



CANDIDATE HANDBOOK

This handbook provides you with details of the association between TLA – The Locum Agency and our temporary workers. Within our handbook you will find information that will assist you within your locum positions. The handbook includes statements, policies and procedures that are relevant to your placements and will assist in advising what is expected of you.

Please note that this handbook does not replace the policies and procedures in place within the hospitals or clients that you are allocated to.

Contact details:
Whitegates Business Centre
Alexander Lane
Shenfield
Essex
CM15 8QF

T: 01277 280200
F: 01277 280635
E: info@thelocumagency.co.uk
W: www.thelocumagency.co.uk

PRIOR TO COMMENCING YOUR ASSIGNMENT

TLA – The Locum Agency will be unable to offer you assignments until you are fully contract compliant. Our compliance team will liaise with you as to the process and once this is completed our recruitment team will contact you to advise that you are able to start a position via TLA Group.

Please retain this handbook whilst working through TLA Group as it contains information that is important and useful.

INDUCTION

TLA – The Locum Agency will brief you on the general issues and procedures in relation to the registration and compliance process. In addition, we will provide you with Induction Training which includes, but is not limited to the following:

Basic Life Support	Conflict Resolution
Manual Handling	Information Governance (Caldicott Protocols)
Health and Safety	Complaints Handling
Fire Procedures	Infection Control
Risk Incident Reporting	Safeguarding Children (SOCA)
Lone worker Training	Safeguarding Vulnerable Adults (SOVA)

MANDATORY TRAINING

It is essential for you to keep your knowledge and skills up to date. All candidates must complete practical Manual Handling and Basic Life Support courses annually. You will also be required to complete regular online and practical training courses annually during your time with us. We can organise and book the training courses, please contact our compliance team to discuss. You can also source your own training courses. We will require documentary evidence of training certificates. Please ensure your Training Record is kept up to date at all times and to continue notifying us of any training completed.

RISK INCIDENT REPORTING

Under the Management of Health and Safety Regulations of 1992 you have a legal duty of care to report all accidents, incidents and near misses. These regulations impose a duty on employers to perform risk assessments on all work activities. If during the course of your work you identify a risk to the health, safety and welfare of your own personal safety, and/ or that of your colleagues/patients/clients, you have a duty to report this. In the first instance it should be reported to the person in charge of the establishment to which you are assigned, and to TLA Group Recruitment Consultant. An incident report form must be completed at TLA Group Head Office.

LONE WORKERS INFORMATION

Lone workers are those workers who work by themselves without close or direct supervision. Lone working is not governed by any specific legislation, but a wide range of legislation may apply depending on the nature of the work involved. In all instances the Health and Safety at Work Act 1974 and the Management of Health and Safety Regulations of 1992 will apply.

Generally, within the healthcare industry, lone workers can be regarded as those who work on a peripatetic basis such as community/district nurses, domiciliary homecare workers etc., or those who work outside of normal hours e.g. domestics, porters, security etc.

In all cases where a worker is expected to work alone a risk assessment should be performed by the employer and steps taken to reduce risk to the lowest practicable level. The risk assessment should address:

- Whether the work can be performed safely by a single person
- What arrangements are required to ensure the lone worker is at no more risk than employees working together.

If for any reason you consider yourself to be at risk working in a “lone worker” situation, please contact your Recruitment Consultant immediately so that a further risk assessment can be performed, and arrangements can be made to ensure safe systems of work and your personal safety.

VIOLENCE AND AGGRESSION

It has been recognised for some time that workers within a hospital setting are in an environment where there is potential for threat, aggression or violence. Violence and aggression can be defined as including the following circumstances:

- Minor assaults including situations where physical contact and / or injuries occur which require first aid treatment
- Threats with an offensive weapon without physical injury
- Aggravated assault resulting in injury requiring medical assistance
- Threatening behaviour which could include verbal abuse, threats or fear arising from damage to the physical environment
- Assault resulting in serious injury and / or death

Any violent, abusive or threatening behaviour is unacceptable. You must report an incident immediately to the person in charge and also to TLA Group Recruitment Consultant. The establishment where you are working will have policies for dealing with such incidents, and an incident report form should be completed by both the place of work and at TLA Group Head Office. All Candidates have an obligation under the Health and Safety at Work Act 1974 to have regard to their own health, safety and welfare at work, and that of others who may be affected by their acts of omissions.

THE CALDICOTT PROTOCOLS (Information Governance)

The Caldicott review was commissioned due to the development of information technology and its capacity to rapidly and extensively disseminate information concerning patients or service users. An essential component of the clinical consultation in the provision of health care is confidentiality. All healthcare workers have stringent requirements with regard to confidentiality of patients within their care. However, information given about patients underpins the efficient operation of the NHS, and it is important that confidentiality does not impede upon the provision of effective patient care. Therefore, the Caldicott review devised protocols and recommendations, which assume the appointment of a Caldicott Guardian who is created to safeguard and govern the users of patient information within NHS organisations. Caldicott guardians are senior health professionals. All of TLA Group personnel are required to familiarise themselves with the local policy on confidentiality within the establishment / NHS Trust where they are working.

COMPLAINT HANDLING

During the course of your work with TLA Group you may come across complaints from patients / clients. It is the policy of TLA Group to deal with any expression of dissatisfaction in a professional and precise manner. If you are on an assignment within an establishment, please report any complaints to a senior person and document all details of the complaint. You must also report the complaint to TLA Group Recruitment Consultant or their Manager. All complaints must be investigated within a specified time limit and resolved as soon as possible, and this is the responsibility of the responsible manager at TLA Group (this is outlined at the end of this document). You may be requested to complete a complaint record form and attend an interview to investigate the matter further.

If you personally are the subject of a complaint you will also be asked to record details as part of an investigation and in some circumstances, it may be necessary to suspend you from duty whilst an investigation is in process. Any complaints of misconduct against individuals will be reported to the relevant Registration Body. If you have any complaints about any aspects of your work at TLA Group please do not hesitate to contact us. Any complaints from individuals will be dealt with in a professional and confidential manner. TLA Group operates a “whistle blowing” policy, please refer to the policy section at the end of this book.

FITNESS TO PRACTICE

It is important for your own health and of those in your care that you are fit to practice whenever you attend an assignment. You must declare yourself fit to practice when you accept an assignment. You must also inform us if you are pregnant as we are required to perform a health and risk assessment for all expectant mothers. If you are concerned that your assignment involves unnecessary risks to either your health or fitness, or that of your unborn child, please contact us immediately. You will be required to supply TLA Group with an update of your occupational health questionnaire on an annual basis, as this is a contractual requirement of the NHS. We will contact you and supply you with the new forms as they are required.

IMMUNISATIONS

Please keep the following immunisations up to date:

- Hepatitis B
- Varicella (Chicken Pox)
- MMR
- Tuberculosis
- Diphtheria
- Hepatitis C
- Tetanus
- Polio

Any boosters or new vaccinations should be recorded on your Immunisation Record. You need to disclose details of your medical record on your medical questionnaire. Documentary evidence is required for Hepatitis B, Varicella, MMR, Tuberculosis, Measles and Mumps. Without documentary evidence of immunisation, we will be unable to offer you assignments.

MRSA & INFECTION CONTROL

Methicillin Resistant Staphylococcus Aureus (MRSA) is the name given to a range of antibiotic-resistant bacteria. MRSA exists on the hands or in the nose of around one third of the healthy population and is usually harmless. It can however prove fatal if it enters the bloodstream of an already weakened patient. It is usually transmitted by touch. The single most effective measure for preventing MRSA contamination is washing hands before and after every patient contact. In addition, please:

- Use liquid soap and water or an alcohol-based hand rub when washing hands – make sure it comes in contact with all areas
- Remove wrist and preferably hand jewellery at the beginning of each shift you will be regularly decontaminating your hands
- Wear disposable gloves and aprons when attending to dressings or dealing with blood and body fluids (sterile gloves should only be worn when performing aseptic techniques)
- Dispose of gloves and aprons after use
- Cover cuts or breaks in your skin or those patients/clients with waterproof dressings

If you come into contact with a patient who is later found to be contaminated with MRSA, it may be necessary to attend screening sessions at the hospital's Occupational Health Department. During this time and before you have been declared clear from MRSA, we may be restricted in the assignments we can offer you due to the risks of infection.

AIDS / HIV

Candidates should be aware of and abide by the requirements of HSC 1998 / 226 "Guidance on the Management of AIDS/HIV Infected Health Care Workers and Patient Notification"

- If you believe you may have been exposed to HIV infection in any way you should seek medical advice from your GP or Occupational Health Department and, where appropriate, undergo diagnostic HIV antibody testing.
- If you are found to be infected, you must again seek guidance from your GP or Occupational Health Department
- If you are found to be HIV positive and perform or assist with invasive surgical procedures you must stop this immediately and seek advice from your GP or Occupational Health Department regarding what action, if any, should be taken
- Please be aware that it is the obligation of all health workers to notify their employer and, where appropriate, the relevant professional regulatory body, if they are aware of HIV positive individuals who have not sought or followed advice to modify their working practice

Please note the above guidance does not supersede current Department of Health Guidelines (in particular HSC 1998/226) or local practices and procedures.

MEDICALS

Because of the importance of your fitness to practice, TLA Group reserves the right to request a certificate of fitness to practice from your GP or an Occupational Health Service. Our clients may also ask that you undergo a medical examination before commencing work for them. In these cases, future placements may be dependent upon your compliance with this request and its outcome, providing it was a justifiable request

ASSIGNMENTS

Timekeeping

Please make every effort to ensure you arrive and leave all bookings, at the time specified in your confirmation letter.

Attendance

If you are unable to attend a booking you should contact your Recruitment Consultant, and if possible your line manager, as soon as possible and definitely prior to the time you are due to start your booking.

Mobile Phones

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

Uniforms

The uniform requirements for some of our clients may differ and will be stated prior to the assignment. If you are on an assignment where a hospital uniform is not required or have any queries regarding dress, please read the policy at the end of the handbook. You are required to dress smartly, and the wearing of jeans is not permitted.

ID Badges

ID badges will be issued in line with your Professional Registration. When we are advised of your registration or re registration, TLA Group will generate ID badges. Your 1st ID badge will be provided at interview stage; subsequent badges will be sent to you. Badges must be handed back to us termination of employment with TLA Group. Please wear your current ID Badge at all times during your assignment with TLA Group.

Arriving for Work

On arrival at a new booking, please take the opportunity to familiarise yourself with the local policies and procedures. In particular, please be aware of the following.

1. Crash Call Procedure
2. Hot Spot Mechanisms

3. Violent Episode Policy
4. Procedure for Alerting Security Staff
5. Policy for Administration & Assistance with Drugs
6. Complaints handling

Whenever possible, we encourage candidates to visit their potential workplace prior to commencing their assignment. If you have any queries regarding correct local procedures, or are uncomfortable carrying out any of the duties you have been asked to perform, please raise these issues with your line manager in the first instance.

Equipment & Clients Premises

You are responsible for your own actions when completing assignments, at TLA Group we expect that clients' premises and equipment are treated with respect and left clean and acceptable for use. You should comply with all reasonable requests, using your professional judgement at all times.

Accidents or Incidents

TLA Group expect you to report any accidents, incidents or near misses to your line manager and a member of TLA Group.

Notice Period

Candidates should inform TLA Group if they are aware that their assignment is coming to an end. This will allow us time to organise your next assignment or process your leaver paperwork. Our Terms of Business request that both Candidates and Clients Provide at least one weeks' notice (except in exceptional circumstances when each case will be looked at individually). If a particular placement is not to your liking please advise your consultant so they can find you an alternative role.

Client Performance Reports

TLA Group requests that Clients complete a Performance Review after a candidate has completed their 1st week, then at 3 months and then annually thereafter.

End of Placement References

At the end of each assignment TLA Group request that Clients completes an End of Placement Reference.

Candidate Performance Reports

Candidates will be requested to provide feedback on their work based assignment as well as the service they have received from TLA Group. This information can then be used to advise future locums. Both positive and negative feedback is actively encouraged so The Locum Agency can continually improve the quality of service it offers.

Appraisals

We will conduct annual appraisals which provide a review of your performance at work. They will also give you an opportunity to raise any concerns or issues that you may have. Appraisals are carried out based on feedback received from clients and cover the following areas:

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

CRIMINAL CONVICTIONS

NHS policy and the National Contract require Agencies for the Supply of Allied Health Professionals and Health Science Services Staff to obtain a Disclosure and Barring Service check (DBS) or a Disclosure Scotland (DS) for all candidates, particularly those working in Paediatrics and in the Community. Disclosures from previous employers are not transferrable. Please be aware that our clients may require us to inform them in writing of candidate's criminal convictions - We would always seek consent prior to disclosing this information. However, we cannot accept liability should a client decide not to utilise a candidate following this disclosure. Our own response to criminal record information will depend upon its nature and seriousness. We will need you to complete, sign and date a "Criminal Convictions" declaration as part of your application form. DBS checks are carried out on an annual basis. Please ensure that you inform us if you are investigated, cautioned or convicted of any offence between DBS checks.

REMUNERATION

Timesheets

Timesheets run from Monday to Sunday. Please submit your timesheet to us by at the very latest 11am on a Tuesday to enable us to process your timesheet for payment on Wednesday. Deadlines may change at Bank Holidays – we will inform all candidates in advance of any change of deadlines. Payments will be made directly into your bank / building society / Payroll Provider / Limited Company (dependent on whether your role is inside or outside of IR35) accounts by BACS (Please ensure we are in receipt of the correct details.

It is your responsibility to ensure your timesheet is legible, completed correctly and has been authorised and signed by your manager – payment may be delayed if information is incorrect or you miss the deadline for submission.

Timesheet submission check list

- 1 Your timesheet is for the correct week ending date
- 2 The date and times you worked are correct and breaks have been excluded from the total hours.
- 3 Your name, place of work and all other information is clearly visible at the top of the timesheet.
- 4 The total hours are calculated correctly
- 5 Your timesheet is signed and dated by your line manager
- 6 You have signed the timesheet

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

Holiday Pay (PAYE Candidates)

If you are a PAYE Candidate you start accruing holiday pay as soon as you begin work for us and start accruing holiday hours. You can request your holiday by filling in a holiday request form which can be obtained from your consultant. Holiday entitlement is the statutory minimum for full time workers, apportioned *pro rata* for part time workers. The holiday year ends 31st December. It is not possible to carry entitlement over to the following year.

Agency Workers Regulations

Day 1 rights for all agency workers:

What this means for you

If you are a 'temp' agency worker: From 1 October 2011, after you have worked in the same job for 12 weeks, you will qualify for equal treatment in respect of pay and basic working conditions. You can accumulate these weeks even if you only work a few hours a week. Your temporary work agency is likely to ask for details of your work history to help establish when you are entitled to equal treatment (separate guidance is available for agency workers on direct.gov website).

Day 1 rights for all agency workers

(Regulations 12-13)

The Regulations give agency workers the same access to certain facilities provided by the hirer and information on job vacancies. The test relates to what comparable workers and employees receive and the agency worker is entitled from the first day of their assignment (so not after 12 weeks).

- Access to facilities
- Access to information relating to vacancies

Access to collective facilities and amenities:

(Regulation 12)

From day one of an assignment, agency workers are entitled to be treated no less favourably than a comparable worker or employee in relation to access to collective facilities and amenities provided by the hirer.

This is not intended to extend to all benefits which a hirer might provide to directly recruited workers or employees; rather, it applies to collective facilities provided by the hirer either to workers or employees as a whole or to particular groups of workers or employees.

These may include:

- a canteen or other similar facilities
- a workplace crèche
- transport services (e.g. in this context, local pick up and drop offs, transport between sites – but not company car allowances or season ticket loans)
- toilets/shower facilities
- staff common room
- waiting room
- mother and baby room
- prayer room
- food and drinks machines
- car parking

This is a non-exhaustive list and acts as an indication of which kind of facilities should be included. It applies to facilities provided by the hirer and therefore these facilities will usually be on-site. However, for example, if a canteen is used on another site – or shared with another company – then this should also be available to agency workers.

Access to information on job vacancies
(Regulation 13)

From day one of an assignment, all agency workers will be entitled to be provided with information about any relevant job vacancies within the hirer that would be available to a comparable employee or worker. Hirers can choose how to publicise vacancies, whether it is via the internet/intranet or on a notice board in a communal area. But the agency worker should know where and how to access this information.

OUR POLICIES

Our policies are available on our website and we require you ensure you are familiar with their content. Our policies and procedures are not intended to replace the policies and/or procedures issued by our clients or organisations where you may be placed on assignment.

PROFESSIONAL STANDARDS

Whilst this handbook outlines TLA Group's own policies and standards, these do not supersede the national guidelines outlined by the relevant professional bodies. Further information is available from:

GPhC website: www.pharmacyregulation.org

GMC website: www.gmc-uk.org

HPC website: www.hpc-uk.org

The relevant professional bodies can also be contacted in writing at their mailing addresses as found on their websites.

CODE OF CONDUCT

TLA Group expects all candidates to act in a professional manner at all times. We particularly ask you to pay special attention to:

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

You are responsible for your own actions when completing assignments, co-operating with colleagues and managers for the care of patients and clients. You should comply with all reasonable requests, using your professional judgement at all times. If you have any questions about your work, please try to resolve these with your line manager in the first instance, if you are unable to do this then do not hesitate to seek advice from your consultant.

ALCOHOL AND DRUGS

You **MUST** not attend work under the influence of alcohol or any illicit substances.

SMOKING

No smoking during working hours

MEDICATION ADMINISTRATION POLICY & PROCEDURE

Temporary Locums are not allowed to administer medication without the authority of a senior permanent, NHS manager. **It is the policy of The Locum Agency that NO TEMPORARY WORKER IS AUTHORISED TO ADMINISTER MEDICATION.**

Policies and procedures issued by the client or organisation where you are placed MUST be followed. Please ensure that you also follow the standards set out by your regulatory body.

Please ensure you review the full policy on our website.

EQUAL OPPORTUNITIES

TLA Group offers equality to all our candidates and will treat any allegations of discrimination very seriously in accordance with these principles candidates may not discriminate on the grounds of:

- **Race**
- Nationality
- Religion of Belief
- Sexual Orientation
- Disability
- **Ethnic Origin**
- Colour
- Gender
- Marital Status
- Age

HEALTH AND SAFETY

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

- Take reasonable care for the health and safety at work of yourself and any other people who might be affected by your acts or omissions
- Co-operate with your employer and others to enable them to comply with statutory duties and requirements
- Not intentionally or recklessly misuse anything provided in the interests of health, safety or welfare

The Management of Health & Safety at Work Regulations 1992 further requires you to:

- Use any equipment, etc., provided in the interests of safety
- Follow health & safety instructions
- Report anything you consider to be a serious danger
- Report any shortcomings in the protection arrangements for health and safety

When on assignment, it is the client's responsibility to familiarise you with their own Health & Safety policy and procedures, and with locations of fire escapes, first aid contact person etc. At a client's request in writing, TLA Group will undertake to train candidates to be supplied in standard workstation safety. We cannot, however, be held responsible for the suitability of workstations used by our clients. If you express concern over the Health & Safety arrangements of your employing client, we will ask the client to investigate and, if possible, to make improvements. If you refuse to work for a client on Health & Safety grounds, we will attempt to find you other employment without prejudice.

Record Keeping

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

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

Records

- Be written with the involvement of the patient, client or their carer where possible
- Be written in terms the patient or client can understand
- Be consecutive
- Identify problems that have arisen, and action taken to rectify them
- Show care planned, decisions made, care delivered, and information shared

Please be aware that full records are essential should any questions be raised about the care and standards of care delivered.

For more detailed information, please see the relevant Professional Bodies' guidelines

Confidentiality

Any patient information obtained by you during the course of your duties is confidential and should not be disclosed to any third party if it is not legitimately in connection with their treatment or any other official investigation. Please take care with patient records when on assignment to ensure that they are not in undue danger of being accessed by unauthorised individuals. Patients'/clients' information should only normally be shared with their consent – you should make sure patients/clients understand that their information may be shared with various Candidates of the team providing care. It is a patient's/client's decision what information should be shared with their family or others.

Where a patient/client is considered in capable of giving consent, please consult relevant colleagues. Where a patient/client has withheld consent, disclosures of information may only be made if:

- They can be justified in the public interest (normally where the disclosure is essential to protect the patient/client or someone else from risk of significant harm)
- They are required by law or court order

You should act in accordance with local and national policies if there is an issue of child protection.

DATA PROTECTION

In addition to the above, you must adhere to the requirements of the *Data Protection Act 1998*. In brief, anyone processing personal data must comply with the eight enforceable principles of good practice. Data must be:

- Fairly and lawfully processed

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

For further information, please see www.dataprotection.gov.uk from which the above guidance is reproduced.

Computer Use

Where our clients grant you access to their computer systems, these must only be used as *authorised* and not to gain access to any other data or programs.

- Keep any passwords safe
- Keep to the client's policies and procedures
- Log off immediately after use
- Observe any local policies and procedures regarding passwords, floppy disks, CD ROMS and data storage/transfer
- Do not load or introduce any programs onto the computer
- Refrain from accessing any information service or bulletin board including the internet without specific prior authority from your line manager
- Do not download any files or connect to any network or other computer equipment without prior authority

Freedom of Information Act 2000

The above act came into force in January 2005. It gives any person legal rights of access to information which is held by a public authority. This should be taken into account during record keeping and particular attention paid to notes recorded on computer systems. You must also be aware that recordings of telephone calls may be monitored for training and quality purposes.

Consent

In accordance with the relevant Professional Bodies, you must obtain the consent of a patient before giving any treatment or care. Consent must be:

- Given by a legally competent person
- Given voluntarily
- Informed Patient/client has Patient/clients are assumed to be legally competent (that is they can understand and retain treatment information and use it to make an informed choice) unless otherwise assessed by a suitably qualified practitioner.

The exception to this rule is in the case of an emergency where a treatment is necessary to preserve life and the patient/client is unable to give consent. In all cases, you must be able to demonstrate you are acting in the patient's best interests.

If a patient /client are no longer legally competent, decisions should be based on previous consent/non-consent in a similar situation (providing there is no reason to believe they have changed their mind) or their known wishes. Otherwise, treatment should be in their best interests.

In the case of children (those aged under 16 in England and Wales), the involvement of those with parental responsibility is usually necessary – you should be aware of legislation and local protocol.

It is not usually acceptable to seek consent for a procedure, that you will not be performing yourself unless you have been specifically trained for that area of practice. All discussions and decisions relating to consent should be documented in the patient's/client records. Where consent is withheld, you should follow the policy in force at your assignment location.

Caring for Patients in their Own Homes

Please see below for general guidelines relating to assignments carried out in an individual's private home. For further detailed information, please refer to the relevant Professional Bodies' guidelines.

General Conduct:

- Clients and their families should at all times be treated with dignity and respect and due consideration should be taken of their religion, culture and any other preferences

- Clients should be addressed using their preferred name
- Care and support should be offered in the least intrusive manner possible
- The independence of clients should be supported and encouraged where possible through appropriate communication about, and involvement in, their own care. This independence should only be curbed where it is in the clients' best interests and the reasons recorded

Attending and Leaving a Home Visit:

- You should announce your identity clearly on arrival and not enter a client's home without invitation
- Upon arrival at a home visit, you should check whether your clients have any specific needs for this visit
- Please take full care securing a client's home when leaving including, where appropriate, doors, windows and the safeguarding of keys

Carrying out Assignments

- Medication should be kept in a safe place, known and accessible to the client, or to relatives and other carers where appropriate.
- You should not make use of a client's property (including, for example their telephone) without their express permission
- You should report any accident or emergency situations as soon as possible to the relevant authorities and to your Consultant.
- All visits, incidents, observations, care and, where relevant, financial transactions should be logged on records kept securely in the client's home.
- Records are kept for one month, or until the assignment is over, and are made available to the client, their relatives and representatives.
- If you are unable to attend any specific appointment, please notify not only us but also your client and line manager.
- You are not permitted to carry any firearm or offensive weapon with you to any assignment.

Allegations of Abuse

TLA Group will take seriously any allegations of abuse by staff working through us. If we receive complaints of this sort against you, we may not be able to assign you whilst a full investigation is performed. Ultimately, if allegations are well founded, we may not be able to offer you work in the future. Where allegations are sufficiently serious, we may need to report you to the relevant registration body and/or the police depending on the allegation. Appeals against any decisions made by our staff in these matters can be made to the Operations Director, whose decision will be final.

Should you in the course of duty suspect that abuse is taking place you should inform your line manager, immediately. In the case of caring for service users in their own homes, you must report any suspicion or allegation of abuse immediately to TLA Group. There are strict guidelines to be followed in reporting abuse under the Department of Health guidance "No Secrets" and a full report will need to be made prior to investigation.

There are many different forms of abuse:

- Physical, including hitting, slapping, punching, kicking, misuse of medication, restraint or inappropriate sanction
- Sexual, including rape and sexual acts to which the vulnerable adult has not consented, or could not consent or was pressured into consenting
- Psychological, including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks
- Financial or material abuse, including theft, fraud, exploitation, and pressure in connection with wills, property or inheritance or financial transactions, or the misuse of misappropriation of property, possessions or benefits
- Neglect or acts of omission, including ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating
- Discriminatory abuse, including racist or sexist abuse or that based on a person's disability and other forms of harassment, slurs or similar treatment

Whistleblowing

TLA Group operates a whistle-blowing policy which encourages a culture of openness within our organisation and aims to prevent malpractice. With the introduction of the Public Interest Disclosure Act 1998 all workers now have legal protection from any form of retribution, victimisation or detriment as a result of publicly disclosing certain serious allegations of malpractice. The policy will apply in cases where a Candidate genuinely and in good faith believes that one of the following sets of circumstances is occurring, has occurred or may occur within their line of duty.

- 1 A criminal offence has been committed or is likely to be committed
- 2 A person has failed, is failing or is likely to fail to comply with any legal obligation to which he or she is subject
- 3 A miscarriage of justice has occurred is occurring or is likely to occur
- 4 The health and safety of any individual has been, is being or is likely to be endangered
- 5 Information tending to show any matter falling within any one of the preceding paragraphs has been, is being or is likely to be deliberately concealed

Anyone who wishes to raise or discuss any issues which might fall into the above categories he/she should contact their Recruitment consultant at TLA Group in the first instance who will treat the matter in confidence. It is likely that a further investigation will be necessary and he/she may be required to attend a disciplinary or investigative hearing as a witness.

A copy of our full Whistle-blowing policy is available on request. Everyone should be aware that if any disclosure is made in bad faith (for example, in order to cause disruption within the organisation), or concerns information which you do not substantially believe is true, or indeed if the disclosure is made for personal gain, then such a disclosure may constitute gross misconduct for which summary dismissal is the sanction.

SAFEGUARDING

Children

Doctors play a crucial role in protecting children from abuse and neglect. You may be told or notice things that teachers and social workers, for example, may not. You may have access to confidential information that causes you to have concern for the safety or well-being of children.

Early identification of risks can help children and young people get the care and support they need to be healthy, safe and happy, and to achieve their potential.

If you work with children or young people, you should have the knowledge and skills to identify abuse and neglect. You should be aware of the use of frameworks for assessing children and young people's needs, the work of Local Safeguarding Children's Boards and Child Protection Committees, and policies, procedures and organisations that work to protect children and promote their welfare.

Children, young people and parents may not want you to disclose information about them if they think they will be denied help, blamed or made to feel ashamed. They might have had bad experiences or fear contact with the police or social services. You should help them understand the importance and benefits of sharing information. But you must not delay sharing relevant information with an appropriate person or authority if delay would increase the risk to the child or young person or to other children or young people.

Confidentiality is important and information sharing should be proportionate to the risk of harm. You may share some limited information, with consent if possible, to decide if there is a risk that would justify further disclosures. A risk might only become apparent when a number of people with niggling concerns share them. If in any doubt about whether to share information, you should seek advice from an experienced colleague, a named or designated doctor for child protection, or a Caldicott Guardian. You can also seek advice from a professional body, defence organisation or the GMC. You will be able to justify raising a concern, even if it turns out to be groundless, if you have done so honestly, promptly, on the basis of reasonable belief, and through the appropriate channels.

Your first concern must be the safety of children and young people. You must inform an appropriate person or authority promptly of any reasonable concern that children or young people are at risk of abuse or neglect, when that is in a child's best interests or necessary to protect other children or young people.

You must be able to justify a decision not to share such a concern, having taken advice from a named or designated doctor for child protection or an experience colleague, or a defence or professional body. You should record your concerns, discussions and reasons for not sharing information in these circumstances.

You should participate fully in child protection procedures, attend meetings whenever practical and co-operate with requests for information about child abuse and neglect. This includes Serious Case Reviews set up to identify why a child has been seriously harmed, to learn lessons from mistakes and to improve systems and services for children and their families. When the overall purpose of a review is to protect other children or young people from a risk of serious harm, you should share relevant information, even when a child or young person or their parents do not consent, or if it is not possible to ask for consent. You must be prepared to justify your decision not to share information in such cases.

You should make sure that there are clear and well-understood policies and procedures for sharing information with agencies you work with closely or often. You should have an understanding of the roles, policies and practices of other agencies and professionals.

This includes understanding the circumstances in which they consider disclosure to be justified. Teachers, social workers, police, youth offending teams and others all have different relationships with children and young people. They also have different cultures, policies and guidance on sharing information. You should understand and respect these differences but remember the particular responsibilities you have as a doctor and the importance of trust in your relationship with your patients.

Vulnerable Adults

When a vulnerable adult has experienced significant harm from someone they are in a personal/close relationship with and where there is an expectation of trust OR are at risk of experiencing such harm, this is a safeguarding issue. We have a duty to protect vulnerable people from harm. Possible abusers can include paid carers and other professionals as well as friends and family.

N.B: Vulnerable adults with children can be targeted by virtue of the fact that they have children. Abuse can also include abusing/threatening children, in order to abuse the adult

Definition of Significant Harm:

'Abuse is a violation of an individual's human rights by any person or persons. Abuse may consist of single or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or omission to act, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent. Abuse can occur in any relationship and may result in significant harm, or exploitation of the person subjected to it'

Types of abuse:

Physical abuse	Neglect & Acts of Omission
Sexual Abuse	Discriminatory Abuse
Psychological Abuse	Institutional Abuse
Financial and material	

What to do if you have concerns reported to you or suspicions:

- All allegations of abuse must be treated seriously
- We have a duty and responsibility to protect and safeguard the interests of a vulnerable adult. Any employee concerned about reporting concerns must give due regard to this duty above all other concerns.

If an individual discloses a safeguarding issue:

- If a vulnerable adult confides in you that they or their child is being abused but do not wish matters to be taken further, you must say that you have a duty to pass this information on to a manager.
- In an emergency, make sure that the vulnerable adult is safe, summon emergency assistance if necessary or contact the police if you suspect a criminal offence has been committed.

Reporting an allegation or concern

- If you have suspicions that abuse may be taking place or someone has disclosed to you about an alleged incident of abuse you must report these concerns to your line manager.
- Your line manager will report these concerns to the appropriate team on the same working day.
- If you cannot find a manager, report it directly to your Recruitment Consultant, who will inform the Manager at the Trust of the concern.

Definition of a Vulnerable Adult - A vulnerable adult is any person who is:

- Aged 18 years or over and
- Who is or may be in need of community care services because of frailty, learning or physical or sensory disability or mental health issues and
- Who is or may be unable to take care of him or herself, or take steps or protect him or herself from *significant harm* or exploitation (DOH 2000 No secrets)

NB: All investigations into allegations of abuse will also cover recommendations published in the "Lessons Learnt" report by Kate Lampard as a result of the Jimmy Savile investigation <http://www.nhsemployers.org/your-workforce/need-to-know/the-savile-inquiry>

Uniform Policy

TLA – The Locum Agency requires that all candidates undertaking roles for the company abide by the Uniform Policy.

It is the responsibility of each candidate to ensure that they are suitably dressed for work. TLA – The Locum Agency requires that all candidates wear appropriate clothing i.e. navy or black trousers/skirts with suitable shoes. The candidate must ensure that their clothing/shoes create a professional image and are suitable to allow them to work safely.

Should a candidate be provided with a uniform, TLA – The Locum Agency advises that this is to be worn for clinical work only and candidates are not to wear their uniform when travelling to and from their place of work.

Any candidate who is not required to wear a uniform will be expected to dress appropriately

Professionalism and presentation is expected when a candidate works for TLA – The Locum Agency and the following guidelines must be adhered to:

- **Hair** – tidy & clean. Long hair should be tied up or pinned out of the way.
- **Jewellery** – should be kept to a minimum and should not pose a risk of injury to any person.
- **Body piercings** – should not be visible. Facial jewellery should be kept to a minimum. Piercings should be kept small to ensure they cannot be grasped.
- **Fingernails** – should be short & clean.
- **Makeup** – can be worn however it should reflect the professionalism and presentation expected by TLA – The Locum Agency and their clients.
- **Footwear** – should be clean. They should be appropriate for the role you are covering. They should provide support and protection.
- **Trousers / Skirts** – ideally black or navy. Must be presentable & clean.
- **Tattoos** – Should be covered where possible to ensure professionalism within the work place.

Making a Complaint

If you have a complaint about the way you have been treated on assignment or by our staff, please direct this in the first instance to your Recruitment Consultant or their Manager. Our Full Address is:

Whitegates Business Centre
Alexander Lane
Shenfield
Essex
CM15 8QF

T: 01277 280200
F: 01277 280636
E: howard@thelocumagency.co.uk
W: www.thelocumagency.co.uk