

Candidate Handbook



Welcome to Mediteam

Thank you for choosing to work with Mediteam Ltd. We provide temporary assignments to Doctors, Nurses, Allied Health Professionals and Healthcare Assistants across a wide range of public and private sector health settings, including private hospitals and the NHS.

This handbook has been designed to support your induction and provide guidance about what to expect whilst working through us.

It is imperative that you read through it and familiarise yourself with the information contained here and the guidelines and instructions about the minimum standards required when working for our Clients, including the various NHS frameworks (CPP/Workforce Alliance and HealthTrust Europe).

It is important that you fully understand everything covered in this handbook. If there are any points which you do not fully understand or if you have any feedback about how we can improve the handbook for the next edition, please contact the Compliance Manager at compliance@mediteam.co.uk or call 01908 597984.

Occasionally we will need to update the staff handbook. When this happens, we will send you a notification and provide you with a revised copy. You will be responsible for reviewing the updated handbook and ensuring that you comply with any of the changes held within it.

This handbook outlines Mediteam policies and standards, however, you will also be expected to abide by the standards and policies of the regulatory body that you are registered with and any local policies and procedures within the Contracting Authorities and Clients that you work for.



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GENERAL OBLIGATIONS & BEHAVIOUR

While engaged/employed as an Agency Worker, you will be working on the Client's premises. In the run up to your assignment and whilst on the Client's site you must adhere to the following:

At all times you must:

- Follow the instructions and all reasonable requests from the Client.
- Familiarise yourself with and follow the Client's documented policies and procedures.
- Undertake tasks assigned to you promptly and diligently.
- Conduct yourself in an appropriate and professional manner, and act with honesty and integrity.

You must comply with all legislation, regulation and good practice standards including:

- Abiding by the Working Time Regulations 1998.
- Keeping Client and patient information confidential (including but not limited to patient identity, clinical conditions and treatment) and abide by the General Data Protection Act 2018 (GDPR).
- Meet all requirements of the Equality Act 2010 and not discriminate unlawfully for any reason.

Prior to any assignment you must:

- Keep us informed of your availability.
- Inform us if you have booked a shift directly with the Client immediately
- Advise us immediately if you are unfit to work (e.g. if you are suffering from any medical condition that would prevent you carrying out your duties safely, such as sickness, diarrhoea, skin rash etc.). In such instances please contact your dedicated Recruitment Consultant or call in to the office on 01908 597984.
- Advise us on 01908 597984 if you are unable to attend a shift AT LEAST 4.5 HOURS BEFORE
 YOUR SHIFT START TIME. Please note that if you repeatedly cancel a shift less than 4 hours
 before the shift start time, or you repeatedly fail to attend a shift that you have previously
 committed to, you will be subject to disciplinary action on a three strikes basis as follows:
 - a) First offence verbal warning.
 - b) Second Offence written warning.
 - c) Third offence assignment terminated and Mediteam not providing you with further work.
- Keep your mandatory training up-to-date.

On arrival at your assignment you must:

- Be prompt and punctual and inform us immediately if you can't attend a booked shift.
- Identify your supervisor on arrival and establish what your duties will be whilst on assignment.
- Provide your proof of original ID to your supervisor at the beginning of your first shift and wear your photo ID badge.



- Wear freshly laundered, relevant uniform or dress in line with the Client's policy.
- Orientate yourself with the environment and ensure you comply with relevant health and safety instructions, requirements and other Client policies and procedures.
- Obtain information regarding fire procedures, onsite security, information security, crash call
 procedures, 'hot spot' mechanisms and 'violent episode' policies prior to starting to deliver
 the service.
- Familiarise yourself with the patients you will be caring for.

Whilst on assignment you must:

- Have the care, wellbeing and safety of the patients and the Client as your first concern and treat patients, visitors and colleagues with dignity, courtesy and respect giving due regard to their age, gender, race, religion and physical/mental condition.
- Work as directed by your Supervisor and follow all requests, instructions, policies, procedures, standards and rules of the Client.
- Adhere to the health & safety requirements of the Client at all times.
- Work collaboratively and communicate effectively with the Client's clinical staff and departments.
- Be flexible and follow all reasonable requests, instructions, procedures and rules of the Contracting Authority, including accepting alternative duties as required; providing you are clinically competent and trained to do so. Should this occur, please contact us immediately on 01908 597984
- to advise us of the changes being requested, and to confirm that all the appropriate checks have been completed to allow you to undertake the work being requested compliantly and safely. Please note assuming that you meet these compliance and safety standards, you will be expected to accept these alternative duties. If we are advised that you have failed to accept them, we reserve the right to terminate your assignment with immediate effect unless you are being asked to do something that you are not trained or competent to do.
- Observe the highest standards of hygiene and infection control in line with Client procedures and use protective clothing as appropriate to the duties being performed.
- Wear your valid photo ID badge at all times while on the Client's premises.
- Communicate clearly and effectively at all times with the Client's staff, other healthcare workers, patients, carers and the general public.
- Ensure your handwriting is always legible.
- Report any complaints, incidents or accidents witnessed to your Supervisor (and if you are involved in them also to Mediteam).
- Not falsify records, timesheets, expenses or attempt to defraud the Client or patients in any way.
- Complete timesheets accurately and ensure they are signed by the Client's approved representative.
- Report any concerns about possible fraud to your Supervisor and also to Mediteam.
- Not solicit or accept bribes or gifts, or fail to account for monies or property received in connection with performing your duties.



- Report if you are being treated unfairly or inappropriately during the assignment to your Supervisor and to Mediteam.
- Not act in a manner likely to bring the Client into disrepute, including but not limited to discrimination, verbal or physical abuse, threatening behaviour, harassment, bullying or otherwise being uncivil to any person you encounter whilst on assignment.
- Not at any time be, or appear to be, under the influence of alcohol or drugs
- Not at any time be in possession of a firearm or other offensive weapon.
- Not smoke/vape on Client premises unless in an area expressly identified for smoking/vaping.
- Notify Mediteam immediately if you are charged or cautioned with any criminal offence after your enhanced DBS check or PVG scheme membership check has been undertaken.
- Notify Mediteam if you are under investigation by your professional body or if you are suspended from your professional register immediately.
- Participate fully and co-operatively in the investigation of any clinical complaint either during the provision of the service or subsequently.

At the end of the assignment you must:

- Hand over work to your Supervisor or the person taking over from you and report any adverse incidents that have occurred.
- Make accurate and legible records before you leave, including your name, role and identifying yourself as an Agency Worker.
- Return any property or other resources obtained from the Client during the assignment and report any missing or damaged items, where appropriate.

Fitness to Practice

You should inform the Client, and Mediteam, if you become injured or diagnosed with any medical condition. You MUST also let us know if you are pregnant. If you are concerned that your assignment involves unnecessary risks to your health or fitness, or that of your unborn child, please do not hesitate to contact us.

The Client may request that you undergo a medical examination before any occasion on which you are involved in the provision of the services. The Client will advise of the circumstances and reasons for the medical examination and is 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.

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

Professional Registration & Qualification Checks

All healthcare professionals will have their registration and fitness to practice / licence to practice checked with the relevant regulatory body in line with the role for which they have applied (if applicable) prior to the start of each new assignment. The checks will ensure that you:



- Have the necessary skills, clinical competence and qualifications for the job that you are applying for; and
- If applicable to the role, that you are registered with the relevant professional body and meet the required standards of training, competency and conduct to practice safely in your chosen profession.

Checks will only be undertaken on qualifications and professional registrations that are required for the position being applied for. When you registered with us, you would have been asked to provide your registration number and confirm your consent for us to check your registration in writing prior to each assignment. It will also be a condition of your employment that should your registration be suspended; your assignment/employment will be terminated, and you will be excluded from the work for which the registration is required unless it is reinstated.

Before appointing you, we will check that:

- You are the person registered with the regulatory body and that you are actively registered to carry out the proposed role.
- There are no restrictions on your registration that may affect your ability to undertake the duties of the proposed role.
- There are no pending investigations on your fitness to practice listed by the regulatory body.

All qualifications that are essential to the role applied for will also be validated prior to assignment (except those that have already been checked by the relevant regulatory body as part of their process; in which case the above professional registration check will confirm that these are valid).

For all other clinical qualifications, we will request the original certificate and check that the details on the certificate match the details that you have provided on the application form. We will also check basic security features and the presentation of the document, contacting the awarding body / UK NARIC to confirm your attendance, course details and grade awarded. Qualifications obtained overseas will be checked to confirm that the qualification exists, it is equivalent to the stated UK qualification, and that you are the holder of the qualification. Again, these checks will be carried out directly with the awarding body / UK NARIC.

Should the qualification verification process produce a result which contradicts the details you have provided, we will check if there is a reasonable explanation and address any concerns directly with you. If the check reveals substantial misdirection, we will report it to the relevant regulatory body and the NHS Fraud and Corruption reporting line.

Enhanced Criminal Record Disclosure (DBS, PVG and AccessNI)

The nature of the work that you have applied to undertake is likely to involve regular contact with vulnerable adults and young people. For this reason it is necessary for us to carry out an enhanced DBS check, including checks of the Adults and Children's barred lists. In Scotland, we will need to check for PVG scheme membership as part of our recruitment process.

We will comply with all codes of practice together with the Data Protection Act 2018 / GDPR to ensure the correct processing, use, storage, retention and disposal of this information.



Your consultant can provide you with further information about the DBS update service if you are not already subscribed to this

We will renew your DBS check (or check the DBS update service or PVG scheme membership status depending on where in the country you are working, if you have subscribed to these) at least annually. You will receive an email reminder when this is due for renewal. Please attend to this as soon as possible as we cannot offer you work if these checks are out of date.

If applicable, you will also be requested to provide an overseas police check as part of the recruitment and vetting process prior to assignment, or re-engagement if you have left the country for a period of three months or more.

Disclosing Convictions and the 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 no conviction or caution can be considered spent and should be declared to Mediteam. This requirement includes convictions, cautions etc., which occur during the Agency Worker's registration with Mediteam, including between annual disclosure checks.

Having a criminal record will not necessarily debar you from working with the company. Denial or nondisclosure of any conviction or caution, which is subsequently shown to exist, will, however, lead to your immediate removal from Mediteam' register. Any Agency Worker with convictions/cautions will be asked to prepare a "Confidential" Statement of Events surrounding each conviction/caution. Positive Disclosures are reviewed by the Compliance Manager. Due consideration is given to the nature of the role, together with the circumstances and background of any offence and over-riding consideration is given to the care, safety and protection of patients and Clients. Mediteam is bound by the Disclosure Body's Code of Practice and we guarantee that all information will be treated confidentially.

Occupational Health Requirements

Mediteam is required to ensure that you undergo comprehensive occupational health screening and have current health clearance/immunisations and test results in accordance with the latest Department of Health guidelines before we can send you out on any assignment. We are required to update these health assessments on an annual basis, unless you have spent a period of three months or more outside of the United Kingdom, in which case we will need to update the health assessment before deploying you.

This process is very straightforward and is described below:

- We will ask you to complete an Occupational Health Questionnaire and this will be forwarded together with your immunisation records and test results to our Occupational Health Provider.
- They will evaluate the file and, if satisfied, will issue us with a 'Certificate of Fitness for Placement' (Fit to Work) which is valid for 1 year.



- If they are not satisfied, they will ask us to request additional proof of immunisations from you and once they are happy with this, they will issue a Certificate of Fitness for Placement (Fit to Work).
- One month before this expires, we will contact you to repeat the process.

Maintaining Compliance

The process of reaching and maintaining compliance with both government legislation and Client requirements is managed for you by our Compliance Team, who work with our local Branch Consultants and Recruiters initially to ensure that all new applications are processed efficiently and accurately to maintain each Agency Worker's 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, fit to work 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. Once a document has expired, you will be required to stop working immediately. In the case of annual training, a refresher course should be booked in good time to ensure no gaps in your work offerings.

Please contact your Recruitment Consultant if you require any assistance with your compliance.

Mediteam ID Badge

A Mediteam ID Badge will be issued to you once you have cleared our compliance process and prior to your first assignment. If you lose your current badge, you should request a new one by contacting your consultant.

Please be aware that should you arrive at any assignment without the proper identification you may be refused access and will have no recourse to claim any expenses or loss of earnings from Mediteam or from the Client. Badges must be returned to us on termination of your employment with Mediteam.

Professional Indemnity (PI) 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. Mediteam would therefore advise you to take out your own personal PI cover.

Medical professionals working outside the NHS should have their own PI cover.

Mobile Phones & Computer Use

Mobile phones, unless working in the Community, should be switched off for the duration of your assignment.

The Client may authorise you to gain access to certain computer systems, programs and data within those systems. You shall not attempt to gain access to data or programs for which authorisation has not been given.



When on assignment you must:

- Observe the Client's computer security policy, procedure and instructions.
- Not load any program into any computer.
- Not access any other computer, bulletin board, information service or the internet without explicit consent.
- Not download any files or connect any piece of computer equipment to any network, except with prior consent.

Timekeeping, Hours & Absence Reporting

Please make every effort to ensure you arrive at and leave bookings at the agreed time. You may, on occasion, be asked by a Client to change your working hours due to their requirements. In the event of a reduction in hours occurring the Client's decision is final - you will only be entitled to be paid for the hours you have worked.

If you are requested to work extra hours (that do not contravene the maximum safe working hours for your occupation), you may choose to do so and should ensure that your timesheet is completed accordingly. If you are unable to work these extra hours, then you should inform the Client immediately so they can arrange alternative cover.

If, for any reason, you are unable to attend a booking you must contact Mediteam a minimum of four hours (but ideally over 4 hours) before the start of your assignment to allow the maximum time to arrange suitable cover. Failure to inform us may result in your removal from future bookings and may lead to Mediteam removing your details from the database.

Uniform & Jewellery

You are required to report for work neatly and appropriately dressed. Where applicable, always start work in a clean uniform. If not in uniform, you must always abide by the dress code advised by the booking consultant.

You should not wear any items of clothing (such as loose jackets or high heeled shoes) that may be a potential safety hazard, or that may prevent you from doing your job properly at all times. You should not wear excessive jewellery that is visible while at work.

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 about where these are kept.

We also have 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 with these with your Recruitment Consultant as soon as possible.



Should any conflicts or confusions arise during your working assignment with regard to the interpretation of policies and procedures, you must seek advice from a senior member of staff or contact us at the time the conflict is occurring. If at any time you believe you are being compelled to compromise your integrity and are instructed to breach your Code of Professional Conduct, then you should 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.

Patient Record Keeping

Record keeping is a professional requirement. Failure to maintain records could cause considerable difficulties (e.g. if there were allegations of negligence). Information is essential to the delivery of high quality, evidence-based health care and is critical to clinical decision making and patient care. It is therefore critical that information is recorded correctly, regularly updated and easy to access when needed.

All patient attendance, non-attendance, and refusal of treatment and advice must be noted. It is advisable to note where telephone contact is made. It is imperative that the Agency Worker dealing with a particular patient on a specific day can be identified. This means the patient's attendance is dated and signed either in the Agency Worker's records, on a register, or both.

All patient records should be kept confidential in line with the Data Protection Act 2018 / GDPR.

Security

Whilst on the Client's premises, you must comply with all security measures of the Client. The Client shall have the right to carry out any physical searches of your possessions or of any vehicles used by you at their premises.

Evaluation of Service

At the end of every assignment Mediteam will request feedback from the Client on the service they have received from us, and to provide a reference for the Agency Worker. This will be shared with you to support your appraisal and where appropriate, revalidation.



PAY AND BENEFITS

Pay Rates

Different rates of pay apply to different assignments depending on which clinical grade you have been booked at. You will be given details of the pay rate when we discuss each booking with you.

Timesheets

Manual Process

Prior to assignment, we will provide you with a timesheet. Timesheets run from Monday to Sunday. When a correctly completed timesheet is submitted by 9am (Monday – Friday), the timesheet will be processed that day and be paid for the following day.

A remittance payment file detailing the hours, rates and any deductions is supplied to the payee (e.g. Umbrella Company, Ltd Company) and for PAYE candidates, you will receive a detailed payslip showing your hours, rates and any deductions each week.

Payments are made to the payee (Umbrella Company / Ltd Company) by faster payment directly into the payee's nominated bank or building society account.

It is your responsibility to ensure your timesheet is legible, completed correctly, and has been authorised and signed by your manager. Payment may be delayed if this is not the case.

Please complete your timesheet in full, in particular:

- Your name.
- Your specialty.
- Your GMC/NMC/HCPC number.
- Client / hospital name and department / ward.
- You complete the correct week ending date on the timesheet.
- Booking or reference number for each shift (if applicable).
- Dates and shift start and end times and declare any breaks taken.
- The total hours worked.
- Client's signature, name, position and date (including signature at the end of each shift as well as at the bottom. If the timesheet is not signed at the bottom it cannot be processed).
- You have signed the timesheet and the NHS counter fraud declaration.

Timesheets all have a unique timesheet number, so you can only use them once.

We cannot accept faxed or photocopied timesheets. We will accept emailed timesheets in a clear PDF, TIFF or JPEG format. You must send the timesheet to timesheet@Mediteam.co.uk.

Please note that if you put more than two timesheets in an envelope, they may require more than one first class stamp. Please ensure the correct postage is on the envelope, otherwise this may delay the arrival of the timesheets and therefore your pay.



The timesheet template is also available on our website (www.mediteam.co.uk), or you can contact your Recruitment Consultant on 01908 683906.

Please call us on 01908 597984 if you have any queries about timesheets or payment.

Online Process

Many of our Clients use e-platforms or portals for electronic timesheeting. You will be advised of the correct process, if this is the case, prior to assignment.

If the Client wishes to use an online electronic timesheet system, you may:

- Receive an email with login details and instructions for you to complete your hours securely
 online. You must input your hours as per the Client's cut off time, which you will be advised
 of prior to commencing your assignment.
- You will be advised of payment schedules / dates accordingly.
- Once you have submitted your hours, the authorised Client signatory will receive a notification that your online timesheet is awaiting approval. If the hours are rejected for any reason, we will investigate with both you and the Client and make amendments accordingly.
- Once the online timesheet is approved, the authorised hours will be sent to us automatically to enable us to complete the payroll process and you will be paid accordingly.

PAYE Workers

If you are a PAYE Agency Worker, you will have a contract of employment with Mediteam and tax, National Insurance and pension contributions will be deducted at source. Each week that you submit a timesheet, you will receive a payslip with a full breakdown of all of the elements of your pay and deductions. Holiday pay will be accrued according to the hours you have worked, as detailed below.

Holiday Pay for PAYE Workers

As a PAYE Agency Worker you start accruing holiday pay as soon as you begin work through Mediteam and you can request this from us at any time.

Holiday entitlement is 28 days paid leave per year (including Bank Holidays) which is calculated as 12.07% for every hour worked. Entitlement to payment for leave accrues in proportion to the amount of time worked during the leave year.

We require two weeks' notice in writing of your intention to take a holiday.

Personal Service Companies

The Government's <u>off-payroll working rules</u> are in place to make sure that, where an individual would have been an employee if they were providing their services directly, they pay broadly the same tax and National Insurance contributions as an employee.



When we receive a vacancy from a Contracting Authority or

Client, they will instruct us as to whether the role is 'in or out of scope' of IR35 regulations. Most medical, clinical and healthcare roles will be classed as 'in scope'. This means that if you are working through a Personal Service Company, we will deduct tax and NI at source, in line with current legislation.

You will also have the option to opt in or opt out of the Conduct of Employment Business & Employment Agencies Regulations 2003 (Conduct Regulations). If you choose to opt in, you will be transferred to PAYE status and receive paid holiday. If you choose to opt out, you will not receive holiday pay or be entitled to pension contributions under automatic pension's enrolment.

For further information about this, please contact your Mediteam Recruitment Consultant.

Off Payroll Working

If you operate your own business and the role has been classed as "out of scope" of IR35 by the Contracting Authority / Client, you will be able to invoice us for the work carried out via your own Limited Company without us making deductions of tax and National Insurance at source. Please note that the Contracting Authority or Client's decision as to whether the role is classed as "in scope" or "out of scope" will be final (as of April 2020 all roles will be classed as in scope).

To set you up on our system as a Limited Company Contractor, we will require a copy of the following documentation:

- Your National Insurance number, or gender and date of birth.
- Certificate of Incorporation (your company must be registered in the UK).
- Confirmation that your company is registered for corporation tax.
- VAT registration certificate (if you are VAT registered).
- Proof of your business bank account.
- Proof of relevant insurances.

Once we have received all the required documentation to verify your business, we will set you up on our system.

Once on assignment, you will need to complete a timesheet (as detailed in the timesheets process above) and submit this together with a corresponding invoice for the hours worked at the agreed rate. This will be paid in the same timescales as our PAYE Agency Workers above.

You must abide by IR35 legislation and your company's administration must be managed promptly and efficiently. Any UK tax liability must be settled without delay.

Agency Workers Regulations (AWR)

The regulations came into force on the 1 October 2011, and were designed to ensure that Agency Workers receive, usually after a qualifying period, treatment no less favourable than their full-time employed equivalents.



In relation to AWR, an Agency Worker is any individual who is supplied by an agency to work under the supervision and direction of a hirer, and has a contract (whether an employment contract, contract for services, or otherwise) to perform work and services personally. Put simply, individuals that fall within this definition are within the scope of the AWR and those that are outside of this definition do not. Agency Workers include:

- Agency Workers (including those on contract for services and 'zero hours' contracts of employment or equivalent).
- Workers employed or operating via umbrella companies or other intermediaries.
- Workers who operate a personal service company/limited company but who are not genuinely self-employed.
- Workers who are supplied through 'intermediaries' such as Master Vendor / Vendor Neutral suppliers and any similar 'chain' arrangement.

Under the Agency Workers Regulations, Agency Workers are entitled to the following from day one of service:

- Access to amenities or collective facilities at the Client's site (e.g. canteen, childcare, transport etc.) unless there are objective grounds for not doing so.
- Access to vacancies within the hirer's organisation Agency Workers must be informed of any
 relevant, vacant posts in the Client's organisation in order to give them the same opportunity
 to find permanent employment as comparable employees or workers.

After a qualifying period of 12 weeks, Agency Workers are entitled to be treated (in relation to basic working and employment conditions) as if they had been recruited directly to the same job.

This should include access to basic working and employment conditions which relate to pay, duration of working time, overtime, rest breaks, rest periods, night work and annual leave.

The following table shows what is and what is not included under the term 'pay':

What IS Included What is **NOT** Included Contractual entitlements directly linked to the Other aspects of remuneration that are work undertaken whilst on assignment including: provided in recognition of the long-term relationship between employer and Basic pay Overtime employee such as: Profit sharing schemes Shift allowances Share ownership schemes Unsocial hours premiums Payments for difficult / dangerous duties Occupational pension contributions Bonuses / commissions that are directly Occupational sick pay (statutory sick pay attributable to the quality or quantity of work is not affected) Redundancy pay (statutory and done by the Agency Worker, or those linked to individual performance / performance contractual) appraisal arrangements and which would have Notice pay (statutory and contractual) been payable to the worker concerned during Maternity pay



- the period of the assignment, had they been recruited directly
- Vouchers or stamps with a monetary value (e.g. luncheon vouchers, transport vouchers)
- Childcare vouchers with a monetary value that are not funded on the basis of a salary sacrifice scheme
- Holiday pay (above statutory)
- Collective agreements (i.e. terms generally included in employees' written contracts and other matters of 'customer and practice' in the workplace concerned).

- Individually negotiated contract terms of one-off discretionary payments
- Bonuses that are not directly attributable to the amount of quality of work done by the Agency Worker (e.g. attendance bonuses or bonuses based on company performance rather than the quality or amount of work done by the individual Agency Worker)
- Childcare vouchers if they are funded on the basis of a salary sacrifice scheme.

The qualifying period of 12 continuous calendar weeks is irrespective of working pattern (e.g. full or part time), which applies to the same role or substantively similar roles with the same Client.

A new qualifying period will begin only if a new assignment with the same Client is substantively different, or if there is a break of more than six weeks between assignments in the same role with the same Client.

The clock will only stop ticking on either a qualifying period or break period when:

- There is an industrial action or lockout.
- The Agency Worker is taking annual leave.
- The Agency Worker is on sick leave with a doctor's note.

You will be advised about pre and post AWR pay and holiday entitlement at the beginning of your assignment. When your pay is to be increased to comply with AWR, the new rate will be shown on your payslip.

The Agency Workers Regulations do not apply to those workers who are genuinely self-employed.

To help us comply with the Agency Workers Regulations we will need to immediately know:

- If you work, or have worked, through any other agency at any Client where we place you (as you may be entitled to equal treatment sooner than week 12 of working there through us).
- If you believe that you have not received the equal treatment to which you are entitled.
- If you become pregnant or are otherwise entitled to maternity or paternity leave.
- If you are returning to work after maternity leave, paternity leave, jury service or sick leave.

Detailed guidance about the regulations is available online <u>HERE</u> and your consultant can help explain this in more detail.



CODES OF CONDUCT & POLICIES

Professional Conduct

All registered healthcare staff working with Mediteam will be required to adhere to the regulatory body's respective Code of Professional Conduct. You will have been provided with this information directly by your regulatory body. Additional copies can be downloaded from your regulatory body's website.

We expect you to 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.

Substance Abuse

You must not arrive on duty intoxicated by either alcohol or drugs prior to a shift. Clients may request that you undertake an alcohol breath test if they suspect that your performance may be affected. Each Contracting Authority or Client will have an alcohol and drugs policy. Any Agency Worker arriving for, or suspected of, arriving for duty intoxicated who is subsequently sent home will not be refunded travel or time expenses and may have their assignment terminated with immediate effect.

Gifts and Gratuities

Under no circumstances should you seek money, gifts, favours, or rewards for services rendered, either for yourself or for any third party. It is not uncommon for a patient, their friend or relative, to offer a voluntary gift as a mark of appreciation for the care you have given. Any offer of a gift should be politely refused; with an explanation that acceptance would be against Mediteam's, and indeed the Client's, policy.

Equality, Diversity & Inclusion

Mediteam is committed to supporting the principle of equality, diversity and inclusion, and opposes all forms of unlawful or unfair discrimination on the grounds of any Protected Characteristic (PC) including sex; race (including colour, nationality, ethnic or national origin); religion or belief; age; disability; marital status or civil partnership; sexual orientation; gender reassignment; pregnancy and maternity. We also oppose discrimination based on other characteristics that are not protected (e.g. class, obesity, regional accent etc.).

In all aspects of work, Mediteam operates a policy of equality, diversity and inclusion. Information may be requested from staff, applicants and Agency Workers, enabling us 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.



Equality of opportunity extends to all aspects of Mediteam registration, including recruitment and selection, assignment of work, pay rates, assessment of performance, and action in response to complaints.

Agency Workers are encouraged to make known all special skills and/or knowledge, which may make you particularly suited to care for patients 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 our register.

Harassment / Bullying

Harassment is defined as 'unwanted conduct which has the purpose or effect of violating an individual's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that individual'.

Individuals can complain of Third Party Harassment also which is behaviour they find offensive, humiliating etc., even if:

- It is not directed at them.
- The behaviour is perpetrated by a third party who is not an employee of the company.
- The behaviour is based on perception or association.

In the event that an employee finds such behaviour offensive or believes it to be inappropriate, they should report it immediately to us.

Mediteam 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 colleagues 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 Mediteam or any of the institutions we service. Any Agency Worker, who is considered, after proper investigation, to have subjected a contracting patient, other Agency Worker or anyone else that they work with to any form of harassment or bullying will be dealt with in an appropriate manner under our complaints and/or disciplinary and grievance procedure. This may include removal from our staffing register.

Fraud Awareness

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 submitting duplicate timesheets.
- Requisition and Ordering Fraud accepting inducements from suppliers, ordering goods and services for personal use and collusion with suppliers to falsify deliveries or order supplies not needed.
- Overseas Patients Fraud People not residing 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, you should follow these guidelines:

| DO | DON'T |
|---------------------------------------|---|
| DO make an immediate note of your | DON'T do nothing. |
| concerns. | DON'T be afraid to raise your concerns. |
| DO report your suspicions | DON'T approach or accuse individuals |
| confidentially to someone with the | directly. |
| appropriate authority and experience. | DON'T try to investigate the matter |
| DO deal with the matter promptly if | yourself. |
| you feel your concerns are warranted. | DON'T convey your suspicions to |
| | anyone other than those with the |
| | proper authority. |

Whistleblowing

Mediteam is committed to ensuring employees, Contractors and Agency Workers are able to raise matters of concern without suffering any discrimination, victimisation, disadvantage or detriment for doing so.

Our Whistleblowing Policy is designed to promote a culture of freedom, honesty and openness by encouraging employees, Contractors and Agency Workers to report any concerns relating to malpractice, wrongdoing, bribery, corruption, dangerous or illegal activity in the workplace internally (rather than having to go to an external organisation to do so), so allowing the company to take early action to resolve the problem before it escalates.

The policy provides a clear procedure for reporting improper actions and omissions of colleagues, which may cause harm to either people or the organisation itself, without suffering detriment or reprisals of any type for making the disclosure.



You do not need have to have proof of wrongdoing or malpractice to make an internal report and you are encouraged to share any concerns that you may have in confidence, particularly if they are unsure whether to raise a concern or not.

Any instruction to cover up wrongdoing is itself a disciplinary offence and if you are told not to raise or pursue any concern, even by a person in authority, you should not agree to remain silent and should report the matter to your Mediteam Recruitment Consultant.

If you make a disclosure, you are protected under the Public Interest Disclosure Act. Your disclosure will be treated confidentially and you will be supported and protected from reprisals (including dismissal, detriment and victimisation). However, should the matter be sufficiently serious we may need to disclose your identity (with your permission) if we require to do so to resolve the issue, or if we are ordered to do so by law. If the issue cannot be dealt with internally, you can also disclose it to an appropriate regulatory body.

Our Consultants are trained to deal with whistleblowing and will report back to the employee, Contractor or Agency Worker who raised the issue with details relating to its progress, actions and outcomes.

How to Make a Whistleblowing Disclosure

The disclosure should include details about:

- The background and history of the concern;
- The nature of the suspected wrongdoing; and
- The individual suspected of carrying out the wrongdoing.

Where possible, the disclosure should be made in writing.

Our Recruitment Consultant or Manager will investigate the Whistleblower's concern and will take the appropriate action to resolve the issue and prevent recurrence, escalating it if appropriate. We also have the following obligations:

- To log details of the disclosure and subsequent actions.
- To undertake further enquiries / investigation as necessary (which may include subsequent disciplinary action and/ or referral to the police or other agencies where necessary).
- To report back to the Whistleblower about the outcome of any enquiry and any remedial action the company proposes to take.
- To protect the Whistleblower from victimisation, harassment, bullying or any sort of detriment for making a disclosure in accordance with this procedure.
- If requested to do so by the Whistleblower, to treat the disclosure confidentially and not to disclose their name or position unless required to do so by law, or unless it is impossible to resolve the concern without revealing the Whistleblower's identity.



If suspicions are not confirmed by an investigation, the matter will be closed, and the employee, Contractor or Agency Worker will not be treated any differently for raising the concern. Their confidentiality will continue to be protected.

Escalation

The Whistleblower may make a wider disclosure if they fear victimisation or if they believe that there is a cover-up. Such escalation should be made to the proper authority which includes:

- HM Revenue & Customs.
- The Financial Conduct Authority (formerly the Financial Services Authority).
- The Competition & Markets Authority.
- The Health & Safety Executive.
- The Care Quality Commission.
- The Care Inspectorate (in Scotland).
- The RQIA (in Northern Ireland).
- The Environment Agency.
- The Independent Policy Complaints Commission.
- The Serious Fraud Office.

In most cases, the Whistleblower would be required to have followed the above internal procedure before making a wider disclosure.

Guidance on Safeguarding

We have a zero-tolerance approach to abuse and/or neglect and all Agency Workers are required to understand and comply with training received as well as our policy. Where the services are provided on Contracting Authority / Client premises (e.g. a hospital), we will operate according to the policies and procedures of that institution / organisation. It is expected that the child / vulnerable person / adult at risk of harm will have been informed of their rights by that institution / organisation and that the institution / organisation will provide independent support and advice to the person concerned.

Identifying Potential Abuse

Abuse is the violation of an individual's human rights and it can take the form of a single act or repeated acts.

The main types of abuse include:

- Physical.
- Domestic.
- Sexual.
- Emotional / psychological.
- Financial.
- Modern slavery.
- Discriminatory.
- Organisational.
- Neglect or acts of omission.



• Self-neglect.

All employees, Contractors and Agency Workers are expected to look out for the common symptoms or indicators associated with the different types of abuse and neglect. Typical signs for each of the above include:

Physical Abuse – the signs of this are often evident, but can be hidden by both the victim and the abuser. Any unexplained injuries should always be fully investigated. Evidence to look out for includes:

- Cuts, lacerations, puncture wounds, open wounds, bruises, welts, discoloration, black eyes, burns, bone fractures, broken bones and skull fractures.
- Untreated injuries in various stages of healing or those not properly treated.
- Poor skin condition or poor skin hygiene.
- Dehydration and/or malnourishment without illness-related cause.
- Loss of weight.
- Soiled clothing or bed.
- Broken eyeglasses/frames, physical signs of being subjected to punishment, or signs of being restrained.
- Inappropriate use of medication, overdosing or under-dosing.
- A person telling you they have been hit, slapped, kicked, or otherwise mistreated.

Sexual Abuse - very often the behaviour of a person, even if they are confused, will tell you that something is wrong. Even with dementia, people can often make their feelings known to you if you take the time to listen, observe and take notice. It is the capacity to believe that sexual abuse is possible, (without automatically seeing it everywhere), that will increase the potential to detect and respond to it when it happens. Some of the physical signs to watch out for are:

- Bruises around the breasts or genital area.
- Unexplained STDs.
- Unexplained vaginal or anal bleeding.
- Difficulty in walking or standing.
- Marked changes in behaviour.
- Torn, stained, or bloody underclothing.
- A person telling you they have been sexually assaulted or raped.

If you suspect sexual abuse, do NOT wash the person or their clothing. Do NOT let time drift by while you think about your course of action. Immediately inform the nurse in charge of the shift and they will refer the matter to the Police as they are the experts and will have the skills, knowledge and equipment to respond appropriately and sensitively.

Emotional / Psychological Abuse - this can have a profound impact on an individual's mental health. They can feel trapped, threatened, humiliated, used or a combination of all these. Most signs therefore relate to someone's mental state, and changes in behaviour, such as:



- Helplessness.
- Hesitation to talk openly.
- Implausible stories.
- Confusion or disorientation.
- Anger without apparent cause.
- Sudden change in behaviour.
- Emotionally upset or agitated.
- Unusual behaviour (sucking, biting or rocking).
- Unexplained fear.
- Denial of a situation.
- Extremely withdrawn and non-communicative or non-responsive.
- A person telling you they are being verbally or emotionally abused.

Neglect - this will often be manifested in the physical, social or health circumstances of the person. Examples may include:

- Dirt, faecal or urine smell, or other health and safety hazards in a person's living environment.
- Rashes, sores, or lice.
- Inadequate clothing.
- Malnourishment or dehydration.
- Untreated medical conditions.
- Poor personal hygiene.
- Evidence of the withholding of medication or over-medication of the person.
- Evidence of a lack of assistance with eating and drinking.
- Unsanitary and unclean conditions.

When considering neglect, it is also important to recognise that there are occasions when someone will choose a particular lifestyle that is considered by others to be poor. There is a difference between a chosen pattern of behaviour and neglect by others that causes deterioration in a person's circumstances and condition. It should also be remembered that neglect can be intentional or passive (i.e. where the 'perpetrator' is doing their best but cannot provide the level of care and support that is needed). From the perspective of the 'victim' the impact is the same, and they experience abuse.

Where abuse is intentional, it is likely that the following signs will be apparent as the abuser may:

- Try to prevent the person from speaking for themselves or seeing others without them being present.
- Display attitudes of indifference or anger toward the person, or the obvious absence of assistance.
- Blame the person (e.g. accusation that incontinence is a deliberate act).
- Display aggressive behaviour (threats, insults, harassment) toward the person.
- Have a previous history of abuse of others.
- Display inappropriate affection toward the person.



- Display flirtatious behaviour, or coyness, etc. that might be possible indicators of inappropriate sexual relationships.
- Create social isolation of the family, or isolation or restriction of activity of the person.
- Create conflicting accounts of incidents by family, supporters, or the person.
- Display inappropriate or unwarranted defensiveness.

Financial Abuse – the signs of financial abuse may include:

- Signatures on cheques etc. that do not resemble the person's signature, or signed when the person cannot write.
- Sudden changes in bank accounts, including unexplained withdrawals of large sums of money by a person accompanying an older person.
- The inclusion of additional names on an older person's bank account.
- Abrupt changes to, or the sudden establishment of, wills.
- The sudden appearance of previously uninvolved relatives claiming their rights to a person's affairs or possessions.
- The unexplained sudden transfer of assets to a family member or someone outside the family.
- Numerous unpaid bills, or overdue rent, when someone else is supposed to be paying the bills.
- Unusual concern by someone that an excessive amount of money is being expended on the care person's care.
- Lack of amenities, such as TV, personal grooming items, appropriate clothing, that the person should be able to afford.
- The unexplained disappearance of funds or valuable possessions such as art, silver or jewellery.
- Deliberate isolation of a person from friends and family, resulting in one particular individual having total control.

Safeguards & Arrangements to Ensure Awareness of the Issues & Processes

We require our employees, Contractors and Agency Workers to follow all the instructions, guidance, policies and procedures provided by the participating authority. Induction training will also be provided to all employees, Contractors and Agency Workers engaged to undertake regulated activity with children / vulnerable persons or regulated work with children / adults at risk of harm, including but not limited to:

- Training in relation to safeguarding and handling of reporting of alleged or suspected abuse / harmful behaviour.
- Risk management to prevent abuse / harmful behaviour.
- Actions to be taken in the event of alleged or suspected abuse.
- The company's complaints and escalation process.
- The company's Whistleblowing policy.
- Current legislation and best practice.

All employees, Contractors and Agency Workers will also be appropriately supervised.

Reporting Suspected Abuse or Neglect



If you suspect or are aware that a child, young adult(s) or a vulnerable person is being abused or neglected you must act quickly, but appropriately and professionally. To assist with the reporting procedure please ensure that you:

| Take it seriously. Reassure the child/ young adult or suggest Try to get the child | ions. n the child or vulnerable words for them to use. |
|---|--|
| Negotiate getting help. Find help quickly. Speculate or acc Make promises | cuse anybody. you cannot keep. on; just state the facts as |
| adult cown words as soon as is practicable 1 | |
| Make careful records of what was said Give your opinion | on; just state the facts as |

If you suspect abuse has taken place or abuse has been brought to your attention, you are obliged to take action.

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.

You should immediately report any suspicion or allegation of abuse to Mediteam and your Supervisor at the Contracting Authority / Client. Do not attempt to assess whether or not the allegations are true and do not attempt to deal with any suspicion or report of abuse yourself.

We will:

- Liaise with the Contracting Authority / Client to ensure appropriate support for the child / young person / vulnerable adult is provided.
- Report the suspicion or allegation to the relevant agencies, who may include the Police and/or Social Services, and maintain a written record.
- Provide appropriate support for the person against whom the allegation has been made if this is one of our employees, Contractors or Agency Workers.
- Confirm to you that action 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.



Health and Safety

It is our policy to ensure, as far as is reasonably practicable, the health, safety and welfare of all our Employees, Agency Workers as well as patients and members of the public. This involves working in partnership with Contracting Authorities and Clients on whose site(s) you may be working.

Health and Safety Guidance

Mediteam seeks to ensure the following in relation to Health and Safety:

- That you have the necessary qualifications, experience, skills and capabilities 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 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 the necessary safety instructions have been followed and understood.

Your Duty of Care & Responsibilities

You are responsible for your own personal Health & Safety and you have a duty of care to:

- Notify Mediteam, the Contracting Authority / Client if you become aware of any risks to health
 & safety that are not adequately controlled.
- Cooperate with the Contracting Authority / Client to ensure a safe system of work and follow any health and safety policies or instructions that you are given.
- Take reasonable steps to safety to ensure your own safety and that of anyone else who may be affected by your actions.
- Report any incidents / accidents to Mediteam and the Contracting Authority / Client and notify all parties if any further risks arise during the course of your assignment
- Not wilfully misuse or interfere with anything provided in the interests of health, safety and welfare
- If you are pregnant, you must inform us, and we will arrange for a risk assessment of your working environment to be undertaken to identify the assignments you can or cannot undertake.

You have a legal right to refuse to undertake work / any particular task if you have reasonable grounds to believe that this would place you in 'serious and imminent danger'. Any such concerns should be reported immediately to us and the Contracting Authority /Client.

Safety Requirements

 Always familiarise yourself with the Health and Safety policies and procedures for the environment you are working within and pay particular attention to fire and emergency procedures.



- Never attempt a task without first ensuring that you understand the instructions and knowing you can carry it 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 us as soon as possible, taking immediate steps to correct it. It may be assumed that you 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 and always follow instructions.
- 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 Mediteam and the Contracting Authority / Client. If necessary, get first aid attention immediately. You should also report near misses.
- Obey all Health and Safety rules, signs and instructions. If you are unsure as to what they mean ask.

Accident and Incident Reporting

You 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 Contracting Authority / Client and Mediteam.

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 a 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 seven 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 (sharps) injury occurs you should do the following:

- Encourage bleeding by squeezing the site of the puncture wound, do not suck.
- Wash the wound with soap and water, do not scrub.
- Cover the wound with waterproof dressing.



- Report the incident to Mediteam. If the injury happens out of office hours, report to A&E and inform Mediteam the next day.
- Report to OH Department during normal working hours.
- Document the circumstances that led to exposure.
- Counselling is available, where required, following 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.

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR)

You have legal duties under RIDDOR that require you to report and record work related accidents.

Over-Seven-Day Injuries

As of 6 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 a worker 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 weekends and rest days) are reportable. The report must be made within 15 days of the accident.

That said, 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 Mediteam of any over three-day injuries 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/uksi/1995/3163/schedule/3/made when they receive a written diagnosis from a doctor that they or their employee / worker 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 and 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 admittance to hospital for more than 24 hours;
- Any other injury leading to hypothermia, heat-induced illness or unconsciousness, or those requiring resuscitation or 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, 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's 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 pipework;
- 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, or any 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; and
- A dangerous substance being conveyed by road is involved in a fire or released.

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

COSHH

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 an assessment has shown that a substance is known to cause occupational asthma or severe dermatitis and COSHH requires that an employer provide suitable information, instruction and training about:



- The nature of the substances you 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 (PPE) and clothing.
- The results of any exposure monitoring or health surveillance and emergency procedures.

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

Data Protection / Access to Records

To deliver the service, Mediteam need to process data including your records. The information contained in your records is taken from your application form, as well as other elements of your application including, but not limited to: Criminal Record Bureau Disclosure; professional registration; right to work in the UK; references and Terms and Conditions. There may be occasions when your records are disclosed to Regulators, Inspectors and contracting Authorities / Clients (e.g. CQC, CPP, CCS, Workforce Alliance, HealthTrust Europe etc).

In line with the Conduct of Employment Agencies and Employment Businesses Regulations 2003, we will obtain and store the following information from all work-seekers:

- Date the application was received.
- Your name, address and, if under 22 years of age, date of birth.
- Any terms which apply, or will apply, between you and Mediteam and any document recording any variation thereto.
- Details of your training, experience, qualifications, and any authorisation to undertake particular work (and copies of any documentary evidence of the same).
- The names of any Contracting Authorities / Client(s) to whom you are introduced or supplied.
- Details of any resulting engagement, and the date from which it takes effect (including all assignment start and end dates).
- Details of any requirements specified by you in relation to taking up employment.
- A copy of any contract between Mediteam and you.
- Dates of requests of fees from you and receipts for such fees with copy statements or invoices, numbers and amounts (please note we do not charge fees to work-seekers for our services).
- Details about you and the position concerned with copies of all relevant documents and dates they were received or sent, as the case may be. These include:
 - Your proof of ID.
 - o Your experience, training, qualifications and professional registrations.
 - o Your references.
 - Confirmation that you are willing to work in the position that you are being submitted for.



- o All relevant pre-employment checks.
- o Health & Safety risks.
- Any information received by us to indicate that you are unsuitable for the work being provided.

We are not required to retain details of any work-seeker who we do not provide services to.

Under current data protection laws, Data Subjects (in this case work-seekers) have a right to request that we delete their Personal Data. However, this is not an absolute right.

Where we have another legal basis to continue to process that data, e.g. we have a legal obligation to hold certain records for a certain period of time, those obligations will take precedence over the Data Subject's rights.

Schedule 1 Data

Subjects have rights when it comes to how we handle their Personal Data too. These include rights to:

Schedule 2

- Withdraw Consent to Processing at any time (where the Company is relying on Consent);
- Receive certain information about our Processing activities;
- Request access to your Personal Data that we hold;
- Prevent our use of your Personal Data for direct marketing purposes;
- Ask us to erase Personal Data if it is no longer necessary in relation to the purposes for which it was collected or Processed, or to rectify inaccurate data or to complete incomplete data;
- Restrict Processing in specific circumstances;
- Challenge Processing which has been justified on the basis of our legitimate interests or in the public interest;
- Request a copy of an agreement under which Personal Data is transferred outside of the EEA;
- Prevent Processing that is likely to cause damage or distress to you or anyone else;
- Be notified of a Personal Data Breach which is likely to result in considerable risk to your rights and freedoms;
- Make a complaint to the supervisory authority; and
- In limited circumstances, receive or ask for your Personal Data to be transferred to a third party in a structured, commonly used and machine readable format.

Schedule 3 We will verify the identity of an individual requesting data under any of the rights listed above and will not allow third

parties to persuade us to



disclose Personal Data without proper authorisation.

Complaints

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 regarding the complaint. You must also report the complaint to Mediteam. If you are the subject of a complaint personally, 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 relevant regulatory body.

Our complaints procedure will enable the Contracting Authority / Client to make complaints quickly and Mediteam will be required to investigate and resolve a complaint within the prescribed timeframes. The Contracting Authority / Client will, with due regard to the Data Protection Act 2018 and GDPR, provide to us with the necessary information to thoroughly investigate the complaint.

Our complaints procedure is as follows and is managed by our partner, ACI Training and Consultancy after we receive a complaint (please note 'we' in this section refers to Mediteam and ACI):

- 1. We will acknowledge any complaint within **two (2)** working days of receipt.
- 2. All reasonable endeavours will be made by Mediteam to ensure that all complaints are resolved within **ten (10)** days of the complaint being notified to us. However, where the nature of the complaint requires additional investigation or action by a professional or government organisation, all reasonable endeavours should be made to ensure that the complaint is resolved as soon as possible thereafter.
- 3. We will ensure that you are fully informed of complaints relating to you (unless there is a specific reason for not doing so).
- 4. You will be afforded the opportunity to state your version of events and will be given **seven** (7) days to respond.
- 5. If appropriate, we will take demonstrable action to ensure there is no recurrence of the act or omission complained of.
- 6. The Contracting Authority / Client may, at any time, request that we provide them with an update as to the progress of the resolution of the complaint.
- 7. Details on how the complaint has been resolved should be notified to the Contracting Authority / Client in writing, as soon as possible after finalisation.
- 8. If we receive a report of poor performance about you from a Contracting Authority / Client, you will not be supplied again to that Contracting Authority / Client until they are satisfied that a) the issues identified have been resolved, b) will not recur and c) has confirmed this in writing, to us.
- 9. Where there is evidence of malpractice, you will be reported to the relevant professional body.
- 10. We will be responsible for monitoring and following up such complaints with the professional body until an outcome is reached. Mediteam and our partner ACI, will discuss with the



- Contracting Authority / Client whether an Alert Notice needs to be issued and we will co-operate with any action required.
- 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.
- 12. A system to analyse and identify any pattern of complaints (Quality Assurance System) is also in place.

Training and Development

Appraisals

For ongoing work in the NHS, you are required to be annually appraised. The requirements are as follows:

- The appraisal must be carried out by a medical practitioner entered on the Specialist Register on the list of Registered Medical Practitioners ('Appraiser').
- The Appraiser is required to supply documentary evidence to demonstrate that they have been appropriately trained in the conduct of appraisals and have been regularly re-trained as appropriate.
- We require evidence that you have undergone an annual appraisal within an 'approved NHS appraisal system', which includes 360 degree feedback as well as feedback from patients.

In addition to the above, Mediteam 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 forwarded to you, giving you an opportunity to raise any concerns or issues you may have.

You should ensure that you maintain a written portfolio of your professional experience and attendance at professional development courses, which should also include a written and agreed 'Personal Development Plan' as agreed at your appraisal.

Revalidation for Doctors

Medical revalidation is the process by which the General Medical Council (GMC) confirms the continuation of a doctor's licence to practice in the UK. All doctors who wish to retain their licence to practice need to participate in revalidation.

The purpose of revalidation is to provide greater assurance to patients, employers and other healthcare professionals that licensed doctors are up-to-date and fit to practice. It is a key component of a range of measures designed to improve the quality of care for patients.



Revalidation is based on a local evaluation of a doctor's practice

though appraisal and subsequent revalidation every five years, undertaken by a senior doctor in the organisation - the Responsible Officer.

The Responsible Officer makes a recommendation about the doctor's fitness to practice to the GMC. The recommendation will be based on the outcome of the doctor's annual appraisals over the course of five years, combined with information drawn from the organisational clinical governance systems.

Following the Responsible Officer's recommendation, the GMC will decide whether to renew the doctor's licence.

The Responsible Officer is accountable for the quality assurance of the appraisal and clinical governance systems in their organisation. Improvement to these systems will support doctors in developing their practice more effectively, adding to the safety and quality of health care.

This also enables early identification of doctors whose practice needs attention, allowing for more effective intervention.

If necessary, we may be able to offer candidates working for us an introduction to an appropriate Responsible Officer to assist with their revalidation.

Revalidation for Nurses

The NMC exists to protect the public. Revalidation will require all registered nurses and midwives to demonstrate that they remain fit to practise. The revalidation cycle for nurses and midwives is every three 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).
- Five pieces of practice-related feedback.
- Five 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. It is a requirement for all nurses and midwives to maintain a portfolio of evidence in order to demonstrate their ongoing commitment of fitness to practise.



Training for Work in the NHS

For all Agency Workers who work within the NHS; the following training is mandatory. All of the below training will be delivered upon recruitment of a new candidate and then thereafter refresher training will be provided at the frequency shown below, unless a risk assessment has shown that additional training is required for a particular candidate or job:

| Subject | Audience | Frequency of Training / Refreshers | Training Delivery |
|--|--|---|---|
| Equality, Diversity & Human Rights | All staff including unpaid and voluntary | 3 Years | E-learning can cover alignment to CSTF learning outcomes |
| 2. Equality, Diversity & Human Rights (Scotland) | All staff including unpaid and voluntary | 3 Years | E-learning can cover alignment to CSTF learning outcomes |
| 3. Health, Safety & Welfare | All staff including unpaid and voluntary | Induction followed by every 3 years | E-learning can cover alignment to CSTF learning outcomes. Further job specific training may be needed based on local risk assessment. |
| 4. NHS Conflict Resolution (England) | Frontline NHS staff and professionals who come into direct contact with the public | 3 years | E-learning can cover alignment to CSTF learning outcomes. Practical instruction also required. |
| 5. Fire Safety | All staff including unpaid and voluntary | Induction: site specific followed by regular fire safety training. At least every 2 years | E-learning can cover alignment to CSTF learning outcomes. Practical instruction also required (e.g. evacuation techniques) supplemented by specific job/site specific training as necessary |
| 6. Infection Prevention & | Level 1: All staff including unpaid and voluntary Level 2: All healthcare | 3 years | E-learning can cover alignment to CSTF |
| Control | staff involved in direct patient care / services | 1 year | learning outcomes. |



| | | Amazzal | |
|--|--|---|---|
| 7. Moving and Handling | Level 1: All staff including unpaid & voluntary Level 2: All staff including unpaid & voluntary staff who are involved in patient handling activities | Annual, although based on local risk assessment Annual, although based upon local risk assessment | E-learning can cover alignment to CSTF learning outcomes. Practical instruction also required. |
| | Level 1: All staff working in healthcare settings | Induction followed by every 3 Years | E-learning can cover alignment to CSTF learning outcomes |
| 8. Safeguarding | who have regular contact with patients, families, carers or the public | 3 years | E-learning can cover alignment to CSTF learning outcomes |
| Level 3: Registered healthcare staff who engage in assessing, planning, intervening and evaluating the needs of adults where there are safeguarding concerns | | 3 years | E-learning can support delivery of knowledge aspects of learning outcomes. |
| | Basic Prevent Awareness: All staff that have contact with adults, children, young people and parents/carers | 3 years | E-learning can cover alignment to CSTF learning outcomes. Can also be incorporated into Safeguarding training |
| 8a. Preventing Radicalisation | Prevent Awareness: All staff who could contribute to assessing, planning, intervening and evaluating the needs of an adults or child where there are safeguarding concerns | 3 years (initial training within 12 months of starting in relevant role with appropriate updating / briefing at least annually) | Should be delivered by attendance at a Workshop to Raise Awareness of Prevent (WRAP) or by completing an approved e-learning package. |
| 9. Safeguarding | Level 1: All staff working in care settings | 3 years | E-learning is appropriate at level 1. |
| Children (Version 3) | Level 2: All non-clinical and clinical staff who have contact with children, young people or | 3 years | E-learning is appropriate, however, training, education and learning opportunities |



| | parents/carers or any | | should also include |
|-------------------|----------------------------|---------------|-------------------------------|
| | adults who may pose a | | multi-disciplinary and |
| | risk to children. | | scenario-based |
| | | | discussion. |
| | Level 3: Clinical staff | | E-learning can be used |
| | (working with children, | | as preparation for |
| | young people or | | reflective team-based |
| | parents/carers or any | | learning. |
| | adults who may pose a | | Learning should be |
| | risk to children) who | | multi-disciplinary and |
| | could contribute to | 3 years | inter-agency, including |
| | assessing, planning, | | opportunities for |
| | intervening and | | personal reflection, |
| | evaluating the needs of a | | scenario-based |
| | child or young person | | discussion, drawing on |
| | and/or parenting capacity | | case studies etc. |
| | Level 1: Any clinical or | | |
| | non-clinical staff, | Induction | |
| | dependent on local risk | followed by | |
| | assessment or work | local | E-learning can support |
| | context | assessment | delivery of knowledge |
| | Level 2: Staff with direct | | aspects of learning |
| | clinical care | | outcomes. |
| 10. Resuscitation | responsibilities including | 1 year | Practical instruction also |
| | qualified healthcare | | required (i.e. hands-on |
| | professionals | | simulation training and |
| | Level 3: Registered | | assessment is recommended for |
| | healthcare professionals | | |
| | with responsibility to | 1 year | clinical staff) |
| | participate as part of a | | |
| | resuscitation team | | |
| 11. Information | All staff involved in | | E-learning can cover |
| Governance & | routine access to | 1 year | alignment to CSTF |
| Data Security | information | | learning outcomes. |
| | Foundation: Support | Required | |
| 12. Information | Staff roles | refresher | E-learning can cover |
| Governance | Intermediate Level 1: | periods based | alignment to CSTF |
| (Scotland) | Clinical, Administrators | on local | learning outcomes. |
| | and Managers | assessment | |
| 13. Information | All staff including unpaid | | E-learning can cover |
| Governance | and voluntary staff | 2 years | alignment to CSTF |
| (Wales) | | | learning outcomes. |



| 14. Violence & Aggression (Wales) | Module A – Induction and Awareness Raising: All staff including unpaid and voluntary staff. Module B – Theory of Personal Safety and Deescalation: Required staff based on local risk assessment and training needs analysis. Module C – Breakaway: Required staff based upon local risk assessment and training needs analysis | Induction followed by refresher periods based upon local assessment | E-learning can support delivery of knowledge aspects of learning outcomes. Practical instruction also required. |
|---|---|--|--|
|---|---|--|--|

Clinical / Care Subjects, Levels & Refresher Periods

All of the below training will be delivered on completion of the Statutory & Mandatory Subjects training above for relevant candidates (depending on the role) and then thereafter refresher training will be provided at the frequency shown below unless a risk assessment has shown that additional training is required for a particular candidate or job:

| Subject | Level | Frequency of Training / Refreshers | |
|-----------------------------|-------------------------|------------------------------------|--|
| Your healthcare career | N/A | Once on recruitment | |
| Duty of care | N/A | Once on recruitment | |
| Person-centred care | N/A | Once on recruitment | |
| Communication | N/A | Once on recruitment | |
| Consent | N/A | Once on recruitment | |
| Privacy and dignity | N/A | Once on recruitment | |
| Fluids and nutrition | N/A | Once on recruitment | |
| Dementia Awareness | N/A | Once on recruitment | |
| | Decision to Transfuse | Three (3) years | |
| | Administration of blood | Three (2) years | |
| | components | Three (3) years | |
| Blood component transfusion | Blood Sampling | Three (3) years | |
| | Collection of blood | | |
| | components from | Thron (2) years | |
| | storage and delivery to | Three (3) years | |
| | the clinical area | | |

Other Training



We will also provide the following training to support the normal duties that are expected to be performed by all healthcare professionals whilst on assignment. Training for these modules will be delivered on recruitment and refreshed thereafter annually, as required.

| Subject | Frequency of Training / Refreshers |
|---|--|
| Complaints | Annual |
| Lone worker training | Annual |
| Food hygiene and hygiene awareness | Annual |
| Mental Health Act | Annual |
| Mental Capacity Act | Annual |
| Physical restraint skills and techniques, including personal safety and control & restraint | Annual |
| Interpretation of cardiographs | Annual |
| Any additional clinical/care or other training that the Participating Authority considers necessary and / or as required by the relevant Professional Body relevant to the role required to be performed, and identified in the individual Order and the Call-off Contract from time to time. | Annual |
| Counter Fraud training | Annual |
| Ionising certificate training | If new/different radiation work takes place, if new legislation is introduced, after a period of inactivity and otherwise at least every five years. |

Agency Worker Handbook Declaration

I have read a copy of the Agency Worker's Handbook which outlines the goals, policies, benefits and expectations of Mediteam Ltd and its Contracting Authorities / Clients, as well as my responsibilities as an Agency Worker.



I have familiarised myself with the contents of this handbook.

Drint Namo

By my signature below, I acknowledge, understand, accept and agree to comply with the information contained within the Agency Worker Handbook and the Terms of Business details provided to me by Mediteam Ltd and any umbrella company you chose to use. I understand this handbook is not intended to cover every situation which may arise whilst on assignment, but is simply a general guide to the goals, policies, practices, benefits and expectations of Mediteam.

Updates to this manual will happen from time to time. Whenever this happens, Mediteam will notify me of this by email. I agree to familiarise myself with these changes before undertaking any further shifts through Mediteam.

I understand that the Agency Worker Handbook is not a contract of employment and should not be deemed as such.

| rillit Name | | |
|-----------------------------------|---|--|
| Profession: | | - |
| Registration No.: | | |
| Signature: | | |
| Date: | | |
| any official audit, or Client con | mpliance purposes carried ersonnel files will be viewed | minimum, to my personnel files as part of out by, but not limited to, any person d in accordance with the requirements of Regulations. |
| Signed: | | |
| Print Name: | | |
| Date: | | |
| | | |

Please forward this signed page to: Mediteam Ltd, 7 Clarendon Drive, Wymbush, Milton Keynes, MK8 8ED *or* print, sign and scan a copy to compliance@mediteam.co.uk