

# **MEMBER DECLARATION**

This Handbook contains important guidance for your time with us. Please sign below to show you accept and understand its contents.

**Print Name:** 

I have received and agreed to abide by the contents of the Jennie Reeves Member's Handbook.

Profession:
Registration Number:
Signature:
Date:
understand that any personal data held by Jennie Reeves is liable to be nspected as part of audit procedures.
Signed
Date



# STAFF HANDBOOK

Welcome to the Jennie Reeves Radiographers Agency. We are pleased you have chosen to join us and look forward to offering you a wide range of positions.

We have designed this handbook to give you an idea of what to expect from your time with us. Please read it carefully - it includes a number of guidelines and standards required under the Framework Agreements we have with the NHS.

As a new member of Jennie Reeves Temporary Staff Workforce we hope you have a successful and prosperous career with us. If you have any queries about the contents within this booklet, please direct these to your Consultant at the address below:

Jennie Reeves 3 Barmouth Road London SW18 2DT

Please note, Jennie Reeves Radiographers Agency will be referred to as Jennie Reeves throughout the Handbook.



# RADIOGRAPHERS AGENCY

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### **BEFORE YOU START WORK**

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#### Induction

During your induction with a Consultant from Jennie Reeves we will brief you on the following general issues and procedures:

- Moving and Handling
- Health and Safety
- Fire Procedures
- Risk Incident Reporting
- Lone Worker Training
- Handling of Violence and Aggression
- The Caldicott Protocols
- Complaints Handling

And the policies contained within this handbook, which you should retain for reference.

You are informed that any placement offer is conditional upon the successful completion of all pre-employment checks, which may include; Identity checks, Right to Work checks, Employment History and Reference checks, Professional Registration & Qualification checks, Criminal Record and Barring checks, Work Health Assessment checks, English language competency checks, Statutory/Mandatory and Clinical/Care core skills training checks, and Appraisal and revalidation checks.

# **Mandatory Training**

All Members must complete Moving and Handling, Health and Safety, and CPR training on an annual basis. Members can also attend courses run by the current assignment's Manual Handling and CPR training departments.

# **Risk Incident Reporting**

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

### Working Time regulation/Safe working

It is your professional responsibility not to over work as this could put patient care at risk. The working time Regulations 1998 provide the average working time, including overtime that shall not exceed 48 hours for each average 7 day period, taking into account all work undertaken by the employee, either through Jennie Reeves in other employment. It is the responsibility of the employee to ensure that Jennie Reeves are informed of the hours worked elsewhere.

On occasions an employee may wish to 'opt out' of the limits of the working time regulations in order to ensure the proper performance of his/her duties under his/her contract of employment. Where it is deemed by Jennie Reeves that the hours being worked could be detrimental to the worker, their colleagues or patients, steps will be taken to reduce the hours worked.



If excessive working hours are noted on a time sheet, this will be discussed with the employee and if the employee wishes and there are no Health and Safety issues an agreement will be sent to that employee to sign confirming: that they may on occasions be required to work such number of hours per week as shall be necessary for the proper performance of his/her duties under his/her contract of employment.

# **Lone Workers Information**

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

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

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

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

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

### **Violence and Aggression**

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

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

# Any violent, abusive or threatening behaviour is unacceptable

You must report any incident immediately to the person in charge and also to your Consultant at Jennie Reeves. The establishment where you are working the assignment will have policies for dealing with such incidents and you should ensure that you are familiar with such policies at the start of your assignment. An incident report form should be completed both at the place of work and at Jennie Reeves. Remember, all staff members have an obligation under the Health and Safety at Work Act 1974 to have regard for their own health, safety and welfare at work, and that of others who may be affected by their acts or omissions.

### **Complaint Handling**

During the course of your work with Jennie Reeves you will come across complaints from patients/clients. It is the policy of Jennie Reeves to deal with any expression of dissatisfaction in a professional and precise manner. If you are on an assignment within an

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establishment, please report any complaints to a senior person and document all details of the complaint. You **must** also report the Complaint to your Jennie Reeves Consultant or their Manager.

All complaints must be investigated within a specified time limit and resolved as soon as possible and this is the responsibility of the Recruitment Manager at Jennie Reeves. You may however, be requested to put details of the complaint in writing on a complaint record form and/or attend an interview to investigate details further.

If you personally are the subject of a complaint you will also be asked to record details as part of an investigation and in some circumstances it may be necessary to suspend you from duty whilst the investigation is in process. Any complaints of misconduct against individuals will be reported to the HCPC or other relevant Registration Bodies.

If you have any complaints about any aspects of your work at Jennie Reeves please do not hesitate to contact us.

Any complaints from individuals will be dealt with in a professional and confidential manner and Jennie Reeves has a "Whistleblowing" policy; please refer to page 18 of this book.

#### **Fitness to Practice**

It is important for your own health and of those in your care that you are fit to practice whenever you attend an assignment. You must declare your fitness to practice or otherwise when you accept an assignment. You must not declare yourself fit to practice if you are suffering from any of the following conditions: - Vomiting, diarrhoea or rash.

You **MUST** also let us know if you are pregnant. If you are concerned that your assignment involves unnecessary risks to your health or fitness, or that of your unborn child, please do not hesitate to contact us.

You must inform Jennie Reeves if you become injured or diagnosed with any condition. Where relevant Jennie Reeves will inform the Trust that you are placed in of such injury or diagnosis, this will be done with your consent.

You are required to supply Jennie Reeves with an update of your occupational health questionnaire on an annual basis, as this is a contractual requirement of the NHS. We will contact you with the new forms when required.

#### **Immunisation**

Please keep the following immunisations up to date:

- Hepatitis B
- Varicella (Chicken Pox)
- Rubella (German Measles)
- Tuberculosis
- Measles

Documented proof is required for the above vaccinations and without proof of these immunisation we will be unable to offer you assignments.

These should be part of your annual occupational health check up and a fit to work certificate sent to Jennie Reeves Agency.



For your protection we also recommend you have the following vaccinations or are tested for them:

- Diphtheria
- Hepatitis C
- Tetanus
- Polio

# MRSA and Clostridium Difficile (C.difficile/ C.diff)

Methicillin Resistant Staphylococcus Aureus (MRSA) is the name given to a range of strains of antibiotic-resistant bacteria. MRSA exists on the hands or in the nose of around one third of the healthy population and is usually harmless. It can however prove fatal if it enters the bloodstream of an already weakened patient.

It is usually transmitted by touch. The single most effective measure for preventing MRSA contamination is washing hands before and after every patient contact.

Clostridium difficile, also known as C. difficile or C. diff, is bacteria that can infect the bowel and cause diarrhoea. The infection most commonly affects people who have recently been treated with antibiotics. It can spread easily to others. C. difficile infections are unpleasant and can sometimes cause serious bowel problems, but they can usually be treated with another course of antibiotics.

You can reduce your risk of picking it up or spreading it by practicing good hygiene, both at home and in healthcare settings.

### In addition, please:

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

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

### AIDS/ HIV

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

- If you believe you may have been exposed to HIV infection in any way you should seek
  medical advice from your GP or Occupational Health Department and, where
  appropriate, undergo diagnostic HIV antibody testing.
- If you are found to be infected, you must again seek guidance from your GP or Occupational Health Department.



- If you are found to be HIV positive and perform or assist with invasive surgical procedures you must stop this immediately and seek advice from your GP or Occupational Health Department regarding what action, if any, should be taken.
- Please be aware that it is the obligation of all health workers to notify their employer and, where appropriate, the relevant professional regulatory body, if they are aware of HIV positive individuals who have not heeded advice to modify their working practice.

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

#### Medicals

Because of the importance of your fitness to practice, Jennie Reeves requires an annual certificate of fitness to practice from your Occupational Health Service. Our clients may also ask that you undergo a medical examination before commencing work for them. In these cases, future placements may be dependent upon your compliance with this request and its outcome, providing it was made with good reason.

#### **Criminal Convictions**

NHS policy and the National Contract require Agencies for the Supply of Allied Health Professionals to obtain a Disclosure and Barring Service check (DBS) for all our candidates, particularly those working in Paediatrics and in the Community. When a candidate is only working in Scotland then a Disclosure Scotland (DS) may be used instead of a DBS. Please be aware that our clients may insist we inform them in writing of any criminal convictions you may have before accepting you for an assignment – we will only provide this information with your consent. Jennie Reeves cannot be held responsible should clients decline your services following refusal to comply with this request or disclosure of a criminal conviction. Our own response to criminal record information will depend upon its nature and seriousness.

We also ask you to complete, sign and date a "Criminal Convictions" declaration as part of your application form.



### **PAY AND BENEFITS**

#### **Timesheets**

Please fax your timesheet to us by Friday in order to be paid the following Friday. Deadlines may change around Bank Holidays but you will be informed in advance. Payments are made directly into your bank/ building society/ Limited Company accounts by BACS transfer (please make sure we have the correct details). It is your responsibility to ensure your timesheet is legible, completed correctly and has been authorised and signed by your manager - payment may be delayed if this is not the case.

In particular, please ensure:

- The date and times you worked, excluding any breaks taken are correct.
- The timesheet is signed and dated by the manager of the department.
- You have signed the timesheet.

If you have any problems with timesheets or payment, please contact Jennie Reeves.

### **Holiday Pay**

As an employee you start accruing holiday pay as soon as you begin working for Jennie Reeves. Holiday entitlement for full time personnel is 5.6 weeks per annum and is apportioned for part time workers. After 12 weeks in the same role your entitlement may change. Annual leave entitlement is set to comply in line with the Agency Workers Regulations.

All leave entitlement must be taken during the course of the Leave Year in which it accrues. None may be carried over to the next year. Your Leave Year commences in your first week of work. You are responsible for ensuring that all your paid annual leave is requested and taken within the Leave Year.

# **CPD (Continuing Professional Development)**

To assist you in your CPD and as a contribution towards enhancing your career, Jennie Reeves will contribute £100.00 towards your CPD fund per annum. The Career Development fund is specifically designed for this purpose, and is not available for ongoing compliance. Your CPD contribution is available after you have completed 300 hours work for Jennie Reeves. You must still be working for Jennie Reeves when you submit your claim. Your annual allowance runs for a year starting from the month you commence work. You must submit a valid receipt in order to make your claim. Unclaimed CPD contributions cannot be carried over to the next year

#### Other Benefits

In addition to training subsidies, we offer a number of benefits to Members, including:

- Stakeholder Pension
- Referral Bonus

### **Stakeholder Pension**

Please contact Jennie Reeves for details.



#### **Referral Bonus**

If you make a referral to us, you will receive £200; your friend/colleague who you have referred will receive £50. To qualify for a referral bonus, your referral must not be known to our agency already. Your referral should mention your name when they register with us.

Once they have worked 150 hours for us the bonus payment will be paid out to you and your referral. If you are working for us the payment will be subject to the usual HMRC statutory deductions. There is no limit to how many friends or colleagues you can refer.



#### **ASSIGNMENTS**

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### **Timekeeping**

Please make every effort to ensure you arrive at and leave all bookings at the agreed time, confirmed in your confirmation letter. If, for any reason, you are unable to attend a booking or are running late you should contact your Consultant, and if possible your line manager, as soon as possible.

### **Updating Records**

It is important that you keep Jennie Reeves up to date with any changes in your status regarding HCPC, Occupational Health and Work permits and any complaints or investigations you are the subject of. This may include the provision of valid certificates or other documentation to Jennie Reeves.

### **Requirements for Assignments**

Please attend all bookings with your current Jennie Reeves ID badge, film badge (where required) and appropriate uniform. Mobile phones must be switched off during working hours.

If you are on an assignment where a hospital uniform is not required (your Consultant will inform you) or have any queries regarding dress, please do not hesitate to contact Jennie Reeves.

# **ID Badges**

An ID badge will be issued to you during your interview with Jennie Reeves or will be posted to you. Should your ID badge become damaged or lost please contact your Consultant at Jennie Reeves. ID badges have an expiry date of one year.

# **Arriving for Work**

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

- Crash Call Procedure
- Hot Spot Mechanisms
- Violent Episode Policy
- Procedure for Alerting Security Staff
- Policy for Administration & Assistance with Drugs
- Complaints handling
- Fire
- Information Security
- Manual Handing
- Health and Safety

If you have any queries regarding correct local procedures, or are uncomfortable carrying out any of the duties you have been asked to perform, please raise these issues with your line manager in the first instance.

You must comply with all security measures of the Trust you work in. The Trust will have the right to carry out physical searches of you, your possessions, and your vehicle. These searches will comply with the Human Rights Act 1998.

You must co operate with the Trust with any investigations carried out by the Trust.



Completing an Assignment	

#### **Notice Period**

When possible, Members should let Jennie Reeves know when their assignment is coming to an end, allowing us time to organise your next assignment if necessary. Members and Clients, according to our Terms of Business, are asked to give at least 1 week's notice (except in exceptional circumstances when each case will be looked at individually) and subsequently inform Jennie Reeves of the end date.

# **Evaluations of Service (EOS)**

At the end of every assignment Jennie Reeves provides 2 sets of Evaluations of Service (EOS) to both Member and Client. Clients are asked to supply feedback on the service they have received from Jennie Reeves and also to provide a reference on the Member.

Members are asked to give feedback on the service they have received from Jennie Reeves and also feedback on the assignment. This information can then be used to advise future locums. Both positive and negative feedback is actively encouraged so Jennie Reeves can act upon it to improve its quality of service.



### YOUR TRAINING AND DEVELOPMENT

### **Training**

Please keep up to date with all relevant clinical guidance as well as attending to your CPD requirements. In particular, you must have annual training in:

- Fire Safety
- Health & Safety
- Moving & Handling
- COSHH
- **RIDDOR**
- Infection Control
- **Basic Life Support**
- Lone Worker Training
- Complaints Handling
- Violence and Aggression

Please ensure your Training Record is kept up to date at all times by bringing it into or sending to our office, together with proof of training completed, after any new course. We will review training completed at your six monthly appraisals (see below).

### **Appraisals**

We will appraise you annually. Appraisals give us an opportunity to consider with you your performance at work. They are also an opportunity for you to raise any concerns or issues you may have.

Appraisals are carried out based on feedback received from clients and cover the following areas:

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

www.jenniereeves.co.uk



### **OUR POLICIES**

### **Professional Standards**

Whilst this booklet outlines Jennie Reeves' own policies and standards, these do not supersede the national guidelines of the HCPC.

Further information is available from the HCPC website, www.hpc-uk.org, or from your Jennie Reeves branch.

The HCPC can also be contacted at the address and numbers below:

Health and Care Professionals Council Park House 184 Kennington Park Road London SE11 4BU

Tel: 0207 582 0866 Fax: 0207 840 9684

#### Code of Conduct

Jennie Reeves expects all Members to act in a professional manner at all times. We particularly ask you to pay special attention to:

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

You are responsible for your own actions when completing assignments, co- operating with colleagues and managers for the care of patients and clients.

You should comply with all reasonable requests, using your professional judgement at all times.

If you have any questions about your work, please try to resolve these locally at first or seek advice from your Consultant.

You should not smoke at work or attend work under the influence of alcohol or any illicit substances.

# **Medication Policy**

Temporary Locums are only allowed to administer medication with the authority of a senior permanent NHS manager. This is very hard to manage.

It is the policy of Jennie Reeves that NO TEMPORARY WORKER IS AUTHORISED TO ADMINISTER MEDICATION.



### **Equal Opportunities**

Jennie Reeves seeks to offer equality to all our Members and will treat any allegations of discrimination with the utmost seriousness. In accordance with these principles Members may not discriminate on the grounds of:

- Race
- Ethnic Origin
- Nationality
- Colour
- Religion or Belief
- Gender
- Sexual Orientation
- Marital Status
- Disability

#### **Health and Safety**

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

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

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

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

When on assignment, it is the client's responsibility to familiarise you with their own Health & Safety policy and procedures, and with locations of fire escapes, first aid contact person etc. At a client's request in writing, Jennie Reeves will undertake to train Members to be supplied in standard workstation safety. We cannot, however, be held responsible for the suitability of workstations used by our clients. If you express concern over the Health & Safety arrangements of your employing client, we will ask the client to investigate and, if possible, to make improvements.

If you refuse to work for a client on Health & Safety grounds, we will attempt to find you other employment without prejudice.

#### **Record Keeping**

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

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



#### Records should:

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

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

For more detailed information, please see the HCPC or relevant professional membership bodies' guidelines.

### Confidentiality

You must not disclose to any person any information acquired by you in connection with the provision of the service which you provide this includes: - the authority, its staff and procedures, the identity of any patient, the medical condition or any treatment received by any patient.

Any patient information obtained by you during the course of your duties is confidential and should not be disclosed to any third party if it is not legitimately in connection with their treatment or any other official investigation.

Please take care with patient records when on assignment to ensure that they are not in undue danger of being accessed by unauthorised individuals.

Patients'/clients' information should only normally be shared with their consent – you should make sure patients/clients understand that their information may be shared with various members of the team providing care. It is a patient's/client's decision what information should be shared with their family or others.

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

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

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

The Caldicott Protocols form the Department of Health's guidance on The Protection and use of Patient Information. These protocols have been agreed nationally and must be adhered to by all health professionals and others with access to patient information. They consist of the following principals:

- Justify Purpose(s) Individuals, departments and organisations must justify the purpose(s) for which information is required. This includes the purpose, use or transfer of patient-identifiable information within or from an organisation. This should be clearly defined and scrutinised, with continuing uses regularly reviewed by an appropriate guardian.
- Do not use patient-identifiable information unless it is absolutely necessary:



This means assessing information flows and uses and 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 (s).

- Use the minimum necessary patient-identifiable information: Where use of patient-identifiable information is considered 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.
- Access to patient-identifiable information should be on a strictly 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.
- Everyone with 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 made fully aware of their responsibilities and
   obligations to respect patient confidentiality.
- Understand and comply with the law: Every use of patient-identifiable information must be lawful. Someone in each organisation handling patient identification information should be responsible for ensuring that the organisation complies with the legal requirements.

### **Data Protection**

In addition to the above, you should adhere to the requirements of the *Data Protection Act* 1998.

In brief, anyone processing personal data must comply with the eight enforceable principles of good practice. Data must be:

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

For further information, please see <a href="www.dataprotection.gov.uk">www.dataprotection.gov.uk</a>, from which the above guidance is reproduced.



### **Computer Use**

Where our clients grant you access to their computer systems, these must only be used as authorised and not to gain access to any other data or programs. In general, please ensure that you:

- · Keep any passwords safe.
- Keep to the client's policies and procedures.
- Log off immediately after use.

# Specifically, you must:

- Observe any local policies and procedures regarding passwords, floppy disks, CD ROMs and data storage/transfer.
- Not load or introduce any programs onto the computer.
- Not access any information service or bulletin board including the Internet without specific prior authority from your line manager.
- Not download any files or connect to any network or other computer equipment without prior authority as above.

#### Consent

In accordance with HCPC and relevant professional membership bodies, you must obtain the consent of a patient before giving any treatment or care.

#### Consent must be:

- Given by a legally competent person
- Given voluntarily
- Informed

Consent is only 'informed' if the individual understands what is to be undertaken by whom the purpose for the treatment and the possible consequences.

Patients/ clients are assumed to be legally competent (that is they can understand and retain treatment information and use it to make an informed choice) unless otherwise assessed by a suitably qualified practitioner.

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

If a patient/ client is no longer legally competent, decisions should be based on previous consent/ non-consent in a similar situation (providing there is no reason to believe they have changed their mind) or their known wishes. Otherwise, treatment should be in their best interests. In the case of children (those aged under 16 in England and Wales), the involvement of those with parental responsibility is usually necessary – you should be aware of legislation and local protocol.

It is not usually acceptable to seek consent for a procedure, that you will not be performing yourself unless you have been specifically trained for that area of practice.

All discussions and decisions relating to consent should be documented in the patient's/ client's records. Where consent is withheld, you should follow the policy in force at your assignment location.



# **Allegations of Abuse**

Jennie Reeves will take seriously any allegations of abuse by staff working through us. If we receive complaints of this sort against you, we may not be able to assign you whilst a full investigation is performed.

Ultimately, if allegations are well founded, we may not be able to offer you work in the future. Where allegations are sufficiently serious, we may need to report you to the HCPC and/or the police depending on the allegation. Appeals against any decisions made by our staff in these matters can be made to the Managing Director, whose decision will be final.

Should you in the course of duty suspect that abuse is taking place you should inform your line manager immediately. There are strict guidelines to be followed in reporting abuse under the Department of Health guidance "No Secrets" and a full report will need to be made prior to investigation.

### There are many different forms of abuse:

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

### **Investigations and Prosecutions Reporting**

The candidate must inform Jennie Reeves of any criminal or professional prosecutions or investigations that they are subject to. The agency will then consider whether or not there is grounds for suspension. The severity of the accusation will determine if the candidate is suspended, the main criteria being a risk to the health or life of a patient or colleague. This criteria is not exclusive and cases shall be dealt with on an individual basis. The decision is ultimately made by Jennie Reeves, Managing Director. The Health Professionals Council shall then be notified of any decision taken, if seen as appropriate.

It is Jennie Reeves policy to inform the candidate that it is not in their best interests to continue with the placement. These situations are dealt with the utmost confidentiality and discretion. It is vital that the credibility of Jennie Reeves is not compromised. The policy of removing the candidate ensures that no damage is done to Jennie Reeves reputation. The health and safety of the patients and colleagues is the primary concern for Jennie Reeves in such a situation, influencing our policy.



# Freedom to speak up: raising concerns (whistleblowing) policy

Jennie Reeves Radiographers Agency (JRRA) are committed to achieving the highest possible standards of service, and encourage a culture of openness within our organisation, supporting their staff members to speak out if they have any concerns.

With the introduction of the Public Interest Disclosure Act 1998 all workers now have legal protection from any form of retribution, victimisation or detriment as a result of publicly disclosing certain serious allegations of malpractice.

The policy will apply in cases where a staff member genuinely show that they reasonably believe that the disclosure they are making is in the public interest and believes that one of the following circumstances (but are by no means restricted to) is occurring, has occurred or may occur within their line of duty:

- unsafe patient care
- unsafe working conditions
- inadequate induction or training for staff
- lack of, or poor, response to a reported patient safety incident
- suspicions of fraud (which can also be reported to our local counter-fraud team [NHS Fraud and Corruption Reporting Line on 0800 028 4060)
- a bullying culture (across a team or organisation rather than individual instances of bullying).

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

Where the concern involves the Consultant of JRRA then the concern should be raised with the Managing Director, Phoebe Sprinz or Vanessa Brown, of JRRA.

All complaints will be viewed seriously and treated confidentially.

# Raising a concern

Please raise your concerns in the first instance to your Consultant or their Manager, Ashley McDonnell, Ashley@jenniereeves.co.uk 020 8870 8143

If for any you still remain concerned, please can we request you call 020 8870 8143 to talk to the Managing Director, Phoebe Sprinz or Vanessa Brown, of JRRA. Alternatively, you may email Phoebe@jenniereeves.co.uk or Vanessa@jenniereeves.co.uk

Please address all post to:

Jennie Reeves 3 Barmouth Road London SW18 2DT

#### **Further Advice and Information**

For further advice on whistleblowing contact the Whistleblowing Helpline for the NHS and Social Care 08000 724725, www.wbhelpline.org.uk If you are a member of a Trade Union, they will also be able to offer you guidance. Alternatively you may consult your Hospital Placement's Policy, if you would prefer to go through this method.

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Everyone should be aware that if any disclosure is made in bad faith (for example, in order to cause disruption within the organisation), or concerns information which you do not substantially believe is true, or indeed if the disclosure is made for personal gain, then such a disclosure may constitute gross misconduct for which summary dismissal is the sanction. However, if you make a genuine mistake then you will not be penalised.

### Making a Complaint

If you have a complaint about the way you have been treated on assignment or by our staff, please direct this in the first instance to your Consultant or their Manager. If for any reason you are still unsatisfied with the case in point, please call 020 8870 8143 to talk to the Managing Director of Jennie Reeves. Please address all post to:

Jennie Reeves 3 Barmouth Road London SW18 2DT E-mail: 020 8877 9281

#### Fraud awareness

Jennie Reeves has comprehensive arrangements for countering fraud and corruption and all staff are duty bound to report any suspicions.

Fraud is an act of dishonesty with the intention to make a gain for themselves or another, or to cause a loss to another or to expose another to a loss.

Examples of what might constitute fraud include:

- Falsely claiming sick leave which is paid
- · Claiming for hours not worked
- False expense claims
- · Falsifying records to steal NHS property
- Failing to declare criminal convictions
- Falsifying qualifications.

If you suspect that fraud of any type has occurred or is in progress you must not attempt to investigate it yourself. Any genuine concerns about fraud may be reported directly to the Trust's Counter Fraud Specialists. Alternatively, any suspicions can be reported to:

### NHS Fraud and Corruption Reporting Line - 0800 028 40 60

Calls to the National Fraud and Corruption Reporting Line are treated in confidence by trained staff and information given will be professionally assessed and evaluated. Callers have the option to remain anonymous should they wish to do so.

Lines are open 8am to 6pm Monday to Friday.

All reports of fraud at a Trust will normally be referred to the Trust's Counter Fraud Specialists. Dependent upon the information received, the Counter Fraud Specialists will usually arrange a meeting to obtain more information and to give advice on whether or not an investigation is

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appropriate. The diverse nature of information received means that it may not always be appropriate to conduct an investigation or it may be appropriate to involve the Police and/or the regional NHS Counter Fraud Service team.

If a criminal investigation is necessary, this will be carried out in accordance with the law and best practice.

Fraud against the NHS is never acceptable. All appropriate legal, civil, and disciplinary action will be taken against those responsible. The government is determined that the fraudster will not benefit and have instructed that, where public money has been defrauded, this will be the subject of recovery procedures in every case.

Wider details on countering NHS Fraud can also be found at: http://www.nhsbsa.nhs.uk/fraud

# Safeguarding Vulnerable Persons - Children & Vulnerable Adults

We all have a statutory responsibility to safeguard and promote the welfare vulnerable persons. Jennie Reeves believe that a child or vulnerable adult should never experience abuse of any kind. Jennie Reeves have a responsibility to promote the welfare of all children and vulnerable adults and keep them safe. JRRA are committed to practice in a way that protects them.

The purpose of the Jennie Reeves safeguarding policy is:

- To protect children and vulnerable adults who receives services from Jennie Reeves Candidates and Staff.
- To provide Candidates and Staff with overarching principles that guide Jennie Reeves' approach to safeguarding.

Please consult the local policies and procedures at your workplace as these will vary according to the Trusts strategy and how they work with supporting agencies.

More information can be found at:

https://www.england.nhs.uk/wp-content/uploads/2015/07/safeguard-policy.pdf and http://www.rcpch.ac.uk

# No Smoking

Jennie Reeves operates a no smoking policy and employees must refrain from smoking outside the client site. Employees must ensure that no cigarette ends or matches are left on the ground outside the client site.