Locum Handbook
Welcome to The Agency! We’re pleased you’ve chosen to work with us and we look forward to offering you a wide range of assignments.

We’ve created 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 to make sure your experience, and that of patients in your care, is as good as possible.

If you have any queries about the contents of this booklet, please direct these to us at the address below:

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Induction

As well as briefing you on general issues such as timesheet procedures, On-Call and so on, we will assist you in sourcing necessary Induction Training covering:

- Basic / Advanced Life Support
- Infection Control
- Lone Worker Training
- Handling of Violence and Aggression
- Risk Incident Reporting
- The Caldicott Protocols
- Complaints Handling
- Health & Safety including COSSH & RIDDOR

You will also find a lot of useful reference information in this handbook.

You will also be required to attend an induction with the Authority where your assignment will be conducted.

Caldicott Protocols

The Caldicott Review was commissioned due to the development of information technology and its capacity to disseminate information about patients/service users both rapidly and extensively.

An essential component of the clinical consultation in the provision of health care is confidentiality. All healthcare workers have stringent requirements with regard to confidentiality within their duty of care. However, information given about patients underpins the efficient operation of the NHS, and it is important that confidentiality does not impede upon the provision of effective patient care. Therefore, the Caldicott Review devised protocols and recommendations which assume the appointment of a Caldicott Guardian who is created to safeguard and govern the uses made of confidential patient information within NHS organisations. Caldicott guardians are senior health professionals.

All Agency staff are required to familiarise themselves with the local policy on Confidentiality within the establishment where they are working assignments.
Violence and Aggression

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

- Minor assault 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 incidents immediately to the person in charge and also to your Agency consultant. The establishment where you are working will have policies for dealing with such incidents and an incident report form should be completed both at the place where you are working and by the Agency. 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.

Lone Worker 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.

Generally, within the healthcare industry, lone workers can be regarded as those who work on a peripatetic basis such as GP’s, community/district nurses, domiciliary homecare workers etc., or those personnel who work outside of normal hours e.g. Domestics, porters, On call Doctors, 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 done 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 if working in a “lone worker” situation please contact the Agency 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.

**Risk Incident Reporting**

Under the Management of Health and Safety Regulations of 1999 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. The first incidence should be reported to the person in charge of the establishment to which you are assigned, and to your Agency consultant. An incident report form must be completed. The 5 steps to risk assessment are covered in your Health and Safety training – as well as COSHH and RIDDOR.

**Complaint Handling**

During the course of your work with the Agency you will come across complaints from patients/clients. It is the policy of the Agency to deal with any expression of dissatisfaction in a professional and precise manner. If you are on an assignment within an establishment, please report any complaints to the nurse in charge/senior Doctor / Hospital Administrator and document all details of the complaint. If you are assigned to a service user / patient in his/her home then please report the complaint to the Manager. All complaints must be investigated within a specified time limit and resolved as soon as possible and this is the responsibility of the Agency Manager. 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.

If you have any complaints about any aspects of your work at the Agency, please do not hesitate to contact us.
Any complaints from individuals will be dealt with in a professional and confidential manner and the Agency have a “whistleblowing” policy, which is available to you on request.

Fitness to Practice

It is important for your own health and that 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 vomiting, diarrhoea or a rash. For female locums, because of the potential risks to your unborn child, you MUST let us know if you become pregnant. If you are concerned that your placement involves unnecessary risks to your health or fitness, or that of your unborn child, please do not hesitate to contact us. This is important, as we are required to perform a health and safety risk assessment for all expectant mothers.

You are required to complete a health declaration form on an annual basis as part of the annual update policy.

Immunisation

Please keep the following immunisations up-to-date at all times:

- Hepatitis B
- Hepatitis C
- Rubella
- Mumps
- Tetanus
- Varicella
- Tuberculosis
- HIV

Without proof of immunisation we will be unable to offer you assignments within the NHS.
AIDS/HIV

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

Professional Indemnity

For information relating to the NHS indemnity available to you, please visit:
http://www.nhsla.com/NR/rdonlyres/1CFE5864-05C3-4770-982C-7003294B8161/0/NHSIndemnity.rtf

The Agency strongly recommends you take out individual Professional Indemnity cover. Details of cover available can be found at:

Medical Protection Society http://www.medicalprotection.org/uk/
Medical Defence Union http://www.the-mdu.com/
Criminal Convictions

We are required by the Care Standards Act 2000 to obtain a criminal record Disclosure for all our Locums. Recent disclosures from previous employers may be acceptable with an additional portability check performed by the Agency. 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 – NOTE: we will only provide this information with your consent. The Agency 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.

You are reminded that should you receive any cautions and/or criminal convictions whilst working on behalf of the Agency you are required to inform us immediately.

Mandatory Training

All Members must complete the Mandatory training on an annual basis. You may have already completed this training in the 12 months prior to your registration with the Agency. In this instance, we must hold these certificates on file as evidence as of you having received the training before we can offer you assignments. Please contact your Agency consultant for guidance on training courses.

Timesheets

PAYE

Payment to locums is made weekly directly into your bank account on Friday each week. Only Agency timesheets will be accepted and they must arrive by the specified time each week in order to secure payment within that week’s payroll run.

Locums must submit their timesheets by 4:00PM each Tuesday.

Please ensure that all sections of the time-sheet are completed in full (including the amount of hours worked in words) in legible handwriting and are authorised by a designated signatory at your place of assignment.
Limited Company

If you have chosen to operate through a limited company, you are responsible for ensuring that your limited company provides the Agency, prior to 5:00PM on Tuesday, with a valid tax invoice which corresponds to the timesheets presented.

Dress Code

The Agency will inform you if there is any specific dress code in the establishment to which you are assigned. Staff are reminded that clean and tidy attire is to be worn in order to promote professional standards and good standards of personal hygiene.

NOTE: it is a requirement that you must wear an Agency identity badge at all times during any locum assignment.

Timekeeping

Please make every effort to ensure you arrive at and leave all bookings at the agreed time. If for any reason you are unable to attend a booking you should contact us as soon as possible.

Please attend all bookings with your current Agency ID Badge clearly displayed. Identity badges must be handed back to A&E Agency if you leave the Agency.

Mobile phones should be switched off for the duration of your assignment.

Smoking is not permitted whilst on assignment.

Arriving for Work

On arrival at a new booking, please take the opportunity to familiarise yourself with 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
If you have any queries regarding the correct local procedures or are uncomfortable carrying out any of the duties you have been asked to perform, please raise these issues with your supervisor.

**MRSA**

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

The single most effective measure for preventing MRSA contamination is washing hands before and after every patient contact.

In addition, please:

- Use liquid soap and water or an alcohol-based hand rub when washing hands - make sure it comes into contact with all areas
- Remove wrist and preferably 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 with waterproof dressings

If you come into contact with a patient who is later found to be contaminated with MRSA, you may need 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 placements we can offer you due to the risks of infection.

**Training**

Please keep up to date with all relevant clinical guidance as well as attending to continuing professional development (CPD) requirements In particular, you must have regular training in:
• Infection Control
• Complaints Handling
• Lone Worker Training
• Health & Safety
• Moving & Handling
• COSHH
• RIDDOR

Records of In Training Assessments (RITAS) will be held on your personnel file at the Agency - please ensure that you provide copies to your A&E Agency consultant of all grading’s within the last 5 years.

You are required to maintain a written port-folio of your professional experience and attendance at professional development courses. This port-folio should also contain a written and agreed professional development plan.

The Agency will from time to time as required circulate to all workers any information that is provided to be supplied by the authority.

Appraisals

You are required to make formal arrangements to be appraised regularly by a medical practitioner who is entered on the Specialist Register (if you are a GP locum your arrangements for appraisal must be with a medical practitioner who is, or is qualified to be a GP Principal)

The Agency will check and record the performance of all newly qualified workers or those workers returning to work twice in the first three months.

For our records you are required to inform us of the date of your appraisals and when the next one is due.

Professional Standards

Whilst this booklet outlines the Agency’s own policies and standards, these do not supersede the General Medical Council’s Good Medical Practice guidance which can be found on the website of the General Medical Council.
The General Medical Council guidance states:

“Patients must be able to trust doctors with their lives and well-being. To justify that trust, we as a profession have a duty to maintain a good standard of practice and care and to show respect for human life.”

In particular as a doctor you must:

- Make the care of your patient your first concern
- Treat every patient politely and considerately
- Respect patient’s dignity and privacy
- Listen to patients and respect their views
- Give patients information in a way they can understand
- Respect the rights of patients to be fully involved in decisions about their care
- Keep your professional knowledge and skills up to date
- Recognise the limits of your professional competence
- Be honest and trustworthy
- Respect and protect confidential information
- Make sure that your personal beliefs do not prejudice your patients’ care
- Act quickly to protect patients from risk if you have good reason to believe that you or a colleague may not be fit to practise
- Avoid abusing your position as a doctor, and
- Work with colleagues in the ways that best serve patients’ interests.

In all these matters you must never discriminate unfairly against your patients or colleagues. And you must always be prepared to justify your actions to them.”

You are required to maintain your registration with the General Medical Council and you are also required to inform the A&E Agency should you be subject to investigation or suspension from the GMC register at any time.
IMPORTANT GUIDANCE LINKS

Fraud Awareness  http://www.nhsbsa.nhs.uk/fraud

Code of Conduct

Please conduct yourself in a professional manner at all times when working through the Agency. In particular, we ask you to pay special attention to:

- Punctuality
- Standards of dress and courtesy
- Quality of care and clinical procedures
- Consideration and respect for clients, colleagues and supervisors
- Confidentiality and integrity

You are responsible for your own actions when completing an assignment and, in cooperation with your colleagues and supervisor, for the care of your patients/clients. You should comply with all reasonable requests, using your professional judgment at all times. If you have any questions or concerns about your work, please try to resolve these locally at first. You should not attend work under the influence of alcohol or any illicit substance or smoke at work.

The Agency Locums are not permitted to accept any gifts or gratuities from clients, nor to witness any wills/last testaments or legal documents; or to give financial advice to clients.

Agency Worker Obligations

When deployed in the provision of the Services our Locum Doctor’s must be aware that at all times whilst on the Authority’s premises they:

- must work as directed by the Authority and follow all reasonable requests, instructions, policies, procedures and rules of the Authority;
• shall not neglect, nor without due and sufficient cause omit, to discharge promptly and
diligently a required task within the terms of the engagement;

• shall not make unnecessary use of authority in connection with the discharge of the
provision of the Services and engagement instructions;

• shall abide by the Working Time Regulations 1998 and where applicable, New Deal
requirements;

• shall not act in a manner reasonably likely to bring discredit upon the Authority;

• shall not unlawfully discriminate within the meaning of Clause 16 (Unlawful Discrimination);

• shall not falsify records, timesheets, expenses or attempt to de-fraud the Authority in any
way;

• shall not corruptly solicit or receive any bribe or other consideration from any person, or
fail to account for monies or property received in connection with duties performed under
the provision of the Services on an engagement;

• shall maintain proper standards of appearance and deportment whilst at work;

• shall be properly and presentably dressed in such uniform and protective clothing, or
otherwise, as agreed between the Parties;

• shall display his photo ID badge on his clothing at all times during an engagement when they
are on the Authority’s (in the format as described in paragraph 6.2 below) to facilitate clear
identification;

• shall not wear the uniform, protective clothing, photo ID badge or use the equipment on the
Authority’s premises unless fulfilling the terms of the agreed engagement;

• shall not engage in any form of physical or verbal abuse, threatening behaviour,
harassment/bullying or be otherwise uncivil to persons encountered in the course of work;

• shall not at any time be, or appear to be, on duty under the influence of alcohol or drugs;

• shall not at any time be, or appear to be, in possession of firearms or other offensive
weapons;
shall report any injury or accident sustained and/or witnessed whilst on the Authority’s premises;

shall on being charged with any criminal offence, notify the Supplier immediately;

shall not misuse or abuse the Authority’s property;

shall not smoke while on the Authority’s premises except in those areas where smoking is expressly permitted; and

shall adhere to all other relevant obligations that the Authority shall reasonably require from time to time.

Equal Opportunities

The Agency seeks to offer equality of opportunity to all our Members and will treat all 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 or 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 1999 further require 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

On assignment, it is the Client’s responsibility to familiarise you with their own Health & Safety policies and procedures, and with the location of fire escapes, First-Aiders etc. 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
• Written in black ink
• Mistakes should not be covered with correction fluid or scribbled out so as illegible. One line should be scored through the mistake and your initial and date written.
• 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 bear in mind that full records are essential should any questions be raised about the care and standards of care delivered.

Confidentiality

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

**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 the Information Commissioner’s website, [www.dataprotection.gov.uk](http://www.dataprotection.gov.uk), from which the above guidance is reproduced.
Computer Use

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

Caring for Patients in their Own Homes

General Conduct

- Clients and their families should at all times be treated with dignity and respect and due consideration should be taken of their religion, culture and any other preferences
- Clients should be addressed using their preferred name
- Care and support should be offered in the least intrusive manner possible
- The independence of clients should be supported and encouraged where possible through appropriate communication about and involvement in their own care. This independence should only be curbed where it is in the client’s best interests and the reasons recorded

Attending and Leaving a Client’s Own Home

- You should announce your identity clearly on arrival and not enter a client’s home without invitation
Upon arrival at a home care assignment, you should check whether your client has any specific needs for this visit

Please take full care securing a patient’s home when leaving including, where appropriate, doors and windows and the safeguarding of keys

Carrying out Assignments

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

Allegations of Abuse

The Agency will take seriously any allegations of abuse by or against staff working through us. If we receive complaints of this sort against you, we may not be able to assign you whilst we carry out a full investigation. Ultimately, if allegations are well founded, we may not be able to offer you work in future. Where allegations are sufficiently serious, we may need to report you to the GMC and/or the Police.

Information on the protection of children and protection of vulnerable adults is covered within the mandatory training.

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:
Complaints Reporting

The Compliance Manager manages all complaints which involve Agency Workers. Complaints of a serious nature will be reported to the Managing Director or Chief Operating Officer.

Each agency worker supplied by the Agency will be promptly and fully informed of complaints relating to him or her.

The Compliance Manager will obtain written statements of the complaint from the complainant and the person(s) whom the complaint is concerning. If necessary, candidates and clients will be interviewed to obtain further information and details.

In certain circumstances it may be necessary to report the individual worker concerned to the GMC/GDC. It may also be necessary to report the individual worker to the police, or to advise the client to report him/her to the police.

Corrective action required to resolve the complaint should be agreed between the complainant and the person(s) whom the complaint is concerning.

Where there is evidence of malpractice on behalf of the agency worker, the Agency will report these complaints to the GMC/GDC within 24 hours of receipt of the complaint and will monitor and follow up such complaints with the GMC/GDC until an outcome is reached. The Agency will discuss with the Authority whether an Alert Letter needs to be issued and will co-operate with any action required.
Where the Agency receive a poor report of performance about an agency worker in a confidential reference written by the Authority, we shall not assign that agency worker to the Authority until we have received confirmation that the problems have been resolved and will not recur.

After implementation of the corrective action it should be confirmed that the complainant is satisfied the complaint has been resolved. If the complainant is still dissatisfied, the complaint should be reviewed again with all parties involved and if necessary further corrective action should be agreed and implemented.

The complaint is considered closed when the complainant is satisfied their complaint has been resolved.

**Complaints Records**

The manager of the complaint will keep records and details of the complaint during their investigation. When the complaint is closed the records will be filed appropriately.

- Number of requests