more than 24 hours;
- Unconsciousness caused by asphyxia or exposure to a harmful substance or biological agent
- Acute illness requiring medical treatment, or loss of consciousness arising from absorption of any substance by inhalation, ingestion or through the skin;
- Acute illness requiring medical treatment where there is reason to believe that this resulted from exposure to a biological agent or its toxins or infected material.

Dangerous occurrences are certain listed near-miss events. Not every near-miss event must be reported. Here is a list of other occurrences relevant to the Client/ End User environments that are reportable:

- Collapse, overturning or failure of load-bearing parts of lifts and lifting equipment;
- Explosion, collapse or bursting of any closed vessel or associated pipe work;
- Failure of any freight container in any of its load-bearing parts;
- Plant or equipment coming into contact with overhead power lines;
- Electrical short circuit or overload causing fire or explosion;
- Any unintentional explosion, misfire, failure of demolition to cause the intended collapse, projection of material beyond a site boundary, injury caused by an explosion;
- Accidental release of a biological agent likely to cause severe human illness;
- Failure of industrial radiography or irradiation equipment to de-energise or return to its safe position after the intended exposure period;
- Malfunction of breathing apparatus while in use or during testing immediately before use;
- Collapse or partial collapse of a scaffold over five metres high, or erected near water where there could be a risk of drowning after a fall;
- A road tanker carrying a dangerous substance overturns, suffers serious damage, catches fire or the substance is released;
- A dangerous substance being conveyed by road is involved in a fire or released.

They must be reported to the Health and Safety Executive Incident Contact Centre.

14. THE CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH (COSHH) REGULATIONS

COSHH is the main piece of legislation covering control of the risks to people from exposure to harmful substances generated out of or in connection with any work activity. As with all other regulations affecting Health and Safety at work, legal duties under COSHH are laid primarily on the establishment in which you are working and it is their duty to see that proper systems of work and management are in place. Duties on Agency Workers include:

- Making proper use of any control measures.
- Following safe systems of work.
- Abiding by local rules and policies.
- Reporting defects in safety equipment as appropriate.

Health surveillance must be carried out, where assessment has shown that a substance is known to cause occupational asthma or severe dermatitis and COSHH requires that employers provide suitable information, instruction and training about:

- The nature of the substances workers work with or are exposed to and the risks created by exposure to those substances and;
- The precautions workers should take
- Control measures and how to use them
- The use of any personal protective equipment and clothing
- Results of any exposure monitoring or health surveillance and
- Emergency procedures

Employers should give sufficient information and instruction on:

Agency Worker Responsibilities

If you suffer illness or injury as a result of a work related issue, we need to be notified.

15 Occupational Health

Carejoy Healthcare is required to ensure that all our Agency Workers undergo comprehensive occupational health screening and have a current health clearance/immunisations and test results in accordance with the latest Department of Health guidelines, before we can send you out on any assignments. We are required to update these health assessments on an annual basis, unless you have spent a period of 3 months or more outside of the United Kingdom, in which case we will need to update the health assessment before deploying you. Carejoy Healthcare and our Occupational Health Advisor will support you in achieving this.

The immunisation and test results required for Occupational Health Clearance are:

Varicella: Tests showing a positive result. (immunity) Negative or Equivocal results require re-vaccination and retesting. Written confirmation of having had chicken pox or shingles is also acceptable. Self-certification is acceptable.

Tuberculosis- Occupational Health or GP certificate of a positive scar or a positive skin test result.

Rubella: Certificate of vaccination or a blood test result showing a positive result (immunity) or TWO doses of MMR, Please note:> 15 UI/ml: Immune, 10-14 UI/ml: Low Level Immunity, and <10 UI/ml: Non- Immunity.

Measles and Mumps: Evidence of TWO doses of MMR, or a positive result (immunity) for measles, mumps and rubella. Negative or equivocal requires re-vaccination and re-testing.

Hepatitis B: A recent pathology report showing titre levels of > 100IU/l. If the result is < 100IU/l then a Hepatitis B Booster is required.

The following three are ONLY required if you need an Exposure Prone Procedure (EPP) Certificate:

Hepatitis B Surface Antigen: Evidence of a negative result

Hepatitis C: Proof of non-infectivity (negative) with a recent UK pathology report.

HIV: Evidence showing antibody negative.

Agency Workers 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, when appropriate, the relevant professional regulatory body, if they are aware of HIV positive

individuals who haven't 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. All healthcare workers are under ethical and legal duties to protect the health and safety of their patients. Agency Healthcare Workers have general duties to conduct their work so that they and others are not exposed to health and safety risks. Certain information may be requested for audit purposes and used to verify medical evidence by the government bodies.

16 Revalidation

The NMC exists to protect the public. Revalidation will require all registered nurses and midwives to demonstrate that they remain fit to practice. The revalidation cycle for nurses and midwives is every 3 years. Revalidation is the mechanism through which nurses and midwives continue to demonstrate that they meet NMC standards.

Criteria for Revalidation (Evidence Required)

Supporting evidence that nurses and midwives must provide to support revalidation includes:

- 450 practice hours for each part of the register (or 900 hours if revalidating as both a nurse and midwife).
- 35 hours of continuing professional development (of which 20 must be participatory learning).
- 5 pieces of practice related feedback.
- 5 written reflective accounts of their CPD and/or practice-related feedback and/or event or experience in their practice and how this relates to the Code.
- Reflective discussion.
- Health and character declaration.
- Professional indemnity arrangements.

All of the above criteria must be supported and evidence-based evidence based. It is a requirement for all nurses and midwives to maintain a portfolio of evidence in order to demonstrate their on-going commitment of fitness to practice. For further help or guidance please contact your Consultant in the office.

17 Safer Jobs Commitment

To stay safe in your job search we recommend that you visit JobsAware, a non-profit, joint industry and law enforcement organisation working to combat job scams. Visit the JobsAware website for information on common scams and to get free, expert advice for a safer job search.

CareJoy's JobsAware Principles of Good Practice

CareJoy commits to:

- meet the requirements of the Employment Agency legislation;
- perform agreed standards of agency staff compliance upfront and meet any requisite legislation ongoing relevant to the sector;
- only advertise jobs that do exist, and the agency has permission to advertise;
- treat job seeker information confidentially and only share with express consent;
- pay job seekers promptly and correctly within openly agreed timescales and be upfront about any charges to job seekers;
- actively support working with under-represented job seekers such as people with convictions, disabled groups, ex-military personnel, and ethnic minorities;
- have an agreed, transparent process in place to investigate job seeker complaints quickly and professionally;
- supply in writing clear and full information to the job seeker about the work assignment;
- have an easily accessible area of the site dedicated to offering advice of common and prevalent scams with the agreed JobsAware text and link;
- have a duty to report and share information about fraud with JobsAware.

18 POLICY REVIEWS

All Carejoy Healthcare Ltd Policies and Procedures are amended by the nominated person on an annual (12monthly) basis or as required Carejoy Healthcare Ltd will on an annual basis engage the services of an independent senior registered nurse to review the appropriateness of Carejoy Healthcare Ltd Clinical Practices & Procedures.

19 APPENDICES

Staff Complaint Form

**Staff
Name**

Address:

Postcode

Telephone:

Person/organisation involved with

**Date of
incident:**

**Place of
incident:**

Nature of Complaint:

Action taken

Signed

Print Name

Candidate report form for reporting accident and incident

<u>Name of the employee</u>		
<u>Establishment</u>		
<u>Date of accident or incident</u>		
<u>Type of accident or incident</u>		
<ul style="list-style-type: none"> • <u>Fatal accidents</u> • <u>Major injury accidents/ conditions</u> • <u>Dangerous occurrences</u> • <u>Accidents causing more than three day's incapacity for work</u> • <u>Certain work-related diseases</u> • <u>Certain gas incidents</u> <p><u>If other please specify</u></p>		

<u>Reported to</u>	
<u>Comments</u>	

Date

Signature

Print name

ASSIGNMENT DETAILS FORM - AGENCY WORKERS (PAYE)

<u>Details of the Agency Worker and Hirer:</u>	
<u>Name and address of the Agency Worker:</u>	
<u>Name of the Hirer:</u>	
<u>Nature of the Hirer’s business:</u>	
<u>Name of Hirer’s contact to report to on arrival:</u>	
<u>Assignment Details:</u>	
<u>Start date of the Assignment:</u>	
<u>Likely duration of the Assignment:</u>	
<u>Calendar weeks already accrued towards the Qualifying Period for the purposes of Regulations 7 and 8 of the Agency Workers Regulations:</u>	
<u>The type of work:</u>	
<u>Location of work:</u>	
<u>Hours of work:</u>	

<p><u>The experience, training, qualifications and any authorisation necessary or required by law or a professional body:</u></p>	
<p><u>Any known health and safety risks and the steps the hirer has taken to reduce the risks:</u></p>	
<p><u>Collective facilities:</u></p>	
<p><u>Hirer's collective facilities available to the Agency Worker:</u></p>	
<p><u>Pay:</u></p>	
<p><u>Any expenses payable:</u></p>	
<p><u>Actual Rate of Pay</u></p>	
<p><u>Actual QP Rate of Pay and any Emoluments (applicable after 12 weeks)</u></p>	
<p><u>Intervals of payment:</u> <u>(N.B Under the Conduct Regulations the intervals of payment should be set out in the Agency Worker's contract)</u></p>	
<p><u>Annual leave:</u></p>	
<p><u>Number of additional [paid/unpaid] annual leave days applicable after 12 weeks</u></p>	

<u>Period of Extended Hire:</u>	
<ul style="list-style-type: none"> • <u>Notice period required where Hirer wishes to engage the Agency Worker for a Period of Extended Hire.</u> 	
<ul style="list-style-type: none"> • <u>Period of Extended Hire if the Hirer wishes to engage the Agency Worker and avoid paying a Transfer Fee:</u> 	
<u>Agency Worker's recruitment consultant's contact details:</u>	