



In order to get your NHS PaSA compliance you have to follow the required process as described here by CES-Locums, CES-Locums is our partner for all locum doctors in the UK. CES is a appointed PaSA agency.

Attached you will find the required forms. If you have assembled everything, we will with great pleasure schedule all necessary appointments. You can theoretically manage everything in one day in London if you arrive early at the day and leave late. Anyhow two days will be better. Please don't hesitate to contact us if any queries appears. Due to frequent change of the process by UK NHS please be aware to use the actual checklist and forms only. If you have any doubt, don't hesitate to ask.

If you have not started to register at the GMC you can go ahead now online, it will take some time before you get your invitation for the ID check. As soon as you have received a proposal for an appointment, please let us know for organising. Please start the GMC process here if you are an EU or EEC Citizen and if you got your PMQ inside the EU or EEC or CH and if you held never an GMC registration before:

http://www.gmc-uk.org/doctors/registration_applications/s3_p1.asp

In case the above depends not for you, please look here:

<http://www.gmc-uk.org/doctors/applications.asp>

Could you send the following documents – if you have them now, which are required in order to register you and put you forward for locum vacancies:

- (1) Clear copy of your original GMC certificate and (2) most recent Annual GMC Retention Fee Letter
- Clear copy of your passport and any visas (if applicable)
- Clear copy of your most recent Basic, Intermediate or Advanced life support training in date certificate
- Clear copy of your most recent Health & Safety training certificate
- 2 proofs of current address (Utility bills, bank statements etc.)
- Recent passport size photos
- Clear copy of your registered medical qualification
- Clear copy of most recent Enhanced UK CRB disclosure, if not available, application can be made during the NHS/PaSA interview at the PaSA agency in London only.
- Current Medical Indemnity Insurance certificate (disclaimer attached above if not held)
- Occupational Health Clearance report from a British Laboratory including:
 - Hepatitis B titre level results (in the last 5 years >100)*
 - Rubella*
 - Varicella*
 - Tuberculosis/BCG (scar test is usable if issued by an UK agency only!)
 - Measles*
 - Mumps*
 - Hepatitis B Surface Antigen (Must state "IVS" or "Identity Validated Sample")
 - Hepatitis C (Must state "IVS" or "Identity Validated Sample")
 - HIV (Must state "IVS" or "Identity Validated Sample")
- Print the front page of the attached Agency Worker Handbook and print your name, sign and date the declaration and send back
- Complete, sign and return the attached application form and health declaration documents.
- Please contact us for an interview, with CES-Locums. We recommend to organise this in conjunction with the visit to the GMC ID-Check.

* German laboratory accepted if translated to English



GENERAL DETAILS

TITLE: _____

SURNAME: _____

FORENAME(S): _____

MARITAL STATUS: _____

DATE OF BIRTH: _____

GENDER: _____

ADDRESS 1: _____

ADDRESS 2: _____

CITY: _____

COUNTY: _____

POST CODE: _____

COUNTRY: _____

TEL1: _____

TEL2: _____

OTHER No: _____

FAX: _____

MOBILE: _____

E-MAIL1: _____

E-MAIL2: _____

NEXT OF KIN DETAILS

TITLE: _____

SURNAME: _____

FORENAME(S): _____

RELATIONSHIP: _____

ADDRESS1: _____

ADDRESS2: _____

CITY: _____

COUNTY: _____

POST CODE: _____

TEL1: _____

TEL2: _____

MOBILE: _____

FAX: _____

E-MAIL1: _____

E-MAIL2: _____

GP Name: _____

GP Address: _____

GP Telephone: _____

TYPE OF ENGAGEMENT WITH CES LOCUMS

Please tick as appropriate and provide information accordingly:

<u>TYPE</u>	<u>YES</u>	<u>NO</u>	Limited Companies, Self employed and Sole Traders are solely responsible for paying their Tax and National Insurance liabilities to the Inland Revenue. CES Locums will be handling the Income Tax and Employee's National Insurance Contribution for PAYE workers.
P.A.Y.E.			
Limited Company/Umbrella Company			
Self Employed			
Sole Trader			

PLEASE PROVIDE THE FOLLOWING DETAILS

National Insurance Number:	
Name on your Bank Account:	
Account Number:	
Sort Code:	

HOW / WHERE DID YOU HEAR ABOUT US

PRINTED ADVERT _____

ONLINE REGISTRATION _____

WEB ADVERT _____

AGENT _____

WORD OF MOUTH _____

OTHERS _____

IMMIGRATION STATUS / RIGHT TO WORK IN THE UK

Nationality: _____ Type of the current visa: _____

Proof provided: _____ Valid from _____ To _____



PROFESSION QUESTIONNAIRE

Please specify your profession by ticking the appropriate boxes

Profession	Tick	Work Type	Tick	Notes, including computing systems
Doctor				
GP		Surgery		
		OOH		
		HMP		
		MOD		
		Other		
Hospital		Specify Grades & Specialties Below		
Pharmacy				Notes, including computing systems
Pharmacist		Retail		
Dispenser		Lloyds		
		Tesco		
		ASDA		
		Sainsbury's		
		Boots		
		Alliance		
		Independent		
		Other, please specify below		
		Hospital		Notes, including computing systems
		MI		
		Aseptic		
		Dispensary		
		Production		
		Other, please specify below:		
Nursing		Elderly		
Registered Nurse		Psychiatry		
Healthcare Assistant		Medical		
		Surgical		
		Specialist, please specify below:		

STATE REGISTRATION WITH PROFESSIONAL BODY IN THE UK:

Professional Body:

GMC

RPSGB

HPC

NMC

Type of Registration:

Full

Provisional

Other, please specify _____

Registration Number: _____

Specialist Registration: _____

Valid until: _____

PROFESSIONAL INDEMNITY INSURANCE

Do you have Professional Indemnity Insurance?

Yes

No

If the answer is Yes, please provide details:

I undertake that I will inform Clinical Employment Services Limited / CES Locums of any changes to my registration status with the professional body also of any allegations, suspensions and any related issues.

I understand that Clinical Employment Services Limited / CES Locums will liaise and communicate with the professional body regarding any complaints about my professional conduct accrued during any work engagement through CES Locums.

APPRAISAL

Last Appraisal Date:

Next Appraiser Date

Appraiser Full name:

Appraiser GMC Number:

OFFICE USE ONLY:

Appraiser verified by (CESL Staff Name):

Date verified:

Evidence:



DECLARATIONS

WTR:

Statement on Working Regulations (WTR)

The Working Time Regulations 1998 require Clinical Employment Services Limited / CES Locums to limit your average weekly working time to 48 hours unless you agree in writing that those limits shall not apply to you. In those circumstances you should complete the declaration set out below.

I agree that I do not want the Working Time Regulations to apply to me

Should I wish to terminate this agreement about the WTR, I shall give Clinical Employment Services Limited / CES Locums 4 weeks written notice.

CRB DISCLOSURE:

CRB Disclosure:

Police Clearance

Disclosure Number: _____ Date of Disclosure: _____

I hereby give my consent Clinical Employment Services Limited to / CES Locums:

1. To carry out Criminal Record Check with the CRB on my behalf
2. Disclose my CRB information to my potential employer prior to starting a job with that employer
3. Communicate with the registered body that had obtained the CRB Disclosure on my behalf to clarify my latest CRB status for the employment purposes only

FITNESS TO PRACTICE DECLARATION:

Criminal Record/Rehabilitation of Offenders Act 1974 and Fitness to Practise declaration by the Agency Worker.

Name:

EXEMPTED QUESTION: Do you have any unspent* criminal convictions?

Yes / No (delete as applicable)

If yes, please list your criminal convictions and their dates in a separate sheet. The information you give will be treated in confidence and only taken into account where, in the reasonable opinion of [Clinical Employment Services Limited], the offence is relevant to the post for which you are applying.

Failure to declare a conviction may require us to exclude you from our register or terminate an assignment if the offence is not declared but later comes to light.

Signed:Date:



I CONFIRM THAT I AM 18 YEARS OF AGE OR OVER.

IN SIGNING THIS DECLARATION, I ACKNOWLEDGE THAT NEITHER CLINICAL, NOR IT'S EMPLOYEES HOLD ANY RESPONSIBILITY OR LIABILITY WHATSOEVER FOR THE SERVICES I PROVIDE, NOR THE CONSEQUENCES OF THE PROVISION OF SUCH SERVICES, INCLUDING PERSONAL ACCIDENT, DAMAGE TO THE CLIENT'S PROPERTY etc.

I DECLARE THAT ALL THE INFORMATION I HAVE GIVEN IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

I HAVE READ AND AGREE TO ABIDE FULLY BY THE TERMS AND CONDITIONS OF MEMBERSHIP.

SIGNED: _____

DATE: _____

OFFICE USE ONLY

DOCUMENT	PROVIDED TO AGENCY WORKER	STAFF NAME & DATE
Terms & Conditions for Agency Worker		
Agency Worker Handbook		
Health & Safety Manual		
Interview Sheet		
Photo ID Badge		
CRB Application Form		
Declaration of Health		
BCG Scar Declaration		
COMMENTS		



ACE SAFE

Confidential Work Health Assessment

Your answers to this questionnaire will be **CONFIDENTIAL** to the ACE SAFE team and will not be given to anyone else without your written permission. The purpose of the questionnaire is to assess whether you have any health problems that could affect your ability to undertake the duties of the post you have been offered or place you at any risk in the workplace. We may recommend adjustments or assistance as a result of this assessment to enable you to do the job. Our aim is to promote and maintain the health of all people at work. Before health clearance is given for employment you may be contacted by the ACE SAFE team and may need to be referred to an occupational health advisor or physician.

Please help us to help you by completing the questionnaire as fully as possible. Please complete this form in BLACK pen / typeface and block capitals

Title: Ms / Miss / Mrs / Mr / Dr / Professor:	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Surname/Family name:	First name:	
Previous names (if applicable):		
Date of birth:	Proposed Job Title:	
Home Address:		
Post code:	Are you new to working for the NHS? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Mobile:	Tel home:	
Name of GP:	Tel No of GP:	
Address of General Practitioner		
<i>Clinical diagnosis and management of tuberculosis, and measures for its prevention and control (NICE 2006)</i>		
Have you lived continuously in the UK for the last 5 years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If no, please list all of the countries that you have lived in over the last 5 years		
Have you had a BCG vaccination in relation to Tuberculosis?	Approx date of vaccination:	

PREVIOUS EMPLOYMENT IN THE LAST 5 YEARS

Employer	Nature of your work	Start date	Finish date

All staff groups complete this section

1. Do you have any illness/impairment/disability (physical or psychological) which may affect your work?

If **yes**, please give details below or on a separate sheet Yes No

2. Have you ever had any illness/impairment/disability which may have been caused or made worse by your work?

Yes No

If **yes**, please give details below or on a separate sheet

3. Are you having, or waiting for treatment (including medication) or investigations at present? If your answer is yes, please provide further details of the condition, treatment and dates.

If **yes**, please give details below or on a separate sheet Yes No

4. Do you think you may need any adjustments or assistance to help you to do the job?

If yes, please give details below or on a separate sheet

Yes No

5. Do you have any of the following:

Yes No

(a) A cough which has lasted for more than 3 weeks?

(b) Unexplained weight loss?

(c) Unexplained fever?

Have you had tuberculosis (TB) or been in recent contact with open TB?

If **yes**, please give details

6. Immunisation History: Evidence must be supplied in the form of vaccination record card or serology reports

Have you had any of the below immunisations	Yes	No	Dates:
Diphtheria			
Tetanus			
Polio			
M.M.R – evidence of 2 vaccinations or serology reports for Measles, Mumps and Rubella			
Varicella – evidence of 2 vaccinations or serology report for Varicella			
Hepatitis B primary course of 3 vaccines: Please supply evidence of titre level following primary course.			
Hepatitis B boosters: Please supply evidence of titre level following booster.			
Tuberculosis – BCG vaccination Evidence to be supplied either by providing a signed record from occupational health or GP that they have sighted your BCG scar or tuberculin skin test (Heaf Grade 2 or Mantoux 6mm – 15mm).			

ONLY HEALTHCARE WORKERS INVOLVED IN PATIENT CARE / PATIENT CONTACT / BODY FLUID SAMPLE HANDLING COMPLETE THIS SECTION (INCLUDING LABORATORY WORKERS)

Yes No

Have you ever tested POSITIVE for HIV/AIDS?

Have you ever had or tested POSITIVE for Hepatitis B?

Have you ever had or tested POSITIVE for Hepatitis C?

Exposure Prone Procedures (EPP) are those procedures where the worker's gloved hands may be in contact with sharp instruments, needle tips or sharp tissue (e.g. spicules of bone or teeth) inside a patient's open body cavity, wound or confined anatomical space where the hands or fingertips may not be completely visible at all times.

EPP staff include: All surgeons (including FY1 and FY2 doctors with a rotation into one of the EPP areas), dental staff, theatre staff, midwives, A&E doctors and nurses.

EPP staff MUST provide documentary evidence of hepatitis B surface antigens, Hepatitis C and HIV status. This must be an identified validated sample (IVS). Health clearance for EPP work cannot be given until these results have been received and processed. IF YOU HAVE PREVIOUS BLOOD RESULTS AND / OR DOCUMENTED EVIDENCE OF RELEVANT VACCINATIONS PLEASE SUPPLY A COPY WHEN YOU SUBMIT THIS FORM.

IF RESULTS ARE NOT AVAILABLE YOU WILL NEED TO BE TESTED AND HEALTH CLEARANCE FOR EPP WORK WILL BE DELAYED UNTIL THESE RESULTS ARE PROCESSED. You will be asked to show formal photographic ID i.e. valid driver's licence, passport for this procedure. This is to comply with the Department of health's standard for Identified Validated samples (IVS).

Yes No

Will you be performing exposure prone procedures (EPP)?

Will you be working on a renal unit?

Healthcare workers who perform EPPs have a legal duty to inform the ACE SAFE team if they suspect or know that they are carriers of HIV, Hepatitis B or Hepatitis C.

DECLARATION

I declare that the answers to the above questions are true and complete to the best of my knowledge and belief. I give permission for a member of the ACE SAFE team to communicate with my own general practitioner, or any other health professional, if further information is required and for that GP or healthcare professional to give details of my clinical condition or other relevant information to the OH advisor/physician at the ACE SAFE.

I understand that I shall be contacted to obtain my fully informed consent **before** any report is requested and that under the Access to Medical Reports Act, 1988:

- I have the right to see the report before it is sent.
- I am entitled to ask the doctor to amend or modify information which I consider is inaccurate.
- I have 21 days from notification to seek access to the report.

*I wish to seek access to this report/I do not wish to seek access to this report

(Please delete as appropriate)

Signed

Date

.....

I understand that if any recommendations to my employer are necessary as a result of this Work Health Assessment, ACE SAFE will discuss the recommendations with me before making them to my employer.

*I give consent for ACE SAFE to make recommendations to my employer, without me having seen a written copy of the recommendations first.

OR

*I would like to see a written copy of any recommendations the Health and Work Centre may make to my employer before they are sent to my employer.

* delete one of the above statements before signing below.

Signed

Date

.....



Declaration by Occupational Health Nurse Advisor for
Ace SAFE re: Viewing of BCG Scar.

Candidate Name:		Date of Birth:	
Please tick yes or no to the following questions:			
Question:	Yes	No	
Do you suffer with any chest problems, e.g. recurrent cough, breathlessness?			
Have you had Tuberculosis or contact with Tuberculosis?			
Do you have a family history of Tuberculosis?			
In the last 12 months have you had a cough last for more than 3 weeks?			
In the last 12 months have you coughed up blood?			
In the last 12 months have you had any unexplained weight loss, fever or night sweats?			
Have you had a BCG vaccination?			

For Occupational Health Use:

Candidate Name:		Date of Birth:	
I confirm that I have viewed a BCG scar on the above candidate:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
The scar is located:			
PRINT NAME:	Signature:		
Qualification:	Date:		

If no BCG scar is present candidate must undergo tuberculin skin test and results evidenced as having protection against TB before being assigned to work in the NHS.

Official Stamp required:

Medical Indemnity Insurance

I do not hold Medical Indemnity Insurance:

Name:

Date:

Signature:

GMC number:

I no longer hold Medical Indemnity Insurance:

Name:

Date:

Signature:

GMC number:

GMC Disclaimer

I no longer hold my original GMC certificate.

Reason:

.....
.....

Name:.....

GMC no:.....

Date:.....

Signature:.....

Registered Higher Qualification Disclaimer

I no longer hold my Registered Higher Qualification.

Reason:

.....
.....

Name:.....

GMC no:.....

Date:.....

Signature:.....



CES Locums

www.ces-locums.com

Albion House, 470 Church Lane, London, NW9 8UA



Structured Reference

Institution:
.

Mrs/Mr.:

Date:

Re:	«Anrede» «Title» «Forename» «Surname», «Country» «Profession»		
GMC or GDC registration no.	«Board1»	Position applied for:	Consultant

Your name has been provided by the applicant named above, who has applied to CES Locums to be supplied as a locum in the position identified above. We would be grateful if you would reply to the following questions regarding this applicant and provide in confidence any information which you are able to/aware regarding his/her character and suitability to the perform the role and associated duties of the position applied for.

Please provide the following information regarding the applicant named above:

1. How long did the named applicant work for/with you or under your supervision and in what capacity, ie clinical position/grade and specialty?

From		To	
Capacity			

2. Please state the nature and depth of your acquaintance to the named applicant?

--

3. Do you believe the named applicant to be honest, conscientious and discreet? If no, please provide further details below. *Please tick the appropriate box.*

Yes		No	



4. General performance of the named applicant:

Please tick as appropriate, providing additional comments in support of the statements made	comment/Unable to	Poor	Satisfactory	Good	Very Good	Excellent
Clinical skills demonstrated in line with the requirements of the position						
Relationships with patients, other healthcare workers and the public						
Timekeeping and management of workload						
Patient records and other records management						
Reliability						
Communication skills						
Supervisory skills						
Organisational ability						
Sickness/absence record						
Additional comments in support of the statements made						

5. Do you know of any factors concerning the named applicant which might cause his/her fitness for employment or reasons why the named applicant should not work in a clinical environment? If yes, please provide details below. *Please tick the appropriate box.*

Yes		No	

6. Are you aware of any criminal conviction(s) relating to the named applicant? If yes, please provide details below. *Please tick the appropriate box.*

Yes		No	



--

7. Have you had any reasons to instigate disciplinary action against the named applicant? If yes, please provide details below. *Please tick the appropriate box.*

Yes		No	

8. Has the named applicant been or is currently the subject of any fitness to practice proceedings by an appropriate licensing or regulatory body in the United Kingdom or any other country? If yes, please provide details below. *Please tick the appropriate box.*

Yes		No	

9. Do you consider the named applicant suitable for the position identified above? If no, please provide further details below. *Please tick the appropriate box.*

Yes		No	

10. Would you re-employ the named applicant? If no, please provide further details below. *Please tick the appropriate box.*

Yes		No	

11. Please provide any further information which is relevant to above named applicant's application to be supplied as a locum in the position identified above?

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In order to protect the public, the post for which the application is being made is exempt from Section 4 (2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. It is not therefore in any way contrary to the Act to reveal any information you may have concerning convictions which would otherwise be considered as 'spent' in relation to this application and which you consider relevant to the applicant's suitability for employment. Any such information will be kept in strictest confidence and used only in consideration of the suitability of this applicant for a position where such an exemption is appropriate.

Reference Request completed by:

Referee name		Position	
Signature		Date	
Tel. no		Email	
Organisation name			
Organisation address			



**Clinical Employment Services Limited
T/A CES Locums**

Agency Worker Handbook

DECLARATION

I confirm that I have received, read, fully understood and shall comply with the content.

Name: _____

Signed: _____

Date: _____

**CES Locums
31-33 Freetrade House
Lowther Road
London, HA7 1EP
Tel: 020 8204 3131
Fax: 020 8238 9808**

**www.ces-locums.com
jobs@ces-locums.com**

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1. WELCOME TO CES LOCUMS

Clinical Employment Services Limited T/A CES Locums is tailored to provide integrated solutions to its service users.

CES Locums specialised in providing the service of employment of healthcare professionals to Secondary, Primary and Community Care sectors Nationwide whereby we employ Doctors, Allied Health Professionals, Health Science Service and Nursing Staff on temporary, contract and permanent basis.

CES Locums is an NHS PaSA approved agency for;

- Medical Locums 2008-2011
- AHPs & HSS 2009-2012

CES Locums is an official supplier (PSL) to reputable Blue Chip healthcare providers within the Community and Primary Care sectors.

2. SPECIALTIES WE COVER

- Locum Doctors to NHS Hospitals (Secondary Care)
- Locum General Practitioners (GPs) to Primary Care Service Providers
- Locum AHPs & HSS to the NHS (Primary, Secondary and Community Care sectors)
- Locum Pharmacists to Community Care Sector (Retail Pharmacy)
- Permanent Placement of Healthcare and Pharmaceutical Staff within the Healthcare Sector and Pharmaceutical Industry

3. RESPONSIBILITIES

3.1 OUR LOCUMS ARE ASKED TO:

- Ensure that the care you give is of the highest standard
- You comply with professional, legal and ethical requirements
- Act as an advocate for all patients and clients in managing their care
- Be on time
- Wear the appropriate uniform
- Wear your Locum ID Badge
- Fully complete and return your timesheet on time
- Inform your Recruitment Consultant immediately if you are unable to attend a placement or interview
- Ensure you have read and understood the Health and Safety, Crash Call, Violent Episode and Security Procedure for each placement
- Let us know if a client offers you a permanent role
- Where possible, give at least one week's notice if you will be leaving a placement early
- Co-operate in the removal of a discrimination in service provision
- Give your Recruitment Consultant as much notice as possible of your holiday

- Inform us of any training you have undertaken and update your training portfolio and CV
- Inform us of any disciplinary proceedings/suspensions immediately
- Tell us if you: fall ill, get injured or become pregnant
- Understand and comply with the relevant security measures
- Keep your professional registrations up to date
- Enjoy your placement
- Shall on being charged with any criminal offence, notify CES-Locums immediately.

3.2 DO NOT:

- Be late
- Arrange or provide a substitute worker yourself if you cannot attend
- Report for an assignment unless you are medically fit to do so
- Be afraid to let us know if something is unsatisfactory
- Take unauthorized breaks

3.3 AGENCY WORKERS OBLIGATIONS

3.3.1

CES- Locums shall use all reasonable endeavours to ensure that the Agency Worker obtains from the Authority, upon arrival at the Authority's premises, relevant information regarding the Authority's fire procedures, on-site security, information security, crash call procedures, "hot spot mechanisms" and "violent episode" policies and before they are involved in the provision of the Services.

3.3.2

CES- Locums shall use all reasonable endeavours to ensure that each Agency Worker is aware of their obligation to adhere to the Authority's policies and procedures including, but not limited, those relating to fire, on-site security, information security, manual handling, cross infection and notifiable diseases and health and safety.

3.3.3

Where the Authority fails to provide such policies in accordance with Clause 21.5 (Performance of the Services) or after CES-Locums has reasonably requested such information, it is acknowledged that CES-Locums is unable to ensure that the Agency Worker is aware of such policies and procedures. CES-Locums must still communicate the Agency Worker's obligation to adhere to the Authority's policies and procedures.

3.3.4

The Authority shall inform CES- Locums in writing if it becomes aware of any Agency Worker's breach of such policies and procedures and CES-Locums shall promptly take action to remedy such breach.

3.3.5

CES- Locums shall advise the Agency Worker of the need to inform them if the Agency Worker is under investigation by their professional body (including, but not limited to, investigations by the GMC or GDC) or is suspended from their professional register (including, but not limited to, the GMC's List of Registered Medical Practitioners or GDC's professional register). If an Agency Worker reports to CES-Locums the details of any suspension, an alert notice or any investigation, then CES- Locums shall, in addition to any other appropriate action, immediately inform the Authority and will comply with any of the Authority's policies and procedures relevant to such matters. CES- Locums shall use all reasonable endeavours to ensure that the Agency Workers supplied by them will participate in the investigation of any clinical complaints either during the provision of the Services or subsequently. If an Agency Worker fails to participate, CES-Locums will not deploy that Agency Worker to any other Participating Authority until such time that the matter has been fully and satisfactorily resolved.

3.3.6

CES- Locums shall advise the Agency Worker of the need to inform CES- Locums if the Agency Worker has been (or is) subject to any kind of investigation or prosecution by the police after the Enhanced CRB check was undertaken by CES- Locums in accordance with Rehabilitation of Offenders Act and Criminal Records Bureau Check. If any Agency Worker reports such an investigation or prosecution to CES-Locums, then CES- Locums shall, in addition to any other appropriate action, immediately inform the Authority and will comply with any of the Authority's policies and procedures with regards to such matters.

4. RECRUITMENT PROCEDURES

4.1

CES Locums itself must ensure that for each Agency Worker it obtains and verifies at recruitment and prior to the Agency Worker being deployed in the provision of the Services and that such information is thereafter updated, monitored and/or reassessed as necessary and as prescribed within these Conditions of Contract.

4.1.1

The objective of CES-Locums itself obtaining and verifying this information is to ensure that CES-Locums relates the information provided by the Agency Worker to that person and is used by the CES-Locums to determine that the

Agency Worker's identity is genuine, relates to a real and living person and establishes that the individual owns and is rightfully using that information.

4.1.2

Without prejudice to any restrictions that may be imposed by other provisions of the Framework Agreement, these Conditions of Contract, the Supply Contract and Special Terms (if any), CES Locums shall not deploy the Agency Worker in the provision of the Services where CES Locums is aware of any adverse information which would have a material impact on either the appropriateness of the Agency Worker's involvement in the provision of the Services or their ability to perform the Services.

4.1.3

The information relating to each Agency Worker must be retained by CES Locums on the Agency Worker's file, recording the information in such a way that cannot be altered, in the English Language and enable audit of the same.

4.1.3.1

In the case of an overseas Agency Worker, where the Information relating that Agency Worker is obtained in a language other than English, CES Locums must ensure that such information is officially translated (at CES Locums expense) into the English language.

4.2

CES Locums shall obtain the permission of the Agency Worker to verify the information relating to that Agency Worker as required by this Recruitment Procedures and in the interests of patient safety. If an Agency Worker fails to provide such permission, CES Locums will not deploy that Agency Worker in the provision of the Services to any Participating Authority.

4.3

In addition to any other requirements and in accordance with Section 15 Agency Worker Appraisals and Management of Section 3 (Staff and Agency Workers), CES Locums shall retain on file:

4.3.1

the name and contact details of the Appraiser who has agreed to act as the Agency Worker's Appraiser; and

4.3.2

the date when the Agency Worker's last appraisal was carried out and the date (month and year) when the next appraisal is due.

4.4

CES Locums shall operate clear and written processes and procedures for the recruitment and selection of all Agency Workers which meet all the requirements of legislation and employment law including that relating to equal opportunities and anti-discrimination practice.

4.5

CES Locums shall make use of Good Industry Practice in the recruitment and employment of Agency Workers to be supplied in the provision of the Services and as a minimum comply at all times with all Department of Health guidelines on safer recruitment, pre-employment screening and Codes of Practice for the recruitment, including international recruitment, and employment of temporary staff in the NHS, as amended, supplemented or replaced during the term of the Framework Agreement and/or Supply Contract.

4.6

CES Locums shall undertake individual face-to-face interviews of the Agency Worker prior to the Agency Worker being deployed in the provision of the Services and ensure that its recruitment and selection policies and procedures are operated so that only questions relevant to the anticipated work of the Agency Worker in the provision of the Services are asked during that interview. CES Locums selection of the Agency Worker must be based on merit.

4.7

Prior to interviewing an Agency Worker, CES Locums must ensure that the Agency Worker has completed an application form that meets with Good Industry Practice and requests full details of that Agency Worker's previous continuous employment history. Where the previous employment history is not continuous or shows gaps of 3 months or more, CES Locums must question the Agency Worker to establish the reasons for such gaps and document these reasons within the Agency Worker's file.

4.8

CES Locums shall undertake the individual face-to-face interviews referred to paragraph 1.6 above in a location that is secure and private.

4.8.1

In the case of an overseas Agency Worker, if an initial interview is conducted by telephone or videoconference, a face-to-face interview must be held by CES-Locums after the Agency Worker has arrived in the United Kingdom and prior to the Agency Worker being deployed in the provision of the Services.

4.9

CES Locums shall use only suitably trained, experienced and competent personnel to conduct face-to-face interviews.

4.9.1

In all cases the interviewer is to be suitably trained, experienced and competent in conducting face-to-face interviews and to ask questions of the Agency Worker regarding relevant clinical experience and in all matters referred to in this Schedule 3 (Recruitment Procedures). The interviewer shall have relevant qualifications and/or relevant experience or training in interviewing techniques and shall be able to assess, select and place the Agency Worker in the provision of the Services according to their qualifications, competencies, clinical experience, training, skills and compliance with these Conditions of Contract and any Supply Contract and Special Terms (if any).

5

CES Locums shall ensure that all necessary and appropriate checks are undertaken on an Agency Worker prior to that Agency Worker being deployed in the provision of the Services including, but not limited to, the pre-employment screening checks referred to in this Schedule 3 (Recruitment Procedures).

5.1

CES Locums shall not deploy any Agency Worker in the provision of the Services if they have failed any such checks, or would have failed such checks had they been conducted immediately prior to the Agency Worker being deployed in the provision of the Services.

6

All Agency Workers must be able to demonstrate their clinical competence, qualifications, skills, training and compliance with these Conditions of Contract and the requirements of the Supply Contract to meet the Authority's needs and in accordance with Annex no. 1 (Person Specifications).

7

The Parties agree and acknowledge that an Agency Worker is either employed or engaged by CES Locums and that no employment relationship between the Agency Worker and the Authority exists or is to be implied. CES Locums shall fully and effectively indemnify and hold harmless the Authority and the Secretary of State for Health against any claim brought by any person who is or has been an Agency Worker or who purports to represent any such person to the extent that such claim relates to that person's employment (by any employer) or termination of such employment including without limitation any claim under the Employment Rights Act 1996, the Transfer of Undertakings (Protection of Employment) Regulations 1981 (as amended), the Trade Union and Labour Relations (Consolidation) Act 1992, the Working Time Regulations 1998, the Sex Discrimination Act 1975, the Race Relations Act 1976, the Equal Pay Act 1970, the Disability Discrimination Act 1995, the Part Time Workers (Prevention of Less Favourable Treatment) Regulations 2000, the Fixed Term Employees (Prevention of Less Favourable Treatment) Regulations 2002, the Equality Act 2006, the Employment Equality (Religion or Belief) Regulations 2003, the Employment Equality (Sexual Orientation) Regulations 2003, the Equality Act (Sexual Orientation) Regulations 2007, the Employment Equality (Sex Discrimination) Regulations 2005, the Employment Equality (Age) Regulations 2006 or any other relevant legislation relating to discrimination in the employment of employees for the provision of the Services whether under UK or EU law, save that such indemnity shall not apply to the extent that any such claim arises directly from any discriminatory act or omission of the Authority or any of its employees, agents or sub-contractors.

8

The terms of the Agency Worker's relationship with CES Locums must be given to the Agency Worker in full and in writing before the CES Locums accepts the Agency Worker for work. These terms must include a provision entitling CES Locums to disclose to the Authority, or any person, firm or organisation duly authorised on the Authority's behalf or NHS PASA for audit and other legitimate purposes any personal information which CES Locums holds about an Agency Worker that is either to be or has been supplied in the provision of the Services.

9

CES Locums shall make each Agency Worker aware of the limits of the indemnity available under the Authority's Clinical Negligence Scheme and shall advise the Agency Worker as to the availability of personal professional indemnity insurance.

10

If an Agency Worker is removed or suspended from the GMC's List of Registered Medical Practitioners or GDC's professional register or fails to maintain ongoing registration with the GMC or the GDC whilst providing the Services, CES Locums will inform the Authority immediately.

10.1

In the case of the Agency Worker being removed from the GMC's List of Registered Medical Practitioners or GDC's professional register CES Locums shall immediately withdraw the Agency Worker from the engagement with the Authority and shall no longer deploy the Agency Worker in the provision of the Services.

10.2

In the case of the Agency Worker being suspended from the GMC's List of Registered Medical Practitioners or GDC's professional register, or failing to maintain ongoing registration with the GMC or the GDC, CES Locums shall immediately withdraw the Agency Worker from the engagement with the Authority and shall not deploy the Agency Worker in the provision of the Services until such time the matter has been fully and satisfactorily resolved.

11

CES Locums shall:

11.1

maintain an alphabetical index of all Agency Workers together with their full name (forenames and last name as listed in the GMC's List of Registered Medical Practitioners or on GDC certificate, as appropriate), GMC or GDC registration number, full permanent address, date of birth and current contact details;

11.2

assign each Agency Worker with an individual serial number and assign an individual serial number to each Authority to which the Agency Worker is supplied in the provision of the Services; and

11.3

maintain cross-referenced records showing which Agency Workers were assigned to which Authority and during which dates and times.

12

Every Agency Worker to be deployed in the provision of the Services is to be provided with a copy of CES Locums Agency Worker Handbook ("Staff Handbook") at recruitment and before being deployed in the provision of the Services.

12.1

CES Locums shall retain on the Agency Worker's file, in a way that cannot be altered, confirmation that the Agency Worker has received the Staff Handbook along with a declaration that has been signed and dated by the Agency Worker to confirm that he has read, fully understood and shall comply with its requirements at all times.

12.2

If the Staff Handbook is updated, CES Locums shall provide each Agency Worker with a copy of the amendments/revised version. CES Locums shall retain on the Agency Worker's file, in a way that cannot be altered confirmation, that the Agency Worker has received the amendments/revised version along with a declaration that has been signed and dated by the Agency Worker to confirm that he has read, fully understood and shall comply with the amended/revised requirements at all times; and

12.3

CES Locums will use all reasonable endeavours to ensure that each Agency Worker complies at all times with the Staff Handbook.

13

CES Locums shall regularly review the Staff Handbook and update it, as necessary, on an annual basis.

14

CES Locums Staff Handbook shall include, but not be limited to providing the Agency Worker with, information on the following:

- 14.1** the codes of conduct expected of each Agency Worker;
- 14.2** the roles and responsibilities of the Agency Worker;
- 14.3** record keeping requirements for each Agency Worker (in terms of patient records);
- 14.4** training and development requirements and opportunities;
- 14.5** policy for dealing with allegations of abuse
- 14.6** induction, and thereafter annual, training requirements and funding, if any, available from CES Locums;
- 14.7** fraud awareness to ensure that the Agency Worker is aware of what constitutes fraudulent behaviour and the action the Agency Worker should take if they are aware of any fraudulent behaviour taking place

- 14.8** doctors, General Medical Council, October 2007 and Safeguarding Children & Young People. Roles & Competencies for Health Care Staff', Royal College of Paediatrics and Child Health, April 2006;
- 14.9** Health & Safety information;
- 14.10** policy regarding uniforms or otherwise;
- 14.11** the requirement for all Agency Worker's to wear CES Locums photo ID badge whilst they are involved in the provision of the Services or on any engagement with a Participating Authority;
- 14.12** the completion and processing of timesheets and payment systems by the Agency Worker;
- 14.13** complaints reporting, complaints handling and management; and
- 14.14** such other information as CES Locums may deem fit or necessary for the provision of the Services in accordance with these Conditions of Contract and Good Industry Practice.

5. FIRST DAY AT A NEW ASSIGNMENT

Before your first day at a new assignment, you'll be given the following:

- Directions to your place of work
- The name of the person to meet (usually your Team Leader/Superintendent)
- A precise meeting place and time
- Details of accommodation if applicable.

On arrival you will be given a brief induction that should include:

- Orientation – how to find your way around.
- Explanation and clarification of times (e.g. Tea or lunch breaks etc)
- Introduction to new colleagues
- Health and Safety overview
- Fire policy and procedure
- Any relevant policies and procedures

Please ensure you have your ID badge.

Please familiarize yourself with the following Health and Safety information:

- Health and Safety
- Fire and Evacuation Policies
- Security Policies

- Environmental and Smoking Policies
- Uniform Policies
- Maintenance Policies

6. ABOUT YOUR PAYMENT

To insure prompt payment you will need to complete a timesheet each week. You will find the timesheets enclosed with your confirmation of assignment, otherwise you call your recruitment consultant or download it from our website.

TIMESHEETS

Write the time you started your first assignment in the relevant day's column. If you have taken a lunch break, write the length of time taken in the appropriate box. Then write down the time you finished. Finally, calculate the total number of hours you worked that day less the length taken for lunch. Do this every day you worked in that week. Total up the daily number of hours to give you the week's total.

Once you have completed the timesheet, you must get it signed by an authorized member of staff e.g. Team Leader, superintendent or a senior member of staff who can confirm your working hours.

We strongly advise that timesheets are faxed rather than posted in order to ensure prompt delivery and then payments.

Fax your timesheet to the number found at the top of the page, by 10.00am Monday for the previous working week in order for you to be paid on the Friday.

Failure to do so by the deadline could also result in late payments.

PAYMENT

The process starts on a Monday, by the Payroll Department. You will be paid by BACS directly into your Bank or Building Society.

Payments by BACS will arrive in bank accounts on the Friday of the week it is processed. In weeks when the Monday is a Public Holiday, then the above timetable is extended by one working day.

PAYMENT FOR HOLIDAY

Most locums are entitled to holiday pay calculated in line with the Working Time Regulations from the first day of their placement. You can discuss your holiday entitlement at any time by contacting either your Recruitment Consultant or the Payroll Team.

We ask that when you request holiday leave, as much notice as possible is given to your Recruitment Consultant or Team. This is so necessary cover can be arranged in your absence. If possible, one week's notice should be given for one day's leave and two week's notice for one week's leave or more.

ACCOMMODATION

A few hospitals do offer accommodation and wherever possible we will try and negotiate this for you.

If your place of work does not offer accommodation, where possible, we will assist you in finding suitable accommodation locally. However, CES Locums does not pay for accommodation.

Any matters relating to accommodation must be confirmed during confirmation of your assignment.

PAYROLL DEPARTMENT

Should you have a query regarding payment, please contact our Payroll Department directly on:

Telephone: 0845 257 1313

Fax: 0845 459 2036

Alternatively you can contact your Recruitment Consultant.

7. FIRST JOB IN THE UK

CES Locums offers a wide range of opportunities for healthcare professionals from around the world to work in the United Kingdom. If you have trained outside the UK and this is your first working experience, the following is designed to provide you with some essential information.

NATIONAL INSURANCE NUMBER (NI Number)

If this is your very first job, you will have been asked to provide CES Locums with your National Insurance or NI Number. This is a unique reference number the Tax Office gives every UK worker.

Obtaining an NI Number is relatively quick and easy. In the interim period before you gain a permanent NI number, we will issue you with a temporary one which will be enough to get you working.

However you must also apply for a permanent number as soon as possible. To do so, please contact your nearest Department of Work and Pensions office (see a copy of the Yell Pages or call 020 7712 2171 - the public enquiry office) and request an appointment for a 'permanent NI number' which should take approximately 6 weeks. You will need two forms of ID – one should be your passport and the other, evidence that you are currently working).

Once you receive this number please let your Recruitment Consultant know, as it usually means you could pay less tax.

BANK ACCOUNTS

Prior to travelling to the UK for your first assignment we can assist with the opening of a UK bank account. Please advise us if you require assistance and we shall provide you with a letter of introduction. We suggest you do this three to four weeks prior to departure so that all the paperwork has been processed and you can collect your bank account details from the relevant branch once you are in the UK. On the production of your passport, the bank will open a current account and provide you with a cheque book and cash card (but not a cheque guarantee card). Please remember to give us your bank account details immediately, so that there is no delay with your pay.

8. HOW LEGISLATIONS COULD AFFECT YOU?

Data Protection Act 1984

The Data Protection Act is concerned with information about individuals (personal data) which is processed automatically (i.e. computer systems), with those that undertake the processing (data users) and with those individuals to whom the data relates. CES Locums is conversant with the legislation and will comply with the requirements.

Care Standards Act

To comply with the Care Standards Act from 1st April 2003, CES Locums Locum must ensure that all temporary workers have a police check (CRB Disclosure done by CES Locums and used only for work through CES Locums).

The Working Time Directive

The European Working Time Directive was implemented in October 1998. The regulations give you certain entitlements:

Subject to limited expectations, the UK Working Time Regulations require that a worker's average working time must not exceed 48 hours per week. You may accept as few or as many hours per week as you wish, subject to statutory limitations. In case you should wish to work more than an average of 48 hours, you need to inform CES Locums in writing. If you change your mind, you should give CES Locums two weeks notice in writing to end the agreement.

9. HEALTH AND SAFETY AT WORK

For many healthcare professionals, it is mandatory to receive regular updates to training such as:

- Manual Handling
- Fire Safety
- CPR
- Health and Safety including COSHH & RIDDOR

It is important that you protect patients and yourself. CES Locums can arrange this training for you if required.

Without proven training and mandatory training updates, we will be unable to find you work.

The Health and Safety Executive publishes Codes of Practice and guidance on the regulations, which provide information on how to implement them in the workplace.

All agency staff should be aware of the Health and Safety regulations which affect their workplace and should make themselves familiar with the duties required.

Moving and handling

All healthcare providers have a responsibility under the Health and Safety at Work Act 1974 and the Manual Handling Operations Regulations 1992 to ensure that:

- All staff are not exposed to risk of injury from manual handling
- A safe and ergonomic environment is provided
- All agency staff are familiar with the policy

Patient handling

With regard to patient handling, providers of care should have a non-manual lifting policy in place.

Where appropriate, in accordance with current requirements, agency staff must attend a lifting and handling course on an annual basis and must be medically fit to handle patients.

Agency staff responsibilities

Agency staff have a duty to ensure that they:

- Take reasonable care of their colleagues' safety when lifting and handling patients or equipment
- Use any work equipment provided correctly in accordance with any training provided, or instructions given.
- Comply with a no manual lifting policy if this is in accordance with the client's policy
- Inform the client when a work situation presents a serious danger or if there are any shortcomings in the arrangements for manual handling

This applies in particular to the need to report:

- Lack of staff or equipment
- Environmental hazards
- Defects in machinery or equipment
- Injuries and accidents
- Illness or disability affecting handling capacity

Agency staff must inform CES Locums if any such action has been undertaken and confirm in writing.

Factors which predispose health and care professionals to back injury:

- Working in an awkward, unstable or crouching position
- Working with the trunk bent forwards or sideways, or twisted
- Lifting loads at arm's length
- Lifting with a starting or finishing position near the floor or overhead, or at arm's length
- Lifting asymmetrically, with the weight predominantly on one side
- Lifting excessive weights, lifting a patient
- Handling an uncooperative or failing patient (careful assessment must be made to avoid unnecessary risk)

Source: Royal College of Nursing Definition of a Safer Handling Policy,
December 1996

10. ACCIDENTS AT WORK

Accidents at work are everyone's business and you have a responsibility to ensure that you do everything that you reasonably can to prevent injury to yourself and others. You are required to adhere to all policies and procedures relating to Health and Safety.

If you are involved in an accident or dangerous occurrence follow the policy and procedures of the workplace and you must notify CES Locums within 24 hours of any incidents which have occurred.

Action to be taken by you:

- Follow the procedure of the workplace.
- Obtain any treatment required from your G.P. or Accident & Emergency Department.
- Notify CES Locums within 24 hours.
- Accurately complete your part of the CES Locums Accident Form.

Action to be taken by CES Locums:

- Your Recruitment Consultant will complete the rest of the Accident Form.
- A record will be kept.
- A copy of the completed form must be sent to a senior member of the workplace for their information.
- Notification, if appropriate will be made to the Health and Safety Executive (HSE)

Notification to the HSE occurs when accidents involve:

- A fatality
- A specified serious injury (see “
- Notifiable injuries” below)
- An absence from work for more than 3 days
- A dangerous occurrence

Notifiable injuries

- Fracture of skull, spine or pelvis
- Fracture of any bone in arm, wrist or leg etc
- Amputation of hand, foot, finger, thumb, ankle or toe
- An eye injury, including the loss of sight in one or both eyes
- Injury, including burns arising from electric shock
- Loss of consciousness arising from lack of oxygen
- Decompression sickness
- Acute illness, etc, arising from exposure to a pathogen or infected material
- Any injury which results in the injured person being admitted immediately into hospital for more than 24 hours

For information on your nearest HSE office, contact:

08702 545 500

hseinformationservices@natbrit.com

www.hse.gov.uk

11. ADDITIONAL INFORMATION

PAYROLL

In accordance with current legislation, CES Locums is recognized as the “employer” only in regard to PAYE and class 1 National Insurance contributions.

Where appropriate, CES Locums will collect National Insurance contributions from both the client and the agency staff member.

Bank holiday rates will be applied to: New Year’s Day, Good Friday, Easter Monday, first and last Mondays in May, last Monday in August, Christmas Day and Boxing Day.

UNIFORMS

Where required by policies, rules, procedures, or standards the candidate shall wear any special protective clothing or footwear

PERMANENT PLACEMENT

CES Locums has a permanent placement service. Should you require permanent work, please speak to your Recruitment Consultant.

Should you take up permanent employment with one of CES Locums clients as a direct result of a CES Locums placement, please speak to your Recruitment Consultant.

CLIENT PREMISES

Client premises, facilities and equipment are to be used only in connection with the provision of services and are to be kept clean, tidy and properly secured.

All CES Locums temporary workers must observe the local security procedures at all times whilst on assignment.

The candidate shall be responsible for the safe keeping of any keys and access passes provided whilst on assignment. You must inform CES Locums immediately of the loss of any keys or access passes.

USE OF COMPUTERS

CES Locums is conversant with the Data Protection Act 1984 and will comply with all requirements of legislation.

Only use a client's computer systems if authorized to do so. Never access data or programs to which prior authorization has not been given.

Understand and observe the client's computer security instructions and the proper use and protection of any passwords used.

Do not load any program onto any computer via disk, typing, electronic data transfer or any other means.

Do not access any other computer, bulletin board or information service (e.g. the Internet) without permission from the client.

Do not download any files or connect any piece of computer equipment to any network or other item of computer equipment except with the prior authorization of the Client's representative.

CONFIDENTIALITY

All agency staff is expected to protect confidential information regarding patients and their colleagues, and to protect the interests of this company.

You are required to protect all confidential information concerning patients and clients obtained in the course of professional practice and make disclosures only with consent, where required by the order of a court or where you can justify disclosure in the wider public interest.

12. IMMUNISATION AND HEALTH

CES Locums will ensure that all locums undergo health screening and have current immunisations and tests results.

The health assessments carried out establish that each locum:

- Is capable of undertaking the duties required of them
- Has an awareness of MRSA contact and the need for screening
- Has immunity in respect of the following diseases Rubella, Varicella, Hepatitis B, Tuberculosis

Some professions will require having additional Hepatitis C and HIV immunisations depending on their speciality of working.

CES Locums will obtain, from each locum, copies of each of the above immunisations and test results. These documents are part of the NAB accreditation process.

CES- Locums shall inform each Agency Worker of the Authority's requirement for the Agency Worker to declare before each occasion on which they are deployed in the provision of the Services that he is fit to practice at that time and to allow the Authority to comply with its obligations. CES- Locums acknowledges that we will be required to provide an alternative Agency Worker if an Agency Worker cannot give this declaration truthfully. We shall use its reasonable endeavours to ensure that the Agency Worker shall not declare himself to be fit to practice if he is suffering from any of the following conditions: vomiting, diarrhoea or a rash.

13. INFECTION CONTROL (not relevant to all professions)

Infection is a major source of concern for patients, healthcare providers and healthcare workers alike. CES Locums is committed to compliance and of our agency staff with the strictest rules relating to infection control.

Application of the principles of infection control is a fundamental part of effective healthcare. Healthcare workers are bound by a Code of Professional Conduct to protect patients and colleagues from the risk of cross infection; they are also accountable through the Health and Safety at Work Act to ensure that the workplace is free from hazards.

UNIVERSAL PRECAUTIONS

Contact with patient's blood/body fluids may cause exposure to occupational risk from blood-borne viral infections such as HIV or Hepatitis B. the most likely means of transmission of these viruses to healthcare workers is by direct percutaneous inoculation of infected blood splashing onto broken skin or mucous membrane.

Since it is impossible to recognize those who are zero-positive to HIV or Hepatitis B, it is recommended that every patient be regarded as a potential hazard.

Therefore agency staff should, as a matter of good practice, routinely use barrier methods, which will prevent contamination by blood/blood fluids.

SKIN – cuts or abrasions in any area of exposed skin should be covered with a dressing that is waterproof and is an effective viral and bacterial barrier

GLOVES – wear disposable latex or vinyl gloves and a plastic apron. Spillages should be covered with disposable towels to soak up excess. The spillage should be cleared up with a gloved hand and debris treated as clinical waste. The area should then be cleaned with the appropriate disinfectant for that surface

HAND WASHING – the use of gloves does not preclude the need for thorough hand washing between procedures and patients

APRONS – disposable aprons may be worn if there is a possibility of splashing by blood/body fluid

EYES – where there is a danger of flying contaminated debris or blood splashes, eye protection is necessary

SHARPS – extreme care should be exercised during the use and disposal of sharps. Needles must not be re-sheathed prior to disposal into approved sharp boxes – which should never be overfilled

14. DEALING WITH ALLEGATIONS OF ABUSE

Abuse can be viewed in terms of six main categories as follows:-

PHYSICAL ABUSE

This is the physical ill treatment of an adult which may not cause physical signs of injury. This can be identified in several forms e.g. pushing, shaking, pinching, slapping, punching or force feeding.

Physical abuse can also occur through withholding of care or enforced confinement e.g. locking someone in their room and inappropriate restraint.

Physical abuse can also include improper administration of drugs or denial of prescribed medication.

Signs of physical abuse

- Injuries that are not explained satisfactorily
- Person exhibiting untypical self harm
- Unexplained bruising to the face, torso, arms, back, buttocks, or thighs in various stages of healing
- Unexplained burns on unlikely areas i.e. sole of feet, buttocks and palms of hands
- Unexplained or inappropriate fractures at various stages of healing
- Unexplained cuts or scratches to the mouth, lips, gums, eyes or external genitalia
- Medical problems that go unattended
- Sudden unexplained urinary and faecal incontinence
- Evidence of over or under medication
- The person flinches at physical contact
- The person appears frightened or subdued in the presence of certain people
- The person asks not to be hurt
- Reluctance to undress part of the body or wears clothes that cover all parts of the body, or specific parts of the body

SEXUAL ABUSE

This is any form of sexual activity that the person does not want and to which they have not consented, or to which they cannot give informed consent.

Any sexual relationship, which takes place between adults where one is in a position of trust i.e. Nurse or Care Workers etc, will be regarded as sexual abuse includes rape, buggery, incest and situations where the perpetrator touches the abused persons body, (e.g. breast, buttocks, genital area) or coerces the abused person to touch them.

Signs of sexual abuse

- The person discloses either fully or partly that sexual abuse is occurring or has occurred in the past
- The person had urinary tract infections, vaginal infections or sexually transmitted diseases that are unexplained
- The person appears unusually subdued or withdrawn
- The person exhibits significant change in sexual behaviour
- The person's clothing is torn, stained or bloody
- The person experiences pain, itching or bleeding in the genital/anal area
- A woman who lacks the mental capacity to consent to sexual intercourse becomes pregnant

FINANCIAL ABUSE

This is the exploitation, inappropriate use or misappropriation of a person's financial resources or property. This includes withdrawing money.

Signs of financial abuse

- Lack of money especially on benefits day
- Unexplained withdrawals from their bank account
- Unexplained inability to pay bills
- Power of attorney obtained when the person lacks the capacity to make decisions
- Recent acquaintances expressing sudden interested in the person or their money

NEGLECT

This is the deliberate withholding or unintentional failure to provide helps or support to enable the person to undergo activities of daily living. Neglect also includes failure to intervene in situations that are dangerous to the person concerned.

Signs of neglect

- Person has inadequate heating or lighting
- Person's physical condition appears poor e.g. ulcers, pressure, sores, solid or wet clothing
- The person cannot access appropriate medicines or medical care
- The person is not given appropriate privacy or dignity
- Callers/visitors are refused open access

PSYCHOLOGICAL ABUSE

This may be intentional or unintentional. It may involve the use of indifference, intimidation, hostility, rejection, threats, humiliation, swearing or the use of discriminatory language.

Psychological abuse is the denial of a person's human rights to choice, opinion, privacy, dignity and being able to follow ones spiritual or cultural beliefs. It also includes the withholding of information or information not being available in different formats/languages.

Signs of psychological abuse

- The person appears anxious or withdrawn in the presence of the alleged abuser
- The person displays passivity, resignation
- The person exhibits low self-esteem
- Untypical changes in behaviour i.e. sleep problems, incontinence
- The person is locked in his/her room
- The person is not allowed access to aides such as hearing aides, glasses, walking frames/sticks etc
- The person's access to personal hygiene and toilet facilities is restricted

INSTITUTIONAL ABUSE

This can be defined as abuse or mistreatment by a regime, as well as by individuals, within any building where care is being provided.

Signs of institutional abuse

- No opportunity for drinks/snacks
- Lack of flexibility/choice
- Lack of choice over meals
- The person is unkempt and smells
- Over use of communal terms and communal personal toiletries
- Restraint
- Staff members have history of moving jobs
- Missing documentation
- Derogatory remarks overheard
- Entering rooms without knocking
- Inadequate or delayed response to medical care

GOOD PRACTICE IN DEALING WITH DISCLOSURES OF ABUSE

1. Stay calm and try not to show shock – BELIEVE THEM
2. LISTEN carefully rather than question directly
3. be sympathetic
4. Give reassurance – tell them that they did right to tell you, that you are treating this matter seriously.
5. Report the incident immediately to the relevant manager
6. Write down as soon as possible what the person has told you
7. Where appropriate, record on body map any relevant bruises or cuts etc.

Do not...

1. Press the person for more details
2. Stop the person who is recalling the events, as they may not tell you again
3. Promise to keep secrets – but explain that the information will be kept confidential and passed to the people who “need to know”
4. Make promises that you cannot keep such, as “it won’t happen to you again”
5. Contact the alleged abuser

6. Be judgmental e.g. why didn't you try to stop it?
7. Pass the information to other staff members i.e. gossip

DEALING WITH IMMEDIATE INCIDENTS

Contact the police immediately if:

- A physical or sexual assault has just happened
- Where violence is continuing
- You believe that a crime may have been committed

Look after and reassure the abused person. Protect anything that may appear to be evidence of a crime. Write a record of what happened as soon as possible. If the alleged abuser is a fellow resident/patient ensure Social Services are informed.

15. APPRAISALS OF HEALTHCARE WORKERS

Appraisals were introduced by the Department of Health to give doctors regular feedback on past performance, their continuing progress and to identify any development needs. The need for a formal appraisal started in 1998 with the introduction of Clinical Governance in the NHS.

Clinical governance is the system through which NHS organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care, by creating an environment in which clinical excellence will develop.

Appraisal is based on the GMC's document 'Good Medical Practice' which describes the principles of good medical practice, standards and competence, and care and conduct expected of doctors in their every day duties. These are:

- Good clinical care
- Maintaining good medical practice
- Teaching and training
- Relationships with patients
- Working with colleagues
- Probity
- Health

Appraisals should cover clinical performance, training and education, audit, concerns raised and serious clinical complaints, application of relevant clinical guidelines, relationships with patients and colleagues, teaching and research activities, and personal and organisational effectiveness.

Revalidation means that any doctor who wants to remain in practice must present evidence to the GMC that they are competent in their chosen field and have followed the principles of 'Good Medical Practice' outlined above. For doctors in the NHS, appraisals can be used as revalidation evidence. Every 5 years doctors will be asked to show the GMC that they have been practicing

medicine in line with the principles of 'Good Medical Practice', once this has been proven, the GMC will confirm that the doctor's license can continue.

The Department of Health and the GMC agreed that a single set of documentation could be used for appraisals and revalidation. For doctors within managed organisations, five sets of completed annual appraisal forms can be submitted to the GMC as evidence for revalidation. Alternatively, other evidence gathered for the appraisal process could be submitted to the GMC as evidence to support revalidation. Every doctor undergoing appraisal needs to prepare an appraisal folder containing information and evidence which can be updated as necessary, ensuring they are pulling together evidence that already exists.

The doctor and appraiser will agree a written overview of the appraisal, which should include a summary of achievement in the previous year, objectives for the next year, key elements of a personal development plan, actions expected of the organisation, a standard summary of the appraisal and a joint declaration that the appraisal has been carried out properly.

Appraisal is one of two ways to gain Revalidation, the second being the Independent route. While the appraisal route is available to healthcare workers who work in a managed environment and have the supporting documentation as a result of the annual appraisal system, the Independent route requires the health care worker to show they have adopted the standards of 'good working/medical practice'.

In addition there is a requirement for health care workers going down the independent route to show that they are continuing their professional development. Workers' who take the independent route are those that work outside a managed environment.

It is the responsibility of all our healthcare workers to ensure they are part of an appraisal process and to collect and retain the necessary information.

16. ENVIRONMENTAL POLICY

THE MANAGEMENT AND STAFF OF CLINICAL EMPLOYMENT SERVICES LIMITED T/A CES LOCUMS BELIEVE THAT TO ACHIEVE OUR GOALS OF BECOMING THE PREMIER EMPLOYMENT BUSINESS WITHIN THE HEALTHCARE SECTOR IN THE UK, WE MUST LEAD NOT ONLY ECONOMICALLY, BUT ENVIROMENTALLY AND SOCIALLY AS WELL.

THE COMPANY UNDERSTANDS THAT IT IS IN A PROMINENT POSITION TO AFFECT THE ENVIROMENT IN THE UK. OUR OBJECTIVES IS NOT ONLY TO SUSTAIN OUR ENVIROMENT FOR OUR DESCENDENTS BUT ALSO TO REHABILITATE THE DAMAGE PREVIOUSLY DONE.

WE BELIEVE THAT OUR CORPORATE RESPONSIBILITY GOES BEYOND OUR PROPRIETARY BORDERS AND WE ENDEAVOR TO COOPERATE WITH OUR NEIGHBOURS AND OUR SUPPLIERS TO DEVELOP OUR BUSINESS IN A SUSTAINABLE MANNER. EVERY EFFORT WILL BE MADE TO CONSERVE RESOURCES THROUGHOUT OUR OPERATIONS. OUR PUCHASING DEPARTMENT WILL SEEK PRODUCTS AND SERVICES OF LOCAL ORIGIN AND THAT ARE ENVIROMENTALLY BENIGN. THE COMPANY WILL CHOOSE TO HIRE LOCAL WHENEVER POSSIBLE.

OUR SUCCESS WILL BE DETERMIND ON A YEARLY BASIS WITH A COMMITMENT TO IMPROVE. FURTHERMORE, THE COMPANY WILL NOT ONLY MEET EXISTING ENVIROMENTAL LAWS AND REGULATIONS, BUT GO BEYOND THE STATUS QUO AND SEEK TECHNIQUES AND APPROACHES THAT POSITION US AHEAD OF OUR COMPETITION.

OUR POLICY TOWARDS THE ENVIROMENT WILL BE READILY AVAILABLE AND PROMOTED TO OUR BUSINESS PATNERS AND SERVICE USERS.

OUR COMPANY'S FUTURE AND THE FUTURE OF OUR ENVIROMENT ARE INTERCONNECTED

17. COMPLAINT PROCEDURE

Clinical Employment Services Limited and its subsidiary settings endeavour to provide the highest quality service under the Quality Assurance Procedure. However, we recognise that on occasion, things do go wrong and we are committed to putting them right. Clinical Employment Services Limited will deal with any complaint professionally and compassionately under the following complaints procedure;

SCOPE

This procedure applies to the Service Users of Clinical Employment Services Limited and its subsidiary settings

PROCEDURE

All complaints whether they are verbally communicated or in writing will be dealt with via the following procedure:

- Any employee taking a complaint must take the details down in writing if verbally communicated.
- The complaint will be passed immediately to the relevant manager.
- The manager will consider the complaint and then respond to the necessary parties within 24 hours of the complaint being lodged.
- Action will be discussed between the company and any other parties involved and the outcome will be decided up on a joint basis.
- A written record of the complaint is to be kept at all stages.
- Should the complaint be of a nature which is more complex and the manager cannot come to an agreeable outcome with the involved parties, the managing director of Clinical Employment Services Limited will consider the complaint and work with the parties to come to an agreement.

On occasions a complaint may mean we enforce our disciplinary procedure and the worker's contract with the agency would be terminated. Grievances are considered as seriously as complaints and both clients and workers are encouraged by the management of Clinical Employment Services Limited to voice any such grievance.

INVESTIGATING A COMPLAINT

All complaints will be acknowledged by letter within seven working days. The letter will clearly details the name of the member of staff investigating the complaint. The investigating member of staff may contact the complainant for further information and will carry out initial enquiries. If the problem or difficulty can be sorted out in straightforward way, the member of staff will take whatever steps are necessary and write to inform the complainant what will be done. The complainant will receive a reply within 28 days of the complaint being received. The reply will detail the result of the investigation and what action will be taken.

INVESTIGATING A COMPLEX COMPLAINT

If the complaint is complicated, it may take longer than 28 days to investigate. In such cases, a letter will be sent to the complainant explaining that the investigation will be completed in three months unless the time limit is extended with all parties' agreement.

The investigating member of staff will conduct a full investigation. This may include more detailed discussion with the complainant and other people. There may be formal meetings which will be properly conducted and recorded. The complainant may, if they wish, be accompanied by a person of their choice to help and support them at this stage of the procedure.

The investigation member of staff will write a report when the investigation is completed. The complainant will receive a reply detailing the conclusions and recommendations of the investigator.

You must acquaint your self with and abide by all and each of the issues current for the time being of the Company's Disciplinary Procedure. The Company revises all such policy and procedural documents on a regular basis responding to changes in the contemporary care practice, the need of the company and the needs to ensure continued efficiency. The responsibility to maintain awareness of and act up-on ongoing revision of such documents remains that wholly of the individual staff member. Although these various statements and procedures are not formally expressed in terms of your contract of employment, compliance is regarded as important by the company and failure to abide by the same may lead to disciplinary action.

18. EQUAL OPPORTUNITIES

As an organisation CES Locums is committed to equal opportunities and not discriminating on grounds of gender, ethnicity, disability, age, sexual orientation, race, nationality or religious belief by:

- Implementing an Equal Opportunities policy
- Ensuring that the policy is implemented and adhered to
- Ensuring good practice is developed and promoted in all aspects of CES Locums business activities
- Complying with all relevant legislation and supporting appropriate codes of practice
- Monitoring the recruitment process and employment decisions
- Ensuring that any grievances are dealt with promptly and appropriately

WORKING RELATIONSHIP

For agency staff, good working relationships are of crucial importance. CES Locums expects that all agency staff promote and co-operate in the removal of any discrimination in service provision and the promotion of best practice.

Agency staff can ensure standards of treatment which are equal by:

- Developing a basic knowledge and understanding of equal opportunities
- Promoting positive benefits and attitudes towards others, aiding the development of effective working relationships
- Attending training, induction and staff briefings available to them
- Reporting any instances of discrimination, harassment, bullying and intimidation

19. POLICY STATEMENT OF SEXUAL/RACIAL HARASSMENT

- CES Locums Equal Opportunities Policy makes a firm commitment to the prevention and removal of discrimination on the basis of sex, marital status, race, religion, creed, colour, nationality, ethnic or national origin, sexual orientation or disability.

CLIENT / VISITOR / CONTRACTOR

If a locum feels that they have been harassed by any of the above they should on no account do or say anything but instead report the incident to their supervisor or manager immediately. The matter will then be dealt with at a senior level

MANAGERS AND SUPERVISORS

All supervisory personnel have a responsibility to prevent and eliminate any forms of sexual/racial harassment brought to them in accordance with the procedure.