



ICG MEDICAL

TEMPORARY WORKER HANDBOOK 2021

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Welcome to ICG Medical

We are very pleased that you have chosen to join us.

ICG Medical Limited operates several healthcare supply agencies (at time of writing: Cromwell Medical Staffing Ltd, Greenstaff Medical Ltd, Greenstaff Community Services Ltd, Care Power Group and Clinical 24 Staffing Ltd, (collectively referred to as ICG Medical).

ICG Medical's values are Family, Passion and Open. These values apply to yourselves as our temporary workers just as much as our contracted staff.

FAMILY

We believe that as one team we will achieve more than on our own. By working together and sharing knowledge we gain a greater understanding of the challenges we each face. With a shared purpose and common goal, we inspire and motivate all around us to excel in what we do to ensure our continued success.

PASSION

We are passionate about everything we are and everything we do, From our brands and colleagues to our clients and candidates. We take pride in working at ICG Medical and always strive to bring positivity, determination and energy to work.

We believe in what we do!

OPEN

We are completely open and honest both internally and externally. We understand that only by hiding nothing and being completely transparent can we then build trust, confidence and commitment with all around us.

About the handbook

If you work through an intermediary/umbrella company that company is your employer (see [appendix B](#))

When you work you are supplied as a temporary worker through ICG Medical, you are also accepting our terms of engagement and the contents of this handbook.

You must familiarise yourself with the information provided and keep the handbook in a safe place in case you need to refer to it later.

You will receive the up-dated version of the handbook annually and will be required to confirm you have read and understand the information it contains. You will receive the handbook electronically and be required to

confirm via a link you have read and understand its content and instructions on what to do if you need any clarity.

To work though ICG Medical, as a temporary worker you must always adhere to all our policies and procedures and be accountable for your clinical practice. Registered nurses and midwives must practice in accordance with Nursing & Midwifery Council (NMC) requirements, which include clinical as well as professional standards such as appropriate indemnity insurance.

Those registered with the Health & Care Professions Council (HCPC) must practice in accordance with professional requirements of this organisation.

Health Care Assistants who are registered with organisations such as the Scottish Social Services Council (SSSC) must also comply with the requirements of these organisations.

If there is anything you do not fully understand please contact your consultant without delay. If you need professional advice, then you should contact our Head of Nursing at nursing.queries@icg-medical.com

From time to time we will review our policies and procedures in line with changes in legislation, NHS Framework or registration requirements. We will update you in writing via the email address we have on file for you so please ensure this is kept updated on our records.

We really hope you enjoy your time while you are accepting work with us and we look forward to working with you.

Expectations

As a member of our team, you are part of a company that maintains the highest possible standards of care. We know that you have the professional knowledge, skills and experience to meet the following standards:

- Arrive at least 10 minutes prior to your shift.
- Inform your agency if you are running late for a shift so they can keep the client informed.
- We understand shifts **very** occasionally need to be cancelled, but please give us maximum notice or as much notice as possible so that we can manage the impact for the client's patients. If you cancel your shift you should be aware that some client organisations may stop, you from working for a period of time or permanently depending on the frequency of your cancellation. Your Consultant will be able to advise you on the rules for the organisations you wish to work in.
- Always wear a clean uniform with your agency brand on it and wear your agency ID badge.
- Ensure you are friendly and approachable to patients, relatives/visitors and staff you have contact with. Communicate clearly and appropriately with the people you have contact with at all times.

- If in a new location/area of work, please make sure you receive an induction. For your own protection and safety, you are required to have an induction, so please call your agency immediately if one is not given after asking.
- Adhere to the Trust/organisation or unit policies, e.g. medication administration. If you are working in a client's own home, then Greenstaff Community Services policies will apply in England and in Northern Ireland Clinical 24 Staffing Ltd specific policies will apply.
- Maintain open communication with your agency if you have any issues.
- Adapt to the requests of the unit e.g. if you are asked to move departments you must accept this as long as it is within your scope of clinical practice as registered with the NMC e.g. an RN asked to move to children's area would be outside of scope of practice.
- If you are asked to move to an area where you feel you lack the clinical skills, ensure you make this clear to the senior nurse asking you to move areas what skills you lack and seek a compromise e.g. a different area or agreement of the additional support you would receive in the new area.. Please also notify your agency who will put your call through to the on-call ICG Medical senior nurse who will provide immediate professional advice to you. For nurses working with Greenstaff Community Services if caring for a client in the community, you must only care for the client in their own home unless prior agreement has been received to care for them elsewhere.
- NEVER leave a shift without speaking to your agency first and, if it's a professional issue, contact the ICG Medical senior nurse on call for professional advice on 07496882532. You will be held to account by the NMC for leaving a shift as it can be argued that you knew the impact of leaving on the patients and colleagues on the ward, so to protect yourself you need to escalate your concerns BEFORE you request or are advised to leave.
- Ensure all documentation is completed to the NMC required standards BEFORE you leave the shift, make sure all medication, observation charts are complete and any gaps in your patients' care are recorded and handed over to the person taking over from you.
- If you are involved in any form of patient or personal related incident e.g. patient fall, needle stick injury etc. make sure that the relevant incident report is completed by you or the nurse in charge. If you are working in the client's own home a report should be sent to the care-coordinator at Greenstaff Community Services.
- Once your shift is completed, ensure you provide as thorough handover, as you would expect to receive yourself.

Our commitment to you

- We will provide you with 24/7 support including access to our senior nursing team.
- We encourage open communication any issues, get in touch.
- Our team will be polite, friendly and helpful.
- On receipt of a properly completed timesheet we will pay you without delay in accordance with our policy (see [appendix C](#)).
- We will help you with your compliance and updates.
- We will always aim to make you feel welcome.
- We will treat everyone fairly and equally.
- We will offer new career opportunities (e.g. lines of work, chance to work in a variety of organisations).
- We will ensure you receive competitive rates of pay.
- We will ensure exceptional staff are rewarded with training, referral bonuses and exciting new opportunities.
- From time to time we offer various incentives. To receive incentive information, opt into our marketing communications.
- If you have questions on our benefits your consultant will be able to assist you.

Refer a friend

ICG Medical is always looking for others like you who have high standards. If you enjoy the freedom of working for an agency and know someone who would also like to join our team, then ICG Medical would love to hear from you.

It is easy to take part in the refer a friend scheme – and ICG Medical will reward you for recommending one or more of your friends/colleagues. Either contact your consultant or opt into the marketing incentives email to learn about the latest incentive schemes.

Note: the refer a friend scheme may be altered from time to time, so please confirm the current terms when making a referral.

Induction, Appraisal Compliance & Mandatory training

It is a contractual requirement that all our nurses undertake an annual appraisal with one of our registered nurses. You will also be required to complete Mandatory Training updates. These may differ from the requirements you have to meet with other organisations.

You will receive reminders of when your update(s) are due for your appraisal and mandatory training from the Compliance Team. If you fail to meet your compliance updates you will not be able to work until you provide evidence of the training being completed.

Generic Mandatory Training will be provided and has been designed to provide you with underpinning knowledge of the following, as a minimum:

- Manual Handling (practical)
- Health & Safety
- Fire Safety
- Basic Life Support (practical)
- Infection Control
- Food handling and Hygiene
- Complaints Handling
- Equality, Diversity and Human Rights
- Confidentiality
- Lone Worker
- Protection of Vulnerable Adults Level 2 or 3 pending on your role
- Safeguarding Vulnerable Children Level 2 or 3 depending on your role
- Handling Violence and Aggression
- Fraud awareness
- Radicalisation awareness
- Medication Management
- Tissue Viability
- Blood Component Transfusion
- Mental Capacity Act
- NEWS2 Early Warning Training

Reference Requests Policy

The application form includes a section relating to referencing and the candidate is requested to consent to references being shared with the NHS or any employer to support quality and audit. NHS reference templates will be used for all reference requests. At least two references (and possibly many more to fully cover the most recent three year's continuous employment) are taken up after the interview and prior to assignment / placement including the most recent employer / assignment. This may be reduced to a single reference if the candidate has been with one employer for the most recent three full years and all requested details have

been confirmed in the reference by the previous employer. If there are gaps in employment / training, we will take up further personal / character references to cover the full three-year period.

There may be occasions when it is deemed necessary to seek references prior to interview (e.g. when making a senior appointment), and in such cases, the candidate will be advised of this in writing, and consent confirmed, prior to the references being taken up.

Written references are requested using the appropriate NHS Employers referencing template and will confirm:

- Where the individual has been employed / studied;
- Dates employed / studied;
- Position held / course undertaken; and
- Recent or ongoing disciplinary action or referrals.

References will be taken up from the HR Department of previous employers and should additional information be required then this may be requested from the candidate's Line Manager via the HR contact.

The organisation providing the reference and contact details of the referee will be checked to ensure it is a bona fide business using the phone book, internet or other appropriate means before the reference request is sent. References must be sent to a verified email address that is verified to the relevant employer. References must not be sent to the referee's private email address (e.g. yahoo, Hotmail, Gmail, Live etc).

It should be understood that the agency worker that any offer of assignment will be withdrawn if it subsequently becomes apparent that they have either knowingly withheld information or have provided misleading or false information in relation to employment history and references.

Returned references will be checked prior to assignment / placement to ensure they cover the most recent three-year period and where appropriate, that all gaps in employment over two weeks are fully explained. Information contained in references will be cross-referenced with the application form, interview and other information obtained from the candidate during the recruitment process to ensure they are satisfactory and consistent.

References must be in writing via post, fax, email or via our recruitment software and have some form of organisational identification on them such as being on company letterhead or being received together with a compliment slip. Emailed references must be from a business email address and will not be accepted if sent from a personal email address (e.g. Hotmail, Gmail, BTinternet etc). As a minimum references must include the referee's full name, any relevant professional body registration number, job title and name of the

employing or training organisation together with a landline telephone number and business email address to enable them to be validated if necessary.

Should any negative information, discrepancies or contradictions be found in references received, we will seek a reasonable explanation, giving the applicant the opportunity to explain the situation. Additional references may be sought to help validate our recruitment decision. In exceptional circumstances where there is serious misdirection, this will be reported to the Compliance Manager who may feel it appropriate to report our concerns to the NHS Counter Fraud Authority. Where information provided in references gives us doubt as to the probity of the candidate, we will invoke our process to withdraw the conditional offer of employment / engagement.

References received in a foreign language will be translated in line with Security Industry Authority (SIA) standards.

Overseas Police Checks Policy

ICG Medical will require to obtain a police certificate or certificate of good character for any agency worker who has entered the UK or become resident here within the most recent 6 months (or who has been living or working outside the UK for 3 or more calendar months). The police check must show no relevant convictions and may not be more than 3 calendar months old at the point of recruitment.

Overseas police certificates will be checked in the same way as all other documentary evidence to verify that they are genuine and relate to the individual presenting themselves. We will also validate the police check with the originator. In addition to this, we will conduct a Regulated Activities Registration Status Check with the DBS for overseas workers who have been in the UK for less than 6 months prior to their first assignment.

If the agency worker is either living in an EEA country or they are currently living in the UK but have declared that they have spent a period of 6 months or more in the last 5 years (in a single period or cumulatively) in an EEA country, we will also:

- Ask them to provide evidence of police certificate or equivalent from the relevant country or countries; and
- Obtain a DBS / AccessNI disclosure or PVG scheme membership check as soon as is reasonably practicable. This check requirement applies even if the individual states they have never lived or worked in the UK before.

The application process for overseas police checks varies from country to country and we will use the following guidance to ensure the correct criminal records check has been undertaken for overseas applicants prior to assignment:

<https://www.gov.uk/government/publications/criminal-records-checks-for-overseas-applicants>

Work Health Assessment Policy

Work health assessments will be conducted for all NHS patient facing roles (or those where specific occupational health guidance is required) once a provisional offer has been made (and prior to job start) and it will be made clear to candidates that any offer is subject to successful completion of all pre-employment checks including the work health assessment. The health clearance and immunisation test results will be relevant to the duties and role the worker is expected for perform and in alignment with the latest DoH and NHS Employers guidelines.

A work health assessment will be carried out:

- Prior to starting the agency worker's first position in the NHS or Private Sector (irrespective of whether this is preceded by a period of training).
- If the agency worker moves to a new job within a different NHS or Private Sector organisation.
- If the agency worker is returning to work following a serious injury or illness to ensure they can safely return to their duties.
- If the agency worker moves to a different job within the same organisation and the nature of the work they will be undertaking changes significantly (e.g. they are required to carry out EPPs for the first time).
- If the agency worker has spent 3+ months outside the UK.

The services provided by our Occupational Health Provider; Healthier Business include:

- Provision of confidential advice to ICG Medical our workers and the Authorities that we contract with.
- Clinicians who will evaluate whether an interview with the worker needs to be arranged to assess their fitness for the post and to identify reasonable adjustments if necessary.
- Testing of blood samples in an accredited UK laboratory.
- Provision of a legibly signed certificate of fitness for placement for workers meeting the required standards. Such certificates will be provided in the format specified by the NHS.

Our Work Health Assessments are undertaken by our Occupational Health provider, Healthier Business with whom we have a contractual agreement. The work health assessment will always be conducted by a qualified clinician who is accredited by the Safe Effective Quality Occupational Health Service (SEQOHS).

To place an agency worker, we will need to receive confirmation from the Occupational provider that the candidate is:

- Of good general health.
- Able to perform the specific duties required on the assignment, do not represent a risk to patient / service users and are not likely to be at excess risk of developing any work-related diseases or illnesses from hazardous agents present at the premises and locations whilst on the assignment.
- Up-to-date with their routine and selected vaccinations in line with latest Department of Health guidelines and recommended levels of health clearance / immunisations / vaccinations for healthcare staff involved in direct patient care.

To appoint an agency worker, we must have received a Certificate of Fitness for Employment which is valid prior to commencement of the assignment and remains valid throughout the assignment if the duration is less than 1 year. A copy of this will be made available to the Authority for audit purposes as required.

We repeat the work health assessment process on an annual basis as standard. Our systems will prompt us in advance of the expiry date of the work health assessment, enabling us to ensure that we arrange for the worker to complete a new assessment prior to the anniversary date. If the member of staff is moved to a different role within the same organisation which has significantly different duties, a new work health assessment will also be undertaken.

As part of the work health assessment, the Occupational Health Provider will check the immunity and immunisation status of the worker and confirm they have up to date routine vaccinations or skin tests, particularly:

- Hepatitis B.
- Measles.
- Mumps.
- Rubella.
- Tuberculosis.
- Influenza.
- BCG.
- Varicella.

For agency workers undertaking exposure prone procedures, they may also be required to provide health clearance for Hepatitis B, Hepatitis C and HIV.

If at any time a worker should acquire or be at risk of acquiring any of these infections, they must refrain from carrying out any work that involves an EPP and inform us in confidence immediately. Healthcare professionals are also advised that they must not declare themselves fit for work if they are suffering from vomiting, diarrhoea or a rash.

All records relating to the agency worker's health clearance/immunity or immunisations will be documented in English and be verified and signed, or stamped, by a suitably qualified clinician with relevant occupational health experience (including their signature and full name printed legibly).

Agency workers are advised that the Authority may at any time request to see a worker's Certificate of Fitness for Employment and immunisation records and may also ask them to undergo a medical examination in addition to the above occupational health checking.

Once we have appointed a worker, any Occupational Health information including immunisation history, health monitoring and referrals will be kept on their Occupational Health Record and recorded on our recruitment software. This will include the original copy of the Certificate of Fitness for Employment.

Right to Work Check Policy

All agency workers will have a face-to-face right to work in the UK check conducted prior to assignment using either the online or manual process described below and using the "Standard Process for Validating All Documentation" described at the beginning of this document.

Online Right to Work Checking

In January 2019 the UK Government provided an online right to work check facility which can be accessed at <https://www.gov.uk/view-right-to-work>. The online checking service supports a right to work check in respect of individuals who hold:

- A biometric residence permit.
- A biometric residence card.
- Status under the EU Settlement Scheme (alternatively these individuals can continue to demonstrate their right to work by presenting their EU passport or ID card until the end of the implementation period for this scheme).

Whilst we will encourage use of the online checking process, individuals unable or unwilling to facilitate this will continue to be subject to the manual checking process detailed hereafter.

The service requires the agency worker to first view their own Home Office right to work record online. This will generate a share code (valid for 30 days) which, when shared will enable us to confirm their right to work online when it is entered along with their date of birth.

ICG MEDICAL use the "employer" part of the service as this activates a Home Office audit record of online checks conducted by employers. To conduct an online right to work check, we will:

1. Log onto the Home Office online portal at <https://www.gov.uk/view-right-to-work> and enter the share code and candidate's date of birth.

2. Check that photograph shown is a true likeness of the individual presenting themselves for work. This part of the check must take place face-to-face with the applicant.
3. Retain a clear copy of the profile page confirming the individual's right to work generated by the portal. This page includes the individual's photograph and the date on which the check was carried out. This page can either be printed out or saved as a PDF for direct upload to our recruitment software.

Manual Right to Work Checking

To conduct a manual right to work check, we will:

1. Obtain one or a combination of original document(s) as specified in List A or List B as detailed in Appendix 3.
2. Verify the documents are genuine and that the applicant is the rightful owner of the document(s) by checking that photographs are clear and look like the holder, and the date of birth is consistent with their appearance and identity documentation (see Appendix 1 for more detail on checking validity of documents). The name and date of birth must also be consistent across all documentation. Right to work documentation must always be checked in the presence of the holder.
3. Check the document(s) containing an expiry date are current. An indefinite leave to remain stamp in an expired passport may not be accepted and the holder must obtain and provide a current document such as a Biometric Residence Permit instead.
4. Check Government stamps and endorsements to ensure that the holder is allowed to do the type of work for which they are applying. Work permits must be confirmed by contacting the appropriate embassy or consulate.
5. In the case of a passport, a copy must be made of any page which shows the expiry date, nationality, date of birth, signature, leave expiry date, biometric details and photograph as well as any page which indicates the holder has entitlement to enter or remain in the UK and undertake the work in question. All other documents must be copied in their entirety including both sides of a Biometric Residence Permit and retained in line with the standard process for verifying documentation detailed above.

Follow-up Checks

In some circumstances we will be required to carry out a follow-up check. There are two categories of documentation that can be provided:

1. Continuous excuse – this is where an individual can provide one or a combination of documents from List A and there are no restrictions on their right to work in the UK. Once the checking process has been completed and a copy of the document(s) have been retained, the procedure is complete, and no further checks are required.

2. Time-limited excuse – this is where an individual can provide one or a combination of documents from List B and there are time limits and restrictions on their right to work in the UK. The individual’s right to work in the UK will end when their visa or other right to work documentation expires. Restrictions may relate to the type of work the individual can do and/or the number of hours they can work. In such cases a repeat check must be scheduled prior to the expiry date of the individual to continue working. The frequency of the follow up depends which list the documents presented are from as shown below.

Document Type	Excuse Type	Frequency of Checks
List A	Continuous Time-limited	Before start of assignment or employment. No further right to work checks are required.
List B	Group 1	Before start of assignment or employment and again when permission expires.
List B	Group 2 Time-limited	Before employment starts and again after 6 months.

During the right to work check process, we will also follow the steps identified in our Modern Slavery & Human Trafficking Policy to reduce risks in this area.

EU Settlement Scheme

ICG Medical will support workers proactively to apply for the EU Settlement Scheme to assist them in obtaining settled status prior to the deadline. Workers from the EU, EEA and Switzerland will still be subject to the right to work checks identified above.

Induction policy

It is easy to forget how difficult the first day in a new job can be. There are new buildings, equipment, systems, policies and procedures, cultures and people to navigate. Agency staff may experience several ‘first days’ a month. It is therefore important to have an induction that is as detailed as possible on each new environment you work in or when you return to an area.

Purpose

It is our aim to supply staff that are qualified, suitable for the placement and able to work to their full potential and maximum efficiency in a very short time. An effective induction and appropriate support from a permanent member of staff are a vital part of this process. An effective induction will benefit the organisation and regular staff in the area as much as the agency worker.

Scope

Induction should be an enjoyable experience and once it has been completed the agency staff member should feel part of the team, committed, engaged and productive.

The policy applies to ALL staff regardless of grade or profession and the policy aims to ensure that agency staff induction is carried out as swiftly as possible. It is essential that induction is dealt with in an organised and consistent manner.

Procedure

When you arrive at a department/home for the first time you should introduce and identify yourself to the person in charge. It is **your** responsibility to ensure that you are given an induction. You must contact your agency immediately if an induction is refused for any reason so that this can be rectified.

To enable a consistent approach across all departments and to ensure that key topics are addressed, the minimum standards that a local induction should contain are:

- Orientation to the ward/department/area.
- All documentation.
- Key policies and protocols specific to the trust and department including management of patients whose condition is deteriorating i.e. MEWS/NEWS/PEWS.
- Bleep system if available
- Resuscitation policy, procedure or protocol.
- Fire procedure including location of fire exits and extinguishers or Personal Emergency Evacuation Plan (PEEP).
- Expectation of your role i.e. what is expected of you during your shift
- Limitations of role.
- Familiarisation and checking of with equipment.
- Location of local policies and procedures.
- Medications common to the speciality/area and any important information.

It is important to complete all aspects of the induction checklist for the area you are working in Please ensure also that you receive your induction from an experienced member of staff/carer before commencing the first shift.

Ensure you receive a copy of the induction you receive and that this is signed and dated by the person who provides the induction. They should print their name and NMC Pin Number. If you are working via Greenstaff

Community Services, you must ensure that you read the care plan and any risk assessments before you commence any form of caring.

Proof of specialist training (cannulation, venepuncture, chemotherapy, and administration of intravenous drugs – list not exhaustive) should be available if requested at induction.

NB. Due to the demands of healthcare work, occasionally you may not be able to receive every aspect of the induction listed above. In this instance, it is your responsibility as a Registered Nurse, Health Professional or Health Care Assistant to ensure you do not attempt any clinical procedure on a patient if at all unsure. Seek help from a substantive member of staff either in the ward/dept or from the site/bed manager if this is appropriate. For those working via Greenstaff Community Services seek help from a family member responsible for the client at home. You must always undertake procedures in a clinically safe way.

ICG Medical Code of Conduct

All temporary workers must abide by all the policies, procedures and Code of Conduct outlined by ICG Medical.

In addition, registered Nurses must also abide by the NMC Code of Professional Conduct: Standards of Conduct, Performance and Ethics (March 2015 updated 2018).

As a registered nurse, you are always professionally accountable for your clinical practice and professional behaviour. This is especially important as you work in different areas and encounter varying levels of support from permanent staff or working in a client's own home with a family member.

Code of Conduct

You must always treat all patients respectfully upholding their dignity and independence.

You must always respect and safeguard the privacy of all clients and patients in accordance with ICG Medical's confidentiality policy.

Confidential information must not be disclosed to any third party without written consent of the patient or appointed advocate, unless it is in the best interests of the patient. You must ensure that the Client organisation has given approval for the sharing of this information and it is provided in accordance with its policy and procedures. If there are any questions these should be referred to the ICG Medical senior nurse on call.

You must act with honesty and respect in relation to all patients' property and belongings.

You are expected to consistently meet the needs of all patients under your care, by promoting and safeguarding a patient's health and well-being. Staff members must immediately inform the relevant medical

professional and follow any relevant local policies and guidelines in the event of any deterioration in a patient's physical, social and mental well-being.

You must always act in a professional capacity and not discriminate on the grounds of age, race or ethnic origin, creed, colour, religion, political affiliation, disability/impairments, marital status, parenthood, sexual gender or sexual orientation. The values, customs and beliefs of all individuals you meet must always be respected regardless of whether they are patients/clients/health care colleagues or members of the public.

The consumption of alcohol, illegal drugs, solvents or other mind-altering substances which could affect your abilities to perform your duties safely is forbidden.

You must always be smart and presentable and wear your agency ID badge and uniform (unless advised otherwise at the time of booking). Uniforms should not be worn when travelling to and from work, in accordance with infection control measures. It is your responsibility to wear the correct uniform for your agency.

You are not permitted to witness, or be party to, patients' wills or any other legal documentation.

You must not be involved in any action that may be perceived as negative or damaging to the reputation or name of the agency. Nor must you share any confidential/business sensitive information concerning your relationship with the agency.

Any accidents or near misses involving patients or healthcare colleagues on duty with you must be reported immediately to the person in charge and local procedure followed.

You must obtain consent before starting any form of treatment or care with a patient.

You must ensure that all relevant documentation concerning patients is entirely complete, clear, concise, accurate and complies with the client organisation standards. No documentation related to a patient, including handover notes, can leave the department/ward/home when your shift finishes and must be destroyed, as appropriate, using the confidential waste procedure for the area.

When working with students, you must not act as a mentor or sign any documentation unless you have undertaken and have evidence of an accepted MENTORSHIP course and the client organisation's written permission to act as a mentor. You will however be required to supervise the practice of any individual you have delegated activities to during your span of duty.

If you are asked to move wards/clinical areas you must do so providing the area is within your clinical scope recorded on the NMC register i.e. general nurse, paediatric nurse etc. If you have concerns about your clinical skills/knowledge and, therefore, your ability to practice safely in the area you are asked to move to, you must ensure that you inform the requesting manager of these concerns. You must also notify your agency

immediately that you are changing areas. If you refuse to change areas, you will not be eligible for a cancellation fee unless the move is outside of your scope of practice as per your NMC registration. You must speak to the ICG Medical Senior Nurse on call if you feel the request to move is outside your scope of practice.

If you are requested to provide a statement as part of an investigation you must comply with the request within the timeframe provided to you by the Head of Nursing. The timeframe will be based on the urgency of the request from the client as well as the risks identified by the Head of Nursing.

If you are involved in an investigation with another organisation i.e. another agency or your permanent employer, you must inform the Head of Nursing for ICG Medical.

If you are referred to the NMC you must notify the Head of Nursing for ICG Medical immediately you are made aware of the referral.

If you become aware of what you think is fraudulent activity you must report this to either the Head of Nursing for ICG Medical or the Manager for your agency.

If you are concerned that you witness actions which could be termed as radicalisation you are required to report this immediately to ICG Medical Head of Nursing

In addition to the above Code of Conduct, please ensure that you are familiar with the following:

Payment: Following the change in legislation on 6 April 2017, and further revision on 6 April 2021, each public sector organisation and private organisation needs to decide whether a role is inside or outside IR35. All nursing roles that ICG Medical places into are currently designated as inside IR35. This means there are 2 different ways for ICG Medical to pay nurses as payment into a Limited PSC is no longer an option as we are legally required to make deductions as though you were working on a PAYE basis.

1. On a PAYE basis where ICG Medical deducts the tax and national insurance and pays you directly.
2. Through an umbrella company where the umbrella company is your employer and ICG Medical pays the company for your services. The umbrella company then deducts the tax and national insurance and pays you.
3. Generally, if all your agency work is with ICG Medical there should be no advantage to you working through an umbrella company. However, if you work through several different agencies it may simplify your tax arrangements to have an umbrella company as your sole employer. ICG Medical's list of preferred umbrella companies is available from our Finance Dept. on request.

Mobile Phones: Ensure your mobile is switched off during your shifts. If you need to make an urgent call you must seek permission from the person in charge before making the call.

Transport: Transport to and from work is your responsibility. We will provide directions or public transport routes or timetables if required. Unless alternative arrangements are agreed for those staff working via Greenstaff Community Services.

Lateness: We operate 24 hours a day, 365 days of the year, with a consultant always available. If you are running late for a shift, you must liaise with us, so we can inform the client. This helps maintain an honest and reliable service with our clients.

Cancelling a shift: If you are unable to fulfil a shift you have been booked for, you must contact your agency as soon as possible, so we have enough time to find a suitable replacement. Trusts now impose exclusions for nurses who have a history of cancelling at short notice – this varies from 2 -24 hours depending on the Trust.

You must follow the cancellation protocol for ICG Medical – you **MUST** verbally cancel your shift and must not use email, texts or forms of social media to provide cancellation notice.

Availability: Ensure you keep your agency aware of your availability and ANY changes to previously given availability.

Time sheets & DBS/PVG/Access NI: Always have a time sheet with you for the client to sign at the end of your shift. Always have a copy of your enhanced DBS/PVG/Access NI with you, you may be asked to show this.

Proof of Identity documentation. You must have your valid agency ID badge with you when on duty and provide confirmation of ID (i.e. other photographic ID) if requested.

Professional boundaries. You must always maintain professional boundaries with those in your care and their families.

Indemnity Arrangements. All nurses must have appropriate indemnity arrangements relevant to your scope of practice.

Community care – any changes to the rota in community care must be agreed with your consultant as not doing so may lead to a delay in any payments.

Healthcare support worker role definition

The healthcare support worker will carry out basic care to patients encouraging independence whilst respecting and maintaining their privacy and dignity. Healthcare Support Workers will work under the direction of a Registered Nurse and work with the multi-disciplinary team to ensure a high standard of care is achieved.

Key duties of healthcare assistants/ support staff members

Includes, but not limited to:

- To provide patient care in support of a registered nurse / senior person in charge to ensure delivery of high-quality patient care.
- Record and report patient observations clearly and accurately in care plans to ensure maintenance of up-to-date records.
- Recognise when a patient's observations or condition is deteriorating and inform a registered nurse.
- Always maintain patient confidentiality.
- Recognise situations detrimental to the health and wellbeing of the patient.
- Ensure the privacy and dignity of the patient is maintained always.
- Maintain a good relationship with an empathetic approach to all patients' carers and relatives. Refer them to a trained nurse / senior person in charge if they have any questions on the patients' condition or any issues that they wish to discuss.
- Co-operate with and maintain good relationships with other healthcare professionals that are attending to and treating patients.
- Maintain a safe and secure environment for Patients, Staff Members and Visitors.
- Protect the safety and property of the patient.
- Assist with social activities by interacting with patients and helping them continue with their hobbies and activities where possible.
- Safeguard the patient from abuse and neglect. Immediately act upon any suspicions of abuse and neglect.
- Work within unit policies and procedures to ensure maintenance of safe working practices for patients and colleagues.
- Adhere to ward and unit procedures for the use of supplies and equipment to promote the effective and efficient use of resources.
- Maintain stock levels of all supplies and carry out housekeeping duties, to support the smooth running of the unit area.
- Participate in a personal career development plan to maintain skills and develop personal growth through training and education.
- In complex Care Services the Care assistants / support workers will work within the boundaries of the care plan provided and ensure all risk assessment are adhered to.

Registered nurse role & commitment to professional support & development

As a registered nurse, ICG Medical requires you to have the ability to organise your own workload with regards to the assessment, planning, implementation and constant evaluation of /patients' needs through a programme of care which is evidence-based and utilises all available resources.

As a registered nurse, you will also take into consideration the lifestyle, gender and cultural background of the client/patient whilst ensuring the patient, client, family, carers and significant others are fully involved and informed as much as the patient wishes in the care process.

As a registered nurse, you will also liaise closely with all members of the multidisciplinary team and protect all confidential information concerning your client/patients.

All registered nurses are accountable for their clinical practice under the NMC Code which was updated October 2018.

All nurses also have a contractual accountability to ICG Medical and will receive professional line management from a member of the agency senior Nursing Team.

The agency senior Nursing Team will provide you with feedback through, appraisal and where appropriate clinical supervision.

The agency senior Nursing Team will also provide support to you as you gather evidence for your revalidation. The agency senior Nursing Team can also undertake the Nurse Discussion and Confirmation Role during revalidation as appropriate. You are advised to contact the Head of Nursing at least 4-6 months BEFORE your revalidation is due so appropriate advice and preparation can be provided.

Core responsibilities

Includes, but not limited to:

Practice within the legal and ethical framework as established by the Nursing & Midwifery Council, Care Inspectorate and legislation to ensure patient needs are continuously met.

Empowering patients to take responsibility for their health, wellbeing and future lifestyle by practising in an open and transparent manner thereby ensuring patient autonomy.

Involvement in constant re-evaluation and development of new care plans.

Responsible for ensuring that subordinates adhere to the policies, procedures and care plans.

Safeguard the patient from any form of abuse and/or neglect. Immediately act upon any suspicions of abuse and neglect.

Protect the safety and property of the patient.

Communicate and work effectively as a member of the multi-disciplinary team when required.

Maintain clear and accurate records to maintain and enhance continuity of patient care.

Keep consistently up to date to ensure evidence-based practice.

When working within families own homes to work in partnership with the families. Whilst maintaining professional boundaries.

Clinical staff health

Occupational health review

All temporary workers are required to complete a medical questionnaire to assess their fitness to work in the areas they will be placed. This will be reviewed annually and if health concerns are identified during the year which impact on your ability to meet the requirements of the role you undertake for ICG Medical when on placements/shifts.

Immunisation

All temporary workers are required to have up-to-date immunisations. Currently these are Varicella, Measles, Rubella, TB and Hepatitis B. If we do not have written evidence of up-to-date immunisations the staff member will not be placed on shifts. We advise all staff to access an influenza vaccination annually normally available October. All clinical staff are also advised to have Covid Vaccination and any subsequent additional vaccines when required.

Health screening

All temporary workers may be required to undergo a health screening to determine suitability for work on applying and subsequently.

Medical examination

All temporary workers may be requested to undergo a medical examination by a Trust prior to the commencement of any work or as the organisation deems necessary.

Pregnancy

If you are pregnant or become pregnant while working for the agency, you must inform us. It is recommended that pregnant temporary workers also seek independent professional advice regarding their suitability to continue/discontinue work.

Client and Patient Confidentiality Policy

The policy has been produced to guide staff in protecting confidential information. All temporary workers are required to comply with this policy. If you belong to a professional body e.g. doctor, nurse, then the regulations produced by your professional body must also be included in your practice.

Specific information related to Caldicott Principles, data protection, consent and record keeping is also provided in this policy

Confidential information

A duty of confidence arises when one person discloses information to another (e.g. patient to nurse) in circumstances where it is reasonable to expect that the information will be held in confidence. It is:

- A legal requirement.
- A requirement established within professional codes of conduct.

Included within the ICG Medical employment contract is a specific requirement the relevant policies and procedures related to all temporary workers

- When patients share information relating to their health they do so in confidence and expect staff to respect their privacy and act appropriately. It is essential, if the legal requirements are to be met and the trust of the patient is to be retained, that agency supply staff provide a confidential service.
- In general patient information is held under legal and ethical obligations of confidentiality. It should not be used or disclosed in a form that might identify the patient without their consent.

Disclosing patient information

Prior to considering the disclosure of patient information it is essential you know the local procedure of the organisation you are working within:

- Whilst caring for patients it may be necessary to share information between team members, care teams or other departments/organisations to provide a high quality of care.
- It is extremely important that the patient is made aware of disclosures that must take place to ensure the patients care needs are met.
- Patients have the right to object to the use and disclosure of confidential information. However, if it is considered that a patient's treatment would be compromised if information was not disclosed, then the patient must be informed of the possible consequences of this.
- Where patients are informed of the use of disclosure, understand the choices and agree to the disclosure, then explicit consent has been given, this can be verbal or written (DOH Confidentiality: NHS Code of practice pages 29-34).

What are your obligations?

- Patient data controlled by your placement site falls under the EU General Data Protection Regulation. As such, all staff have a legal duty to protect personal information they may encounter during their work.

- All temporary workers must meet the standards outlined in the Code of Conduct so that information that is confidential is not compromised.
- Temporary workers should understand the Freedom of Information Act 2000 so that they know what information can be disclosed and what information is classified as confidential.

Requests for information on patients

- Never give out information on patients or staff to someone who does not 'need to know'.
- Always know who the patient has nominated as next of kin. All information to family and friends should be channelled through the next of kin.
- You should know the scope of the information to be given to the next of kin and any limitations.
- When dealing with a telephone enquiry, take a number, verify it independently and call back once you are sure of the identity of the caller and if they are entitled to the information they request.

Carelessness

- Do not talk about patients in public places where you can be overheard.
- Do not leave any medical records or confidential information lying around unattended.
- Make sure that the general public cannot see any computer screens or other displays of information.
- Handover sheets must never be taken home. Shred or place in a confidential waste bin at the end of your shift.
- Be aware of limitations to patient confidentiality, e.g. when handing over at a patient's bedside.

Caldicott principles

The 'Caldicott' principles and recommendations apply specifically to patient-identifiable information and emphasise the need for controls over the availability of such information and how to access it. The six Caldicott principles, applying to the handling of patient-identifiable information, are:

Principle 1: Justify Purposes – Individuals, departments and organisation must justify the purposes for which information is required.

This includes justifying the purposes to the public for specific clients within each organisation. Every proposed use or transfer of patient-identifiable information within or from an organisation should be clearly defined and scrutinised, with continuing uses regularly reviewed by an appropriate guardian.

Principle 2: Do not use patient-identifiable information unless it is absolutely necessary.

This means assessing information flows and use, ensuring that patient-identifiable information is removed unless a genuine case can be made for its inclusion and there is no alternative. The need for patients to be identified should be considered at each stage of satisfying the purpose.

Principle 3: Use the minimum amount of necessary patient-identifiable information.

Where use of patient-identifiable information is considered to be essential, each individual item of information should be considered and justified so that the minimum amount of identifiable information is transferred or accessible as necessary for each given function to be carried out.

Principle 4: Access to patient-identifiable information should be on a strict need-to-know basis.

Only those individuals who need access to patient-identifiable information should have access to it and they should only have access to the information items that they need to see. This may mean introducing access controls or splitting information flows where one information flow is used for several purposes.

Principle 5: Everyone with access to patient-identifiable information should be aware of their responsibilities.

Action should be taken to ensure that those handling patient-identifiable information, both clinical and non-clinical staff are fully aware of their responsibilities and obligations to respect patient confidentiality.

Principle 6: Understand and comply with the law.

Every use of patient-identifiable information must be lawful. Someone in each organisation handling patient information should be responsible for ensuring that the organisation complies with legal requirements.

General Data Protection Regulation (GDPR)

The EU General Data Protection Regulation replaces the Data Protection Act (1998). You must maintain the confidentiality of all information regarding clients, staff and other health service businesses in accordance with the GDPR. Further information on GDPR can be found at <https://ico.org.uk>

You must not, without prior permission, disclose any information regarding clients or staff. In circumstances where it is known that a staff member has disclosed information to an unauthorised person, that staff member will be liable for dismissal. The GDPR also renders an individual liable for prosecution in the event of unauthorised disclosure of information.

Information regarding patients is also subject to GDPR rules. You should follow the patient consent guidelines below, understanding you are processing data following the rules of the placement organisation (the data controller).

Social media technologies take on different forms, and include but are not limited to, magazines, internet forums, weblogs, social blogs, microblogging, wikis, social networks, podcasts, photographs or pictures, video rating and social bookmarking.

Technologies include blogging, picture sharing, vlogs, wall-posting, music sharing, crowdsourcing and voice over IP. Essentially, computer-mediated tools that allow people to create, share information, ideas and

pictures/videos in virtual communities or networks. Well known sites include (but are not limited to); Twitter, LinkedIn, Google+, Pinterest, Instagram, Tumblr, Facebook, Foursquare, Yelp, Qype, YouTube and Wikipedia.

Those using social media must be aware of data protection issues and ensure that confidential, personal and proprietary information is protected. No-one should post personal information about anyone other than themselves.

All content is subject to libel law. Inappropriate or inaccurate comments which are damaging to a person's reputation should be avoided, as they could result in a claim of libel. To prove such a claim, a permanent statement is needed, usually in written text, video or pictures. Social media postings should be considered as permanent statements in this way.

The misuse of social media, or the posting of inappropriate content, may result in disciplinary action or referral to a professional body such as the NMC or HPCC,

All registered nurses must be familiar with and follow the NMC Guidance on Using Social Media Responsibly

Patient consent

All Healthcare workers must ensure:

- Consent is obtained before giving any treatment or care to a patient.

To ensure informed consent and patient autonomy, all patients are entitled to receive and understand information about their condition and treatment and therefore have a right to refuse healthcare intervention. All decisions must be respected by the healthcare worker.

Before any treatment or care is given to a patient who is not legally competent, valid consent must be sought from the legal guardian or next of kin who is legally competent on behalf of the patient. Information given must be accurate and truthful and presented in such a way that the information will be understood.

All temporary healthcare workers must ensure they are familiar with the policies related to consent in the organisation they are being placed to work by ICG Medical agencies.

All temporary healthcare workers must document their actions in relation to obtaining consent. All Healthcare workers must ensure:

- Consent is obtained before giving any treatment or care to a patient.

If, in doubt, ICG Medical require their nurses to seek clarification from a substantive member of staff in the placement location or from the Head of Nursing.

ICG Medical Uniform Statement for all temporary workers

All temporary workers must present themselves in a standard of dress and appearance consistent with a high professional image. This is to ensure that the patient becomes familiar with the identity of our staff, and to foster confidence in the image and professionalism of ICG Medical.

All temporary workers are required to wear their ID badge and uniform or alternative dress code as specifically advised at the time of booking. You must not assume you can wear scrubs unless you are advised of this by your Consultant as it is a Trust decision. For those working in settings where non-uniform is required you must abide by the clients dress code. This will apply to all hours spent on duty.

You must not wear your uniform to or from work but change on arrival to decrease the risk of cross infection.

Clean, presentable and covered shoes must always be worn. High-heeled or platform shoes must not be worn due to the potential safety hazards that they can present.

For Health & Safety reasons, no jewellery other than plain wedding rings or plain ear-studs should be worn. If you have a form of jewellery which has significant cultural or religious importance for you, please notify your agency so they can obtain the relevant feedback for you from the Trust you will be working at to pre-empt any issues which may arise.

Nail varnish, or false nails must **not** be worn on duty due to potential infection risks.

Hair must be worn in a manner, so it does not sit on or below your shoulders.

It is the responsibility of all temporary workers to launder their uniforms to meet infection control guidelines and to ensure they are kept clean, tidy and look presentable on every shift.

Complaints and concerns policy

To develop and maintain the high standards to which ICG Medical aspires, the following principles are followed to ensure we can:

- Create professional relationships with our clients and the people who use their services.
- Search for and establish the truth via our investigation process.
- Communicate the facts and actions established as part of our investigation.
- Manage the process for handling complaints or concerns in accordance with our established procedure.
- Facilitate learning from complaints including where appropriate involvement in Root Cause Analysis/Serious Untoward Incident investigations led by Trusts/clients. Feedback via other routes such as email etc.
- Provide monthly Clinical Complaints Analysis Report to ICG Medical Clinical Concern Governance and Risk Committee

- Ensure all those in the process are provided with appropriate advice and support at each stage be it from within ICG Medical or via other organisation such as professional body/union.

Complaints and concerns procedure

The following outlines our procedure for handling a complaint or concern:

Receipt of Complaint/Concern

All complaints/concerns received by phone, email, and fax, or in person will be directed to the Head of Nursing and will be dealt with at Stage 1 of the procedure where possible.

Where necessary the nurse may be suspended completely from work at the discretion of the Head of Nursing. Where the client requests the agency, nurse does not work with them until the complaint is resolved, the Nursing Team will ensure the nurse and the booking team are informed and the booking system amended to enforce this exclusion.

Stage 1

The Nursing Team will attempt to resolve the issue informally depending on the clinical nature of the issue. The Nursing Team may decide to move straight to stage 2 depending on the nature and risk associated with the complaint/concern.

If the client accepts the informal resolution, then no further action is required providing the staff member does not present a risk to patients/colleagues.

The outcome of the complaint will be notified to the client, nurse and the complaint closed on the Complaints System.

If the complaint cannot be resolved to the client's satisfaction in stage 1, then the Nursing Team will commence a formal investigation and move to stage 2 of the procedure.

Stage 2

The Nursing Team will acknowledge the complaint/concern within 1 working day of receiving a complaint/concern.

Stage 2 Response

The Stage 2 response will be sent to the client once all investigations are complete. The response will give an overview of the complaint/concern and will provide the client with the findings from the investigation and action taken as a result.

The Nursing Team will endeavour to investigate and resolve the complaint/concern within 10 working days of receipt of the complaint. If the complaint is not resolved within 10 working days a letter should be sent to the client detailing why the complaint remains unresolved.

If further supporting information is required from the client (e.g. witness statements, patient notes); the information will be requested by the Nursing Team from the client. It is expected this will be provided within 10 working days of the date of request for the investigation to continue.

Information to be provided for Stage 2 response

A balanced approach will be taken to handling the complaint/concern providing both an account of what happened and, where appropriate, actions taken. The response will be focused on the specific issues raised by the client. In particular: Where there has been a service failing or a clinical practice issue e.g. drug administration error, a clear apology and an account of corrective actions taken (or that will be taken) will be provided with associated time frames.

Where the client is dissatisfied because their expectations are greater than the agreed standards and/or entitlement for service delivery, this will be clearly explained.

The client will be assured that the information provided through their complaint/concern will be used to assist us to identify future priorities and will also be used as an opportunity for further involvement in service planning and consultation where appropriate.

An offer to contact the Nursing Team for further discussion where the client is satisfied with the response but has further queries or is undecided as to whether to escalate the complaint to Stage 3 will be offered.

Advice on how to escalate the complaint/concern to Stage 3.

Why we take this approach:

It is important that the quality of all Stage 2 responses satisfies as many clients as possible and ensure that recourse to Stage 3 complaints/concern is not required. We recognise however that clients may not feel the issue has been resolved and may wish a review to be undertaken.

Stage 3

If the client is not satisfied with the response to their complaint, they may request a review of the findings and actions.

An acknowledgement letter will be sent within 1 working days of receiving a complaint by the Head of Nursing or nominated deputy for ICG Medical, who will undertake the review.

Stage 3 Response

The Stage 3 Response will be sent to the client when an investigation has been completed and made on the most appropriate response to the client.

The response will give an overview of the complaint/concern and will provide the client with a full response of their findings and recommended actions.

Complaints/concerns at stage 3 should be responded to within 5 working days from the date they are received. If this timescale cannot be met due to the nature of the complaint/concern, a letter will be sent explaining the delay.

ICG Medical is committed to the delivery of a high-quality service to all our clients.

The standard of our complaints/concerns policy and procedure will be monitored through feedback from our clients and nurses/staff involved in complaints/concern.

Complaints/concerns from temporary workers regarding clients

Agency nurses will have the opportunity to discuss their concerns with a member of the Nursing Team who will then advise the nurse how they will handle the issue complaints/concerns may initially be verbal or in writing/via email. The nurse raising the concern will be supported by a named member of the Nursing Team during this process.

The Nursing Team immediately notify the client concerned and request a written statement in response to the complaint. Full written records including all subsequent action and correspondence will be maintained.

The Nursing Team will discuss an appropriate course of action with both the staff member and the client. This course of action will be followed up and each party kept fully informed of progress or deterioration of the situation. If a solution cannot be reached to the satisfaction of both parties, the nurse will temporarily be removed from their duties and placed with another client.

Where a nurse is anxious about the complaint/concern, Head of Nursing or a Senior Nurse will use the Whistle Blowing Policy.

NB: Clients and temporary workers in Scotland can also contact the Care Inspectorate with any concerns or complaints they have concerning patient care or the investigation processes. The contact email address is complaints.NEL@careinspectorate.com or telephone number is 03456009527

NMC/HCPC/SSSC referral process

At any point from initial receipt of the complaint/concern the Head of Nursing or a member of the Nursing Team may decide to refer an agency worker to their regulating body. This decision will only be taken when the staff member presents a significant risk to the patient, their actions have constituted gross misconduct, or the Head of Nursing deems that a breach of the Professional Standards of the regulatory body have taken place which are beyond the management of the Head of Nursing.

The Head of Nursing will ensure the registrant is provided with an explanation of the reason for the referral.

The Head of Nursing will hold responsibility for monitoring the progress of the regulating body's investigation and oblige with any requirements they may have.

We always aim to protect the public from registrants whose fitness to practice is impaired and whose situation cannot be managed locally. The following are examples of complaints that would result in a referral are:

- Fraudulent or incorrect entry in the relevant register.
- Physical, sexual or verbal abuse.
- Lack of competence.
- Theft.
- Failure to provide adequate care.
- Falsification of patient records.
- Deliberately concealing unsafe practice.
- Failure to keep proper records.
- Breaching patient confidentiality.
- Failure to administer medicines safely.
- Committing criminal offences.
- A conviction or caution (including a finding of guilt by a court martial).
- Continued lack of competence despite opportunities to improve.
- Physical or mental ill health which impairs fitness to practice.

- Untreated serious mental illness which impairs fitness to practice.
- A finding by any other health or social care regulator or licensing body that a registrant's fitness to practise is impaired.
- Alcohol or drug dependence.

The above list is not exhaustive; we will always seek advice from the regulatory body if any other complaints not listed above warrant referral.

If any of the above listed complaints are reported to ICG Medical, it is our policy to suspend the nurse immediately until the investigation has been completed and the complaint resolved. This is a neutral act. Those involved will be offered support by ICG Medical or the Head of Nursing from ICG Medical where appropriate.

Client Trusts will also be kept informed by the Head of Nursing or a member of senior Nursing Team of the Case reference number once issued to us by the regulatory body and the progress of the case when notified by the regulatory body.

Infection Control Policy

It is paramount that infection control precautions are strictly adhered to. Always observe local policies and procedures on infection control. Care of patients who are particularly frail or who suffer from lowered immunity should not be cared for by employees suffering from colds, influenza or other minor ailments.

All nurses must ensure they are familiar with the local Infection Control policy for the location they are working within

All nurses must ensure their clinical practice reflects current recommendations on reducing the risk of harm to their patients by ensuring they know and following the principles of reducing the risk of spreading infection.

ICG Medical nurses can discuss any concerns they have with a Senior Nurse who will provide professional advice and offer support to the nurse.

Blood-borne Virus Preventative Measures

Infection control measures to prevent the transmission of blood-borne viruses include:

- Apply good basic hygiene by always washing your hands at the start and finish of a shift, before and after meal breaks, before and after all clinical procedures, after using the bathroom.
- Always dry hands thoroughly.
- Cover any existing wounds, cuts, skin lesions and bruises with a waterproof dressing.

- Avoid invasive procedures if suffering from chronic skin lesions on hands and fingers.
- Use appropriate rubber gloves if you suspect you will come into contact with blood, bodily fluids or open wounds. Dispose of the used gloves appropriately.
- Use a plastic apron, facial mask, and eye goggles to protect yourself from bodily fluids, ensuring appropriate disposal of aprons and protective equipment in accordance with local client's policy.
- Clean up any spillages of blood and other bodily fluids promptly and disinfect surfaces.
- Always adhere to safe procedures for the handling and disposal of all needles and other sharps in sharps bins only.
- If an incident occurs where a person with open wounds comes into contact with bodily fluids or blood, report the incident immediately and follow local protocol. An incident report should also be completed.
- Ensure approved procedures for sterilisation and disinfection of instruments and equipment are in use.
- Ensure a procedure for the safe disposal of contaminated waste is in place.

Any ICG Medical nurse who has or believes they have been infected with a blood-borne virus should seek confidential and professional medical advice. Any nurse thought to be infected with a blood-borne virus should have their viral load monitored regularly and should not return to work unless agreed fit by a GP. The agreed viral load level varies depending on the infection. If a nurse discloses a positive infection status, all information will be treated in the appropriate manner. We recognise that nurses with a blood-borne virus are suitable for a wide variety of nursing and caring tasks where there are no exposure-prone procedures.

To avoid risks of cross-infection, it is paramount that infection control precautions are strictly adhered to and it is essential that all incidents that may result in the spreading of blood-borne viruses be reported. Incidents in a hospital, nursing home or other institution should be reported and recorded in accordance with the policies of the institution. All incidents should also be reported to ICG Medical Nursing Team as soon as possible.

Environment

All nurses must adhere to environmental policies in place in the organisation you are working within. This will include recycling paper waste where possible. All sharps should only be disposed of in a sharps bin and all glass should be properly disposed of in the appropriate bins provided in the workplace.

Methicillin Resistant Staphylococcus Aureus, or MRSA.

As a result of the increased widespread use of antibiotics to treat infections, antibiotic-resistant strains of Staphylococcus Aureus have evolved and are known as MRSA.

MRSA does not constitute a hazard or cause a problem in healthy people. MRSA can cause serious infections in the vulnerable including clients already ill, the immuno-compromised, clients with open wounds, the debilitated and the elderly.

Staff in contact with MRSA positive patients will be required to observe and practice the universal precautions for infection control contained in the local Infection Control policies and procedures. Patients who are MRSA positive will not be discriminated against.

Clostridium Difficile (C. diff)

C. diff is a bacterium that can infect the bowel and cause diarrhoea.

The infection most commonly affects people who have recently been treated with antibiotics but can spread easily to others.

C. diff infections are unpleasant and can sometimes cause serious bowel problems, but they can usually be treated with another course of antibiotics. C. diff can spread easily to other people because the bacteria are passed out of the body in the person's diarrhoea.

Once out of the body, the bacteria turn into resistant cells called spores. These can survive for long periods on hands, surfaces (such as toilets), objects and clothing unless they're thoroughly cleaned, and can infect someone else if they get into their mouth.

Someone with a C. difficile infection is generally considered to be infectious until at least 48 hours after their symptoms have cleared up. Staff in contact with C Diff positive patients will be required to observe and practice the universal precautions for infection control contained in the local Infection Control policies and procedures.

Norovirus (or winter vomiting virus)

Norovirus, which causes diarrhoea and vomiting, is one of the most common stomach bugs in the UK. Someone with Norovirus is considered infectious until they are 48 hours after their last symptom. Staff in contact with patients who are experiencing symptoms will be required to observe and practice the universal precautions for infection control contained in the local Infection Control policies and procedures. You must notify your agency if you have been exposed to patients with Norovirus as you will NOT be able to work in non-affected wards/depts. until you outside the 48-hour timeframe for transmission.

Any nurse who contracts Norovirus must not return to work until they are symptom free for 48 hours.

Coronavirus (COVID19)

Coronavirus is a disease identified by the World Health Organisation in December 2019. Which is contagious and for some people gives a mild illness but in others can be fatal. Due to the speed of change in the advice on prevention, management, treatment of the disease and vaccination.

All staff must adhere to the guidance provided by the UK Government and devolved Governments for Northern Ireland, Scotland and Wales. The advice is found on NHS websites as well as on the NMC website.

Communications will also be sent via the Head of Nursing as required and will be available on your agency brands website as well as the ICG Medical webpage.

If you have any questions, concerns, require an updated risk assessment or have potential COVID symptom you must speak to the Head of Nursing who will be able to assist you. If you or a person you live with has suspected Covid symptoms which include a high temperature, persistent cough or loss of sense of taste and/or smell you must isolate immediately and inform your agency. You will not be permitted to work until you have proof of a negative swab result.

Medication Policy

You must not administer controlled drugs, IV drugs or blood products unless the specific local training has been undertaken and approved.

It is a requirement of ICG Medical that the Registered Nurse/Midwife has read the local Medicines Administration policy and has had a full explanation of the prescription chart before administering medicines. Failure to comply may lead to disciplinary action in the event of a medication error.

A Greenstaff Community Services medication policy is available for staff working in the community and this must be adhered to when working in this environment.

Any nurse who does not comply with guidelines on the administration of medicines could have committed a criminal offence and could also be liable to investigation and action by the NMC as well as removal from working with ICG Medical agencies.

Purpose

It is the aim of ICG Medical to ensure that the administration of all medicines by nurses/midwives is in accordance with statute, local rules and guidance issued by the relevant professional experts.

The NMC recognise that nurses need professional guidance on administering medication but since January 2019 they have advised it is not in their remit to provide this. All ICG Medical Nurses and Midwives are advised to be familiar with the January 2019 publication "Professional Guidance on the Administration of Medicines

in Health Care Settings” from the Royal Pharmaceutical Society and Royal College of Nursing. This is also endorsed by the Royal College of Midwives.

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

A nurse must be competent to administer medicines in accordance with NMC Code of Practice.

Hospitals and nursing homes will have their own system for administering medicines. It is each nurse’s responsibility to ensure they are familiar with the policy and system used within the establishment to which they have been assigned. It is imperative that you are familiar with the prescription charts, identification methods and recording systems before administering medicines.

Agency nurses may administer medicines, gases, dressings, nasogastric medication, peg feeds and rectal drugs as per local policy for agency nurses administering medicines and be competent to do so.

Agency nurses may not administer intravenous medicines unless they have evidence showing completion of an intravenous therapy course and obtained specific permission from the client organisation – this should be confirmed prior to shift commencing. In some organisations, for agency staff to administer intravenous drugs, the local training and assessments must be completed. If agency nurses are permitted to administer intravenous medicines, it is the nurses’ responsibility to know the local guidelines governing the administration of intravenous medicines and to be fully competent with all equipment used for intravenous drug administration.

Local prescribing is determined by each organisation and no agency nurse/midwife should undertake this without written approval from the organisation they are working with.

Procedure for general administration of medicines

All medicines (except for controlled drugs) including intravenous fluids and prescription-only topical medications are to be administered only when prescribed in writing and signed for on an appropriate patient prescription sheet.

At administration, if the label is illegible or detached, the drug should not be given, and the container returned to the pharmacy. The prescription chart being annotated to show this.

When a medicine trolley is not in use, drugs must be kept locked and secured to a fixed point and/or kept in a locked secure area. When unlocked, a medicine trolley must be kept under constant surveillance.

Once medicine administration has commenced the nurse should not be disturbed for any reason other than a medical emergency.

Completion of prescription sheet and record book are the responsibility of the administering nurse.

When giving medication, the following procedure must be followed:

Know the therapeutic use of the medicine to be administered, its normal dosage, side effects, precautions and contra indications.

Be certain of the patient's identity. If worn, identification bands must be checked prior to administration. In areas where identity bands are not worn and there is no photographic identification, the nurse should be accompanied by a regular member of staff i.e. trained nurse or care assistant within the establishment who can confirm identity of the patient.

- Read the prescription carefully and make sure that it is signed.
- Check time of last administration.
- When relevant, carry out specific observations that are required to confirm if it is safe to administer the drug.
- Select the medicines required, check the label with the prescription and expiry date, noting any special instructions and any recorded sensitivities of the patient to medicines.

Prepare the medicines as described below by checking the:

- Name of the patient.
- Drug and route.
- Dose.
- Calculation, if any.
- Time of administration.
- Frequency.
- Duration.
- Additional instructions e.g. to be taken after food.

Take the measured dose and prescription sheet to the patient. Confirm the patient's name; hospital/identity number and date of birth either verbally or by checking the wrist band.

Administer the medicine by the correct route.

The nurse should witness the administration of all medicines and satisfy themselves that they have been taken. Never leave medication unattended with the patient to take.

Record the administration of the medicine by initialling the appropriate section on the prescription sheet.

A clear and accurate record must be made of the reason why the medicine was not administered and what action was taken by the nurse in the nursing notes. The prescriber and nurse in charge should be informed when appropriate.

General administration of controlled drugs

Controlled drugs may only be administered on the written instructions of the prescriber.

All controlled drugs must be administered by one nurse with an additional nurse acting as a witness, unless you are a lone worker where local community policy must be adhered to.

Preparation and administration of the controlled drug, completion of prescription sheet and record book are all the responsibility of the administering nurse.

In addition to the standard checks outlined above for drug preparation and administration, when giving a controlled drug the following procedure must be followed.

Check the total amount of stock corresponds to the last entry in the controlled drugs book or in patient's community notes.

Accompanied by the witness, take the measured dose and prescription sheet to the patient. Confirm the patient's name, hospital number and date of birth, either verbally or by checking the wrist band.

Administer the drug noting the time of administration on the prescription sheet and record book. Entry must be countersigned by witness in prescription sheet.

Enter the details in the Controlled Drug Record Book, together with the signatures of the witness and the nurse/midwife who administered the drug.

As an agency nurse, you must enter their full name, designation, signature and name of agency, in the Controlled Drug Record Book as required by local policy for future identification.

If a controlled drug is wasted or only partially used, it must be destroyed as per local policy in the presence of the witness and a record made.

Drug errors

This applies to all staff including staff working in the community services.

If an error in the administration of a medicine is made, for example:

- a. A patient is given a medicine that has not been prescribed.
- b. An incorrect dose of medicine is given to a patient.
- c. A patient is given the correct drug at the incorrect time interval.

- d. A medicine is administered by the wrong route.
- e. A medicine is administered late.
- f. Or, there is an unplanned omission of a medicine to a patient.

The priority must be to minimise potential or actual harm to the patient. It is the responsibility of the nurse in charge to ensure the patient is informed at an early stage.

The local policy must be adhered to in the case of drug error. The nurse must make a record of the occurrence in the patient's nursing notes, report it to the nurse/coordinator in charge and prescribing doctor, then write out an incident report.

NB. The ICG Medical Head of Nursing must also be informed of the drug error as soon as possible. A statement of events, a reflective statement on why the error occurred and if possible, a copy of the incident report, must be submitted within 48 hours of the drug error.

Verbal orders

It is highly advisable that agency nurses do not take verbal orders over the phone, under any circumstances. If local organisational policy allows verbal orders it should be taken by a permanent member of staff and witnessed by the agency nurse.

Every nurse must ensure they are aware of the local policy on verbal orders as some establishments do not under any circumstances permit the taking of verbal orders over the phone even for permanent staff. Some establishments allow the taking of verbal orders over the phone only in emergency or exceptional circumstances and if the prescribing doctor has a compelling reason for not being able to attend personally.

The instruction may only be accepted by a qualified nurse who must immediately record the instruction in the patient's notes with a clear annotation indicating a verbal order. After the order, has been written in long hand it must be read back to the doctor in the presence of another trained nurse who will sign as witness. When the drug is administered, it must be countersigned by the witness.

Self-administration

Every nurse must find out the local policy for patients self-administering medicines. A procedure must be in place on the ward which includes an assessment protocol to ascertain whether a patient is capable of safely self-administering their medicines. This will include an assessment to ensure that the patient understands their responsibility for the safe storage of their medicines and that they must be locked away in the bedside locker provided when not in use.

Unauthorised administration or misuse of medicine

In 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 is the same.

Unauthorised use of medicines by staff e.g. misappropriation or self-medication is a serious offence.

Record Keeping Policy

'Record Keeping' is defined as the recording of information regarding patient care in any form of clinical environment or during a clinical interaction.

Record keeping is an integral part of nursing and midwifery practice. It is a vital tool of professional practice and should help facilitate the care process. Good record keeping helps to maintain high standards of care and to protect the welfare of patients by promoting:

- Continuity of Care.
- Better communication and dissemination of information between members of the inter- professional healthcare team.
- An accurate account of treatment, care planning and delivery.
- The ability to detect problems, such as changes in the patient's condition at an early stage.

The quality of record keeping is also a reflection of the standard of professional practice. Good record keeping is a mark of the skilled and safe practitioner, whilst careless or incomplete record keeping often highlights wider problems with the individual's practice.

There is no single model or template for a record. The best record is the product of the consultation and discussion that has taken place at a local level between all members of the inter-professional health care team and the patient. It is one that is evaluated and adapted in response to the needs of the patient. It is one that also enables any registrant to care for the patient, regardless of their role within the care process or care environment. It is an invaluable way of promoting and maintaining communication within the healthcare team and between practitioners and their patients. Good record keeping is the product of good teamwork and a crucial tool in promoting high quality healthcare.

The NMC believes that there are several key principles that underpin good reports and good record keeping. The minimum requirements to ensure safe recording of information are listed below:

- Documentation should be factual, consistent and accurate.
- Handwriting is legible.
- Details recorded are clear and accurate with all relevant information recorded.

- Entries must be signed, timed, dated and your name clearly printed – some organisation will require you to provide your NMC pin number on the records.
- Entries should be recorded in the correct area of the patient's documentation.
- Details must be written as soon as possible after an event has occurred.
- The documentation must be written clearly and in such a manner that the text cannot be erased. If an error is made one line should be placed through the error and the entry signed and dated but the text must be left legible
- Ensure patient documentation is kept in the designated area and not readily accessible or readable to non-health professionals.

ICG Medical expects all nurses to maintain the standards above and so examples of your documentation maybe be reviewed to ensure these standards are being maintained.

Those working in the community should use whatever types of recording medium provided by the lead agency. Detailed recording of all aspects of care given and the clients condition is essential.

Whistle Blowing Policy

Purpose

The purpose of this policy is to set out clear guidance for temporary workers who wish to express their concerns on practices being undertaken at any of the hospitals or establishments that they have been allocated to work at.

This policy seeks to underpin:

- Clear understanding that ICG Medical encourages the reporting of all suspicious or any serious malpractice witnessed whilst on duty.
- That all temporary workers can report any activities without fear or intimidation.
- That all matters will be dealt with confidentially and in accordance with the Public Interest Disclosure Act 1998.

Policy

ICG Medical will strive to achieve the purpose of the policy by adhering to the following guidelines:

All temporary workers must inform the agency of the following incidents:

Any criminal/suspicious incidents involving a temporary worker and/or client.

All witnessed cases where either a temporary worker or client is exposed to risk, abused or deceived.

We encourage all temporary workers and clients to report any of the above incidents. The identity of the person reporting the incident will remain confidential and they will be reassured of this prior to making a report.

What happens after you make a report?

After receiving a report, the Nursing Team will make confidential enquiries to establish whether the report requires an in-depth investigation.

Once the initial enquires have taken place, all parties concerned will be informed as to whether an in-depth investigation will take place or not.

If the incident is not classed as a serious offence, we will follow the usual procedure.

What if the incident is serious?

If the incident is classed as a serious offence, we will take the following actions:

- Any temporary worker working for ICG Medical involved in the offence will be suspended with immediate effect until resolution has been made.
- All temporary workers involved will be informed of the nature of the enquiry and the rights and obligation that they have throughout the investigation. All staff members will be dealt with fairly in accordance with ICG Medical policies and procedure if applicable.
- We will notify the administrators of the appropriate protection if the alleged offence requires it. This includes referral to ISA and NMC if applicable.
- We will involve all concerned parties in the investigation and will also request feedback that may assist in resolving the matter.
- If we feel that it is appropriate the offence will be reported to the Police and any other bodies that require this information.
- If we find that the alleged offence has occurred, or is likely to have occurred, then appropriate action against those concerned will take place and the matter will be reported to all parties entitled to this information in accordance to the laws surrounding this.
- If after investigation it is evident that the alleged offence did not occur, all actions against the temporary worker will be withdrawn.
- If it appears that the alleged offence was contrived and reported with malice by the accusing person(s), appropriate action will be taken in accordance with our Policies and Procedures.

Any reportable issues related to Care Quality Commission, Care Inspectorate and Regulation and Quality Improvement Authority will be reported in line with their registration guidelines.

What if the report is about a member of staff at the hospital/establishment?

We will discuss the report, protecting the temporary worker's identity always with the client management and allow the hospital or establishment to follow its own policies and procedures about the matter. The person making the report will also be removed from working with that client until the situation has been resolved.

Safeguarding Policy

Multiagency Policy and Procedure for the Protection of Vulnerable Adults & Children

ICG Medical's policy regarding the protection of vulnerable adults reflects the Department of Health (DOH) "No Secrets" document, which consists of a national framework of local NHS bodies, local police forces and other agencies with social services responsibilities, which developed a local multi agency code of practice to help prevent and tackle abuse. The primary aims are to ensure the safety and protection of vulnerable adults and children, to prevent abuse and to ensure that robust procedures are in place for dealing with abuse.

Greenstaff Community Services will provide specific policies, procedures and protocols in relation to those clients receiving complex care in their own homes and these must always be followed and adhered to.

It is the responsibility of the temporary worker to operate within the following guidelines and adhere to the local policy, procedures and protocols, on being aware of incidences or suspicion of abuse or neglect of a patient/vulnerable adult, to investigate and act by:

- Ensuring the person is not in immediate danger.
- If required, seeking medical treatment as a matter of urgency
- Accurately documenting the incident or suspected incident in a clear and factual manner with dates and times of the incident/alleged incident, with details of places and persons involved.
- Informing the doctor/hospital or community mental health/relevant social service of the act of abuse/neglect or suspicion of abuse/neglect, and the CQC or in Scotland the Care Inspectorate (if the concern arises in a registered service).
- Immediately informing Head of Nursing ICG Medical who is the Designated Named Person for Safeguarding Adults.
- Head of Complex Care is the designated named person for safeguarding children.
- All allegations and incidents of abuse will be immediately dealt with and taken seriously and written formal records will be maintained.
- Avoid disturbing any potential evidence and contact police if a crime has been committed.

- CQC/CI/RQIA will be notified within 24 hours of any incident that is reported to the police. We will inform the appropriate authorities to deal with the incident in accordance with the Public Interest Disclosure Act 1998.

If you have any questions concerning negligence or abuse, please contact:

In the UK the: CARE QUALITY COMMISSION (CQC)

Address: Finsbury Tower, 103 - 105 Bunhill Row, London EC1Y 8TG

Telephone: 03000616161

Email: enquiries@cqc.org.uk

In Scotland the: CARE INSPECTORATE

Address: 11 Riverside Drive Dundee DD1 4NY

Telephone: 03456009527

Email: enquires@careinspectorate.com

In Northern Ireland the: REGULATION & QUALITY IMPROVEMENT AUTHORITY

Address: 9th Floor Riverside Tower

5 Lanyon Place

Belfast BT1 3BT

Telephone: 02895361111

Email: info@rqia.org.uk

Gifts, Gratuity & Bequests Policy

It is our policy that no temporary worker will accept a gift, gratuity or bequest from patients, their family, relatives or friends. The temporary worker must explain politely to patients, family and friends that it is their job to help, and therefore cannot accept personal gifts or gratuity for the care or services given. If the patient, relative or friend is insistent upon offering such gifts or gratuities they should be politely but firmly directed to the Head of Nursing for ICG Medical who will explain that it is our policy not to accept such gifts, though the thought behind the gesture is much appreciated.

The same principle applies to a bequest in a patient's will. If a staff member has prior knowledge of a patient's intention to make a bequest, then he or she should attempt to dissuade the patient from doing so. Such instances must be recorded in the patient's notes and our Nursing Team must be notified.

If a staff member is bequeathed a sum of money or a specific gift from the estate of a patient, the staff member should report it immediately to his or her immediate supervisor. If necessary, legal advice will be obtained on his or her behalf and where relevant any records that were previously made of the patient being asked not to make such a bequest must then be provided as mitigating evidence.

Property of Others Policy

Illegal removal of any hospital/patient or co-staff member's property may result in legal prosecution. There are no circumstances where one of our health care workers may take the property of another nurse, patient or healthcare facility without the specific authorisation of the patient or nurse. If there is any doubt whether authorisation may or may not have been given, ICG Medical health care worker must contact their agency to verify authorisation.

Any nurse working in a patient/client's own home must never remove or destroy any property owned by the client even if the client requests them to do so. If in doubt the nurse must contact the Nursing Team or their consultant for advice.

Wills & Estates Policy

This policy defines the procedure to be followed where a patient wishes to make a will, and having no immediate family or other advocates to assist them may ask the temporary worker to help:

- A patient seeking advice about making a will, or changing an existing will, should be encouraged to do so by contacting a solicitor or the Citizen's Advice Bureau. The temporary worker may offer to assist the patient in this respect, if necessary, referring the matter back to our Head of Nursing for guidance.
- UNDER NO CIRCUMSTANCES MAY YOU BE INVOLVED IN THE MAKING OF A PATIENT'S WILL. This includes helping a patient draw up a will or acting as a witness or executor to the estate. If requested to do so by a patient, the temporary worker should politely but firmly explain that it is contrary to both our and the Contracting Authority's policies to become involved in the personal affairs of patients to this extent, and to do so could lead to disciplinary action.
- Should a temporary worker discover that they have been appointed as executor without prior knowledge then they have the right to disengage themselves. If this should happen the temporary worker must report it to the Nursing Team immediately for advice and appropriate action.

Lone Worker Policy

A situation at work may arise where you are working alone. If this occurs, ensure you have a means of contact and make certain your mobile phone is within range. If you are in a building on your own, always lock the door to ensure no one can enter without your knowledge. Notify security that you are on your own. If you

must leave the work premises, let someone know where you are going, how long you will be there and carry a reliable means of contact with you.

You must notify the Trust/organisation as well as your agency that you are in a vulnerable environment.

A Lone Worker assessment should be undertaken by the organisation you are working with to ensure you know the correct procedure to follow.

If you have any concerns, contact the Head of Nursing for ICG Medical or your agency senior manager.

When working in the community you must complete the lone worker training module

Dealing with Violence and Aggression Policy

Violence, threats and abuse to staff are unacceptable. This includes sexual and racial harassment, and threats to family and property.

Violence and abuse are NOT part of the job.

Managing violence, threats and abuse is the responsibility of both the employer and employee.

Organisations, managers, employees, and clients working together provide the means to safer practice. Every establishment should have a local policy that clearly sets out a code of practice. A procedure should also be in place detailing what to do, when and if it occurs or what to do if you think there is a risk.

If you have any concerns regarding the potential threat of violence or aggression in the workplace, immediately inform your supervisor. They will be able to advise and assist you.

All employees have a legal obligation under the Health and Safety at Work Act 1974 to take reasonable care of both their own safety and others who may be affected by acts or omissions at work.

Further information and guidance can be found at the: [VIOLENCE TASKFORCE WEBSITE](#) from the Department of Health.

The NHS also provides information and guidance on its [ZERO TOLERANCE](#) website.

Appropriate training must be completed by all of those who are taking roles that include caring for people who display challenging behaviour.

Harassment Policy

ICG Medical will not tolerate any form of harassment or bullying on the grounds of sex, race, age, creed, colour or disability. We aim to ensure our clinical staff are provided with a neutral working environment in

which no one feels threatened or intimidated. Harassment is an act of discrimination and is a criminal offence.

It is very difficult to define harassment as it can take many forms; generally, it is unwanted behaviour by one employee to another and may include:

- Patronising or belittling comments.
- Comments about appearance body/clothes.
- Leering or staring at a person's body.
- Unwelcome sexual invitations or pressure.
- Promises or threats, concerning employment or conditions, in exchange for sexual favours.
- Display of offensive or sexually explicit material.
- Touching, caressing, hugging, indecent assault.
- Racial abuse or harassment.
- Physical aggression, which may or may not lead to actual violence or attack.
- Verbal abuse or threats.

This behaviour is UNWELCOME, UNINVITED AND UNRECIPROCATED. Bullying is also difficult to define, examples include:

- Threats or actual physical violence.
- Unpleasant or over-repeated jokes about a person.
- Unfair or impractical work loading.

If you encounter a problem of this nature, it is vital that you make the person aware that his/her behaviour, remarks or conduct are offensive to you. This should be done in a simple, straightforward way.

It is recognised that complaints of harassment or bullying are often of a sensitive or worrying nature and that it may be difficult to speak directly to the other employee involved. If this is the case, you should put your request in writing and hand it to the harasser or bully.

When or if this informal approach fails or you believe that the harassment or bullying is of a very serious nature, you must bring the matter to our attention. If possible, you should keep notes of the harassment or bullying so that the formal complaint can be investigated, including the date, time and whereabouts of the act.

A formal complaint will be thoroughly investigated, all possible action will be taken to separate you from the alleged harasser or bully whilst the investigation is taking place. You will be informed of the findings of the investigation and will be given an opportunity to comment.

Equal Opportunities Policy

Equal opportunity is defined as access to jobs, service, information and participation for everyone. It is our belief that no job applicant, staff member or client shall receive less favourable treatment than another on the grounds of sex, marital status, age, sexual orientation, disability, race, ethnic or national origin, creed, colour, religion, political or trade union affiliation or the responsibilities of parenthood.

ICG Medical is committed to Equal Opportunities for all Staff members, and clients shall always adhere to such a policy and will continually review all aspects of recruitment and service to avoid unlawful or undesirable discrimination.

We accept responsibility as an employer and provider of services, to eliminate discrimination and to promote good relations and equal opportunities for all.

We will treat everyone equally irrespective of sex, marital status, age, sexual orientation, disability, race, ethnic or national origin, creed, colour, religion, political or trade union affiliation, or the responsibilities of parenthood and places an obligation upon all Staff members and Clients to act in accordance with this policy.

The Equal Opportunities (EO) policy of ICG Medical and actions which arise because of it, considers of all statutory requirements e.g. Race Relations Act (1976), the Sex Discrimination Act (1995), the Employment Act (1980) amended, the Disability Act (1995), the Equal Pay Act (1975) and Codes of Practice. The policy is modelled on the Equal Opportunity Codes of Practice published by the Equal Opportunities Commission and the Commission of Racial Equality.

Equality of opportunity for all sections of its workforce is an essential aim of ICG Medical. This means recognising the inequalities which people may suffer and acting to reduce this. All staff must ensure that all clients, colleagues and clients are treated fairly. If you are found to be acting in a discriminatory manner you will be suspended pending an investigation.

We will accordingly make career opportunities available to all people with disabilities and every practical effort will be made to provide for their needs. Staff members with physical disabilities will only be excluded from positions where the job duties involve activities that would make it impossible or inherently hazardous to perform.

We are committed to retaining temporary Staff members whose skills, experience, and attitude are appropriate to the requirements of various positions regardless of age.

We provide facilities for anyone who believes that they have been discriminated against within the scope of this Equal Opportunities (EO) Policy and encourages the individual to document the alleged incident.

Monitoring of equal opportunities

ICG Medical aim to monitor and assess the EO Policy through a review of practices and appropriate action will be taken to improve our policy where necessary.

To ensure the EO policy is effective, detailed monitoring of applications is performed via a 'Diversity Monitoring Form'. This necessitates the collection of data regarding an applicant's ethnic origin, sex and disablement. This information is given voluntarily. The information will only be used for the monitoring of Equal Opportunities purposes and will be treated as confidential, however it may be used to collate company statistics required by relevant authorities, and personal identities will always be suppressed. The selection criteria of all applicants will proceed purely according to the merits and abilities to perform the tasks and duties required.

We recognise that it is in the best interest of all temporary Staff members and ourselves, to utilise the skills of all staff. All temporary Staff members are encouraged to advise us of all skills and knowledge, which may make you particularly suitable to care for clients from specific ethnic or religious groups.

Data Privacy Statement

ICG Medical takes the protection of your data seriously and complies with the rules laid down under the General Data Protection Regulation (GDPR) released by the EU. This statement details your rights as a data subject and gives contact details enabling you to exercise those rights should you wish to. It is further supported by our Privacy Notice found online here: <https://www.icg-medical.com/privacy-policy>

As a data controller and processor, ICG Medical tasks its Data Protection Officer (DPO) with ensuring our practices are in line with the GDPR. Our DPO is named in the Privacy Notice and can be contacted regarding any aspects of this statement via dpo@icg-medical.com or on 020 7803 1720.

ICG Medical processes your data so we can provide you with employment in the healthcare industry and to supply our services to you as per our contract. This includes processing data outside of the European Economic Area (in India and South Africa) and may include sharing your data with third parties such as your placement site or auditors.

When sharing your data, we take care to ensure it is minimised, only accessible by only those who require it and we do so only to fulfil the contract (e.g. securing work for you). We do not share the data with any third party for any marketing or analytical purposes.

Most of the data we hold about you is collected from you, so we can ensure your compliance and therefore ability to work. Some data however comes from third party organisations such as the DBS checks we are obliged to obtain during the compliance process.

Your data is retained to ensure we can deliver on our contract with you. The data is retained in accordance with the responsibilities placed upon us by governing bodies such as Framework bodies and HMRC.

You have a right to access your data, to confirm how it's processed including any supplementary information.

While we endeavour to ensure we capture your data accurately, if for some reason you find a mistake in the data we hold about you, you have the right to rectify the error(s).

Data we hold about you is yours and you have a right to erasure. Where we can comply with your wishes, we will do so, however we are obligated by law to retain data in some circumstances to fulfil our contractual obligations and / or information required for HMRC and other government bodies.

You have a right to restrict us processing your data, however doing so will mean we can no longer fulfil our contract with you until you lift the restriction. You also have a right to a copy of any data you have provided to us, in a portable manner provided we hold it in a readily portable format.

Under GDPR you have the right to object to your data being processed for direct marketing, profiling, research, or for activities companies may deem legitimate. ICG Medical's marketing permissions are below. However, if at any time you wish to object, please follow the contact procedures laid out in the Privacy Notice.

Lastly, please note, we may from time to time make automatic decisions and profiling activities to fulfil the contract with you. This will typically be when ensuring you are suitable for the shifts we are providing you with.

ICG Medical Ltd Health and Safety Policy

Purpose of this policy

This policy covers all temporary workers who are placed via any ICG Medical Ltd policy and is compliant under the Health & Safety at Work Act 1974

Responsibilities:

ICG Medical Ltd is responsible for ensuring Policy is kept updated in line with any Health & Safety Executive requirements in all four countries of the United Kingdom.

All temporary workers have access to this policy and are informed of any updates.

Undertake health risk assessments as deemed necessary by Occupational Health Provider.

Temporary Worker responsibilities and duty are 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 the organisation you are placed in and enable colleagues on duty with you to comply with statutory duties and requirements.

Not intentionally or recklessly misuse anything provided in the interests of health, safety or welfare.

Comply with any individual health risk assessments which have been conducted by ICG Medical Ltd.

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

Use any equipment, etc., provided in the interests of safety.

Follow all health and safety instructions.

Report anything you consider to be a danger.

Report any shortcomings in the protection arrangements for health and safety.

Client Organisations are responsible for ensuring

Temporary workers are familiarised with their Health & Safety Policy as this can differ from each location.

Ensure you receive an induction on first shift at a new placement, in your induction you should expect to receive information regarding procedures, locations of fire escapes, first aid contact person etc. If this is not provided you must request it from the person in charge of your shift/placement.

Reporting Concerns

ICG Medical Ltd will investigate any concerns/issues reported to the Head of Nursing. Concerns will be investigated using the Whistle Blowing Policy to support anonymity where appropriate.

Use the client risk reporting system to raise any concerns e.g. Datix or CIMS.

Appraisal Policy

Newly employed temporary workers will have an initial appraisal within the first six (6) months of completing their first work placement to discuss individual performance, standards of practice and to discuss any issues arising.

This discussion will be arranged to suit the person and take place in a location that is secure and private.

Each person then subsequently has a planned annual appraisal by a senior practitioner of the same discipline.

The appraiser is required to provide documentary evidence to demonstrate they have been appropriately trained in the conduct of appraisals and has been regularly re-trained as appropriate.

At each Appraisal account is taken of the clinical practice of the individual from feedback provided by clients, and the results of any review by ICG Medical of persons clinical practices.

Information regarding the performance of person and where they have provided services is made available to the appraiser.

If the appraiser has any concerns about the performance of the individual, the individual will not be placed until the performance of the individual has been investigated and resolved.

ICG Medical uses a standard appraisal form for all temporary workers to enable written records to be kept by ICG Medical on the content and outcome of each meeting that takes place. Such records placed on the individual's file.

At any appraisal meeting, the form completed at the previous meeting will be reviewed to ensure that previously agreed actions or outcomes were undertaken.

ICG Medical uses reasonable endeavours to ensure that individual maintain a written portfolio of their professional experience and attendance at professional development courses.

ICG Medical shall use reasonable endeavours to ensure that the appraisal reviews the training and development needs (including CPD) of the individual.

Recruitment of Ex-Offenders Policy

Scope

It is a requirement that all registered bodies must treat applicants who have a criminal record fairly and do not discriminate because of a conviction or other information revealed. This Policy details the way in which ICG Medical support those with a previous criminal history.

1. ICG Medical as an organisation assessing applicants' suitability for positions which are included in the Rehabilitation of Offenders Act 1974 (Exceptions) Order using criminal record checks processed through the Disclosure and Barring Service (DBS), ACCESS NI or PVG, ICG Medical complies fully with the code of practice and undertakes to treat all applicants for positions fairly. ICG Medical undertakes not to discriminate unfairly against any subject of a criminal record check based on a conviction or other information revealed.
2. ICG Medical can only ask an individual to provide details of convictions and cautions that ICG Medical are legally entitled to know about. Where a DBS/Access NI/PVG certificate at either standard or

enhanced level can legally be requested (where the position is one that is included in the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 as amended, and where appropriate Police Act Regulations as amended)

3. ICG Medical can only ask an individual about convictions and cautions that are not protected.
4. ICG Medical is committed to the fair treatment of its staff, potential staff, or users of its services, regardless of race, gender, religion, sexual orientation, responsibilities for dependants, age, physical/mental disability, or offending background.
5. ICG Medical has a written policy on the recruitment of ex-offenders, which is made available to all DBS applicants at the start of the recruitment process.
6. ICG Medical actively promotes equality of opportunity for all with the right mix of talent, skills, and potential and welcome applications from a wide range of candidates, including those with criminal records.
7. ICG Medical select all candidates for interview based on their skills, qualifications and experience an application for a criminal record check is only submitted to DBS/Access NI/PVG after a thorough risk assessment has indicated that one is both proportionate and relevant to the position concerned. For those positions where a criminal record check is identified as necessary, all application forms, job adverts and recruitment briefs will contain a statement that an application for a DBS/Access NI/PVG certificate will be submitted in the event of the individual being offered the position
8. ICG Medical ensures that all those in our organisation who are involved in the recruitment process have been suitably trained to identify and assess the relevance and circumstances of offences.
9. ICG Medical also ensures that they have received appropriate guidance and training in the relevant legislation relating to the employment of ex-offenders, e.g. the Rehabilitation of Offenders Act 1974.
10. At interview, or in a separate discussion, ICG Medical ensures that an open and measured discussion takes place about any offences or other matter that might be relevant to the position. Failure to reveal information that is directly relevant to the position sought could lead to withdrawal of an offer of employment.
11. ICG Medical makes every subject of a criminal record check submitted to DBS/Access NI/PVG aware of the existence of the code of practice and makes a copy available on request.
12. ICG Medical required a reflective statement discussing any matters revealed on a DBS/Access NI/PVG certificate with the individual seeking the position before withdrawing a conditional offer of employment. Once staff are in a position to seek work through ICG Medical, the hiring client will be informed of the disclosure and confirmation of acceptance of the worker will be sought.
13. All workers are made aware that the decision to accept the worker is the hiring clients and whilst ICG Medical Ltd will support the worker it does not have the authority to “force” a client to accept a candidate. The worker will be provided with the reason given by a client for non-acceptance

Subject Access Request Policy

Individuals have the right to access their personal data and supplementary information. The right of access allows individuals to be aware of and verify the lawfulness of the processing. Our business must comply with the requirements of the General Data Protection Regulations (GDPR) and we must be able to demonstrate compliance to the Information Commissioner's Office (ICO).

Upon receipt of a request for information our internal policy is as follows:

Responsibility:

ICG Medical is responsible for the handling of Subject Access Requests (SAR) in our business.

The duties of ICG Medical include but are not limited to:

1. Log the receipt and fulfilment of all requests received from a data subject/the person making the request/ requestor to see his or her personal information.
2. Acknowledge the subject access request (SAR).
3. Verify the identity of any person making a SAR.
4. Maintain a database on the volume of requests and compliance against the statutory timescale.
5. Verify whether if we are the controller of the data subject's personal data.
6. Check if we are not a controller, but rather a processor. If so, inform the data subject and refer them to the actual controller. This needs to be recorded in writing.
7. Where applicable, decide if a request is excessive, unfounded or repetitive and communicate this to the requestor.
8. Decide if an exemption applies.
9. If a SAR is submitted in electronic form, any information should preferably be provided by electronic means as well.

Oral or written requests

Subject access requests can be made in writing, electronically or verbally. If a member of staff is in any doubt if a certain situation has given rise to a SAR, contact ICG Medical by email providing full details of the incident. Staff should do this without delay and certainly within [TWO] business days.

Where a member of staff receives a subject access request, they must email the relevant information to ICG Medical without delay and certainly within TWO working days.

How do we verify the requestor's identity?

The requestor must supply valid evidence to prove their identity. We may verify the requestor's identity either through a phone call where we ask questions that only the requestor will know the answers to or by requesting forms of identification.

We accept the following example forms of identification:

1. Current UK/EEA Passport
2. UK Driving Licence
3. Financial Statement issued by bank, building society or credit card company
4. Utility bill for supply of gas, electric, water or telephone landline

How to process the request

Our aim is to determine what information the requestor is asking for. If the request is not clear, or where if we process a large quantity of information about an individual, the GDPR permits us to ask the individual to specify the information the request relates to. Where this applies, we will proceed with a request for additional information. We must verify whether we process the data requested. If we do not process any such data, we must inform the data subject accordingly. We must respond to the data subject within 30 days of receiving the request as valid. This is a requirement under the GDPR.

Any employee, who receives a request from ICG Medical to locate and supply information relating to a SAR, must make a full exhaustive search of the records which they are responsible for or owns. This may include but is not limited to emails (including archived emails and those that have been deleted but are still recoverable), Word documents, spreadsheets, databases, systems, removable media (for example, memory sticks), recordings, paper records in relevant filing systems.

ICG Medical should check whether the data requested also involves data on other data subjects and make sure this data is filtered before the requested data is supplied to the requestor; if data cannot be filtered, ensure that other data subjects have consented to the supply of their data as part of the SAR.

All the information that has been requested must be provided unless an exemption can be applied (see below). Information must be supplied in an intelligible form and we will explain acronyms, codes or complex terms. No charge to comply with the request (with exceptions). We will provide a copy of the information free of charge, as per the GDPR rules. However, we may charge a reasonable fee' when a request is manifestly unfounded or excessive, particularly if it is repetitive.

We may also charge a reasonable fee to comply with requests for further copies of the same information. We understand that this does not mean that we can charge for all subsequent access requests. Where applicable, ICG Medical will determine the 'reasonable fee' that must be based on our administrative cost of providing the information. Excessive, manifestly unfounded or repetitive requests Where requests are manifestly unfounded, excessive and repetitive, we may refuse to act on the request or charge a reasonable administration fee. ICG Medical will decide on this. ICG Medical must provide information on our decision to the requestor in writing within 30 days and must state how they reached their decision.

Complex Requests

As stated, we must respond to a SAR within 30 days. If more time is needed to respond to complex requests, an extension of another two months is permissible, provided this is communicated to the data subject in a timely manner within 30 days.

Where we decide not to act on the request of the data subject, we need to inform the data subject of this decision without delay and at the latest within 30 days of receipt of the request.

Our response to the requestor

After processing the SAR, our response to the requestor should include:

1. The purpose(s) the processing
2. The categories of personal data concerned
3. The recipients or categories of recipients to whom personal data has been or will be disclosed, in in third party countries or international organisations, including any appropriate safeguards for transfer of data
4. The envisaged period for which personal data will be stored, or, if not possible, the criteria used to determine that period
5. The existence of the right to request rectification or erasure of personal data or restriction of processing of personal data concerning the data subject or to object to such processing the right to lodge a complaint with the ICO
6. If the data has not been collected from the data subject the source of such data
7. The existence of any automated decision-making, including profiling and any meaningful information about the logic involved, as well as the significance and the envisaged consequences of such processing for the requestor.

How to handle exemptions?

If a member of staff believes that we have a valid business reason for an exemption, please inform ICG Medical without delay by email. Exempt information must be redacted from the released documents with an explanation of why that information is being withheld.

Marketing consent

At the time of signing this handbook you will see marketing consent for opting in for information via email, telephone or SMS/Instant messaging. Please ensure you tick all that apply. See below example of the marketing consent you'll be asked to complete:

As part of our service, we would also like to offer you relevant professional information, including:

- Useful news and features about your profession
- Events, competitions and promotions we are running
- Surveys and opportunities for you to offer your views and insights
- Ongoing career opportunities during breaks of 12 months or more from temporary work assignments with us

We may use your email, postal address, mobile number and/or job title information to send you the most relevant career opportunities.

Agency Worker Regulations

The Agency Workers Regulations derive from European legislation designed to give temporary agency workers parity in pay and employment conditions as they would have been entitled to had they been recruited by the client directly to do the same job.

The regulations were ushered through Parliament during the last administration under a Labour Government. They were strengthened by Union backing to protect a vulnerable work force and as such were initially meant to apply to the lower end of the agency worker market. Unfortunately, the legislation does not actually set out to do this and demonstrates a 'one-size-fits-all' approach, thus applying to all agency workers irrespective of occupation, status, qualifications and pay levels.

With effect from 1st October 2011, the regulations clearly define what is required by all parties in the supply chain for agency workers to ensure equal pay, equal entitlements, and equal treatment after a specific qualifying period. Subsequent rulings have dictated to the masses that there will be no changes to the regulations as originally passed and the emergence of the formal guidance notes in May 2011 has shed some positive light on the overall part they play in the execution of the regulations.

Day One Rights

Broadly taken from the regulations, day one rights are the sole responsibility of the client and MUST include:

- Equal treatment - access to amenities and facilities that are generally utilised by full time employees of the client, such as: canteens, lockers, uniforms, car parking, memberships and all other generally accepted items that are not given as a result of
- long service or loyalty.
- Equal Opportunity - access to all job vacancies that are 'relevant' to the agency worker, giving them the chance to apply directly for a full-time or hired position. Typically to include: notice boards, intra net access, direct correspondence, email notification of posts and/or any other form of making the agency worker aware.

Whilst day one rights are the responsibility of the client alone, we feel it good practice that all agency businesses put in place standard guidelines to make sure all clients are aware of these rules.

Rights After 'The Qualifying Period'

The Qualifying Period is denoted as being 12 weeks in the same or similar role with the client. This does not take into account any natural breaks during this time such as holidays, sickness, maternity and other statutory reasons whilst the clock for qualifying is paused. It is also prudent to note that the period is set out for a time worked with a particular client, meaning an agency worker could have already worked for the client before they join your business and therefore, may have qualified for equal treatment instantly.

The qualifying clock resets if there has been a break of more than 6 weeks from the previous client and where the agency worker has moved to a different client. It is extremely important to ascertain an agency worker's previous working history and to document these details before they start with your business - we aim to look back at a total of 6 month's history prior to them joining ICG Medical. Multiple client arrangements performed at the same time are also a great cause for concern and monitoring.

What are the rights after 12 weeks?

The agency worker is entitled to the following equal rights after they have completed the required qualifying period and this is in direct relation to an individual performing the same or similar role with the client, who is employed directly or hired directly by the client:

Equal treatment

Once an agency worker has completed 12 weeks with the organisation in the same role, he/she will be entitled to the same basic working and employment conditions that would apply to employees or workers

who have been directly recruited to the same job. This includes pay, duration of working time, rest periods and breaks, and annual leave.

Pay

All agency workers will be entitled to the same basic pay to which an employee or worker who has been directly recruited to the same job would be entitled. This includes pro-rated salary and additional risk payments for hazardous duties/overtime pay/unsocial-hours allowance/shift allowance/bonuses/commission. It does not include any bonus or reward given to employees or workers for a reason that is not directly attributable to the amount or quality of the work that they have done.

Annual leave

Agency workers will be entitled to the same paid annual leave to which an employee or worker who is recruited directly to the same job would be entitled. This leave entitlement will be pro-rated to the length of the assignment.

Working hours

Agency workers will work the same basic working hours as an employee or worker who is recruited directly to the same job. There may be circumstances in which agency workers will, if they wish, be able to opt out of the maximum 48-hour working week under the Working Time Regulations 1998. Any worker who has not signed the opt-out or who has revoked his/her opt-out will not be requested or permitted to work more than the maximum number of working hours permitted under the Working Time Regulations 1998.

Rest periods

Agency workers will be entitled to the same rest periods and breaks to which an employee or worker who is recruited directly to the same job would be entitled.

Night work

Agency workers will be entitled to the same arrangements for night work to which an employee or worker who is recruited directly to the same job would be entitled.

There are of course many determining factors relating to these rights and it is paramount that all eventualities and conditions are obtained from the client before the commencement of any assignment - all parties are responsible!

Appendix A

Modern Slavery & Human Trafficking

ICG Medical recognises that all businesses have an obligation to prevent slavery and human trafficking and will do all in its power to do this within its business and the supply chains through which it operates.

Modern slavery can take many forms including the trafficking of people, forced labour, servitude and slavery. As leading recruitment experts, we take our responsibility for supplying staff extremely seriously and are aware of the potential for being targeted by traffickers and unlicensed gang masters. Our own processes around candidate engagement ensure our employees are alert to the signs of exploitation, in order that we may take the necessary action promptly and effectively, should it be identified.

This statement focuses specifically on ICG Medical's compliance with the Modern Slavery Act 2015 (the Act) and highlights the steps we take to ensure to minimise the risk of slavery or human trafficking occurring within the organisation or its supply chains. One of our Company's most valuable assets has always been its reputation for integrity and fairness. Maintaining this reputation within our market is an essential prerequisite to our continued success.

Our Supply Chains

Our supply chains include, but are not limited to, sourcing candidates for clients. This may involve the introduction by external agencies to ICG Medical of candidates for onward supply to our clients. We expect our suppliers and potential suppliers to aim for high ethical standards and to operate in an ethical, legally compliant and professional manner. We also expect our suppliers to promote similar standards in their own supply chain.

Our Policies on Slavery and Human Trafficking

Suppliers are expected to adhere to our Supplier Code of Conduct, which includes specific reference to the Act, and should have in place a policy recognising, respecting and protecting the human rights of their employees, agency nurses, those of their suppliers and business partners and the communities affected by the suppliers' operations.

Agency nurses should be free to choose to work for their agency and to leave the company.

All agency nurses must be provided with clear terms of engagement, which comply with local legislation.

All agency nurses must be treated in a fair and equal manner and with dignity and respect.

Any form of discrimination, victimisation or harassment on the grounds of marital or civil partnership status, sex (including gender reassignment), race (including ethnic, national origin and nationality), disability, sexual

orientation, having or not having dependents, religious belief or political opinion, age, trade union activity and offending background should be prohibited.

All applicable laws and industry standards on payment, benefits, working hours and minimum age should be adhered to in all countries of operation, without any unauthorised deductions. Suppliers should observe the provisions of the International Labour Organization such that any young persons under the age of 18 should not be offered work at night or for any hazardous work and their work should not harm the young person's education, health or physical, mental, moral or social development. No young persons may be offered work below the age of 16.

All slavery and human trafficking laws must be complied with including, but not limited to, the Act. Suppliers must ensure their business operations are free from slavery and human trafficking practices whether in the UK or elsewhere, both internally and within their supply chains and other external business relationships. We are committed to ensuring that there is no modern slavery or human trafficking in our supply chains or in any part of our business.

Due Diligence Process for Slavery and Human Trafficking

ICG Medical ensure strict compliance checks are carried for all candidates it supplies. We verify the identity of each worker and their right to work before supply commences.

As part of our commitment to identify and eradicate slavery and human trafficking, we undertake due diligence on our supply chains to ensure compliance with legislative obligations and will continue and evolve this process in future years.

All ICG Medical agency nurses have access to dedicated channels through which they may voice concerns, either through local reporting mechanisms or through the whistleblowing procedure (See Whistleblowing Policy). ICG Medical is committed to protecting agency nurses when disclosing malpractice and will ensure that all disclosures made in good faith will be treated confidentially and without fear of retaliation.

Any identified concerns regarding modern slavery and human trafficking would be escalated as part of the ICG Medical safeguarding process and in conjunction with the relevant agencies; such as the Local Authority and Police.

Training

All ICG Medical agency nurses are expected to comply with all laws and act in accordance with local guidelines and regulations and act with integrity and honesty. We have undertaken to review our policies and procedures to ensure our agency nurses have access to any additional information and support they may

require about human trafficking, forced labour, servitude and slavery. Further training will be provided as required, which is an area that remains under review.

This statement is made pursuant to Section 54 of the Act and constitutes ICG Medical's slavery and human trafficking statement for the financial year ending 31st March 2022.

Appendix B

Employment Agency Standards Inspectorate

In line with Employment Agency Standards (EAS) Inspectorate, with effect from the 6th April 2020, as an employment business, ICG Medical must give all new agency workers a key information document. The purpose is to give you a clear overview of some aspects of your contractual arrangements, including how your rate of pay is affected by fees (if any) and statutory deductions. The content of the key information document will depend on the way you are paid:

1. **PAYE** – the information will be about your relationship with ICG Medical Ltd and includes details on your pay, tax, holiday entitlement and other benefits you have as a new agency worker
2. **Intermediary/Umbrella company** - the information will be about your relationship with ICG Medical Ltd and the intermediary/umbrella company and includes details on your pay, tax, holiday entitlement and other benefits you have as a new agency worker

If you have any questions, please contact us at the relevant email address:

Cromwell Payroll payroll@cromwellmedical.com

Greenstaff Payroll payroll@greenstaffmedical.com

Clinical24 Payroll payroll@clinical24.co.uk

Carepower Group payroll@carepowergroup.co.uk

From time to time we will send out email communication from ICG Payroll. This to ensure that you as our customers at ICG have the most updated and relevant information, which may or may not affect your pay.

The emails could relate to e.g. Pension, payment cut offs and any HMRC related notifications.

Appendix C

Payment

On receipt of a properly completed time record*, ICG Medical will process your pay as follows:

PAYE worker (England & Wales):

Payment for time records received by 10am on a Friday will be in your bank account the following Monday (except for public holidays).

PAYE (Scotland & Northern Ireland):

Payment for time records received by 10am on a Thursday will be in your bank account on Friday (except for public holidays).

Umbrella company:

For time records received by 10am Monday to Friday (excl. public holidays) payment will be made to the umbrella company on the next working day. Each umbrella company has its own payment cycle, ranging from paying on the day after receiving funds from ICG to a set day each week.

Timesheets will only be processed if they are completed correctly and they include a signature from a person authorised by the trust/hospital. Any timesheets that have not been filled in correctly can cause a delay in payments.

***What is a properly completed time record?**

A “time record” may be in the form of a timesheet that you complete and send to ICG Medical or it may be an electronic record that you complete on site at the hospital which is subsequently submitted to ICG Medical once it has been authorised at the placement site.

All-time records must be fully and accurately completed, then signed by a person appropriately authorised by the client to confirm the work was completed before ICG Medical can release payment to you.

Appendix D

Guidelines for completing ICG Medical timesheets

When completing your timesheet, you need to:

1. Make sure you complete a time sheet for the agency you work for i.e. Cromwell, Greenstaff, Clinical 24 etc.
2. Make sure all the sections on the time sheet are clear and legible and completed in pen.
3. Make sure you have the correct booking reference number of your timesheet for the shift and ward you have worked on – if you moved wards let your consultant know immediately and request a new reference number. You will need to complete a separate timesheet with booking reference number, start/end time and reference number for each area you work in during your shift e.g. CCU-07.30-9.30 and HDU-9.30-19.30. Following these requirements will help ensure you have no delay in receiving your payment
4. Make sure you check your maths – have you added up your hours and deducted your meal breaks correctly (this is one of the most common reasons why we have to ask temporary workers to amend their timesheet).
5. Make sure your timesheet has been signed by an authorised person at the placement site.

Remember your timesheet also contains a section for you to obtain feedback on your performance. This is important as it assists us in evidencing your ongoing suitability for roles and for your revalidation portfolio.

An example of a correctly completed timesheet is on the following final page of this handbook.

Please complete this form in CAPITAL letters and ensure all fields are completed. Please ensure the shift date corresponds with the correct day. The start and finish time, break, hours worked and total hours must be completed. If you did not take a break please write 0. Please use the 24-hour clock and ensure hours are calculated correctly. Failure to comply with our timesheet guideline may result in delayed payment. Please send completed timesheets to timesheets@cromwellmedical.com.

First Name				Last Name			
FIRSTNAME				LASTNAME			
Hospital							
HOSPITAL NAME							
Ward		Job Title			Band		
WARD		JOB TITLE			BAND		

Date	Start Time	Finish Time	Break	Hours Worked (Excluding Break)	Reference Number
Monday	:	:	:	:	
Tuesday	:	:	:	:	
Wednesday	28/03/18	08:00	18:00	01:00	09:00 0123456
Thursday	:	:	:	:	
Friday	:	:	:	:	
Saturday	:	:	:	:	
Sunday	:	:	:	:	

Please confirm that you have had an induction in the trust which included local fire safety

The timing of payment for properly completed time records depends on whether you work as PAYE, through an umbrella company or a personal services company. For details of the payment cycle, please refer to Appendix A of the ICG Medical Temporary Worker Handbook. Guidelines for timesheet completion may also be found in Appendix B of the Handbook.

I declare that the information I have given on this form is correct and complete and that I have not claimed elsewhere for the hours/shifts detailed on this timesheet. I understand that if I knowingly provide false information this may result in disciplinary action and I may be liable to prosecution and civil recovery proceedings. I consent to the disclosure of information from this form to and by the Authority, other Public Sector body and Private entities who have a similar requirement and the Counter Fraud Services (or other similar organisation which operates in the same capacity for any other Public Sector organisation) for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud

Agency worker signature

Your Signature

Date

28032018

Client Feedback Form (Please complete the below feedback form assessing this agency worker)

As part of our after care procedure, we would greatly appreciate if you could provide us with a follow up assessment for the agency worker's time spent at this hospital. Please note this information may be used as a reference for future temporary positions. Please tick the box which most reflects your view of the candidate.

	Excellent	Good	Average	Poor		Excellent	Good	Average	Poor
Clinical skills suited to assignment	✓				Organisation skills	✓			
Report concerns / issues to shift leader	✓				Ability to cope under pressure	✓			
Record keeping	✓				Communication skills	✓			
Infection control standards	✓				Timekeeping	✓			
Does not exceed limitations / boundaries	✓				Ability to work as a team	✓			

<p>Additional Comments</p> <p style="font-size: 1.2em; text-align: center;">COMMENTS FROM HOSPITAL</p>	<p>Future Employment</p> <p>Would you be happy to receive this agency worker again?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p>
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<p>Authorised trust/hospital signatory</p> <p>I am an authorised signatory for my ward/department/NHS/Public Sector body/Private Sector body. I am signing to confirm that the Job Profile Title and Band/Grade of Temporary Workers and the hours/shift that I am authorising are accurate and I approve payment. I understand that if I knowingly provide false information this may result in disciplinary action and I may be liable to prosecution and civil recovery proceedings. I consent to the disclosure of information from this form to and by the NHS other Public Sector body and Private entities with similar requirements and the Counter Fraud Service (or other similar organisation which operates in the same capacity for any other Public Sector organisation) in England for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud</p> <p>Authorised Signature</p> <div style="border: 1px solid black; padding: 5px; width: 150px; margin-top: 5px;"> <p style="font-family: cursive; font-size: 1.2em;">Hospital Signature</p> </div>	<p>First Name</p> <div style="border: 1px solid black; padding: 2px; width: 100%; margin-top: 5px;"> <p style="text-align: center;">FIRSTNAME</p> </div> <p>Last Name</p> <div style="border: 1px solid black; padding: 2px; width: 100%; margin-top: 5px;"> <p style="text-align: center;">LASTNAME</p> </div> <p>Position</p> <div style="border: 1px solid black; padding: 2px; width: 100%; margin-top: 5px;"> <p style="text-align: center;">POSITION</p> </div> <p>Date</p> <div style="border: 1px solid black; padding: 2px; width: 100%; margin-top: 5px;"> <p style="text-align: center;">28032018</p> </div>
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Any questionable timesheet must be immediately brought to the attention of the local counter fraud specialist (within England) or you may report any case of fraud in confidence to the NHS fraud and corruption reporting line on 0800 028 4060.