

Elite Nursing Services Handbook – Issue 15

(The Handbook can be displayed in an alternative format on request)

Contents

Page 2	Introduction To Elite Nursing Services
Page 3	Mission Statement
Page 4	Philosophy
Page 5-10	Terms Of Engagement
Page 11	The Roles and Responsibilities of an Agency Worker For the National Health Service
Page 12-14	Equal Opportunities Policy
Page 15	Diversity Policy
Page 16	Grievance And Disputes Policy / Disciplinary And Capability Policy
Page 17-18	Complaints Policy
Page 19	Complaints Procedure for the National Health Service
Page 20-21	Manual Handling Policy
Page 22-23	Administration and Assistance with Medication Policy for the National Health Service
Page 24	Telephone Cover Policy
Page 25	Uniform Policy
Page 26	Uniform Policy for the National Health Service
Page 27	Training Mission Statement
Page 28	Occupational Health Mission Statement
Page 29	Staff Guidance Refreshment Contributions
Page 30	Do The Right Thing – Reporting of Malpractice and Abuse
Page 31-32	Duty to Report Your Concerns
Page 33	Independent Personal Development Review for NHS
Page 34	Record Keeping Policy
Page 35	To Refer Concerns About Alleged Abuse
Page 36	Submitting timesheets

INTRODUCTION TO ELITE NURSING SERVICES

Dear Member

Elite Nursing Services (ENS) aims to provide the Healthcare Profession with a high standard of friendly professionally trained nurses and healthcare assistants. We pride ourselves in offering competitive pay rates and will listen to the requirements of our Members.

Elite Nursing Services forms part of County Group Services. The Group has more than ten years experience in accounting for Agencies as well as over thirty years experience in a successful business.

We make provision for training and occupational health services and also provide incentives for introducing other work colleagues to Elite. If you wish to find out more about us, please call on telephone number 01179 564 511.

Yours sincerely

Sarah Walters
Registered Nurse / Manager

MISSION STATEMENT

“ENS will provide the highest standard of service to both Members and Service Users alike in conjunction with the guidelines and parameters set within the Healthcare Profession. On achieving these objectives, we will ensure our position is maintained in order to expand and become a successful Nursing Agency”

AIM

To provide a high quality standard of health care to the public and private sector and maintain a successful business within the boundaries set by law.

OBJECTIVES

1. Inclusive of the Data Protection Act 1998 and confidentiality agreements, ENS will implement the most effective communication skills with friendly and professionally trained staff
2. ENS will work as part of a team when ensuring the placements of Members to Service Users are made efficiently and correctly.
3. Within the guidelines set by the NMC Code of Professional Conduct 1st June 2002, updated May 2008. ENS will maintain and develop a local and eventually national role in providing a comprehensive healthcare service to Service Users.
4. ENS will give scope to its Members in education and training of up to date research and practical skills.
5. ENS will maintain clear and achievable objectives and value continuous personal developmental reviews, whilst using an open feedback system, hence providing our staff with determination to succeed.
6. To increase profit margins on a yearly basis.
7. To expand on the number of Members and Service Users on a yearly basis.
8. Set new initiatives on a regular basis, in accordance with the Advertising Laws in order to promote ENS.
9. To obtain an excellent quality assurance accreditation.

PHILOSOPHY

Elite Nursing Services welcomes you into a warm and caring environment.

As a Nursing Agency we aim to provide the highest standards of care and business set within a professional organisation.

Inclusive of the specialty and qualifications provided by the individual, ENS will seek to provide the most suitable Member to enter each placement.

ENS will work as part of a team, enhanced by excellent communication skills in order to support our Members and Service Users.

We will be happy to discuss any problems, which may arise.

Sarah Walters 11/2005

TERMS OF ENGAGEMENT

1. DEFINITIONS

1.1. In these Terms of Engagement the following definitions apply: –

“Assignment”	means the period during which the Temporary Worker is supplied to render services to the Client;
“Client”	means the person, firm or corporate body requiring the services of the Temporary Worker together with any subsidiary or associated company as defined by the Companies Act 1985;
“Employment Business”	means Elite Nursing Services, Gladstone House, Gladstone Drive, Soundwell, Bristol BS16 4RU
“Temporary Worker”	means Elite Temporary Worker.
“Relevant Period”	means the longer period of either 14 weeks from the ^[1] first day on which the Temporary Worker worked for the Client, or 8 weeks from the day after the Temporary Worker was last supplied by the Employment Business to the Client.

1.2. Unless the context otherwise requires, references to the singular include the plural.

1.3. The headings contained in these Terms are for convenience only and do not affect their interpretation.

2. THE CONTRACT

2.1. These Terms constitute a contract for services between the Employment Business and the Temporary Worker and they govern all Assignments undertaken by the Temporary Worker. However, no contract shall exist between the Employment Business and the Temporary Worker between Assignments.

2.2. For the avoidance of doubt, these Terms shall not give rise to a contract of employment between the Employment Business and the Temporary Worker. The Temporary Worker is engaged as a self-employed worker, although the Employment Business is required to make statutory deductions from the Temporary Worker's remuneration in accordance with clause 4.1.

^[1] The 'first day' will be the first occasion on which a Temporary Worker is supplied to work for the Client or the first day of an assignment where there has been more than 42 days since the end of any previous assignment

2.3 No variation or alteration to these Terms shall be valid unless the details of such variation are agreed between the Employment Business and the Temporary Worker and set out in writing and a copy of the varied terms is given to the Temporary Worker stating the date on or after which such varied terms shall apply.

3. ASSIGNMENTS

3.1 The Employment Business will endeavour to obtain suitable Assignments for the Temporary Worker to work as a nurse or care support worker. The Temporary Worker shall not be obliged to accept an Assignment offered by the Employment Business.

3.2 The Temporary Worker acknowledges that the nature of temporary work means that there may be periods when no suitable work is available and agrees: that the suitability of the work to be offered shall be determined solely by the Employment Business; that the Employment Business shall incur no liability to the Temporary Worker should it fail to offer opportunities to work in the above category or in any other category; and that no contract shall exist between the Temporary Worker and the Employment Business during periods when the Temporary Worker is not working on an Assignment.

3.3 At the same time as an Assignment is offered to the Temporary Worker the Employment Business shall inform the Temporary Worker of the identity of the Client, and if applicable the nature of their business; the date the work is to commence and the duration or likely duration of the work; the type of work, location and hours during which the Temporary Worker would be required to work; the rate of remuneration that will be paid and any expenses payable by or to the Temporary Worker; and any risks to health and safety known to the Client in relation to the Assignment and the steps the Client has taken to prevent or control such risks. In addition the Employment Business shall inform the Temporary Worker what experience, training, qualifications and any authorisation required by law or a professional body the Client considers necessary or which are required by law to work in the Assignment.

3.4 Where such information is not given in paper form or by electronic means it shall be confirmed by such means by the end of the third business day (excluding Saturday, Sunday and any public or Bank holiday) following save where:

3.4.1 the Temporary Worker is being offered an Assignment in the same position as one in which the Temporary Worker had previously been supplied within the previous five business days and such information has already been given to the Temporary Worker; or

3.4.2 where, subject to clause 3.5, the Assignment is intended to last for 5 consecutive working days or less and such information has previously been given to the Temporary Worker before and remains unchanged.

- 3.5 Where an assignment is for five consecutive working days or less and the provisions of clause 3.4.2 are met, the Employment Business need only provide the Temporary Worker with written confirmation of the identity of the Hirer and the likely duration of the work. If the Assignment extends beyond the intended five consecutive working day period the Employment Business shall provide such information set out in clause 3.3 to the Temporary Worker in paper or electronic form within eight days of the start of the Assignment.
- 3.6 For the purpose of calculating the average number of weekly hours worked by the Temporary Worker on an Assignment, the start date for the relevant averaging period under the Working Time Regulations shall be the date on which the Temporary Worker commences the first Assignment.
- 3.7 If, before the first Assignment, during the course of an Assignment or within the Relevant Period the Client wishes to employ the Temporary Worker direct or through another employment business, the Temporary Worker acknowledges that the Employment Business will be entitled either to charge the Client a fee or to agree an extension of the hiring period with the Client at the end of which the Temporary Worker may be engaged directly by the Client or through another employment business without further charge to the Client. In addition the Employment Business will be entitled to charge a fee to the Client if the Client introduces the Temporary Worker to a third party who subsequently engages the Temporary Worker within the Relevant Period.

4 REMUNERATION

4.1 The Employment Business shall pay to the Temporary Worker remuneration calculated at a minimum hourly rate of £6.46 being the minimum rate of remuneration that the Employment Business reasonably expects to achieve, for all hours worked. The actual rate will be notified on a per Assignment basis, for each hour worked during an Assignment (to the nearest quarter hour) to be paid weekly in arrears, subject to deductions in respect of PAYE pursuant to Sections 44-47 of the Income Tax (Earnings and Pensions) Act 2003 and Class 1 National Insurance Contributions and any other deductions which the Employment Business may be required by law to make.

4.2 Subject to any statutory entitlement under the relevant legislation, the Temporary Worker is not entitled to receive payment from the Employment Business or Clients for time not spent on Assignment, whether in respect of holidays, illness or absence for any other reason unless otherwise agreed.

5 STATUTORY LEAVE

5.1 For the purposes of calculating entitlement to paid annual leave pursuant to the Working Time Regulations 1998 under this clause, the leave year commences *on the* date that the Temporary Worker starts their first Assignment.

- 5.2 The annual leave granted under these terms will always be the statutory minimum as it is from time to time. Under the Working Time Regulations 1998 (as amended), the Temporary Worker is entitled to annual leave as follows: For work carried out between 1 October 2007 to 31 March 2009: 4.8 weeks. For work carried out from 1 April 2009 onwards: 5.6 weeks. If the statutory minimum leave is subsequently decreased or increased then entitlement to leave under this clause will be decreased or increased so as to be set at the statutory minimum as it applies to any period in which work is carried out.
- 5.3 All entitlement to leave must be taken during the course of the leave year in which it accrues and none may be carried forward to the next year.
- 5.4 Where a Temporary Worker wishes to take paid leave during the course of an assignment s/he should notify the Employment Business of the dates of his/her intended absence giving notice of at least twice the length of the period of leave that s/he wishes to take. In certain circumstances the Employment Business may give counter-notice to the Temporary Worker to postpone or reduce the amount of leave that the Temporary Worker wishes to take and in such circumstances the Employment Business will inform the Temporary Worker in writing giving at least the same length of notice as the period of leave that it wishes to postpone or reduce it by.
- 5.5 Entitlement to payment for leave accrues in proportion to the amount of time worked continuously by the Temporary Worker on Assignment during the leave year. The amount of payment which the Temporary Worker will receive in respect of periods of annual leave taken during the course of an Assignment will be calculated in accordance with and paid in proportion to the number of hours which the Temporary Worker has worked on Assignment
- 5.6 In the course of any Assignment during the first leave year the Temporary Worker is entitled to request leave at the rate of one-twelfth of the Temporary Worker's total holiday entitlement in each month of the leave year.
- 5.7 Where a Bank Holiday or other Public Holiday falls during an Assignment and the Temporary Worker does not work on that day, then subject to the worker having accrued entitlement to payment for leave in accordance with clause 5.5 the Temporary Worker may, upon giving one week's notice, take a Bank Holiday or other Public Holiday as part of his/her paid annual leave entitlement.
- 5.8 Where this contract is terminated by either party and a P45 is requested, the Temporary Worker shall be entitled to a payment in lieu of any untaken leave where the amount of leave taken is less than the amount accrued in accordance with clause 5.5.
- 5.9 None of the provisions of this clause regarding the statutory entitlement to paid leave shall Affect the Temporary Worker's status as a self-employed worker.

6 SICKNESS ABSENCE

6.1 The Temporary Worker may be eligible for Statutory Sick Pay provided that s/he meets the relevant statutory criteria.

6.2 For the purposes of the Statutory Sick Pay scheme there is one qualifying day per week during the course of an assignment and that qualifying day shall be the Wednesday in every week.

7 TIME SHEETS

7.1 At the end of each week of an Assignment (or at the end of the Assignment where it is for a period of one week or less or is completed before the end of a week) the Temporary Worker shall deliver to the Employment Business a time sheet duly completed to indicate the number of hours worked during the preceding week (or such lesser period) and signed by an authorised representative of the Client.

7.2 Subject to clause 7.3 The Employment Business shall pay the Temporary Worker for all hours worked regardless of whether the Employment Business has received payment from the Client for those hours.

7.3 Where the Temporary Worker fails to submit a properly authenticated time sheet the Employment Business shall, in a timely fashion, conduct further investigations into the hours claimed by the Temporary Worker and the reasons that the Client has refused to sign a timesheet in respect of those hours. This may delay any payment due to the Temporary Worker. The Employment Business shall make no payment to the Temporary Worker for hours not worked.

7.4 For the avoidance of doubt and for the purposes of the Working Time Regulations, the Temporary Worker's working time shall only consist of those periods during which s/he is carrying out activities or duties for the Client as part of the Assignment. Time spent travelling to the Client's premises; lunch breaks and other rest breaks shall not count as part of the Temporary Worker's working time for these purposes.

8 CONDUCT OF ASSIGNMENTS

8.1 The Temporary Worker is not obliged to accept any Assignment offered by the Employment Business but if s/he does so, during every Assignment and afterwards where appropriate, s/he will: –

- a) Co-operate with the Client's reasonable instructions and accept the direction, supervision and control of any responsible person in the Client's organisation;
- b) Observe any relevant rules and regulations of the Client's establishment (including normal hours of work) to which attention has been drawn or which the Temporary Worker might reasonably be expected to ascertain;
- c) Take all reasonable steps to safeguard his or her own health and safety and that of any other person who may be present or be affected by his or her actions on the Assignment and comply with the Health and Safety policies and procedures of the Client;

- d) Not engage in any conduct detrimental to the interests of the Client;
- e) Not at any time divulge to any person, nor use for his or her own or any other person's benefit, any confidential information relating to the Client's or the Employment Business' employees, business affairs, transactions or finances.

8.2 If the Temporary Worker is unable for any reason to attend work during the course of an Assignment s/he should inform the Client and/or the Employment Business within four hours of the commencement of the Assignment or shift.

8.3 If, either before or during the course of an Assignment, the Temporary Worker becomes aware of any reason why he may not be suitable for an Assignment, he shall notify the Employment Business without delay.

9 TERMINATION

9.1 The Employment Business or the Client may terminate the Temporary Worker's Assignment at any time without prior notice or liability.

9.2 The Temporary Worker may terminate an Assignment at any time without prior notice or liability.

9.3 If the Temporary Worker does not inform the Client or the Employment Business [in accordance with clause 8.2] should they be unable to attend work during the course of an assignment this will be treated as termination of the assignment by the Temporary Worker in accordance with clause 9.2 unless the Temporary Worker can show that exceptional circumstances prevented him or her from complying with clause 8.2.

9.4 If the Temporary Worker is absent during the course of an assignment and the contract has not been otherwise terminated under clauses 9.1, 9.2 or 9.3 above the employment business will be entitled to terminate the contract in accordance with clause 9.1 if the work to which the absent worker was assigned is no longer available for the Temporary Worker.

10 LAW

10 These Terms are governed by the law of England and are subject to the exclusive jurisdiction of the Courts of England

The Roles and Responsibilities of an Agency Worker For the National Health Service

The roles and responsibilities of the Member will be set out within the handbook, inclusive of the Policies/Procedures and Terms of Engagement.

The standard of work will be expected to be in line with the Nursing Midwifery Council Professional Code of Conduct and the General Social Care Council Code of Practice for Social Care Workers.

The National Health Service policies must be adhered to and a quality assurance system is in place to monitor the training and performance of all Members.

Record Keeping Requirements for the National Health Service

Record keeping will be in line with the Nursing Midwifery Council Guidelines for Records and Record Keeping; a copy can be found on www.nmc.uk.org, this will include the patient's record.

The Member will ensure that they adhere to the Local National Health Service Trust's policies and procedures in connection with record keeping prior to starting the placement.

Service Users in Their Own Home

Elite Nursing Services is **NOT REGISTERED** under The Care Quality Commission to provide domiciliary care, therefore will **NOT PROVIDE** a service to patients in their own homes.

Sarah Walters 7th October 2005

EQUAL OPPORTUNITIES POLICY

As an equal opportunities employer Elite Nursing Services will guarantee a non-biased recruitment and selection policy, in relation to marital status, gender, age, race, colour, creed, sexual orientation and disability. During the selection process individuals will be treated according to their merits and abilities. This in turn will ensure an equal opportunity for all Service Users in the delivery of Service.

This policy applies to all Office Staff and Agency Members and in turn must be relayed to Service Users. Whilst on placement, Members must also comply with the equal opportunities policy of the Service User.

The Care Standards Act 2000 Section 3, Standard 3 states the recruitment process as being in line with equal opportunities and is non-discriminatory. Other information can be gathered from the Race Relations Act, Disability Discrimination Act, Service Specification, Human Rights Act and the Commission for Racial Equality's code of Practice in employment 1983.

Elite Nursing Services will ensure that no Member will be discriminated against and educate their staff in all aspects of this policy. The Member must also aid the management in upholding the equal opportunities Law, thus relaying the information in terms of practice whilst providing care to a Service User. Sarah Walters, Registered Manager is responsible for the overall implementation of the equal opportunities policy.

Direct or indirect discrimination, victimisation and harassment should be reported as per the Grievance procedure and acts of such nature will be dealt with according to the severity and disciplinary action may be taken. The Agency will also ensure that quality, equity and consistency in working practices and conditions are upheld. Positive action will be implemented where there are incidences of discrimination, deprivation and for those who are disadvantaged.

Assessment and evaluation of the equal opportunities policy will be carried out every three Months. The process will start with the collection of anonymous questionnaires from the recruitment stage and continue with documentary evidence being passed to the management by way of Report. Compliments and complaints will also be recorded in order to ascertain the effectiveness of the equal opportunities policy.

The Care Quality Commission can be referred to in all incidences the address being;

The Area Manager
Care Quality Commission
Colston 33
33 Colston Avenue
Bristol
BS1 4UA
Telephone 0117 930 7110

Race equality

It is essential that Elite Nursing Services is given feedback either verbally or in writing of any racial discrimination that may have occurred either directly or indirectly. When delivering care the Member must ensure that it is given in a culturally sensitive manor.

Age equality

When placing a Member with a Service User, the Member is assessed on their abilities to the requirements of the Service User. No record of age is used within the placement process. Job descriptions are non-discriminative and individuals are short-listed based on their abilities.

Disability equality

A Member of Elite Nursing Services staff is provided with access to all information in relation to disability and equalities. The Occupational Health Nurse is available to do a work station assessment for all Staff. Access to information can be gained verbally or written by any member of Office Staff, Agency Member or Service User. Any change will be assessed and implemented to accommodate the needs of an individual who is working for or providing a service for Elite Nursing Services.

Sexual Orientation equality

The Office Staff and Members are not required to relay their sexuality in any of Elite Nursing Services recruitment, selection and placement procedures.

Women's equality

Elite Nursing Services holds harassment and bullying policy for all Members and Office staff.

In turn this policy must be adhered to whilst on placement and the safety of all Members and Office Staff are taken into consideration.

The Equal Opportunities Policy is written with the guidance of the Social Services, National Health Service and Legislation.

Diversity Policy

Elite Nursing Services recognises the importance of diversity in the work place and believes that diversity increases the quality of the service being provided, thus giving a wider perspective to the holistic approach, which is already implemented throughout the Organisational structure.

Due to the wide range of specialities required from the Service Users who are Clients, each individual Member will be interviewed and assessed as to their clinical experiences and capabilities. This will then ascertain the type of environment best suited to the Nurse and the Service User who are Clients, therefore making a successful placement.

The Organisation will endeavour to meet staffing needs as to the age, sex, race, gender identity, health status, religion and belief, domestic circumstances, ethnicity, disability, education and sexual orientation. Diversity has been implemented into the workplace as an Organisational strategy.

Elite Nursing Services welcomes all views from the staff and Members who form part of the Organisation whether named or anonymously. These ideas should be put in writing to Sarah Walters, Managing Director.

Sarah Walters, October 2007

GRIEVANCE AND DISPUTES POLICY

Members of ENS are entitled to document complaints and report to their immediate manager. In such cases where the immediate manager is unable to resolve the matter, then the Directors will determine the outcome. Legal representation or a colleague is allowed to be present at each meeting.

DISCIPLINARY AND CAPABILITY POLICY

MISCONDUCT

ENS defines misconduct as a deliberate act against the rules. Such offences can range from incorrect uniform dress and absenteeism to assault or fraud. ENS enforces a verbal warning followed by a written warning and then dismissal according to severity.

The right to appeal will be given to Members and they will be made aware and updated on the procedure.

CAPABILITY

ENS will assess the capability of an individual and determine whether they are suitable to be placed into the working environment, for example, a ward or clinic area. A full health assessment will be carried out and reviewed on a regular basis. If ENS feel that a member may endanger the patient or work colleagues at any time, then their contract will be terminated.

COMPLAINTS POLICY

In providing a high standard of service Elite Nursing Services will aim to give quality satisfaction to our Members and Service Users alike. The complaint procedure has been devised to help eliminate any problems, which may arise from this service. It enables Service Users to complain about the provision of care in a formal manor to the Agencies Management, Social Services and Health, Healthcare Trusts and the Care Quality Commission. The following Criteria are to be used as guidelines:

In the first instance verbal communication of the problem is to be given to a member of the Elite Nursing Services staff this will be documented and advice sought from the Agencies Management. The complaint will only become formal once all recourses of the informal channel have been met.

Secondly written confirmation to be sent to,

Mrs. S A Walters
Registered Nurse/Manager
Elite Nursing Services
Gladstone House
Gladstone Drive
Soundwell
Bristol
BS16 4RU
Telephone 0117 9564511

On receiving a letter of complaint, ENS will acknowledge the complaint within 24hrs and endeavor to resolve the problem within 28 working days.

In instances where the Company is involved, a meeting with a Director will be convened and all letters and details of telephone conversations concerning complaints will be kept for reference purposes.

The complainant can write direct to the Care Quality Commission or to Social Services and Health, the addresses are given below:

The Area Manager
Care Quality Commission
Colston 33
33 Colston Avenue
Bristol
BS1 4UA
Telephone 0117 9307110

The Complaints Manager
Bristol City Council
Social Services and Health
FREEPOST SWB97
BRISTOL
BS99 7ZZ
Telephone 0117 9874222

The complaint policy is written in line with Legislation, Social Services and Health and the National Health Trust.

Complaints Procedure for the National Health Service

The complaints procedure will enable the National Health Service to make complaints quickly and simply. It will also enable Elite Nursing Services to keep to a strict timetable as set by the Framework Agreement.

- Elite Nursing Services will keep a full documentary record, inclusive of the action taken regarding the complaint.
- A written response to the complainant will be given within 3 working days of receipt of the complaint.
- A written report of the outcomes will be given within 15 working days, except where in some cases the investigation would take longer.
- A system to identify a pattern of complaints is put into place at the Management's request.
- Elite Nursing Services will make the Member fully aware of the complaint and take action to ensure that the same complaint would not happen again.
- A reporting procedure to the NMC is in place on request from the management.
- A Member will not be placed in the National Health Service until the complaint is fully investigated and the complainant is happy to have the Member placed again.
- Minor complaints are to be dealt with immediately or within a maximum of 24 hours of being received by Elite Nursing Services.

All complaints in the first instance must be put into writing to:

Mrs S A Walters
Registered Nurse/Manager
Elite Nursing Services
Gladstone House
Gladstone Drive
Bristol
BS16 4RU

The Care Quality Commission may also be informed and the address is

The Area Manager
Care Quality Commission
Colston 33
33 Colston Avenue
Bristol
BS1 4UA
Telephone 0117 930 7110

Sarah Walters 5th October 2005

Manual Handling Policy

Manual Handling is used by all Nurses and Care Workers to provide a high standard of quality care in a safe working environment with other staff and Service Users, thus giving a safe system of work. It is the responsibility of the Manager, staff, and risk assessment staff and link staff to promote a good practice within a working environment. The following points are to be implemented when delivering care to a Service User:

- A risk assessment form must be completed in all cases; the forms can vary between different Service Users. Appendix A is given as an example. Elite Nursing Services has an Occupational Health Nurse who is competent in all duties of health and safety. Please contact Mrs Lizzy Bunce if you have any queries regarding risk assessment on telephone 0117 9564511.
- The Agency Member must ask to see a copy of the Service Users risk assessment form.
- A change in a risk must be reported to Mrs Bunce or the officer/nurse in charge for further evaluation.
- Training will be offered during induction and three/four times a year as an update, which can be booked through either Sarah Walters or Helen Taylor.
- A record of each training course attended will be kept by electronic and documentary form at Elite Nursing Services.
- The equipment provided by the Agency such as the identification badge and clothing are to be maintained by the Member, however, if an identification badge needs renewing or is lost the Agency must be contacted immediately.

- Equipment used whilst on placement are maintained by the Service User, but it is the responsibility of the Agency Member to report any deficiencies, to the officer or nurse in charge of your placement.
- Equipment checks should be carried out in accordance with the Service Users policies and procedures, the Service User will keep a record of this.
- The Member prior to using the aide for moving and handling must check the manual handling equipment.
- Accidents must be documented in the accident book whilst on placement as well as to the Agency.
- Personal injury must be documented in the incident book and once an incident form has been completed the Health and Safety Executive must have a copy. The Agency and Service User must be aware of any incidences that occur. Reference to www.hse.gov.uk
- High-risk areas including the heavier Service User, confused and aggressive Service Users and Service Users who refuse to be handled in a safe way must be given special consideration. These issues are covered in induction and manual handling updates.
- In an emergency, care may be required prior to a risk assessment taking place, in these circumstances, only care staff who are able to complete a risk assessment immediately must be used in order to provide a safe environment for the Service User and staff.

The manual handling policy has been written in compliance to the Social Services and National Health Service, Service Level Agreements. This policy is reviewed and updated on a regular basis.

Administration and Assistance with Medication Policy for the National Health Service.

All Members both qualified and unqualified must follow the National Health Service Trusts policy firstly on the administration and assistance of medication.

Qualified Members

This policy will be inline with the Nursing Midwifery Councils, Professional Code of Conduct for the Administration of and Assistance with Medication by the Member. A copy will be issued with the handbook or can be found on the NMC web site at www.nmc.uk.org

The indications clearly state the parameters of which medications can be issued in connection with specialist training.

All qualified Members must ascertain the policy for the administration and assistance of administration of medication with their direct supervisor at the start of a placement.

Consent from the patient will be gained prior to administering any medication. If consent is withheld then the qualified Member must follow the National Health Service Trusts policy.

Qualified Members may administer and dispense drugs, gases, dressings, naso-gastric and peg feeds and rectal drugs.

Intravenous medication may not be administered unless training specific to the local National Health Service has been taken.

Medication can be described but only where formal and local training has taken place.

Unqualified Members

Unqualified Members may **NOT** issue medication, intravenous drugs, rectal drugs, naso-gastric or PEG feeds or any type of gases. No medicines are to be dispensed.

Unqualified Members may assist or aid the patient in taking medication with water or repositioning for ease.

Dressings may only be changed by direction and supervision of a Registered Nurse.

Record Keeping and Reporting

The Member both qualified and unqualified **must clearly record in the patients notes or care plan any assistance, advice or administration of drugs or medicines.**

A Member be qualified or unqualified may report any concerns regarding the patient, his/hers health or their medication to either the Nurse in Charge/ The Manager of Elite Nursing Services or the Protection of Vulnerable Adults for the Local Authority. Details of which will be in the staff handbook.

All incidents are to be reported in accordance with the National Health Service Trusts policies and procedures; these must be gained prior to starting a placement.

All drug errors are to be recorded in conjunction with the National Health Services policies and procedures and reported to the Manager of Elite Nursing Services. The incident will be investigated under the complaints procedure and the Member may be suspended from work until the matter is resolved. An outcome of the report will be given to the Trust in question.

As deemed between the Trust and Elite Nursing Services, the Member may be reported to the NMC under the Reporting of Nurses to their Professional Body Policy for the National Health Service. Guidance can be sought from the Nursing Midwifery Council, Royal College of Nursing, Care Quality Commission and the National Health Service Trust and Elite Nursing Services.

TELEPHONE COVER POLICY

- ENS will provide a 24-hour telephone cover policy for Members and Service Users. Confidentiality will be maintained at all times.
- When a requirement becomes available, every effort will be made to ensure that the position is covered within 30 minutes.
- Members must identify whether they mind having a early morning call at interview.
- The telephone cover also relates to any emergency calls from Members and Service Users who wish to seek advice.
- Should a Member cancel a shift the Service user will be informed immediately, irrespective of time. Every effort will be made to find an alternative Member to cover the cancelled shift.

Uniform Policy

This policy relates to all ENS Members who are required to wear uniform in order to carry out their everyday work duties. Presentation of uniform is the Members responsibility and a full length coat must be worn to and from the place of duty according to Health and Safety Infection Control policies. Identification badges must have a recent photograph and be worn at all times.

1. The only jewellery that may be worn is stud earrings and a single band ring. Wristwatches are not to be worn during patient contact.
2. Due to Infection Control policies, hair, collar length or longer must be tied back with grips/combs or bands of a black, brown or navy colour.
3. Cardigans and jumpers are black or navy in colour and must be removed whilst in contact with patients.
4. Tights should be black or flesh coloured. Men may wear black or navy socks.
5. Shoes are to be black, flat and have non-slip soles.
6. For health & safety, no sharp objects are to be worn in the pocket unless a guard is used for protection.

In common with all other Agencies we make a charge for our uniforms.

Uniform costs:

Dress	£18.70
Tunic	£17.00
Trousers (Ladies)	£14.00
Jacket (Male)	£17.50
Epaulets	£ 3.00
Polo Shirts	£15.00

Remember to keep a receipt of your purchase.

Uniform Policy for the National Health Service

The Member will wear the uniform set by the local NHS Trust inclusive of the identification badge.

The identification badges will detail the Member's name, Elite Nursing Services, a photograph of the Member, the NMC PIN number, the Criminal Records Bureau number and expiry date and the Member number.

Where a Member is not requested to wear a uniform, the local NHS Trust will set an agreed dress code.

All Service Level Agreements will be taken into account whilst addressing the Uniform Policy.

TRAINING

Mission Statement

ENS will aim to provide a suitable training programme in order to update and develop its Members and staff on current issues within the nursing profession.

Members will be given the opportunity to participate in the programme and evaluation / feedback will be welcome.

Aim

To ensure all members and staff of ENS are aware of the current issues surrounding the nursing profession and are updated in all mandatory/specialist training, to provide a safe environment.

Objectives

1. To update all nurses and healthcare workers on current issues within the nursing profession, inclusive of updates in manual handling, basic life support and health and safety.
2. To provide all nurses and healthcare workers the knowledge and awareness of their responsibilities whilst assigned to a Nurse Agency.
3. To provide an excellent training programme in order to enhance the skills of ENS Members.
4. To reassure each individual that their practice is able to reach the standards set by the Care Quality Commission and the Service User.
5. To ensure each nurse and healthcare worker has the opportunity to evaluate/feedback on his or her training needs in particular during an independent personal development review.

Occupational Health Services

Mission Statement

To ensure that Elite Nursing Services, (ENS) staff are fit to work and that work does not endanger their health. The Occupational Health Nurse Advisor (OHNA) will achieve this in a professional and confidential way.

Advise and support will be given, when appropriate, to each employee to ensure that they can achieve the pre-employment requirements prior to clinical placement.

Continued support will be provided to those with ongoing medical problems or to those who develop a medical problem that affects work whilst in employment with ENS. Rehabilitation and planned staged returns to the workplace will be arranged if necessary.

Annual health reviews will also be given to each Elite Nursing Services Member.

It must be remembered however that the individual has a duty to take reasonable care for their own health and safety and that others who may be affected by what you do or do not do. ENS will do whatever is reasonably practicable to help the individual achieve this.

Further expert advice via contract agreement will be purchased from Avon Partnership Occupational Health if recommended from OHNA.

Staff Guidance

Refreshment Contributions

All food and drink purchased from house budgets is funded through residents' fees and as such, belongs to the residents. The Trust has always had the expectation that staff should pay a minimum of £5 per month (see Staff handbook and finance pack) contribution to the house budget to cover the cost of refreshments consumed.

The contributions currently offset Household expenditure and ensure that residents are not financially disadvantaged.

From May 2005 all staff are asked to pay towards drinks and light snacks (biscuits, toast or crisps) taken whilst working in residential homes. The following amounts will be taken monthly at source via Payroll.

Full-time staff:	£5.50
Part time staff (over 20 hours):	£3.75

An Honesty Pot may be kept within each home to collect any additional monies either from staff working under 20 hours or for those wishing to pay more and from visitors (including Agency/Bank workers).

Opting Out

As a team it may be possible to opt out of the above arrangements however the home must be able to demonstrate an alternative workable system that satisfies internal and external audit. Exceptions can only be authorised in agreement with your Area Manager and Head of Finance.

Eating Out

It is expected that staff support people in the community and this inevitably has a cost implication. It has been difficult to decide on the appropriate amount of money that staff should pay towards meals taken whilst out with residents.

As a guide it is recommended that staff are funded to a maximum of £5 per meal or £2.50 refreshments. This will usually be funded via Household/Amenities budget, however can be funded by the service user if agreed as part of PCP or Care Plan.

DO THE RIGHT THING – Reporting of Malpractice/Abuse

Introduction

Aspects and Milestones Trust is committed to the highest standards of quality, probity openness and accountability.

As a part of that commitment, we encourage employees or others with serious concerns about any aspect of our work to come forward and express those concerns. In some cases, we recognise that employees will initially need to do so on a confidential basis.

This policy makes it clear that staff can report matters of concern without fear of reprisal or victimisation. The policy underlines our commitment to staff and our support for those who come forward to express their concerns. It is important that everyone should be able to follow their sense of right and wrong.

A staff member who witnesses malpractice and fails to report this to a manager will have committed a disciplinary offence – failing to report malpractice, neglect or abuse.

Knowing What's Right and What's Wrong

The staff handbook, induction programme, Vulnerable Adults Policy, house policies and procedures all reflect the Trust's approach to the job of caring for people. One way of distinguishing what's right from wrong is to ask 'if I or a member of my family used this service, would it be acceptable?' The following problems affect the service you provide, your job and the organisation as a whole

- Fraud, corruption and malpractice
- Abuse or neglect of residents (see Vulnerable Adults Policy)
- Failure to deliver proper standards of service
- Damaging personal conflicts within staff teams that affect the service residents receive
- Bullying, discrimination, harassment or victimisation in the workplace

If you are not sure about something you think is a problem, ask before taking any action. We hope that when you finish reading this policy you will feel confident in coming forward and be assured that we will act on what you tell us.

Duty to Report Your Concerns

We know that it is never easy to report a concern, particularly one which may relate to fraud or ill-treatment of residents. However, it is your duty to report bad practice, failure to do so may constitute a disciplinary offence. We hope that you will come forward with any concerns at an early stage, and before problems have a chance to become serious.

If you prefer, we are happy for you to come forward with another colleague, a friend, trades union representative or other advisor to report a concern.

Supporting People Who Report Concerns

If anyone tries to discourage you from coming forward to express a concern, we will treat this as a disciplinary offence. In the same way, we will deal severely with anyone who criticises or victimises you after a concern has been expressed.

We will support you and protect you from reprisals or victimisation. If you come forward with a concern you can be confident that this will not affect your career. The type of support we can offer includes a range of options and various types of support such as counselling and changes in your rota of hours or an alternative job. You can discuss options and choose what you think is best. This applies equally if you come forward with a concern which turns out later not to have been justified.

Whom Do I Contact If I Have a Concern?

In most cases, you should be able to raise any concerns with your line manager. If for some reason this is not possible, you should speak to another manager, member of the Management Team including the Chief Executive or a Trustee. You can ask any of these people for a confidential meeting.

We will do everything we can to respect your confidentiality, if you have requested this.

However, there are some urgent or exceptional cases where we may need to contact an external agency for instance:-

- In a case of criminal offence, the police

- In the case of abuse of a resident, the local authority, social services and the inspection and registration officer

If the concern involves a member of the Management Team or a Trustee you should feel free to contact an external agency, such as the inspection officer or social worker.

We hope that most concerns will not be urgent or exceptional, so that you can feel confident that your contact will be treated in confidence. If we need to tell someone else or initiate an investigation, we will tell you, explain why and talk about what is involved.

Dealing With Concerns

If you come to us with a concern, we will look into it carefully and thoroughly. We have to be fair to you, but also to any others involved. If someone is potentially being accused of misconduct, we have to find out their side of the story as well. In our investigations we will respect any concerns you have expressed about your own safety or career.

We will try to let you know the results of our investigation and about any action that is proposed. However, in doing this we have to respect the confidentiality of other employees as well.

If you have abused the confidential reporting process by maliciously raising unfounded allegations, we will treat this as a disciplinary matter. But no-one who comes forward in good faith has anything to fear.

Conclusion

The Trust is striving to become an organisation with an open and honest culture where people feel free to give and receive feedback about their work.

This policy seeks to assure staff who have serious concerns that there is a safe route for airing those concerns on a confidential basis.

Mel Aker
Chief Executive
Aspects & Milestones Trust

Date : November 2004
Review Date : November 2007

Independent Personal Development Review for the National Health Service

An Independent Personal Development Review (IPDR) will be held every 6 Months to ascertain the Members training needs and performance. If the work is more complex then there may be a cause to hold a one to one meeting on a more regular basis.

The IPDR will be held with a more senior staff member from Elite Nursing Services and take into account the Member Assessment Forms from the Service Users.

Time scales will also be set for training needs to be met.

In the case of a Nurse, the portfolio will be assessed and for Healthcare workers, the General Social Care Council, Code of Conduct will be explained and a copy given to the Member.

For a newly employed Nurse, the IPDR will take place at least twice in the first three Months bearing in mind that a Nurse must have 6 Months experience in the last two years in order to be recruited by Elite Nursing Services.

An IPDR is to be kept in the Members personnel file.

Information required by the NHS Trust to be relayed to the Member will be circulated in the wages slips as well as in the flyers on a Monthly basis.

Each Member will have an induction process prior to working with the local NHS Trust.

If the Member is a Nurse, all documentation relating to professional development courses are to be kept in the personnel file.

The local NHS Trust will be informed if a Nurse is suspended or struck off the NMC Register.

Record Keeping Policy

The aim of this policy is to ensure all records are up to date and accurate, and the level of care provided is communicated to all parties to ensure a safe environment for the Service User who is a patient.

Records are kept to protect the Service User who is a patient and the care worker. These records ensure that the care provided is kept up to date, thus providing a safe environment. The records are reviewed on a regular basis in order to enhance the quality and standard of care.

Where different organisations are involved, one organisation will be responsible for record keeping and one system is to be maintained.

Record keeping will be discussed on induction and as part of Independent Personal Development Reviews. Records are stored at the premises of the Service Users who are Clients.

Records must be accurate and factual.

Sarah Walters

11/2004

To refer concerns about alleged abuse:

Contact

Adult Duty Desk (Bristol Care Direct)

Telephone: 0117 903 6684

Fax: 0117 903 6688

Minicom: 0117 903 6689

E Mail: caredirect@bristol-city.gov.uk

To seek advice or discuss any concern:

Contact

Protection of Vulnerable Adults from Abuse – Reviewing Manager

Kate Spreadbury : Mon – Weds

Liz Frankland : Weds – alternate Fridays

0117 903 7850

E Mail : katespreadbury@bristol-city.gov.uk

lizfrankland@bristol-city.gov.uk

Submitting Timesheets

Please note: Timesheets must reach our Payroll Office by 12 noon on the Thursday after a shift is worked in order to be paid on the Friday of the following week.