



KAIDY EMPLOYMENT AGENCY

# STAFF HANDBOOK

Updated 05/05/2012

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## ABOUT KAIDY EMPLOYMENT AGENCY

### **THE COMPANY**

Kaidy Employment Agency is a generalist Recruitment Company established in 1998.

Kaidy Employment Agency has a wide range of staff to work with various organizations.

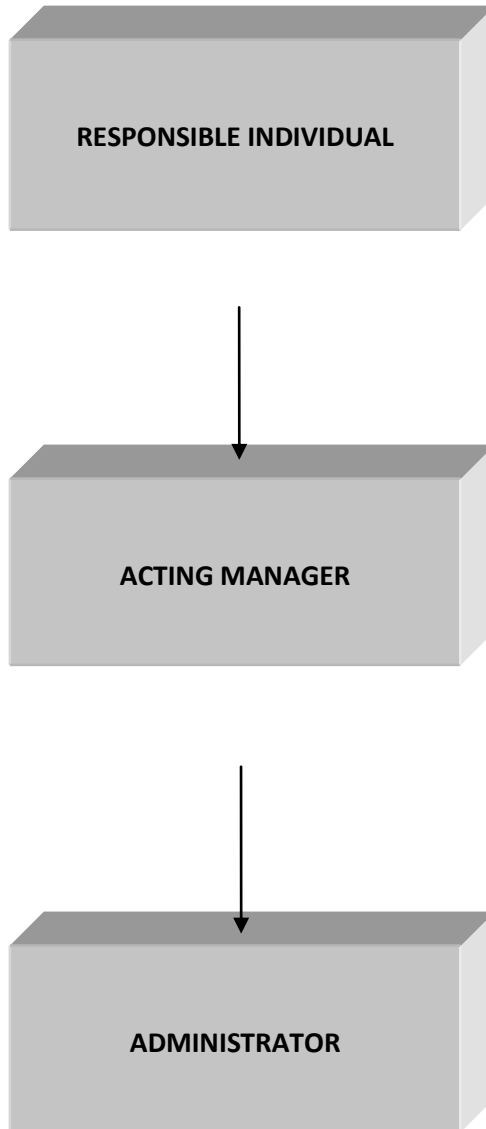
Efficient, experienced and well-motivated members of staff run Kaidy in a friendly atmosphere.

Our Head of nursing is a level 1 RGN.

The proprietor is a qualified Management consultant with several years of experience.

Our administrative members of staff are competent professionals.

## ORGANISATION CHART



## STATEMENT OF PURPOSE

Our aim is to provide a high quality service to our users and staff alike.

For the service user, we aim to provide staff fully qualified in the profession and to provide a professional and efficient service. To achieve this, our reference request includes a quality assessment form.

For our staff, we aim to ensure they are competent in their job. An induction program is given to all our new members of staff to familiarize them to our aims, objectives and policies of the Agency.

Kaidy aims to provide caring services of the highest quality to all our clients / patients and in doing so will:

- Recognise and respect the intrinsic worth, dignity and individual differences of all our clients/patients.
- Always ensure at the outset that you address your client / patient with their preferred mode of address.
- Support clients/patients in the independence and outcomes of their decisions and also acknowledge their right to take risks.
- Support clients/patients in their need to fulfil their personal aspirations and full potential in all aspects of activities of daily living including the opportunity to develop new skills, knowledge and relationships.
- Ensure that clients/patients are given every opportunity to participate in the formulation of their care, and in any policy, plan and decision that affect their lives.
- Ensure that clients/patients are protected from any unnecessary intrusion and that confidentiality is maintained at all times.
- Ensure that you follow the procedures and policies of the establishment where you work.
- It is your responsibility to observe these values in all areas of your work on behalf of Kaidy.

## PERSONNEL SUPPLY

We aim to meet the needs of our clients and are therefore able to adapt our recruitment to meet the demands of local business and clients.

We are able to provide temporary staff to cover periods of absence or staff shortages.

Our staff members are expected to be ready and willing to work flexible hours to suit clients' needs.

Our current services include:

- Supply of Nurses- RGN, RMN to Establishments
- Health Care Assistants
- Social Care Staff
- Domestic

## CANCELLATION OF STAFF

We reserve the right to cancel a booking for a particular staff, but we will inform you as soon as we are aware of the need to do so. We will endeavour to find a replacement for you (subject to clause 7 in our terms and conditions of business).

If you decide to cancel any booking please notify us as soon as you are aware (subject to clause 9 in our terms of business).



## CODES OF CONDUCT OF AGENCY WORKER

Purpose of the code of conduct:-

- To inform all Agency Workers of our clients expectations about their general conduct and approach to tasks
- To emphasise the importance of a professional approach to all clients and service users.
- To highlight situations that Agency Workers may have to deal with.

What you must do:

- Discrimination:** Agency Workers should not discriminate between people on the grounds of Creed, colour, race, political preference, sexual preference, ethnic background, Disability of whatever nature, age, marital status or gender.
- Reputation:** Agency Workers are ambassadors of Kaidy Employment Agency and must not say or do anything that may harm our reputation.
- Own duties:** Agency Workers must never attempt to perform any duties of care or otherwise that may fall outside their expertise/and or qualifications. Specifically, care staff must not attempt to perform the duties of nursing staff.
- Confidentiality:** Agency Workers will at times become privy to information concerning a client or service user, this information must be treated with respect and remain confidential at all times. At no time may any temporary worker discuss the confidential affairs of Ambition, a client or a service user without specific written permission to do so. The only exceptions to this requirement are cases where the law dictates otherwise or if silence may negatively affect a service user's wellbeing.
- Dignity:** Agency Workers must not do or say anything that may put the dignity or health of their service users at risk.
- Professionalism:** Agency Workers must at all times remain professional whilst on assignment, even if regular contact with service users or other workers may engender Personal relationships. Agency Workers must take specific care to keep the professional nature of the relationships intact in the working environment.
- Keep updated:** Agency Workers must at all times keep up to date with policies and procedures and changes to legislation that may affect them.
- Respect:** Agency Workers must always respect the working practices and demands of service users unless unreasonable or if a working practice may breach health & safety.
- Keep to plan:** Agency Workers must always, whenever applicable, keep to the requirements of a care service plan and/or any other agreed role requirement.
- Best interests:** Agency Workers must always act with the best interests of the service user in mind.

- Notifications:** Agency Workers should always in the first instance notify the manager of the Institution where they are working, of any concerns, followed by a telephone call to Kaidy.
- Own decisions:** Agency Workers must always allow the service user to make the decisions about what is best for them. This includes decisions about treatment and personal affairs.
- Complaints:** Kaidy has a detailed policy on how to report complaints, in the event of a complaint that may affect your duties and obligations please refer to our policy and notify us immediately.

## ROLES AND RESPONSIBILITIES OF AGENCY WORKERS

### FOR REGISTERED NURSES:

- Assesses patients, plans and implements care
- Provides advice and maintains associated records
- Carries out nursing procedures
- May provide clinical supervision and managerial leadership to other staff, students
- Works within codes of practice and professional guidelines.

### REQUIRED SKILLS:

- Able to assess, plan, implement & evaluate programmes of care
- Good interpersonal skills with the ability to relate within the interdisciplinary team and across disciplines and agencies
- Effective communication skills (written, non-verbal & verbal)
- Able to function effectively as a team member
- Self motivated, uses own initiative and will make decisions
- Able to prioritise workload (self and others), allocate work and meet deadlines
- Able to supervise and train junior staff
- Time management and effective delegation skills
- IT skills
- Prepared to learn (with sufficient teaching and support) basic assessment skills relevant to the speciality of the work area.
- Works well in stressful situations and able to respond effectively to challenging situations
- Maintains clear and accurate records of assessments made, nursing care and treatment delivered and how effective these have been
- Competent and effective clinical nursing skills including:
  - Able to record an ECG
  - Able to demonstrate safe use of patient equipment including infusion devices
  - Competent in basic life support
  - Effective wound care
- Ensure all patients and relatives are treated with respect and dignity at all time

### KNOWLEDGE & UNDERSTANDING:

- Understanding of clinical governance and its implications for nursing care
- Understand the principles of confidentiality and how to handle information in accordance with the Data Protection Act 1998.
- Knows when information given them in confidence must be shared with their manager or members of the interdisciplinary team.
- Awareness and knowledge of current issues, protocols and policies in relation to protection of vulnerable adults and children
- Sensitive and responsive to the race, culture, religion, age, disability, gender and sexuality of the person receiving care, their relatives and representatives
- Ensures that own actions support equality, diversity, rights and maintain quality
- Understands and follows the Agency's and Authority's policies for reporting concerns, responding incidents, seeking guidance and complaints handling.
- Complies at all times with Health and Safety regulations and takes responsibility for health and safety of self and others at all times.
- Work according to the NMC Standards of Conduct, Performance and Ethics for Nurses and Midwives.

- Able to recognise and work within the limits of own competence and deliver care based on best available evidence or best practice

**FOR HEALTH CARE ASSISTANTS:**

- Undertakes personal care duties for patients in a hospital or similar setting. Duties may include:
  - Assisting patients with bathing, washing, shaving and oral hygiene
  - Toilet and continence requirements
  - General patient observations and other nursing related activities
  - Moving and handling patients safely
  - Assisting with eating and drinking
  - Handling personal possessions and documents
  - Maintaining the orderliness, hygiene and safety of the ward/ departmental/ patient environment
  - Updating patient records, recording observations etc
- May undertake some clerical duties
- Assists qualified staff by carrying out routine personal care duties. Supervision/ management will be available

**REQUIRED SKILLS:**

- Ability to communicate clearly and effectively both verbally and in writing (to understand and be understood) in English
- Ability to communicate effectively with patients, their relatives/carers and members of the ward / department team using persuasion, reassurance, tact and empathy
- Basic numeracy
- Reliable and dependable. Arrive at work at the time specified and work the full amount of time allocated
- Able to respond flexibly and appropriately to the personal care needs of the patient
- Able to provide effective personal care and support in a way which maintains the privacy, dignity and safety of the patient at all times
- Able to manoeuvre the patients safely using aids where appropriate e.g. hoists
- Treats patients, their relatives/ representatives with courtesy at all times
- Able to follow clear instructions and feed back to senior staff
- Able to work as part of a team as well as use own initiative
- Understands the need to report to the manager changes to the care needs or condition of the patient
- Good observational skills, able to take and record blood pressure, temperature and respiration
- Able to update patient records, record observations, fluid balance, update care plans
- Ensure all patients and relatives are treated with respect and dignity at all times
- Mental Health settings: Able to recognise and report changes in mental state and / or changes in behaviour

**KNOWLEDGE & UNDERSTANDING:**

- Understands the **principles of confidentiality** and how to handle information in accordance with the Data Protection Act

DEVONSHIRE HOUSE, 582 HONEYPOT LANE, STANMORE, MIDDLESEX HA7 1JS

PHONE NO: 02089062001 FAX: 02089062234

LICENSED BY: Care Quality Commission. Registered in England N03414273

- Sensitive and responsive to the race, culture, religion, age, disability, gender and sexuality of the person receiving care, their relatives and representatives
- Ensures that own actions support equality, diversity, rights and maintain quality
- Understand and follows the Agency's policy for reporting concerns, responding to incidents, seeking guidance and complaints handling
- Complies at all times with Health and Safety regulations and takes responsibility for health and safety of self and others at all times.

## CONDITIONS OF TEMPORARY AGREEMENT

These terms and conditions constitute a legally binding agreement between you and Kaidy Employment Agency. It is a condition of engagement that you must read and fully understand. We will be pleased to clarify any points you do not understand, or you need more information.

**LEGISLATION** – Kaidy operates in accordance with The Nurses Agencies Regulations 2002.

**POLICIES AND PROCEDURES** – These conditions of engagement and Kaidy's policies, procedures and guidelines for the delivery of care to clients have been drawn up for protection of staff and their clients. A signed acknowledgement will be held in each member of staff's personal file confirming that all applicable policies, procedures and guidelines have been read and understood. Any failure to comply with a stated policy, procedure or guideline could lead to the removal of a member of staff from the Company's register.

**CODE OF PROFESSIONAL CONDUCT** - All Registered Nurses are professionally accountable to the NMC and Kaidy will expect you to abide by the NMC's code of professional conduct. You are particularly reminded that each clause of the code starts with the phrase "As a registered nurse, midwife, or health visitor, you are personally accountable for your practice..."

**SUSPENSION FROM REGISTER LIST** – You must inform Kaidy if you are under investigation by the NMC or if you are suspended or removed from register.

**ASSIGNMENTS** – Kaidy acts as agent for the client on whose behalf it offers assignments to staff. Whilst Kaidy will endeavour to offer staff suitable assignments we cannot guarantee that we will always be able to do so and staff have no obligation to accept assignments offered to them. Staff are employed only for the duration of each assignment and have no contract once duty is finished.

**FIT TO PRACTICE** - If you are given an assignment, you can only accept if you are fit to practice

- You are not fit to practice if you are suffering from vomiting, diarrhoea or a rash
- You must inform Kaidy if you become pregnant
- You may be asked to undergo a medical examination by the NHS Trust you are assigned to before the commencement of any shift.
- You must abide by the requirements of HIV Infected Health Care Workers
- You must inform Kaidy if you become injured or are diagnosed with any condition

**TIME SHEETS** – For all assignments completed, members are required to submit promptly, properly signed time sheets to the office before 12noon every Monday. These should be handed or delivered to the office on the designated day of each week. Delay in submitting time sheets may cause delay in paying of wages.

The time sheets must be completed with:

- The client's name and address
- The date of each day worked
- The start and finish time
- Total hours for each day
- Name of staff
- Signature of client's/company's representative
- Name and position in company

The completed time sheet must be signed by the client. You must not sign your own time sheet. This and any intentional claim for hours not worked, is fraud and will be treated as such.

**TAX AND NATIONAL INSURANCE** – Advances to staff are paid monthly to the nominated bank or building society account. Under Inland Revenue rules, appropriate fees will be subject to PAYE and National Insurance. A small deduction will be made in respect of professional negligence and administration fee. Members will receive a full statement detailing any deductions made each month.

**BANK DETAILS** – If your bank or building society details change you should notify the office in writing.

**QUERIES** – Any query relating to payment should be made within four weeks of payment. If an advance is shown to have been incorrect Kaidy reserves the right to adjust future advances to compensate.

**CAR INSURANCE** – It is your responsibility to obtain additional insurance if you intend to utilise your vehicle for non-private use (i.e. attending clients in the community and/or transporting clients).

**REFERENCES** – Employment will not be offered unless you can supply 2 references, one which must be your last employer. Your ID will include birth certificate or passport.

**CRIMINAL CONVICTIONS** – A Criminal Records Bureau Enhanced Check will be requested of all potential staff who will work in areas where health service employees would normally be checked:

- Paediatric wards or working with children
- Secure units – sexual offenders
- Prisons
- Vulnerable adults

**WORKING WITH CHILDREN** – A Criminal Records Bureau Enhanced Check is essential for all members deployed in areas where they will work with children. This is in accordance with the Children act 1989.

**WORKING WITH THE ELDERLY** – A Criminal Record Bureau Enhanced Check is also required for working with vulnerable adults.

**CONVICTIONS AFTER CRB CHECK**- You must inform Kaidy immediately if you are prosecuted or convicted after CRB checked.

**AVAILABILITY** – In order for the office to secure work on your behalf you are asked to supply the hours/days you are available to work in advance on a weekly basis. Staff who have no means of being contacted should telephone at regular intervals.

**ATTENDANCE ON CLIENTS** – Once you have accepted an assignment you are expected to keep any appointments that are made for you. Staff should be consistent and conscientious in their work and stay for the assigned time allocated to that duty. If the client does not require you for the full allotted time/shift inform the office immediately.

- Day/Evening Duty – For establishment work you will be given an allocated shift time.
- Night Duty – You will be expected to stay awake for the full shift to attend to your client's/patient's needs throughout the night.

**HEALTH** – Engagement of a nurse is conditional upon a true statement of the details of your mental and physical health as set out in the Health Questionnaire and upon understanding that you must be in a state of good health when reporting for duty. Any evidence of back problems must be declared or any illness that may affect your performance.

**IMMUNISATION** – All members are advised to ensure that they are up to date with immunisations, e.g. tetanus, hep. B, TB. Those who work in a hospital setting must have written evidence of these immunisations which can be obtained from your GPs.

**REMOVAL FROM COMPANY REGISTER** – You may be removed from the register and not considered for further assignments if it is found that you have brought Kaidy into disrepute by:

- Failing to notify the office that you will not be attending a client.
- Continual poor performance
- Serious breaches of safety rules/legislation potentially involving loss of life or limb, or injury to the client or other persons.
- Theft
- Fraud
- Failure to declare criminal convictions
- Being under the influence of alcohol or drugs whilst on duty
- Flagrant refusal to follow our policies, procedures and guidelines.
- Deliberate damage to client's property.
- Abuse of client
- Disorderly or indecent conduct, fighting on client's premises or threatening physical violence
- Acts of incitement or actual acts of discrimination on the grounds of race, religion, colour or ethnic origin.

Your employment will be suspended while the circumstances of any complaints are investigated. You have the right to representation at any meetings to discuss the complaint(s).

**GRIEVANCE** – If you have any difficulty in carrying out your work due to interference from clients, relatives or carers, report to the office immediately.

If your grievance is with the management of your work or your treatment generally discuss this with the Nurse Manager. If however, you do not wish to discuss the matter, you should detail your grievance to the office:

Kaidy Employment Agency  
Devonshire House  
582 Honeypot Lane  
Stanmore  
Middlesex  
HA7 1JS  
Tel: 0208 906 2001



If however, you wish to have your grievance heard by someone independent of Kaidy, you are free to approach any arbitration body or the

**Care Quality Commission (CQC)**

Finsbury Tower  
103–105 Bunhill Row  
London  
EC1Y 8TG  
Tel:020 8441 6930

**TIME KEEPING** – You should arrive for duties at the requested time and carry out your duties for the full time you have been allocated. If it is found that your attendance was not for the full allotted time Kaidy will reduce your fees accordingly and a report on this action will be requested of you.

**STAFF CHILDREN OR OTHERS** – Whilst on duty you will not take with you pets or members of your family i.e. children, friends or other relatives. In some instances the client may ask to meet your children or other members of your family. Please notify the office for guidance.

**HOLIDAY PAY** - Under current regulation, agency workers qualify for holiday pay. The holiday pay is not available to be carried forward from one holiday year to the next and must be claimed in advance of your holiday(s) using the claims forms which are available along with full details of the scheme, from the office.

**WORKING TIME DIRECTIVE** – The European Union has laid down guidelines for all workers governing the length of the maximum working week and the amount of night work which is safe to undertake. Because there is no obligation for any worker to accept duties from Kaidy which he or she does not wish to complete, you will never be compelled to work outside of these guidelines. However, because we do not know what other work you may be undertaking during the week, we will ask you to sign a form acknowledging that you are aware of the guidelines and confirming that if you accept duties which would result in more than the recommended hours for work, you have chosen to do so.

Under the Working Time Regulations, the Temporary Worker is entitled to 5.6 weeks per year of annual leave as a statutory minimum. All entitlement to earned 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. The Temporary Worker is responsible for ensuring that all paid annual leave is claimed and taken within the Leave Year.

Entitlement to payment for leave accrues in proportion to the amount of time worked continuously by the Temporary Worker on Assignments during the leave year and is calculated according to the previous 12 weeks worked. Four weeks' notice of a requirement for statutory leave must be provided by the Temporary Worker.

**AGENCY WORKER'S REGULATIONS (AWR)** - Under the Agency Workers Regulations, on completion of the Qualifying Period the Temporary Worker may be entitled to paid and/or unpaid annual leave

in addition to the Temporary Worker's entitlement to paid annual leave under the Working Time Regulations. If this is the case, any such entitlement(s), the date from which any such entitlement(s) will commence and how payment for such entitlement(s) accrues will be as set out in writing.

These regulations that came into force on the 1<sup>st</sup> of October 2011 are designed to ensure that agency workers receive, after the qualifying period, equal treatment to full-time employees engaged in the same positions.

Detailed guidance on the regulations is available online ([www.bis.gov.uk](http://www.bis.gov.uk)) and your consultant can help but in brief your entitlements include:

- a) Immediate access to facilities, etc. provided by the Client to equivalent employed workers at the Client, and,
- b) after a qualifying period of twelve weeks, equal basic working conditions. The working conditions referred to are principally pay and holiday pay.

For the purpose of entitlement to equal working conditions the definition of the twelve week "Qualifying Period" is important so when calculating whether any weeks completed with the Client count as continuous towards the Qualifying Period, where:

- a) the Agency Worker has started working during an assignment and there is a break, either between assignments or during an assignment, when the Agency Worker is not working; ,
- b) the break is:
  - i.) for any reason and not more than six Calendar Weeks;
  - ii.) wholly due to the fact that the Agency Worker is incapable of working in consequence of sickness or injury and the break is 28 Calendar Weeks or less; paragraph (iii) does not apply; and, if required to do so by the Employment Business, the Agency Worker has provided such written medical evidence as may reasonably be required;
  - iii.) related to pregnancy, childbirth or maternity and is at a time in a protected period, being a period beginning at the start of the pregnancy and ending at the end of the 26 weeks beginning with childbirth (being the birth of a living child or the birth of a child whether living or dead after 24 weeks of pregnancy) or, if earlier, when the Agency Worker returns to work;
  - iv.) wholly for the purpose of taking time off or leave, whether statutory or contractual, to which the Agency Worker is otherwise entitled which is:
    - 1) ordinary, compulsory or additional maternity leave;
    - 2) ordinary or additional adoption leave;

- 3) ordinary or additional paternity leave;
  - 4) time off or other leave not listed in paragraphs (iv)i, ii, or iii above; or;
  - 5) for more than one of the reasons listed in paragraphs (iv)i, ii, iii to iv above; (v) wholly due to the fact that the Agency Worker is required to attend at any place in pursuance to being summoned for service as a juror and the break is 28 Calendar Weeks or less; (vi) wholly due to a temporary cessation in the Client's requirement for any worker to be present at the establishment and work in a particular role for a pre-determined period of time according to the established custom and practices of the Client; (vii) wholly due to a strike, lock-out or other industrial action at the Client's establishment; or (viii) wholly due to more than one of the reasons listed in paragraphs (ii), (iii), (iv), (v), (vi) or (vii);
- c) the Agency Worker returns to work in the same role with the Client. Any weeks during which the Agency Worker worked for the Client before the break shall be carried forward and treated as counting towards the Qualifying Period with any weeks during which the Agency Worker works for the Client after the break. In addition, when calculating the number of weeks during which the Agency Worker has worked, where the Agency Worker has started working in a role during an Assignment and is unable to continue working for a reason described in paragraph (b)(iii) or (b)(iv) 1), 2), or 3), for the period that is covered by one or more such reasons, the Agency Worker shall be deemed to be working in that role with the Client for the original intended duration or likely duration of the relevant Assignment, whichever is the longer. For the avoidance of doubt, time spent by the Agency Worker working during an assignment before 1 October 2011 does not count for the purposes of the definition of "Qualifying Period".

In the event that your pay is to be increased so as to comply with the regulation the new rate will be shown on your payslip.

**SICKNESS AND ILLNESS** – As staff are only employed for the duration of the assignment and have no contract once the duty is finished, statutory sick pay does not become payable and there is no company sick pay scheme. Staff who are unable to accept assignments due to sickness or ill health should contact their local Benefits agency for advice.

**UNABLE TO ATTEND/SICKNESS** – If you are unfit for duty or are unable to attend an assignment which you have accepted, contact the office immediately so that alternative arrangements can be made for the client ( 24 hours on call service). Under no circumstance should anyone be asked or sent on your behalf that is not registered with Kaidy to attend the client.

**CHANGE OF ADDRESS/TELEPHONE NUMBER** – Please notify the office immediately if you change your address and telephone number.

**CHANGE OF NAME** – Please notify the office immediately if you change your name.

**LOSS OF PIN CARD** – If you lose your PIN card and are issued with a new PIN card by the NMC, a copy will be required immediately.

**TERMINATION** – Because you are under no obligation to accept assignments, you can terminate your employment at any time with 1 weeks' notice. However, where you have made advanced commitments to undertake duties, we would ask to give at least one week's notice of your intention to terminate your employment.

**PERMANENT APPOINTMENTS WITH KAIDY'S CLIENTS** – If you wish to take up an appointment within 6 months of the termination of your registration with a client or an employer introduced to you by Kaidy, you are asked to first notify the office in writing.

**SUPERVISION** – Kaidy requires all staff to provide nursing care to our clients to the highest standard possible. You will be expected to attend reviews and appraisal meetings to discuss your performance. You will also be able to discuss any problems and further training needs you might have.

**IDENTIFICATION BADGES** – Kaidy supplies all staff with identification badges. These badges must be shown to clients or their representative and worn at all times in a place where they are easily seen when carrying out your duties.

It is considered gross misconduct for any member to lend or give their ID badges to another person to use. Such behaviour will result in your removal from the register.

Loss of identification badges should be reported immediately to the office.

**CONFIDENTIALITY** – Personal information disclosed to you during the course of your work is to be treated as private confidential and should be only discussed with the consent of the person(s) concerned unless the person is considered to be at risk.

This also relates to information received from third parties (e.g. district nurse, relatives etc) which should not be passed on even to the service user without the third party's permission.

Disclosure to authorised person(s) can only be made with the client's consent unless an emergency makes such permission unobtainable.

Authorised persons are those with direct need for information relating to the client's welfare, for example:

- Health Care Professionals
- Nurse Manager
- Care Managers

Relatives, neighbours and family friends do not necessarily constitute authorised persons.

You are reminded to adhere to the NMC Code of Conduct on Confidentiality. DO NOT leave client documentation in a place where an unauthorised person could gain access to it. DO NOT discuss your clients in public place.

**RECORD KEEPING** – Record keeping is an integral part of nursing and care practice. It is a tool of professional practice and it helps the care process.

Good record keeping helps to protect the welfare of the patients as it provides continuity of clinical care, better communication and dissemination of information between members of the multi-disciplinary, multi-agency care team giving an accurate account of the treatment (care planning and delivery).

Considerable difficulties would arise from failure to maintain accurate patient records in regards to any legal actions stemming from allegations of negligence or other such accusations against the agency worker. To ensure that that the Agency Worker dealing with a particular patient in a particular period can be identified, it is essential that attendance is dated and signed either in the Agency Workers records or on a register, or both.

All Kaidy workers should maintain a high level of quality record keeping, as it is also a reflection of the standards of your professional practice. The frequency of entries will be determined both by your professional judgement and the local standards and agreements. And all entries should be signed (or initialled) and dated.

It is also essential that records are easily accessible by ensuring that they are stored and recorded in the correct place. All patient data must also be kept confidential in accordance with the Data Protection Act 1998.

**DATA PROTECTION** – Data relating to your qualifications, training and personal information is held on computer by Kaidy. If you wish to access this information please contact the office. This information is kept confidential.

**ALCOHOLIC DRINKS AND DRUGS** – Impaired judgement in caring for vulnerable people is extremely dangerous. For this reason consumption of alcoholic drinks at any time before the start of a shift or whilst on duty is strictly prohibited. This also applies to illegal drugs consumption. If you are offered an alcoholic drink by a client, please decline as this is not accepted whilst on duty.

**SMOKING ON DUTY** – Smoking on duty is forbidden. Please note if you smoke the smell remains on your clothing which many clients find repulsive and offensive. According to section 2(2)(e) of the Health and Safety at work act 1974 employers are to provide safe and healthy working environment for all staff; and Section 2(2) of the Health Act 2006 prohibits smoking in all public premises including workplaces and Vehicles (See *No Smoking Policy*).

**GIFTS AND GRATUITIES** – Under no circumstance should you accept gifts, loans or gratuities from clients, their relatives or other interested parties.

It is Kaidy policy that our carers may not accept any form of gifts from their patients.

If a patient offers the carer a gift of any kind, the carer should refuse politely.

If the patient persists, the carer may accept the gift and report as soon as is reasonably possible to the office.

The office will then inform the next of kin of the patient in view of returning the gift.

### **HANDLING CLIENT'S FINANCES**

It is best to avoid handling client's money. However, if you have to handle client's finances, please do so openly and honestly.

If you are asked to go shopping for the client,

- count the money you are given in front of the client
- agree the amount you are given before you leave
- agree on the list you are given
- get a receipt for items bought
- account for the money spent and return any change to the client.

If you are asked to collect pensions for clients,

- ensure the client is aware of the fact that you are collecting the pension
- ensure that the pension book is signed and gives you authority to collect
- after collection, return the pension book to client
- check the amount collected with the client.

**WILLS AND FINANCIAL ADVICE** – You are not permitted to act as witnesses to the will and testament of any client for whom you are providing or have provided care.

You are not permitted to give advice in relation to wills, investments or financial matters generally. Please at all times, act professionally.

**STATIONERY** – You are advised to keep a folder for all stationery, timesheets, extra forms and handbook.

### **QUALIFIED NURSE SUPPORT OF NURSES**

Nurses needing qualified nurse support should call 020 8203 1518 OR 020 8906 2001 for assistance. The nurse on call will then call you back.

## NHS GUIDELINES

Wear the correct uniform with ID badge, flat duty shoes, hair tied up, no jewellery, short finger nails, and no nail varnish. (See Uniform Policy)

Ensure you arrive on time. You may be asked to show your PIN card please be ready to show it.

It is your responsibility to familiarise yourself with the person in charge of the ward, the Hospital policies, procedures and guidelines including Health and Safety and fire instructions. Ensure you are familiar with the emergency call numbers for cardiac arrest and fire alarm.

If you are not familiar with the ward ask to be shown around, find out where the emergency equipment is stored, where the fire alarms, exits and extinguishers are located, the treatment room, sluice, linen cupboard and where you can find spare equipment.

Under your NMC code of Professional Conduct you are accountable for your actions. Do not attempt to undertake tasks that you are not competent to do.

All documentation must be in accordance with the guidelines set out by the NMC.

MRSA – to contain the spread of infection it is generally hospital policy that bank and agency nurses do not have close contact with patients with MRSA. Check the Hospital Infection Control Policy.

If the ward wants to book you for further shifts please inform the office.

Time taken for meal breaks will be deducted from the total hours worked per duty.

Timesheets must always be signed by the person in charge, ensure you leave a copy with that person.

You will be expected to be up to date with your immunisations.

## RESIDENTIAL/NURSING HOME GUIDELINES

Wear the correct uniform with ID badge, flat duty shoes, hair tied up, no jewellery, short finger nails, and no nail varnish. Ensure you arrive on time and you may be asked to show your PIN card, please do.

It is your responsibility to familiarise yourself with the person in charge of the Home, the Establishment's policies, procedures and guidelines including health and safety, fire instructions and accident documentation. Ensure you know where to find the details of the client's doctor, next of kin (usually on the client's care plan or Kardex system) and number of the person on call for any establishment emergencies.

If you are not familiar with the home ask to be shown around, find out where the emergency equipment is stored, where the fire alarms, exits and extinguishers are located, the treatment room, sluice, linen cupboard and where you can find spare equipment. Ensure you are aware of how to operate any security systems and know what each key is used for. In a medical emergency it is usual to call 999 for an ambulance – check the procedure with the person in charge.

Expected Death of a client – It is usual to notify the client' GP immediately, the next of kin and their chosen Undertaker (check establishment procedure). Document any action taken in the care plan.

Sudden Death of a client – It is usual to notify the client's GP immediately and the next of kin (check establishment procedure). A post mortem will be undertaken and the body removed by the Coroner. Statements are usually required. Do not remove or wash the body. Document any action taken in the care plan.

MRSA – To contain the spread of infection it is generally a nursing home's policy that bank and agency nurses do not have close contact with patients with MRSA. Check the establishment policy on Infection Control.

All documentation must be in accordance with the guidelines set out by the NMC.

Under NMC code of Professional Conduct you are accountable for your actions. Do not attempt to undertake tasks that you are not competent to do.

Residential and Nursing Homes are the client's home. All clients should be treated with dignity and respect.



Time taken for meal breaks will be deducted from the total hours worked per duty. If you are the only qualified nurse on duty and not able to take a break you will be paid for the full shift.

Time sheets must always be signed by the person in charge. Ensure you leave a copy with that person. Use the correct time sheet. If the establishment wants to book you for further shifts, please inform the office.

You will be expected to be up to date with your immunisations.

## HOME NURSING & HOMECARE GUIDELINES

Kaidy recognises that, in providing nursing and care services to clients in their own homes, it assumes the responsibility for delivering a dependable service to vulnerable people, who do not have the back-up and support that they would in an institutional setting.

Kaidy Clients, who often have highly complex care needs, are safeguarded from abuse, through deliberate intent, negligence or ignorance.

The Care Manager is responsible for ensuring that care delivery and Agency worker allocation is planned with maximum efficiency, organisation and a flexible approach and for ensuring that consultants understand the specific requirements laid down in respect of nursing and care supplied directly to patients requiring home nursing and homecare services.

A Lead Nurse or Senior Carer is appointed for each client to ensure that the quality of care is maintained and decisions and changes are communicated to the Care Manager.

The agency obtains from the local authority, or the local health or primary care trust, a detailed needs assessment for be used together with the agency risk assessment.

For individual clients who are self-funding, the agency will carry out a care needs assessment, prior to the provision of a home nursing or domiciliary care service (or within 2 working days in exceptional circumstances) using senior staff who are competent and trained in such procedures (Assessors).

### **Document: Care Plan & Service Records for Nursing & Care at Home**

A Care Plan is completed for each new Home Nursing & Care Client, when the initial assessment is carried out. Thereafter, the document is updated six-monthly or more frequently, if the condition of the Client changes.

A copy of the Care Plan & Service Records is stored electronically and is accessed and updated by the Care Manager.

The Care Manager is responsible for ensuring that training is provided in the completion of personal records held in Clients' homes, as required.

## **Procedure**

The care needs assessment for individual clients has a number of elements including important information about the client; care needs assessment and a client's risk assessment.

Each part comprises a set of forms, for completion by the needs assessor. These forms are used throughout the care planning and delivery process, and are kept as part of the client's records in the agency's office. As they contain personal data, these records come under umbrella of the Data Protection Act and must be protected at all times from wrongful or inappropriate disclosure.

Copies of all forms completed by the agency should also be kept in the home of the client. If the client prefers NOT to have a copy of these forms, a statement to that effect, signed by the client, is held at the office.

This is designed to collect important information about a client, such as personal details, information about anyone living with the client, name of emergency contact/next of kin, main family carer: GP; Dentist etc.

Important additional information about the client Care must be provided in a fashion which allows for the client's own wishes and preferences to be expressed and, where appropriate, followed. This form collects information, for example, on issues such as communication, entering the client's premises, any sensory impairments etc. This information allows the agency to design an individualised Care Plan which takes these matters into account, allowing for greater autonomy and independence together with input from the client.

## **Needs assessment**

Where an assessment has been performed by a third party (Local Authority, PCT, Health Trust etc.) this is used together with the branch assessment and is the key part of the process, and this form invites an initial discussion between the client and the needs assessor on matters such as the client's own assessment of their physical and mental health,

disabilities or impairments, and the client's own ideas about the support they need, how it should be delivered, when, etc. The form goes on to discuss a variety of tasks associated with daily living, such as dressing, personal hygiene, food and drink, housekeeping, leisure etc

### **Client's risk assessment**

This part of the assessment discusses mainly health and safety issues relating to the client (as opposed, for example to health and safety issues relating to the client's home, electrical equipment, hazardous substances etc, which are dealt with separately), and examines slips, trips and falls, aspects of the client's chosen lifestyle which might present hazards, the potential for abuse or exploitation, risks to others, administration of medicines, manual handling and transfer etc

## INFECTION CONTROL

### Hand Washing

Good basic hygiene practices should be followed at all times including thorough hand washing whenever necessary. Hand washing is considered the single most important measure in infection control. Hands should be washed:

1. At the beginning and end of a span of duty.
2. Prior to serving meals and drinks.
3. After general patient contact.
4. After handling potentially contaminated articles even when gloved
5. After removing articles of protective clothing

All rings, jewellery, wrist watches etc should be removed prior to working in a clinical area and washing. Soap or cleaning agent must come into contact with surfaces of hands, the palms, back of the hands, between fingers, nails and wrists. Once washed, hands should be rinsed and dried thoroughly.

If you have any wounds or moist skin conditions, ensure they are covered with a water proof dressing. Blue dressings must be used by those involved in food preparation.

Invasive procedures, dressing wounds or dealing with clinical waste should be avoided by members who have most lesions (such as eczema) on their hands.

### Personal Hygiene

As well as ensuring hands are cleaned thoroughly, it is important to remember personal hygiene. Health Care workers by the nature of their work have close contact with clients during toileting, bathing, dressing and assisting clients out of bed and with their grooming. Micro-organisms are present on all living things so it is possible that with close contact with both client and health care worker can become contaminated with each other's micro-organisms. For this reason all health care workers should observe basic personal hygiene standards, namely:

- Clean uniform daily
- Shoes cleaned regularly
- Pens, watch, scissors cleaned regularly (these have been known to harbour micro-organisms)

- Personal body hygiene
- Long hair tied back
- Finger nails should be short and clean, without nail varnish, in order to prevent injuries to patients or cross infection.
- Dangling earrings should not be worn as they may cause serious injury to the wearer

It is possible to identify clients who may spread infection to others, so universal precautions to prevent and reduce the risks to health care workers and clients were introduced by the Department for Health (1990).

### **Universal Precautions**

The term Universal Precaution means undertaking routine safe working practices to protect staff and patients from infections by blood and body fluids. Universal Precautions, although originally aimed at protection against infections such as HIV and Hepatitis viruses, may also be used to control the spread of all infections.

- All health care workers who come into contact with patient's blood/body fluids may be at risk from blood borne viral infections such as HIV or Hepatitis.
- It is not always possible to identify people who are positive to HIV or Hepatitis, therefore precautions to prevent the spread of infections must be followed at all times when care is provided to clients. This includes older clients. 10% of the elderly population carry HIV. 1% of the population carry Hepatitis B virus (this figure may be higher in heavily populated areas).
- The most likely means of transmission of these viruses to health care workers is by inoculation of infected blood from sharp injury or by blood splashing into broken skin.

Gloves and aprons should always be worn when dealing with patients' body waste (urine, faeces and vomit), soiled linen and open wounds. Gloves and aprons should be disposed of between each procedure and hands washed thoroughly.

### **MRSA Methicillin Resistant Staphylococcus Aureus**

There has been a lot of confusion regarding the bacteria known as MRSA. Strains of staphylococcus Aureus resistant to Methicillin (antibiotic) were first described soon after the introduction of this antibiotic. This bacteria known as MRSA poses a significant threat to the frail and elderly as it is capable of rapid spread and causes serious infections. A high proportion of healthy people in the community carry these bacteria in their nose and throat with no ill effects.

The most significant transmission of MRSA is via direct contact by hands that have become colonized with the bacteria. MRSA is capable of colonising on beds, curtains, furniture, baths, bidet taps, urine jugs, and foam mattresses and staff uniforms.

- Clients with MRSA can be cared for in the community or at home with very little risk to healthy adults provided staff follow hygienic precautions such as good hand washing techniques.
- If caring for a client in their own home, ensure you wear gloves and an apron. Always wash your hands thoroughly after contact with the client. Equipment such as commodes or bowls should be cleaned with detergent and hot water then dried properly.
- Clothes and bedding should be machine washed on a hot wash setting.
- For clients who need to attend hospital and have, or are known to be carriers of MRSA, it is essential that the hospital is informed.

## **HIV & AIDS**

The Department of Health Occupational Guidance (April 1993) 'Aids-HIV infected Health Care Workers; Guidance on the Management of infected Health Care Workers' in particular section 5.1, of the document defines the responsibilities of employers including Agencies that:

Health Authorities and NHS Trusts, must bring to the attention of new and existing Health Care Workers including Agency Staff and independent contractors, the Professional Regulatory Bodies notices of ethical responsibilities and occupational guidance for Aids-HIV Infected Health Care Workers

## **GUIDANCE ON THE MANAGEMENT OF HIV/AIDS INFECTED HEALTH CARE WORKERS**

Kaidy has a responsibility to inform all our staff as summarised in the key recommendations below

- All Health Care Workers should routinely follow the existing Department of Health general infection control policy and adopt safer working practices to prevent the transmission of HIV infection
- All Health Care Workers have an ethical duty to protect patients. Those who believe they may have been exposed to the HIV in their personal life or during work must seek advice and if appropriate, diagnostic HIV antibody testing
- HIV infected Health Care Workers should not undertake procedures that may place patients at even a remote risk of infection. These procedures are defined as exposure prone invasive procedures(EPP)
- All Health Care Workers found to be infected must seek appropriate medical and occupational advice and those who perform or assist in exposure prone invasive procedures must obtain further advice in their work practices which may need to be modified or restricted to protect patients. The appropriate advice may be sought from the relevant Occupational Health Department at your hospital
- Health Care Workers who are found to be HIV positive and who have performed EPP whilst infected must cease these activities immediately and inform their employing authority so they can decide what if any action is necessary
- Personal Physicians or Occupational Physicians, who are aware that infected Health Care Workers under their care have not sought or followed advice to modify their practice, must inform the employing authority and appropriate body. Where a Health Care Worker is not member of such a body the Physician will only inform the employing authority
- All matters arising from and relating to the employment of HIV infected staff will be coordinated by an Occupational Health Physician

- Kaidy respects its duty to keep information on health confidential and is not legally entitled to disclose that a member of staff has HIV infection, except where staff member consents, unless disclosure of such information is in the public interest. A decision to disclose such information must be carefully weighed. Those making such a disclosure may be required to justify their decision.

HIV (Human Immunodeficiency Virus) is a virus that affects the immune system breaking down a person's defence against infections. The person develops severe disease due to generalised infections with bacteria, referred to as full blown AIDS (Auto Immune Deficiency Syndrome). Transmission is mainly by infected blood, sexual intercourse or from mother to child during pregnancy or at child birth.

The main risk groups are:

- Homosexuals – no protection during sexual intercourse
- Intravenous drug abusers – sharing needles
- Health care workers – very rare: infection via needles/sharp injury or splashes of blood from HIV/AIDS infected patients
- Haemophiliac and blood transfusion recipients (before 1995)
- The sexually promiscuous – no protection during sexual intercourse
- Children born to HIV-infected mothers – infection transmitted when the baby is in the uterus or at childbirth
- Heterosexual contacts of HIV-infected individuals – no protection during sexual intercourse

Be aware that older clients could be infected with HIV or have AIDS and take the necessary precautions when handling blood and body fluids.



## **HEPATITIS**

Hepatitis is a virus that causes inflammation of the liver. There are different types of strains – A, B, C, D, E

Hepatitis A – transmitted via the faecal-oral route from person to person

Hepatitis B – transmitted via blood or semen, blood transfusions, sharing needles

Hepatitis C – transmitted as B

Hepatitis D – transmitted as B – occurs only in patients who have Hepatitis B

Hepatitis E – transmitted via the faecal-oral route and person to person – type of Hepatitis caused by disasters (contamination of water supplies)

As with all other infectious diseases precautions should be taken when handling blood and body fluids.

## **Disposal of Clinical Waste**

Disposal of clinical waste is governed by the Environmental Protection Act (1990) which influences both local and national practice. You must ensure that you dispose of waste using the correct bags when working in hospitals, nursing and residential homes.

- Black plastic bags – normal household waste
- Yellow plastic bags – clinical waste arising from direct patient care
- Brown cardboard boxes – aerosols and glassware
- Red plastic bags – foul and infected linen
- Clear plastic bags – non-infected linen

## EQUAL OPPORTUNITIES POLICY

The Company's objective is to maintain operational standards so that all its employees and employment applicants are treated equally, irrespective of race, sex, sexual orientation, religion, disability, age, gender reassignment, marital status or ethnic origin. Employees are instructed to ensure the following:

1. There shall be no discrimination in respect of race, sex, sexual orientation, religion, disability, age, gender reassignment, marital status or ethnic origin.
2. Recruitment, promotion, training, development and redundancy shall be determined on capability and merit only.
3. All employees have personal responsibility for the practical application of this Policy, which applies to the treatment of customers, suppliers and the general public as well as to fellow employees.
4. Any employee, manager, supervisor and director that is involved in recruitment, promotion or training has specific responsibility for the practical application of this Equal Opportunity Policy.
5. In the event that an employee considers that he/she has been the subject of unfair discrimination, or any form of harassment or victimisation, the employee should refer to the Company's Grievance Procedure.
6. Any employee or director who has been determined to have committed an act of unlawful discrimination shall be subject to disciplinary action according to the Company's Disciplinary Rules and Procedures.
7. If there is any doubt about the terms of this Policy or the application thereof an employee should consult The Proprietor

Please note – Clients have a right to choose a person of either sex to undertake nursing and personal care, provided their objections to the other sex are reasonable.

Behaviour which is in contravention of the equal opportunities policy will be treated as misconduct and result in your removal from Kaidy's register.

You must venture to meet the needs of our diverse and multicultural society.

Kaidy gives fair consideration to all applicants solely on suitability and qualification for the post applied for regardless of age, creed or colour.

## HEALTH AND SAFETY POLICY

### Policy Statement

*Section 2 of the Health and Safety at Work Act 1974* places a legal duty on Kaidy to ensure, so far as is reasonably practicable, the health, safety and welfare at work of all members of staff.

It is the policy of Kaidy to observe the requirements of the Health and Safety at Work Act 1974 and any subsequent legislation or regulations. To this end the Health and Safety Policy will be reviewed and amended as necessary.

It is Kaidy policy to provide and maintain safe and healthy working conditions, practices and equipment for all of our staff. Kaidy will provide information, training and supervision as may be necessary for this purpose.

It is our policy to listen carefully to any views of the staff or of the care team in relation to Health and Safety issues.

### Members of Staff's Responsibilities

*Section 7 'Health and Safety at Work Act 1974'* places a legal duty on all people working on behalf of Kaidy 'to take reasonable care for the health and safety of themselves and of other persons who may be affected by their acts or omissions at work'

*Section 8 'Health and Safety at Work Act 1974'* states that 'No person shall intentionally or recklessly interfere with or misuse any item provided in the interests of Health, Safety and Welfare'.

*Regulation 12 of the 'Management of Health and Safety at Work Regulations 1992'* further extends their responsibilities.

“Every member must use machines, equipment, dangerous substances, transport equipment, means of production or safety device provided by the employer in accordance with the training and instructions received, (whether this is written or verbal)”

Every staff member will be instructed to inform the office

1. Of any work situation where it is considered that the training and instruction received by themselves or fellow staff could represent a serious and imminent danger to their health and safety, and
2. Of any matter where it is considered that the training and instruction received by them or fellow member could present a failure in protection arrangements for their health and safety, even where no immediate danger exists.

### Communication with Staff Members

It is Kaidy policy to listen carefully to any views of the members of staff in relation to Health and Safety issues and to ensure that supervision, instruction or training is made available.

Members who are suffering from any medical condition, or are aware of any unsafe conditions, which may affect the health and safety of themselves or other persons, or who require information regarding health and safety topics, should contact the office.

### Safe Working Guidance

A copy of all Kaidy Policies and Procedures will be found in the Office

### Guidelines on COSHH

You will be provided with gloves and aprons for handling body or clinical waste in accordance with PPE 1992 regulations. Further information can be found in the Infection Control section of this handbook.

Infected and clinical waste must be disposed of in yellow bags for incineration sharps such as needles and syringes must be disposed of in accordance with the Environmental

Protection Act. Further information can be found in the Infection Control Section of this handbook.

- When you are using bleach or cleaning fluids, always wear gloves.
- If you splash cleaning chemicals into your eyes or on your skin, wash immediately and thoroughly with copious amounts of cold water. Wash eyes for at least 10 minutes and seek medical attention.
- Read the instructions on any hazardous substances and use in accordance with those instructions. Do not use any substances which are unlabelled.
- Any accident or incident to yourself or client must be reported to the office and an incident form should be completed at all times.
- Store all chemicals and cleaning materials in a safe place out of the reach of young children or confused clients.
- Never mix cleaning chemicals, or transfer them into another container.

#### Guidelines on Risk Assessment (see Safe Working Environment)

If you encounter any further hazards, for example, dangerous flooring, faulty electrical appliances or equipment, inform a responsible person at the establishment and report to the office and incident forms are to be completed.

#### Guidelines on Safe Working Environment

If you encounter any hazards or faulty equipment whilst working in an establishment report them to the person in charge.

#### Use of Electrical Equipment

If you are supplied with equipment to use whilst on duty, you must use it in accordance with the manufacturer's instructions. If you are unsure or do not know how the equipment is to be used, contact the nurse in charge.

If the equipment you have been supplied with becomes faulty or is damaged, it is your responsibility to inform the nurse in charge immediately.

Do not make any repairs or carry out maintenance work of any description unless you are authorised to do so.

Do not handle electrical equipment with wet hands.

Do not rely on your surgical rubber gloves to insulate your hands.

### Guidelines- Portable Electrical Equipment

It is your responsibility to ensure that you use a circuit breaker whilst working. Before using any electrical make sure you check the following

- The casing of the appliance should be in a reasonable condition i.e. not damaged.
- The cable should be held firmly into the plug with no wires exposed, plug itself should be in reasonable condition, not broken.
- The whole length of the cable leading from the appliance to the plug should be in a good condition, not frayed, broken, cracked or taped up.
- The cable should be held firmly and securely into the appliance itself, with no coloured wires visible at the point of entry.
- The coloured wires inside should not be visible anywhere along the cable.
- The on/off switch should work properly and not be damaged or loose.

Do not use any electrical appliance that has a defect. Inform either the person in charge of the Unit or the Home.

Do not attempt to repair a blown main fuse. Do not make any repairs or carry out maintenance work of any description unless you are authorised to do so.

If your client or any other person is electrocuted, do not touch them. Isolate the supply of electricity first (turn off at the mains). Call the emergency services.

Follow instructions for collapsed client only when the electricity supply has been isolated (turned off).

### Guidelines on Fire Prevention and Evacuation

In order to survive a fire needs oxygen and fuel.

Some of the main causes of fire in the home are:

- Faulty electrics
- Open fires
- Gas fires
- Unattended cigarettes
- Clothes drying too near a source of heat

Fire guards should be used where available for the elderly or children. If your client does not have a fire guard and you fear for their safety, inform the office or Care Manager.

Free standing heaters (liquid gas, paraffin or electric) must be placed where they cannot easily be knocked over or tripped over.

Ensure matches are kept out of the reach of children or confused clients and make sure that cigarette ends are put out properly.

Always keep furniture, papers, drying clothes, tea towels etc., away from a direct source of heat, e.g. gas or electric fires and cookers.

### Evacuation

Fires spread very quickly. It is the smoke from the fire that kills. If you see or suspect a fire, act immediately.

Raise the alarm by breaking the glass panel of the nearest fire alarm point or phone the emergency services.

Tackle the fire with the nearest appropriate fire extinguisher, only if it is safe to do.

When working in establishments ensure you are aware of the local fire procedure.

### Guidelines - Oxygen Cylinders

A care plan will detail all instructions for clients receiving oxygen therapy.

You are expected to follow the following instructions:

- Not to clean oxygen cylinders.

- To ensure oxygen cylinders are stored in a cool place away from direct heat or naked flame
- Never to allow clients to smoke whilst receiving oxygen therapy
- To check the setting on the flow meter unless instructed to do so
- To ensure the oxygen mask is clean
- To ensure there are no kinks in the tubing from the oxygen cylinder to the client's mask

If you encounter any problems with the care of a client receiving oxygen therapy, contact the nurse in charge or report to the office.

If you suspect an oxygen cylinder is leaking (you will hear a loud hiss sound) report to the nurse in charge and call the supplier immediately.

Establishments will have their own procedures to follow. Ensure you are aware of them.

#### Guidelines on Personal Protective Equipment

Establishments such as Hospitals and Nursing/Residential Homes are required to supply you with gloves, aprons and any other protective equipment necessary to carrying out your work under the Personal Protective Equipment Regulations 1992.

#### Guidelines on Reporting Accidents and Notifiable Diseases

You are responsible for reporting any incident/accident or dangerous occurrence immediately to the office.

Any accident to you or your client whilst working must be reported to the nurse in charge and documented in client's care plan and the accident form completed.

You must ensure that you have documented any injury to yourself in the accident book in the office.

If you have a Notifiable disease, you must report this to the office. You must not carry out duties for Kaidy during the period you have a Notifiable disease as you will put clients at risk.



### Dealing with Emergencies

If a client collapses whilst you are attending to them, ensure your safety, call client by name, press or pull the emergency bell in the room (most establishments have emergency call bell). You report to the nurse in charge. Most establishments have their own procedure. Make sure you are aware of this.

## UNIFORM POLICY

<b>General Appearance</b>	<b><i>Rationale</i></b>
<p>Hair must be within the normal colour range, clean, and well groomed. It should be worn in a style above the collar line and away from the face. Long hair must be fastened discreetly with clear, navy or black elastics/slides, which are not a hazard.</p>	<p>People may use general appearance as a proxy measure of competence</p>
<p>Male staff should be either clean-shaven or have a well groomed beard or moustache.</p>	<p>Patients/clients generally prefer to be treated by staff with tidy hair and a neat appearance.</p>
<p>Fingernails must be short, clean and neat. Artificial nails and/or nail varnish must not be worn (including clear)</p>	<p>False nails harbour micro-organisms and can reduce compliance with hand hygiene. Long nails are more difficult to keep clean and may scratch patients.</p>
<p>No jewellery is permitted (including bracelets, bangles and necklaces). Some Trusts may allow plain stud earrings and plain wedding rings without stones. Jewellery for other piercings (nose, tongue etc) should not be worn.</p> <p>When a member of staff has a hidden medical condition or allergy which requires the wearing of a MedicAlert identification system a MedicAlert necklace may be worn but not a MedicAlert bracelet.</p> <p>Religious headscarves should be tied closely to the head and fastened securely and discreetly. They should be shoulder-length or neatly tucked in. When worn with uniform they should be either black or navy.</p>	<p>Jewellery may be hazardous and inadvertently pulled by confused patients/clients, babies and young children.</p>
<p><b>Personal Hygiene</b></p> <p>All Staff must maintain a good standard of personal hygiene. Make-up, perfume and after-shave should be minimal and unobtrusive.</p>	<p>Maintain a professional appearance. Some scents can cause adverse reactions and patients/clients may find smells offensive or nauseating.</p>
<p><b>Identification Card</b></p> <p>Kaidy photo ID card must be worn at all times while you are involved in the provision of services or on any assignments. ID cards must be clipped on or carried at all times (not around the neck to prevent injury or</p>	<p>Patients/clients and their relatives wish to know who is caring for them and expect to use appearance to do this. To reassure patient /clients and when caring for</p>

<p>dangling when delivering patient care). Any loss of ID cards should be reported immediately. Replacement ID card should be obtained from the office.</p>	<p>them.</p>
<p><b>Bare Below Elbows</b></p> <p>Bare below elbows means no wristwatches, no bracelets or wristbands (including those of religion), no rings (other than a wedding band in some Trusts). Long sleeve tops must not be worn underneath uniforms. Uniform tunics are available with elbow length with sleeves as well as short sleeves.</p>	<p>Hand and wrist jewellery can harbour micro organisms and can reduce the compliance with hand hygiene.</p> <p>Cuffs become heavily contaminated and are more likely to come into contact with patients/clients.</p>
<p><b>Footwear</b></p> <p>Plain black shoes that cover the whole foot and have low heels. The soles should be noiseless and non-marking. They should be clean and in a good state or repair.</p>	<p>Incorrect footwear may endanger both the patients/client and student especially in manual handling situations. Closed toe shoes offer protection against spills. Soft soles promote patients/client rest.</p>
<p><b>Female</b></p> <p>Blue striped tunic bearing the Kaidy logo and navy blue/black trouser. Black or natural coloured tights/stockings.</p> <p>Clothing worn underneath the uniform should not be visible (eg, logos on vest).</p> <p>A navy blue cardigan may only be worn when not in ward area, except on night duty where it should be removed when providing direct care.</p>	<p>Professional appearance promotes public confidence.</p> <p>Patients/clients and their families expect staff to have a neat appearance. Anything else may indicate lack of professional pride and poor personal standards.</p> <p>Some clothing (or lack of it) may offend patients/clients and their families.</p>
<p><b>Male</b></p> <p>White Tunic/Blue tunic bearing Kaidy logo and navy blue/black trousers. The top buttons/studs must be fastened. Black or grey socks.</p> <p>Clothing worn underneath the uniform should not be visible (e.g., logos on vest)</p> <p>A navy blue cardigan may only be worn when not in ward areas, except on night duty where it should be removed when providing direct care.</p> <p>Uniform should be in good order. Please re-order as needed.</p>	<p>A professional appearance promotes public confidence.</p> <p>Patients/clients expect staff to have a neat appearance. Anything else may indicate lack of professional pride and poor personal standards.</p> <p>Some clothing (or lack of it) may offend patients and clients.</p> <p>Ties are rarely laundered but worn daily and have been shown to be colonised by pathogens.</p>

<p><b>Equipment</b></p> <p>Only scissors, one red pen and one black pen should be carried on the person. Items should not be carried in a breast pocket but in a hip pocket. A fob or wristwatch may be pinned to the front of uniform.</p>	
<p><b>Laundry</b></p> <p>Kaidy Staff are to have three sets of uniform.</p> <p>A clean uniform must be worn every day.</p> <p>Change immediately if uniform or clothes becomes visibly soiled or contaminated.</p> <p>Clean washing machines and tumble-driers</p> <p>Clothing should be changed daily and laundered at the highest temperature allowed (ideally 60°C).</p> <p>'Dry-clean only' or clothing to be washed at low temperatures should be avoided.</p>	<p>A wash for 10 minutes at 60°C removes most micro-organisms.</p> <p>Visible soiling or contamination may be an infection risk. It is also likely to affect patient/client confidence.</p>
<p><b>Travelling to from/work</b></p> <p>Kaidy Staff are not permitted to wear uniform outside their work area. Therefore Kaidy Staff must change into and out of uniform at the work area and store their belongings appropriately. This includes going off the premises for breaks.</p>	<p>Whilst there is no evidence of an infection risk from travelling in uniform, there is evidence that patient confidence may be undermined. Likewise, shopping or undertaking similar activities in public has been shown to undermine public confidence.</p>

## FIRE SAFETY POLICY

Nearly all Homes and Hospitals have been designed to meet all current standards in fire prevention, fire control and fire alarms. However, fires do occur and in this event the following instructions must be followed.

Please be sure of the fire policy in any area where you are sent to work.

Obey the smoking / non-smoking policy.

### 1. IF YOU DISCOVER A FIRE

- Immediately find the nearest red box and press the alarm bell.
- On hearing the alarm, the person in charge will telephone the fire brigade by dialling 999 stating the name, address and telephone number of the Home or Hospital/Premises.

- Move all patients/residents/staff/visitors away from the immediate location of the fire and in any case into the next compartment/zone.
- Once everyone has been evacuated from the building proceed to the external assembly point.

IF YOU HEAR THE ALARM SOUND

- Close all windows in your immediate area.
- Proceed to the assembly point or where the fire panel. This will show the zone area where the fire is located.

GENERAL

- Do not use the lift.
- Once assembled out of the building a roll call should be taken by the person in charge

## MEDICINE POLICY

### POLICY

Only trained nurses are allowed to give medication. Under no circumstances is any Kaidy HCA allowed to give medication.

Kaidy totally endorses the NMC guidelines on the administration of medicines. Kaidy policy also states

- Nurses must establish and adhere to the policy of the NHS Trust or Nursing home with their direct supervisor at the start of any assignment
- Workers must be aware of the limits placed on them in administration of medicine
- Agency nurses should not undertake single handed administration of medicine
- Consent must be sought from patient before administering medication. If such consent is withheld, then the policy of the Trust or Home must be followed
- Any concerns about the patient, their health or medication should be reported to the person in charge
- We advise all nurses to complete the trust training /assessment before giving medication in that particular placement
- Any medication error must be reported immediately to the person in charge immediately.

### PROCEDURES AND GUIDELINES

The administration of all medicines by qualified nurses only shall be in accordance with statutory and local rules and guidance issued by their professional body.

Primary legislation concerning the administration of medicines is contained in the Medicines Act 1968 and the Misuse of Drugs Act 1971. Professional guidance is given in NMC Standards for the Administration of Medicines.

It is the responsibility of the qualified nurse to know the statutory professional and local rules governing the administration of medicines.

Hospital and Nursing Homes will have their own 'system' for administering drugs. It is each qualified nurse's responsibility to ensure that they are familiar with the system used within the establishment they have been assigned to. Please establish the policy for the administration and assistance with drugs with your direct supervisor.

## **General Administration of Medicines**

### **Agency nurses without appropriate additional training**

- Must not prescribe drugs or medication.
- Must not administer IV unless specific local training has been given.

Agency Nurses may not always be familiar with the patients in their care. Therefore, in order to ensure medicines are administered to comply with safe practice, Kaidy insists that all qualified nurses adhere to the following guidelines when administering medicines.

The nurse should be accompanied by a regular member of staff i.e. trained nurse, auxiliary, or care assistant within the 'assigned' establishment if identification bands are not worn by patients/ residents

- The nurse must check that each prescription shows the date, medicine name, dose, route of administration and administration times
- The nurse must be able to read and fully understand the prescription, have knowledge of the medicine and be able to calculate the dose.
- The patient's identity must be agreed either verbally with the patient/resident, member of staff or identification band or photograph.
- Any contraindications or change in the patient's clinical condition that may require the drug to be withheld must be noted. If necessary immediate advice should be sought.
- Ascertain that there is no previous history of sensitivity or allergies associated with the medicine to be given.
- Select the medicine, check the date of the medicine for expiration.
- Check the dose, form and route of administration.
- Check that the patient has not already received the dose which is about to be administered.
- Ensure the nursing/medical notes are consulted prior to administration of any PRN medication.
- Administer the medicine and immediately record the date and time the dose is given.
- The nurse should remain with the patient until the medicine has been taken.

Note – Any difficulties encountered with the above should be reported to the office.

## **Administration of Controlled Drugs**

The procedure must involve the nurse and one other care giver.

- The procedure for the administration of a Controlled Drug is the same as for other medicines with the following instructions added:
- Prior to administration the stock is checked, the dosage removed and the remaining stock recorded in the Controlled Drugs Book. The patient name, date, time and dosage given, together with a full legible signature of both the witness and the nurse who administered the drug.
- If a Controlled Drug is wasted or only partially used, it must be destroyed in the presence of the witness and a record made.

## **Crushing Medication**

The principle for crushing of medication applied if your patient/client are unable to swallow their tablets or capsules whole and the crushing or opening of capsules is often the method to be used to administer such medication. You are advised not to crush any medication or open capsules not specifically designed for the purpose as by doing so the chemical properties of the medication could be altered. There are also legal issues surrounding the crushing of tablets.

If patient/clients are unable to swallow tablets or capsules, you should discuss this with the authorised prescriber and pharmacist. An alternative, such as a liquid should if available be prescribed instead. If there is no option but to crush the medication, it must be done with the knowledge and agreement of the authorised prescriber and pharmacist and the consent of the patient/client taken.

## **Recording**

The person administering the medicine is responsible for completing the administration record.

- Clear accurate and contemporaneous records must be made on all administration of medicines, either administered or withheld.
- Where medicine is refused by the patient, i.e. the patient refuses to administer or allow administration of a particular medicine, the nurse must assess whether the refusal compromises the patient's condition, or the effect of other medicines and contact the prescriber. A clear and accurate record must be made of the refusal on the drug chart and the action taken by the nurse in the nursing notes.



## **Drug Errors**

If an error in the administration of a medicine is made, e.g.

- A patient is given a medicine which has not been prescribed
- An incorrect dose of medicine is given to a patient
- A patient is given the correct medicine but at an incorrect interval
- A medicine is administered by the wrong route
- There is any unplanned omission of a drug to a patient

The nurse must make a record of the occurrence in the patients nursing notes, a report must be written and the Senior Nurse/Manager/Matron informed of the error. Please draw a line neatly over the error. The nurse is to complete an incident form immediately.

If the wrong drug is administered to a patient/resident or if a drug is administered to the wrong patient, twenty four hour observation should be carried out and recorded in the patient's nursing notes. If the wrongly administered drug is detrimental to the patient and likely to cause any side effects the patient's doctor must be informed immediately.

Any drug error must be reported immediately to the office along with a written report of the incident.

## **Verbal Orders**

Each nurse must ensure they are aware of the local policy on verbal orders as some establishments do not under any circumstance permit the taking of verbal orders over the telephone.

Only in emergency and exceptional cases may a verbal order for the administration of a drug be accepted if the prescribing doctor is unable to attend personally. The instruction may only be accepted by the trained nurse (not via auxiliary or carer) who must immediately record the instruction on the patient's/resident's drug chart and annotate it 'verbal order'. After the order has been written down, it must be read back to the doctor checking the patient's name, drug, dosage, frequency, and method of administration (this verbal conversation must be witnessed by one other care giver and the drug chart signed by the witness).

All communication must be written and signed within the Client's Care Plan.

### **Unauthorised Administration or Misuse of Medicines**

Within Nursing homes it is unacceptable practice to administer medicines prescribed for one resident from their monitored dose system to another resident, even if the drug and dose are the same.

Unauthorised use of medicines by staff e.g. misappropriation, self medication, is a serious offence. Any nurse who is found to contravene this clause will be removed from the Kaidy register for gross misconduct and reported to the police.

### **HEALTH CARE ASSISTANTS**

Under no circumstances are Health Care Assistant are allowed to administer drugs.

### **GUIDANCE OR CLARIFICATION OF POLICY**

If you need guidance or clarification on any part of this policy, please contact the office or log on to the Department of Health's website ([www.dh.gov.uk](http://www.dh.gov.uk)).

## DRUGS POLICY

### **Introduction**

Kaidy Employment Agency is a responsible employer and we take our obligations to our employees very seriously. This is why we have set out this policy to help us ensure the health, safety and welfare of our employees and to help us comply with our legal duties. The use of non prescribed drugs is not only dangerous but also illegal under criminal law.

- Section 2(2)(e) of the Health and Safety at Work Act 1974 places a duty on employers to provide a safe and healthy working environment.
- It is an offence to supply, produce, and offer to supply or produce controlled drugs.
- The Misuse of Drugs Act 1971 makes it an offence for the occupier of premises to permit knowingly the production or supply of any controlled drugs or allow the smoking of cannabis or opium on those premises.
- It is also an offence to aid or abet any of these offences.

Any reference in this Policy to a non-prescription drug refers only to controlled or illegal substance and does not refer to medicines, supplements and similar substances that are legally and commercially available in the United Kingdom.

### **Aims of the Policy**

This policy aims to:

- Comply with the Company's legal obligations to provide a safe and healthy working environment for all staff.
- Comply with all of the requirements imposed by law.
- Raise awareness of the dangers and penalties associated with the use of controlled drugs.
- Guarantee the right of all staff to work in an environment unaffected by controlled drugs.
- Provide support to staff whose lives are or who have been affected by the misuse of controlled drugs.

## **Health and Safety**

Controlled substances often possess side effects that could not only adversely affect employees health but that of their colleagues at work as well as their performance. Employees should be aware that anyone under the influence of controlled drugs is a risk to everyone around them and should be alert to possible signs of drugs abuse. Such indicators commonly include:

- Sudden changes in behaviour;
- Confusion;
- Irritability;
- Fluctuations in mood and energy;
- Impairment of performance; and
- Increase in short term sickness absence.

Employees should report any concerns they may have about a colleague displaying any or all of these symptoms to The Head Nurse but should not under any circumstances approach the person displaying the symptoms or discuss their concerns with any other colleagues.

## **Prohibition**

- No non – prescription drugs are allowed to be consumed in or brought onto company premises, land or vehicles at any time by any person irrespective of their status in, or business with, the Company.
- The prohibition of non – prescription drugs extends to all activities carried out by staff whilst they are at work. These activities include but are not restricted to driving on company business, when on call or standby duties or when on trips for company business, training or social events.

## **Disciplinary Action**

A breach of these rules will be defined as gross misconduct and it is likely that the employee in question will face summary dismissal.

## Principles

- If an employee is diagnosed as having a drug related problem the Company will treat it as a health matter. This does not however excuse the employee from any of the disciplinary matters that may fall within the scope of the Company disciplinary policy.
- All drug related issues will be dealt with in a constructive and sympathetic manner, and the person responsible for all such issues in the Company is The Head of Nursing who will also provide any interested employees with the details of where to seek further information and help.
- All requests for help will be treated in the strictest confidence and all information gathered as a result will be held in accordance with the Data Protection Act 1998.
- In the event that an employee following successful treatment for a drug related problem suffers a relapse the Company will not make provision for any further treatment and the employee in question will face summary dismissal.

If it is considered that the working environment or culture is the cause or a contributor to a drug related problem, the Company will take all reasonably practical steps to ensure a reduction of such problems.

## SMOKING POLICY

### Introduction

Kaidy Employment Agency is a responsible employer and we take our obligations to our employees very seriously. This is why we have set out this policy to help us ensure the health, safety and welfare of our employees and to help us comply with our legal duties. Smoking does not only cause serious damage to the health of smokers, but research has also shown that second hand smoke causes cancers, heart and respiratory diseases in non smokers as well.

- Section 2(2)(e) of the Health and Safety at Work Act 1974 places a duty on employers to provide a safe and healthy working environment.
- Section 2(2) of the Health Act 2006 prohibits smoking in all public premises including workplaces and vehicles.

### **Aims of the Policy**

This policy aims to:

- Provide a safe and healthy working environment for all staff, customers and visitors;
- Comply with all of the requirements imposed by law;
- Raise awareness of the dangers associated with tobacco smoke;
- Guarantee the right of non smokers to breathe air free of smoke; and
- Support staff who wish to give up smoking.

### **Restrictions on Smoking**

- Smoking is not permitted in any of the Company's premises, entrances, or grounds at any time by any person irrespective of their status in, or business with, the Company.
- All visitors, customers, contractors and deliverers are required to abide by the no smoking policy. Staff must inform all of the above of the policy although it must be stressed that staff should not put themselves at any risk in furtherance of this policy.
- Smoking is not permitted in any company vehicles or in any vehicles being used or hired for Company business.
- No smoking signs must be displayed by the Company in all of its premises and vehicles.
- Smoking on Company premises or in Company vehicles constitutes an offence under the Health Act. In the unlikely event that a member of staff does not comply with the Company's No Smoking Policy disciplinary action will be taken in accordance with the Company's disciplinary policy.

### **Support for Smokers**

- Reasonable requests from staff for time to attend smoking cessation groups will be treated sympathetically.
- The Proprietor is responsible for maintaining the policy and will provide staff who wish to give up smoking with details of where to seek help.
- All requests for help will be treated in the strictest confidence. Written information will be stored in accordance with the Data Protection Act 1998.
- Nothing in this policy should be taken as excusing an employee if their conduct falls within the scope of the Company disciplinary procedures.

## PROTECTION OF VULNERABLE ADULTS POLICY

An adult is a person aged 18 years or over. Vulnerable adults could include elderly and frail persons, those with learning and/or physical disabilities. Vulnerable adults are those adults who rely on others to care for them.

Abuse is ill-treatment which causes significant harm and can take place in a variety of settings which include a nursing or residential home or hospital. This may be in the several forms, including physical, sexual, psychological, financial, neglect and acts of omission.

Child abuse is common and well known but the abuse of adults is not well pronounced even though it happens.

Every adult has the right to:

- Live a life free from threat or fear
- Be treated with respect and dignity
- Have their choices respected, give informed consent and not forced to do anything against their own wish

### DEALING WITH ALLEGATIONS OF ABUSE

Abusers can be the carers, spouse, friends, relatives, neighbours or volunteer workers.

Types of abuse in relation to the policy on safeguarding children, young people and vulnerable adults including:

- **Physical:** Hitting, slapping, pushing, giving medication inappropriately, poor moving and handling, unreasonable restraint.
- **Psychological:** Verbal or non verbal behaviour that disrespects the patient e.g. mocking, ignoring, coercing, threatening or denying privacy, stressing people out.
- **Financial or Material:** Money or property taken away without consent or under pressure, borrowing or inappropriate handling or accounting for a client's money
- **Sexual:** Unwanted touching, kissing, sexual intercourse, sexual discussion that has no relevance to care
- **Neglect and acts of omission:** Failure to attend to personal hygiene, failure to communicate, not giving medication at the appropriate time, patient losing weight, patient gaining too much weight, withholding food.

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- **Discriminatory:** Includes racist, sexist, or abuse based on a person's disabilities and any other form of harassment, slurs or similar treatment.

## SIGNS OF ABUSE

Always be alert to the signs of abuse and remember abuse can be in several forms:

- **Physical and Sexual:** Look for signs of bruising, bite marks, cigarette burns or marks that are not adequately explained. Clients who have been sexually assaulted may have soreness, bruising or bleeding around the genital area. The client may wince or withdraw from you when you touch them or they may hit out in an attempt to protect themselves.
- **Neglect/Deprivation:** The client may be dirty, have little food in the house, the heating may be switched off in winter and their clothing inadequate for the time of year. If medication is withdrawn the client may be in extreme pain or suffer ill health, effects of not taking their medication.
- **Psychological:** The client may be distressed, frightened, nervous, irritable or very withdrawn and reluctant to hold a conversation.
- **Financial:** stealing money, valuables, articles with sentimental attachment or any other personal belongings. Putting pressure on the client to have debts paid, to gain a loan or even be written into a Will. The client may appear worried, irritable, frightened or very withdrawn and reluctant to hold a conversation.

## PROCEDURE FOR CONCERN ON ABUSE

If at any time in the course of your duty, any form of abuse is noticed, or you suspect or believe a client is been or has been abused, please report immediately to the appropriate authority.

All case or suspected cases of abuse must be investigated.

Please follow this procedure

- Listen carefully and sympathetically
- Don't press the child or vulnerable adult to disclose all details
- Don't promise to keep secrets
- Explain what you will do next
- As an agency nurse or carer, report to the Nurse in Charge or take a whistle blowing action.
- Keep your agency informed
- The Nurse in Charge will report to the Manager



- The Manager will contact the nearest Social Services or the Police if there is a serious crime. Identify the offender and the witness, classify the nature of the abuse, note the date, time and place. Write the details of the support which is available.
- If there are signs of physical injury, she will call 999 and take the patient to the hospital
- If no injury a copy of the incident will be sent to the CSCI and must be properly documented in the Accident/Incident report book

If you have any suspicion of abuse, whatever it might be, report the fact to your Manager in the place of work and Kaidy IMMEDIATELY.

Remember abuse can often result inadvertently from you or other carers well intentioned actions. Undue pressure on a client to 'hurry up' or 'not to wet the bed again' is a form of abuse which can deeply upset or confuse vulnerable clients.

Any member found to be abusing clients will be removed from the Kaidy register and reported to the relevant authority.

## HEALTH & SAFETY

### YOUR HEALTH & SAFETY

Health & Safety law applies equally to employers, employees and the self-employed and Agency Workers. As an Agency Worker you have a general duty to ensure that your work activities do not endanger yourself or others. The Hospital, clinic, Care home or owner of a private house also has a general duty to ensure that the work environment is itself free from any dangers to health or safety.

### HEALTH & SAFETY GUIDANCE NOTES

Kaidy strives to always ensure the following in regards to Health & Safety:

- That you have the necessary qualifications, experience, skills and capability to carry out the assignments that you will be undertaking.
- That any risks to health, in connection to the use, storage and handling of substances hazardous to health, are identified through an assessment of their potential effects, as required by the latest edition of The Control of Substances Hazardous to Health (COSHH) Regulations, and that necessary control measures are implemented.
- That you are given sufficient information, instruction and training to ensure your own Health & Safety.

- That consideration is given to Health & Safety factors when equipment is procured or new services obtained, or when changing procedures or work patterns and that all necessary safety precautions are taken and that necessary safety instructions have been understood.

Your personal responsibilities as an Agency Worker with Kaidy include:

- The duty to comply with all existing safety instructions and directions.
- The duty to use the means and facilities provided for health and safety in a proper manner.
- The duty to refrain from the willful misuse of, or interference with, anything provided in the interests of health, safety and welfare and any action that may be construed as dangerous.
- The duty to report any potential hazards or dangerous occurrences that may cause harm to others.

## **SAFETY INSTRUCTIONS**

Here are a few safety instructions to abide by at your Work place:

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

- If you, or the equipment you operate, are involved in an accident - regardless of how minor - report it immediately to your branch. If necessary, get First Aid attention immediately. You should also report near misses to your branch.
- Ensure that all equipment (e.g. hoists) has been maintained properly and that documentary evidence is supplied.
- Obey all health & safety rules, signs and instructions. If you are unsure as to what they mean ask.

## **IDENTIFYING AND REPORTING HAZARDS**

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

A suitably trained Assessor will carry out a Risk Assessment for each client. Any Agency Worker, delivering care to people in their own homes, should also look out for hazards and should report them immediately. Hazards can occur at any time and can include broken doors and windows, carpets or rugs that present a tripping hazard, dangerous chemicals, and faulty electrical equipment such as exposed wires.

### **How to Report Back**

Call your bookings team and describe the hazard that you have identified. You may be asked to complete a Risk Assessment Form, which will be provided for the purpose.

## **ACCIDENT REPORTING**

Agency Workers are responsible for ensuring that all incidents or accidents that relate to the provision, control and maintenance of Health & Safety in the workplace are reported to the client and your local Branch Manager (and/or to the Local Authority in the case of serious accidents and/or dangerous occurrences). It is also important that the internal reporting procedure of the establishment is carried out e.g. recording the accident in the accident report book.

If you 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:

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- Fatal accidents.
- Major injury accidents/conditions.
- Dangerous occurrences.
- Accidents causing more than three day's incapacity for work.
- Certain work-related diseases.
- Certain gas incidents.
- If you suffer a needle stick injury you must attend to it 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 sharp injury (i.e injury from a needle prick) occurs you should do the following:

- Encourage bleeding by squeezing site of puncture wound, do not suck.
- Wash the wound with soap and water, do not scrub.
- Cover wound with waterproof dressing.
- Report incident to the Branch Manager.
- Report to OH Department during normal working hours.
- If the injury happens out of office hours report to A&E and inform the branch the next day.
- Document the circumstances that led to exposure

Counselling is available following these blood tests. Always report a needle stick injury even if it occurs with a 'clean' needle, via an incident report or accident book according to protocol.

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

Dangerous occurrences and serious, lost time injuries (over 3 days) must be reported to the Health and Safety Executive/Environmental Health Officer immediately and followed up by a Form 2508 within 10 days in line with RIDDOR. Failure to do so can result in a £5000 fine. Records must be kept. As a self-employed person you have legal duties under RIDDOR that require you to report and record some work related accidents. These include for example, deaths, major injuries, fractures, amputations, dislocations, loss of sight and lost time

injuries over 3 days. They must be reported to the Health and Safety Executive Incident Contact Centre.

## **COSHH**

The Control of Substances Hazardous to Health (COSHH) Regulations 2002 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 & Safety at work, legal duties under COSHH are laid primarily on the establishment in which you are working and it is their duty to see that proper systems of work and management are in place. Duties on Agency Workers include:

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

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

- The nature of the substances workers work with or are exposed to and the risks created by exposure to those substances and;
- The precautions workers should take.

Employers should give sufficient information and instruction on:

- Control measures and how to use them.
- The use of any personal protective equipment and clothing.
- Results of any exposure monitoring or health surveillance and;
- Emergency procedures.

Kaidy encourages all employees to inform their immediate superior of any areas of the health and safety policy that they feel are inadequate to ensure that the policy is maintained as a true working document.

## POLICY AND PROCEDURE ON REPORTING MISCONDUCT OF NURSES TO THE NMC

The NMC is the statutory body responsible for the regulation of Nurses. Kaidy follows the NMC's guide for employers and managers.

Where an incident has occurred which is and has not been the subject of criminal proceedings, Kaidy will follow the guidelines and report immediately to the NMC.

According to the NMC, the following are examples of what to report:

- Misconduct
- Lack of competence
- A conviction or caution
- Physical or mental ill health
- A finding by any other health or social care regulator or licensing body that a registrant's fitness to practise is impaired
- A fraudulent or incorrect entry in the NMC's register

Where there have been complaints about a nurse's fitness to practise, the following procedure will apply

- Kaidy will inform the nurse about the complaint verbally and in writing.
- Kaidy will then report the matter to NMC with the supporting evidence.

## COMPLAINTS REPORTING, HANDLING AND MANAGEMENT

Kaidy aims to provide an excellent service to our Clients. However we realise that sometimes things go wrong.

To ensure the service we provide matches our clients'/candidate needs to their expectations, we positively welcome comments and feedback. All complaints received from clients / candidate will be acknowledged in writing within 3 working days (by post or via email) on the receipt of the complaint.

Kaidy will investigate and interview all concerned, Kaidy undertakes to work with all parties applicable to an investigation and where necessary share findings of such investigations. A full written record of the nature of each complaint and details of the action taken as a result of the complaint will be kept on complaint file database for easy access.

Kaidy will make all reasonable endeavours to ensure that all complaints are resolved within fifteen (15) days of the complaint being notified to Kaidy.

In the event of complaint being made against a Temporary Worker, the Worker will be fully informed of the complaints relating to him/her and the worker will receive a copy of the complaint.

The Temporary Worker will be giving the opportunity to state his/her version of events and will be given seven (7) working days to respond to Kaidy in writing (by post, by hand or via email).

All responses will be shared with the complainant and Kaidy will take demonstrable action to ensure there is no recurrence of the act or omission complained of.

The client may at any time request Kaidy to provide the client with an update as to the progress of the resolution of the complaint.

The client will receive a written response from the Employment Business, detailing how the complaint has been resolved.

Where there is evidence of malpractice or the complaint is an event that requires notification, Kaidy will immediately notify CQC, The Scottish Care Commission or The Regulation and Quality Improvement Authority, The Police, Protection of Vulnerable Adults or Children and where applicable alert the Temporary Workers professional body. If necessary Kaidy will immediately exclude the Temporary Worker from its register whilst an investigation is in progress.

Kaidy has a system in place to analyze and identify any patterns in complaints and trend analysis is conducted continuously. Via our internal audit processes we will review all complaints and take action to prevent reoccurrence.

The complainant at anytime has the right to refer this matter for review to the Care Quality Commission, The Scottish Care Commission or The Regulation and Quality Improvement Authority.

## **DISMISSAL PROCEDURE**

- i.) *Verbal Warning* – Unsatisfactory performance will lead to a recorded verbal warning. This could be over the telephone or you may be requested to come into the Kaidy offices to meet with one of the Managers.
- ii.) *Written Warning* – A continued drop in performance will lead to a second warning which is written. This document will state reason for warning and will also serve as a reminder of the earlier verbal warning.
- iii.) *Final Written Warning* – If staff performance is still unsatisfactory a final written warning will be issued. Any misconduct after receipt of this warning will lead to immediate termination of your contract with Kaidy Employment Agency.





## ABUSE AND HARASSMENT POLICY

We aim to provide a good service to our clients; however we have to balance this with the welfare of our staff.

We will not accept any form of racial abuse or harassment towards our staff.

We will not accept any form of sexual abuse or harassment towards our staff.

We will not accept any form of racial or sexual discrimination towards our staff.

We reserve the right not to send our staff to those clients who harass our staff for any reason whatsoever.

## TRAINING & DEVELOPMENT

### Introduction

Kaidy Employment Agency recognises that members of staff are key to providing caring services of the highest quality to all our patients/ clients. The Company is therefore committed to the personal and professional development of all employees and aims to facilitate all staff in achieving their full potential.

As a condition of your employment with Kaidy you will be expected to undertake induction training to ensure that you carry out your duties in accordance with the current legislation.

### MANDATORY TRAINING

On an annual basis (i.e Every 12 months) with the exception of life support, which shall be renewed in accordance with the latest Resuscitation Council UK and the Client's guidelines, all training relevant to the normal duties the Agency Worker is expected to perform. These include:

- **Basic, Intermediate or Advanced Life support** (adult or paediatric, as appropriate). This training must be compliant with Resuscitation Council UK guidelines. Guidelines and a list of accredited trainers can be obtained from [www.resus.org.uk](http://www.resus.org.uk).
- **Complaints Handling.**
- **Conflict Resolution** (including but not limited to, **management of violence and aggression**).

- **Fire Safety**
- **Health and Safety at Work** (including but not limited to: **COSHH** and **RIDDOR**)
- **Information governance** (including but not limited to: The **Caldicott Protocols** and **Data Protection**)
- **Infection Prevention and Control** (including but not limited to: **MRSA** and **C. Diff**)
- **Lone Worker Training**
- **Moving and Handling**
- **Food Hygiene Awareness**

## **APPRAISALS**

Within the first six (6) months of your employment or engagement with Kaidy you will meet with our Senior Nursing practitioner for an individual performance review to discuss your standards of practice and any issues arising. This review shall then be conducted annually henceforth.

If as a result of appraisal there is any serious concern about the performance of the Agency Worker Kaidy may not deploy the worker until such time that the concerns about the performance of the Agency Worker are fully investigated and resolved. The appraisal would be deferred until the investigation is completed and resolved.

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

## **FRAUD AWARENESS**

Agency Workers are expected to be aware and vigilant regarding matters of fraud in the Work place and during the process of applying for work.

The 2006 Fraud Act is the guiding document that recognises fraud as a criminal offence. It states that a person is guilty of if they are in breach of the following:

1. Fraud by false representation
2. Fraud by failing to disclose information

### 3. Fraud by abuse of position

Fraud within the NHS is usually of 3 types:

1. Payroll Fraud: This includes payments to fictitious employees or fraudulent manipulation of payment; false or inflated travel expense claims, overtime or unsocial hour's claims, duplicate timesheets or timesheet claim for hours the Agency Worker did not work.
2. Requisition and Ordering Fraud: This includes accepting inducements from suppliers; ordering goods and services for personal use and collusion with suppliers to falsify deliveries or order supplies not needed.
3. Overseas Patients Fraud: People not resident in the UK getting unpaid treatment from the NHS through fraudulent means.

### **DOS AND DON'TS**

Here are some simple guidelines to follow if you suspect or aware that any fraudulent behaviour is taking place in the Work place:

#### **DO**

- Report your suspicions to someone with the appropriate authority and experience
- Deal with the matter promptly if you feel your concerns are warranted
- Make an Immediate note of your concerns

#### **DON'T**

- Be afraid to raise your concerns
- Try to investigate the matter yourself
- Convey your suspicions to anyone other than those with the proper authority
- Approach or accuse individuals directly
- Do nothing

For more information regarding fraud awareness and actions to take please give us a call to request a copy of our Anti-Fraud policy.

### **ADVOCACY**

Advocacy is defined as speaking up for, or pleading on behalf of another person or group.

- In practical terms this means ensuring that your clients are given information and the opportunity for input on any aspect of their own health care, and respect for legal and moral rights.
- Clients may require an advocate for such reasons as:
  - Illness
  - Learning disabilities
  - Limited knowledge, intimidation or embarrassment
  - Level of maturity
  - Where English is not their first language

## CHALLENGING BEHAVIOUR

What is considered challenging behaviour?

- Violence/aggression to others – biting, hitting, swearing, verbal abuse
- Self injurious behaviour – head banging, hand biting, eye poking
- Destructive behaviour – smashing windows, kicking doors, tearing clothes
- Repetitive behaviour – finger flicking, teeth grinding, arm flapping
- Disruptive/anti-social nuisance behaviour – stealing, exposing oneself, running away.

Clients with profound learning disabilities, clients in the later stages of Alzheimer's disease, or clients with dementia may exhibit varying examples of challenging behaviour.

There are two kinds of incidents you may encounter

- **Predictable behaviour** – by clients who regularly exhibit head banging, teeth grinding, swearing, exposing themselves etc. A procedure to deal with predictable behaviours will be written in the care plan. It is essential that members read the client's care plan to establish the procedure to follow.
- **Unpredictable behaviour** – by clients who do not normally exhibit display of challenging behaviour or violence. Where there is no written procedure in the care plan use the following guidelines:
  - Remember safety comes first. No one has the right to abuse you or attack you.
  - Make sure you are able to exit the room i.e. place yourself between the client and the exit route.
  - Be assertive not aggressive i.e. attempt to calm the person down, do not shout or argue with the client, never use physical punishment.
  - Talk calmly to the client; attempt to find out the problem.
  - If you are subjected to serious abuse or the threat of violence, leave. Ensure that the Office Manager is aware of the reasons and what care has been delivered. Provide the Office Manager with a written report of the incident.
  - Only in extreme circumstances may you use reasonable force to protect yourself or your client if you feel they are at risk of harm. Any physical intervention must be documented and reported immediately to the Office Manager.

### Other Concerns

- If you have any concerns regarding a change in your client's behaviour, report these to Office Manager.
- If you believe that an area or a call to a client may pose a threat, inform your Office Manager, who will arrange an accompanying carer.
- Verbal or sexual harassment by a client towards you should be reported and documented.

- If a family member or another person exhibits challenging behaviour or violence towards you, it must also be reported to the Office Manager.

## STANDARD OF SERVICE

Kaidy has a high expectation of the staff who work for us.

We therefore expect their service to be of a high standard.

If for any reason, any employee fails to meet the standard expected by the service user, please contact the office.

We will discuss the problem with the employee and replace the person if deemed necessary.

Timesheets are to be initialled at the end of each shift and fully signed at the end of each week of assignment by the appropriate authorized person.

The office hours are 9.30am to 5.00 pm. Outside these hours we are only available on telephone 020 8203 1518 or 020 8906 2001.

We are insured by Ace European Group in respect of Public and Employment Liabilities (subject to clause 6 in our terms of business)

We welcome feedback and comments about our services and staff. We will ask you for your comments regularly and send you an easy tick box questionnaire every 6 months.

## HANDBOOK DECLARATION

PRINT NAME -----

I have read an up-to-date copy of the "Staff Handbook" issued by Kaidy Employment Agency. I have read, understood and agree to abide by its Conditions, goals, policies, benefits and expectations, including the Conditions of Membership.

By my signature below, I acknowledge, understand, accept and agree to comply with the information contained in the Agency Worker Handbook provided to me by Kaidy Employment Agency. 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 Kaidy Employment Agency.

Updates to this manual will happen from time to time. Whenever this happens Kaidy Employment Agency will notify me of this by email and I will be required to download a copy from [www.kaidy.co.uk](http://www.kaidy.co.uk) website. I agree to familiarize myself with these changes before undertaking any further shifts through Kaidy Employment Agency.

SIGNED ----- DATE -----

I hereby give permission for Kaidy Employment Agency to allow access, as a minimum, to my personnel files as part of any official audit, or client compliance purposes, carried out by any person authorised by the NHS Authority. These personnel files will be viewed in accordance with the requirements of the Data Protection Act 1998.

SIGNED ----- DATE -----