



Temporary Workers Handbook

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Registered in England No. 620371

Last Updated October 2025

Document Control

Version	Date	Modified By	Comments
1	April 2016	Kate Davies	First Issue
2	April 2017	Chris Whawell	Annual Review & Update
3	April 2018	Chris Whawell	Annual Review & Update
4	March 2019	Chris Whawell	Annual Review & New Branding
5	April 2020	Chris Whawell	Annual Review & Update
6	April 2023	Chris Whawell	Annual Review & Update
7	Oct 2024	Chris Whawell	Review for Legal Update
8	Oct 2025	Charlotte Tomlinson	Annual Review

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INTRODUCTION

Welcome to Hallam Medical. As a temporary worker for Hallam Medical, you can expect to receive professional advice and support from the Management team. You will receive support whenever, and wherever, you might need it.

This handbook is produced to help explain everything you need to know about Hallam Medical. Thank you for choosing to work for Hallam Medical.

Company Services

Hallam Medical are clinically led, framework-accredited healthcare recruitment specialists, supplying temporary clinicians to healthcare providers across the UK.

We support the delivery of excellent patient care in Urgent and Emergency Care, Primary Care, Neighbourhood Services, Community, NHS 111, and 999 services. We specialise in recruiting Advanced Practitioners, Urgent Care Practitioners, Community Specialists, and 111 Clinical Advisors.

Based in Sheffield, Hallam Medical was founded in 2007 by Alex Munro and is led by CEO Deborah McCain. Our Senior Leadership Team comprise of individuals with extensive Advanced Practice, Clinical and managerial backgrounds across the NHS and commercial organisations.

When a company understands you, your entire recruitment process becomes easier, saving time and money so you can focus on the important things, your service and patients.

When you register with Hallam Medical you can always expect our full support and attention. We will work with the profile we obtained from you at interview and offer you suitable placements according to your availability.

Hallam Medical provides a 24-hour service. If you have any routine enquiries, please telephone the office during normal office hours Monday to Friday. If you require urgent assistance outside office hours, please call the office and you will be transferred to one of the on-call Hallam Medical Management team.

Recruitment and Employment Confederation (REC)

Hallam Medical are corporate members of REC (Recruitment and Employment Confederation), the association for private recruitment services, and complies with its Code of Conduct and Code of Practice. REC has over 2,500 offices in membership throughout the UK and is recognised as the representative body for the recruitment industry by Parliament, the Civil Service, EC and other opinion formers.

SECTION 1 – YOUR REGISTRATION & RESPONSIBILITIES WITH HALLAM MEDICAL

1.1 Introduction

Hallam Medical are committed to ensuring that you are appropriately inducted prior to starting work. We fully understand that working for an agency for the first time can be an exciting yet daunting prospect, we are here to set your mind at ease and give you all the information you need to make your time with Hallam Medical as enjoyable as possible. In fact, some of our staff are also clinicians who

have worked in an agency capacity in the past, they can give you first-hand insight in to life as an agency worker.

Our induction will ensure that you are aware of our ways of operating, company policies and processes. We will also discuss the renewals of documentation, how to complete your timesheet correctly and weekly payment processes, as well as providing you with an Identification badge and company uniform (where necessary).

1.2 Registration Process with Hallam Medical

By registering with Hallam Medical you will undergo a number of safeguarding & employment checks that have been discussed with you at interview and confirmed by email. By continuing the registration process, you are deemed to be giving your consent to for all appropriate Safeguarding & Employment Checks required by the NHS Employers Check Standards, our Framework Agreements and our Client Contracts to be conducted.

By registering with Hallam Medical you also acknowledge that any Personal Data, including but not limited to references, professional registrations & qualifications, occupational health & training certificates may be shared with any of our Clients, Managed Service Partners and third-party Auditing bodies as part of Hallam Medical's on-going audit requirements for providing assignments to the Agency Worker.

Any failure to provide accurate information or present valid, current and original documentation, or where any Safeguarding and Employment Check carried out are discovered to be unsatisfactory for the provision of temporary agency assignments to Hallam Medical clients, your registration with Hallam Medical may cease or be delayed whilst further checks are conducted.

Below is a reminder of the checks that Hallam Medical require you to complete as part of your registration, which are required before you can commence temporary work. In addition, we have given you a brief overview of the on-going file maintenance that we will require from you on an annual basis.

1.3 DBS Disclosures, the Update Service and AccessNI Disclosures

Rehabilitation of Offenders Act (1974)

This act makes it unlawful to take into account any offences of a person who is considered to have undergone a satisfactory period of rehabilitation. There are a number of situations where the act does not apply, including "any employment which is concerned with the provision of health services and which is of such a kind as to enable the holder to have access to persons in receipt of such services in the course of his or her normal duties..."

As such it is a requirement that all applicants provide details of any existing convictions or any new convictions occurring during their time as a Temporary Worker for Hallam Medical. Denial or non-disclosure of any relevant conviction, which is subsequently shown to exist, shall lead to the immediate removal from Hallam Medical's Register. In order to comply with this,

Hallam Medical completes an Enhanced level Disclosure Baring Service DBS on all potential Temporary Workers. In addition, we also complete an Enhanced Level AccessNI Disclosure on all Temporary Workers based in Northern Ireland.

Our Policy on the Recruitment of Ex-Offenders and Policy on the Secure Handling, Use, Storage and Retention of Disclosure Information can be made available on request by contacting our Head Office.

Dealing with Temporary Workers Criminal Convictions

As all convictions must be declared, the Hallam Medical Management team will decide whether the offence gives rise to a risk to Clients and whether the applicant should be offered Temporary Worker status. As convictions may include relatively minor motoring offences, there may well be situations where a conviction will not affect the application.

Hallam Medical undertakes to judge such matters carefully and responsibly with over-riding consideration to the care, safety, and protection of patients. Should there be, in the opinion of

Hallam Medical, a risk to patients then Temporary Worker status will be refused, or assignments restricted.

Disclosure of Convictions to Clients

Hallam Medical undertakes to disclose information concerning a Temporary Worker's criminal conviction(s) to Clients where such information is specifically requested, but only with the prior written approval of the Temporary Worker.

DBS Update Service

Hallam Medical actively promote the use of the DBS Update Service for all applicants, if when registering with Hallam Medical you are already registered on the DBS Update Service, we ask that you provide us with the information required for us to carry out a status check with the DBS Update Service, this will usually be your current DBS certificate. By providing us with this information you are deemed to be giving your authority for Hallam Medical to carry out an online Status check and thereafter, receive up-to-date information (within the meaning of section 1116A of the Police Act 1997) in relation to your criminal record DBS certificate.

If you require a new DBS disclosure, then as per the information provided as part of your registration, Hallam Medical will complete the application on your behalf upon receipt of your DBS Information sheet and Identity Documents. As part of this process Hallam Medical will also register your new DBS disclosure on to the Update Service in order to carry out online Status checks on periodical basis. By completing this form, you are agreeing to Hallam Medical conducting such Status checks on your DBS disclosure.

1.4 Mandatory Training and Development

As part of the registration process you will be required to complete or show current valid certificates of your mandatory training modules. These mandatory training modules shall be in accordance with the guidance set out in the Skills for Health Core Skills Training Framework (CSTF) Agreement.

In addition to our NHS Clients requiring this training under the National Framework Agreements, many of our private sector clients also require seeing documented evidence of completion of some, or all of these training courses prior to work being confirmed.

During your registration call, you will have discussed the training required for the type of work that you are seeking, giving you a full understanding of how much you need to complete as part of your

registration process. However, all Mandatory Training provided by Hallam Medical is free to our agency workers, so we strongly advise all new registrations to complete any modules that they haven't done as this training contributes to CPD points.

The Mandatory Training Courses (include but are not limited to*)

- Complaints Handling
- Conflict Resolution
- Countering Fraud, Bribery and Corruption in the NHS
- Equality, Diversity and Human Rights
- Fire Safety
- Handling Medication and Avoiding Drugs Errors
- Health, Safety and Welfare
- Infection Prevention and Control Level 2
- Information Governance, Record Keeping and Caldicott Protocols
- Lone Worker
- Mental Capacity Act including Deprivation of Liberty.
- Moving & Handling Level 2
- Numeracy & Drugs Calculations
- Preventing Radicalisation
- Resuscitation: BLS/ILS/ALS incl safe use of AED's delivered by means of a practical course
- Safeguarding of Vulnerable Adults (SOVA) Level 3
- Safeguarding of Children & Adolescence (SOCA) Level 3
- Sepsis Awareness
- Dementia Awareness
- Management of Anaphylaxis
- National Early Warning Score (NEWS2)
- Oliver McGowan OR Autism Awareness & Learning Disabilities
- Paediatric Basic Life Support
- Spotting the Sick Child (Level 1/2/3 dependent on role) *

Please note that some courses are job role dependent, and we may require you to complete others that are not listed above, your consultant will discuss this with you.

Training courses are valid for either 1 year, 2 years or 3 years and will require a refresher at their expiry date. Hallam Medical will keep a record of all training expiry dates and will inform you at least 4 weeks prior to the certificate expiring and provide you access to refresher courses at no cost to you. It is a requirement of your registration that these courses are refreshed at the appropriate time and you may not receive the work you want after your training certificates expire.

Continued Professional Development

CPD is fundamental to the development of all healthcare practitioners and the enhancement of quality patient care. As a Temporary Worker for Hallam Medical, you are responsible for updating your skills and knowledge regarding best practice in health and safety. You should subscribe to all codes of practice as laid down in statute, or by the NMC/HPCPC. This includes the techniques on moving and handling and record keeping.

It is your responsibility to maintain your CPD.

Hallam Medical can offer access to a range of courses either in house or through various organisations. Contact the Hallam Medical Management team for more details.

All our Temporary Workers must be qualified in line with statute regulation.

1.5 Occupational Health Checks & Fitness to Practice Policy

Before any Temporary Worker is allowed to work in the NHS, they must complete a health declaration form. This will have evidence of the immunisation status acquired from their substantive employer. This must be submitted to Hallam Medical who will request a certificate of fitness to practice from our partner Occupational Health Service. This certificate will either be cleared for Non EPP or EPP (Exposure Prone Procedures) work depending on the information provided.

In certain circumstances, our Occupational Health Provider may reject the health questionnaire due to insufficient immunisation and vaccination information. In such cases you will be provided with a report of what further information is required to complete your occupational health clearance.

If a Temporary Worker cannot provide evidence of the required immunisations, they must acquire the required immunisations before working for Hallam Medical. This will be at no cost to Hallam Medical.

Immunisation

- Varicella – Each agency worker must provide a written statement to confirm whether or not they have had chicken pox or shingles or a blood test result showing varicella immunity.
- Tuberculosis – Each agency worker must provide ONE of the following: an occupational health/GP certificate of a positive scar or a record of positive hear test result, a recent clear chest X ray.
- Rubella - Certificate of vaccination blood test result is required showing rubella immunity – must be on a pathology report and be an Identified Validated sample.
- Mumps - Each agency worker must provide a written statement to confirm whether or not they have had mumps or a blood test result showing mumps immunity.
- Measles - Each agency worker must provide a written statement to confirm whether or not they have had measles or a blood test result showing measles immunity.
- Hepatitis B – Each agency worker must provide a copy of the most recent pathology report showing titre levels of 100lu/l if possible or antigen status if titre levels are below 100lu/l. the report must be an identified validated sample.
- Hepatitis C - if you are carrying out EPP procedures i.e. midwife
- Proof of Hepatitis C non-infectivity is required for staff performing exposure prone procedures therefore please provide an identified validated sample of your most recent pathology report.

The Temporary Worker must declare before each assignment if he or she is suffering from any of the following conditions:

- Vomiting
- Diarrhoea
- Rash

Any Temporary Worker who becomes pregnant must inform the Hallam Medical Management team immediately.

As part of the requirements of the NHS National Framework Agreements, The Authority may request that a Temporary Worker undergoes a medical examination by the Authority prior to the commencement of any shift.

The Authority shall instruct the Temporary Worker of the circumstances and reasons for the medical examination. The Authority shall be entitled to refuse to allow the Temporary Worker to continue working for the Authority unless the medical examination demonstrates that it is safe for the Temporary Worker to continue working for the Authority or if the Temporary Worker declines to be examined.

1.6 Eligibility to Work in the UK & ID Checks

In order to register with Hallam Medical, you will need to provide original proof of your eligibility to work in the UK. Hallam Medical will request documents from you in line with the requirements laid out by the UK Border Agency (UKBA) and the provisions set out in Immigration, Asylum and Nationality Act 2006 (amended by the Immigration Act 2014 and the Immigration Act 2016) which provide agencies with a 'statutory excuse' against a civil penalty, where they can provide sufficient evidence that they have carried out all necessary checks to mitigate any risks of engaging illegal workers as part of the recruitment process.

Under these guidelines we are required to conduct a right to work check on you as part of your registration with Hallam Medical. This includes us obtaining from your original evidence or your right to work and checking that you are permitted to do the type of work being offered and to make a clear copy of this evidence to be retained on your worker file for the duration of your time with Hallam Medical.

Under the NHS Employers Check Standards and the client frameworks under which Hallam Medical provide temporary agency workers, we are required to also obtain documents from you that verify your identity, as part of your registration. These documents have already been discussed with you during your initial telephone contact with our office and highlighted in the subsequent registration email that was provided to you.

If you are unsure of what documents we can accept or how we can accept these documents, please contact the Hallam Medical our Team at our Head Office who will happily answer any queries that you have.

1.7 Employment History & Reference Checks

In order for Hallam Medical to ascertain your suitability for the position for which you have registered, a full employment history will be required and will be backed up by reference checks for the most recent employments.

We can accept your full employment history in the form of a CV, or we can provide you with an application form to complete. We will require your complete employment history from education to date, ideally showing start and end dates for each employment in month and year format. Where there

are gaps in employment of 3 months or more you will be required to provide brief information of what you did during this time.

We do ask that you provide as much information as possible about your previous experience and skills, as this information is what we will require for us to match you against our client requirements. By providing less information you may well be missing out on some fantastic work opportunities.

If you provide your information within an application form, Hallam Medical will transfer this to one of our standard CV formats for presenting this to our clients.

You will also be required to provide details or at least 2 referees to cover the last 3 years of employment, including 1 reference from your most recent employer / assignment. However, if you have been with the same employer for the previous 3 years then we may well only need the 1 reference.

During your registration call with Hallam Medical, our team will have discussed the reference requirements with you. They will have asked for your permission to contact your designated referees at their places of work. There may also be occasions where we will contact the referee by telephone to further verify the reference that we receive.

Obtaining satisfactory references is a key part of the registration process with Hallam Medical and we may deem it necessary to seek more references where additional information is required and has not been so from the originally sought references. Therefore, please do not be offended if you are asked to provide more than 2 referee details.

Your registration with Hallam Medical will be affected if we are unable to obtain suitable references for you pertaining to your previous work history. Also, any offer of appointment may be withdrawn if, at any time, it subsequently becomes apparent that you have either knowingly withheld information or have provided false or misleading information.

1.8 Professional Registration & Qualifications

As part of your registration with Hallam Medical you will need to show details of your Professional Registration with the NMC or HCPC, this should be your Statement of Entry or letter from the Professional Body showing your PIN number.

Hallam Medical will check your registration against the NMC or HCPC register as part of your registration process and then monthly whilst you are working with Hallam Medical. As part of your registration, you must always remain registered with your professional body, you are required to inform Hallam Medical of any restrictions to practice or any changes or updates to your registration. You must inform Hallam Medical immediately if you are suspended or are put under investigation by your professional body. Failure to disclose any restrictions, investigations or suspensions to Hallam Medical may result in the suspension or termination of your registration with Hallam Medical.

During your initial contact with our office, our team will have discussed any post-graduate qualifications / training that you have listed on your CV / application. In order for these qualifications or training to be considered as part of your application you will need to provide Hallam Medical with copies of the certificates for your file.

You will be required to provide original documents to demonstrate that you have the post-registration qualifications listed in your CV / Application Form. Hallam Medical will take copies of these qualifications for your recruitment file, and will, if necessary, verify these qualifications with the awarding body to check that they are bona fide.

To offer you appropriate assignments in line with your stated experience and qualifications, Hallam Medical may be required to send evidence to our clients pertaining to such qualifications, therefore it is important these certificates are provided.

1.9 Professional Indemnity / Vicarious Liability

As an Agency Worker on assignment within an NHS organisation you are covered by the NHS Indemnity Arrangements for clinical negligence claims in the NHS (Clinical Negligence Scheme for Trusts CNST), however there may be occasions when this cover does not apply, or the cover may not be sufficient to cover all the situations in which you might find yourself in. Hallam Medical would like to remind you of your responsibility to take out your own personal professional indemnity insurance cover and that without this insurance you could be liable for all costs relating to any claim made against you.

You are required any all times throughout your registration to hold your own personal professional indemnity insurance and should provide details of such to Hallam Medical upon registration and throughout periodical file updates. Personal professional indemnity cover can be obtained from many different sources, Hallam Medical cannot advise you of which insurance over you should take, but would suggest that in the first instance you speak to your professional regulatory body or union.

1.10 Terms of Engagement

The Agency Worker should read carefully their copy of Hallam Medical's Terms of Engagement in conjunction with the information contained in this handbook. Any queries you may have can be raised with the Hallam Medical Management team at head office.

As changes are made to these terms of engagement from time to time, you will be sent an email copy via our adobe sign facility, we ask that you sign and return these at your earliest convenience.

Temporary Worker Status

The Agency Worker is engaged on a contract for services by Hallam Medical. As an Agency Worker, there is no obligation on the part of Hallam Medical to offer you or provide you with temporary work. Equally, as an Agency Worker, you are not obliged to accept any work which has been offered.

Hallam Medical acts at all times for you and assumes no employer responsibilities. We are required to make deductions in respect of PAYE pursuant to Sections 44 – 47 of the Income Tax (Earnings and Pensions) Act 2003 and Class 1 National Insurance Contributions and any other deductions which the Employment Business may be required by law to make unless you are operating through a Ltd company or working via an Umbrella Payroll provider. This does not affect your employment status.

1.11 Annual Appraisals

As part of our commitment to provide a quality service to our agency workers and in order to gain regular feedback from your experiences, we aim to conduct annual appraisal sessions when required. The main purpose of our appraisal is to measure your continuing performance and identify any

development needs where this falls in line with your revalidation portfolio. Our Chief Nurse will contact you if an appraisal is required.

1.12 Revalidation at a Glance

Hallam Medical are the only agency to have worked with the Nursing and Midwifery Council (NMC) on the Nurse Revalidation pilot, so we are perfectly placed to guide and support you through Revalidation.

We want to offer Nurses as much support as possible through this process.

This guide combines the essential information provided by the NMC together with our knowledge in a quick, easy-to-read format.

What is Revalidation

- Revalidation is the new three yearly professional registration process with the NMC.
- It replaces PREP
- It is a tool for the NMC to check all Nurses and Midwives are working to the new code of conduct.

Revalidation and the Code

The four themes of the new NMC code are

- Prioritise people
- Practise effectively
- Preserve safety
- Promote professionalism and Trust

What is Needed

You must:

- Have access to a computer
- Maintain a portfolio of evidence either electronically have or paper-based
- Ensure you get the feedback from your confirmer in the last 12 months of the three-year period (The NMC recommend this to ensure it is relevant and up-to-date)

What's New

Registration must be submitted online

- The application date is now the 1st of the month rather than the 30th
- You need to provide five pieces of feedback and five reflective accounts
- You must have evidence of your professional indemnity cover
- You will need to have a reflective discussion and also a third-party confirmer
- If you are a Practice Nurse, you may need to work across surgeries to have reflective discussion

Requirements:

You must provide evidence over a three-year period, that you have achieved the following minimum criteria.

- 450 practice hours or 900 if dual registered (Nurse and Midwife) over the three years prior to the renewal of your registration.

You must include:

- Dates of practice and the number of hours worked (include timesheets, jobs specs etc)
- Name & address of the organisations you have worked for and a description work carried out
- 35 hours of Continual Professional Development (20 of these must be participatory)
- Evidence that you undertook the CPD activity (include any certificates of participation)
- A description of the topic and how it relates to your practice and The Code
- The dates and number of hours spent on completing your CPD activity
- Five Practice Feedback and Five Reflective accounts.
- You can include feedback - In written, verbal, formal and/ or informal formats
 - From Patients, Colleagues (fellow Nurses) Teachers / academics, Colleagues (management, on reception, office administrators, or teachers)

IMPORTANT: If providing practice feedback from patients you must have their consent and ensure all records are anonymised.

- Professional Indemnity Insurance - You must provide evidence that you have the appropriate cover.
- Health Declaration - You must provide a Health and Character Declaration.
- Reflective Discussion - You must provide five written reflective accounts relating to The Code, CPD and practice related feedback and an event / experience in your practice related to The Code
- Confirmation - Your confirmer can be your line manager; they do not need to be NMC registered.
- All revalidation requirements must be met before your confirmer can sign and date the confirmation form.
- Verification must be carried out in a face-to-face meeting.

How to apply for Revalidation

The NMC will notify you at least 60 days before your application is due.

You will then have 60 days to complete the online revalidation application form.

You should already have all of your revalidation evidence collated and ready to submit. Follow this link for more information about registering for Revalidation online:

<http://www.nmc.org.uk/Registration/NMC-Online/>

How can we help?

We can support with Revalidation via our Chief Nurse.

You can find NMC templates for recording your evidence here:

<http://www.nmc.org.uk/standards/revalidation/revalidation-guidance-and-resources/>

Other useful information:

- NMC <http://www.nmc.org.uk/registration/nmc-online>
- RCN <https://www.rcn.org.uk/professional-development/revalidation>

1.13 Annual Registration & Compliance Updates

Once you are registered and cleared to work Hallam Medical will monitor your file with regards to compliance updates. We will ensure that you are given ample notice to provide new documents where existing documents are due to expire. This will allow you to remain fully compliant and to continue to work on Assignment.

Documents that will require updating on an annual basis include: -

- New DBS Disclosure (if you have Hallam Medical DBS provided since August 2017 you will automatically be on the Update Service); or DBS Update Service details if you have one of these from another provider
- Mandatory Training – if required Hallam Medical will provide you with details to take the appropriate courses
- Occupational Health Clearance – we will send you an annual review questionnaire for completion
- Indemnity Insurance – we will require evidence of on-going Indemnity Insurance Cover

Hallam Medical will also seek on-going performance related feedback from your agency assignments as part of our continual reference process. These will be obtained from Hallam Medical client sites that you attend on a regular basis.

Failure to maintain a compliant file may result in the suspension of work until you have provided the necessary documentation, therefore your commitment to training, induction and compliance initially and on-going is essential and greatly appreciated.

SECTION 2 – CODE OF CONDUCT FOR TEMPORARY WORKERS

2.1 Professional Codes of Conduct

Registered Nurses

To practice in the UK, all registered nurses must hold a current registration with the NMC (Nursing and Midwifery Council) and must at all times abide by their Code of Professional Conduct. Registered nurses not adhering to the above standards may be removed from the Hallam Medical register and will not be eligible to practice.

As part of Hallam Medical's selection procedure for Temporary Workers, all qualified nurses' PIN numbers (Personal Identification Number) will be validated with the NMC, and the ability to practice and current registration will be confirmed. If Hallam Medical are unable to validate a current PIN, then no work (appropriate to the profession to which the PIN applies) will be offered until the matter is fully investigated and resolved satisfactorily.

Registered Paramedics

To practice in the UK, all registered paramedics must hold a current registration with the HCPC (Health & Care Professions Council) and must at all times abide by their Code of Professional Conduct. Registered paramedics not adhering to the above standards may be removed from the Hallam Medical register and will not be eligible to practice.

As part of Hallam Medical's selection procedure for Temporary Workers, all qualified Paramedics' PIN numbers (Personal Identification Number) will be validated with the HCPC, and the ability to practice and current registration will be confirmed. If Hallam Medical are unable to validate a current PIN, then no work (appropriate to the profession to which the PIN applies) will be offered until the matter is fully investigated and resolved satisfactorily.

2.2 Sexual Harassment Prevention Policy

Hallam Medical is committed to ensuring that all its Temporary Workers are treated with dignity and respect and treat others in the same way. We believe that all Temporary Workers have the right to work in an environment which is free from any form of harassment, including sexual harassment.

Hallam Medical has a zero-tolerance approach to sexual harassment.

Hallam Medical is committed to ensuring that reasonable steps are taken to prevent sexual harassment to all Temporary Workers. This policy will be reviewed and updated from time to time to ensure Hallam Medical's compliance with its duties under the Equality Act 2010 as amended by the Worker Protection (Amendment of Equality Act 2010) Act 2023 to ensure that all reasonable steps are taken to prevent sexual harassment.

Harassment

Under the Act, harassment is defined as unwanted conduct that relates to a protected characteristic which has the purpose or effect of violating an individual's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that individual, including conduct of a sexual nature.

Sexual Harassment

In accordance with the Worker Protection (Amendment of Equality Act 2010) Act 2023, Hallam Medical is committed to providing a work environment free from unlawful sexual harassment.

2.2.1 Sexual harassment is unwanted behaviour of a sexual nature which has the purpose or the effect of:

- violating the victim's dignity; or
- creating an environment that is intimidating, hostile, degrading, humiliating or offensive to the victim.

2.2.2 An individual of any gender may be the victim of sexual harassment.

2.2.3 Whilst not an exhaustive list, forms of sexual harassment can include:

- Slurs or unwanted sexual advances.
- Visual conduct such as derogatory or sexually oriented posters.

- Physical conduct such as assault, unwanted touching, or any interference because of sex, race, or any other protected characteristic basis.
- Threats and demands to submit sexual requests as a condition of continued employment or to avoid some other loss and offers of employment benefits in return for sexual favours.
- Sexual comments or jokes.
- Unwelcome touching, hugging, massaging, or kissing.

2.2.4 If an individual believes that they have been sexually harassed, they should make an immediate report to a Director of the Company followed by a written complaint as soon as possible after the incident. The details of the complaint should include:

- Details of the incident
- Name(s) of the individual(s) involved.
- Name(s) of any witness(es)

2.2.5 Hallam Medical will undertake a thorough investigation of the allegations. If it is concluded that harassment has occurred, remedial action will be taken.

2.2.6 Where an incident/complaint of sexual harassment relates to a temporary agency worker the Hallam Medical will not carry out instructions from a hirer/and/or intermediary which it considers will amount to sexual harassment and victimisation.

2.2.7 Hallam Medical will take reasonable steps to safeguard temporary workers it supplies and internal members of staff from harassment.

2.2.8 Hallam Medical will ensure that the hirer has a sexual harassment policy in place, and this is given to the employee or worker.

2.2.9 Hallam Medical will ensure that all staff are given training on sexual harassment, and this is monitored, and regular training will be provided to all staff on sexual harassment.

2.2.10 Hallam Medical will carry out due diligence checks on hirers/intermediaries who we engage in the supply of temporary agency workers to ensure that they are taking reasonable steps to carry out their duties as employers under the Equality 2010.

All Temporary Workers will be expected to comply with Hallam Medical's policy on sexual harassment in the workplace. Any breach of such a policy will lead to appropriate disciplinary action.

Temporary workers who Hallam Medical finds to be responsible for sexual harassment will be subject to Hallam Medical's complaints procedure even where such sexual harassment involves individuals who are not engaged by Hallam Medical.

Complaints and monitoring process

Hallam Medical has procedures for monitoring compliance with this policy and for dealing with complaints of sexual harassment in place. These are available from the Directors and will be made available immediately upon request. Any discrimination complaint will be investigated fully.

2.3 Your Availability for Assignments & Allocation of Work

As work cannot be guaranteed, most work goes to those Temporary Workers who contact head office on a regular basis, giving as much availability as possible. We prefer Temporary Workers to give us their availability for one month ahead.

Mobile phones are an advantage, enabling the office to contact you at short notice, however, these should be turned off whilst on assignment. By advising the office of your availability one month ahead, it saves the office staff trying to contact you unnecessarily, and also means you are more likely to get the assignments and hours that suit you.

Hallam Medical can also offer you a 'diary management' service, whereby you give us authority to fulfil all of your availability as and when shifts are received without the need to contact you on each and every occasion when the shifts come in. We do this based on pre-defined specifics provided by you, on the type of work you want, how far you wish to travel, the shift patterns you prefer and the number of hours you wish to work each week. This diary management service gives you peace of mind that you will have your availability for assignments filled each week without the need to be constantly called for shifts. If at any point, we are unable to fulfil your requirements we will of course let you know in good time.

Shifts will be circulated via a group email at any given time, and it is the responsibility of the temporary worker to check their emails regularly. Shifts will be allocated on a strictly 'first come, first served' basis.

2.4 Temporary Assignments

Assignments are offered to you as outlined section 2.2 above, but you are under no obligation to accept. However, once you have accepted the assignment you must make sure that you do the following:

- Do not cancel once you have accepted the shift
- Take full details of the shift i.e. location, date, start time, finish time
- Confirm receipt of the confirmation sheet by email or telephone.
- Make sure that you know where you are going. Do a route planner on the internet or find out about public transport.
- Turn up on time
- Make sure you are appropriately dressed
- Always carry your Hallam Medical ID badge
- Nurses should always carry their NMC PIN card
- Make sure that you have a timesheet with you
- Report on duty
- Find out the basic health and safety issues in the building i.e. fire exits
- Find out what the staff expect you to do
- If you finish a task, ask what you can do next
- Never do anything you are either unsure about or feel is dangerous
- Make sure that you get your timesheet signed by an authorised signatory before you leave

- Please ensure that you're aware of and comply with the individual Trust – Unit policies and procedures.

2.5 Personal Appearance

To best meet the needs of our clients, please ensure you adhere to the following guidelines:

- Uniform
- Adhere to clients uniform policy.
- Identity Cards

All Temporary Workers are required to carry an identity card. This will display your name, photograph, NMC & expiry and signature. Clients may ask to see your identity card if they do not know you.

Please do not take offence as the Client is only taking sensible security precautions. Identity cards are issued after your application has been successful. Please keep your identity card safe and in the event that it is misplaced please inform the Hallam Medical Compliance team immediately. If for whatever reason you cease to become a Temporary Worker for Hallam Medical, we ask that you return your identity card to us.

Whilst on duty, qualified nurses must also carry their PIN card.

Hairstyles

Please make sure that your hair is clean and tidy. Long hair must be secured in such a way so as not to pose an infection or safety hazard.

Jewellery

Please ensure that the jewellery you wear does not cause offence to a client or become a health hazard. Any jewellery worn during shift should be kept to a minimum and appropriate to the job role.

Shoes and Footwear

Shoes that comply with health and safety guidelines should be worn. These should be flat with a closed toe.

Client Policy

In all cases, please ensure you abide by any uniform policy that is required by the Hallam Medical client, which you will be informed of prior to the shift. This includes all client 'short sleeve' policies that are becoming more common within NHS clients.

2.6 Reporting on Duty & Your Conduct whilst on Assignment

Hallam Medical prides itself on the fact that its Temporary Workers maintain a high professional standard while carrying out their assignments. Reliability and punctuality are of prime importance. For handover and induction purposes, try to arrive at least 15 minutes early for an assignment and report to the person as advised in your shift confirmation. If this person is not available, then you should report to the person in charge.

As a Temporary Worker with Hallam Medical, you will be expected to follow our agency code of conduct whilst on any assignment with any Hallam Medical client. This will include, as a minimum: -

- You must work as directed by our client and follow all reasonable requests, instructions, policies, procedures and rules of our client. This will include the accepting of alternative work within the client site that falls within the scope of your clinical competence when requested to do so as required.

This can include being asked to work in a different ward or department than what you were originally booked in to by your Hallam Medical Consultant, if our client needs to utilise you in a different part of their organisation.

Our client's needs can vary in as patient numbers and demand varies, which will have a direct impact on their workforce requirements to deal with the demand. As a Temporary Worker with Hallam Medical you are expected to recognise this and work in any area within the scope of your clinical competence.

You must not neglect, not without due or significant cause omit, to discharge promptly and diligently a required task with the terms of your assignment

- You must not act in a manner that is reasonably likely to bring discredit upon our client.
- You must not lawfully discriminate within the boundaries of the Equality Act 2010.
- You must not falsify records, timesheets, expenses or attempt to de-fraud the client in any way. Falsification of documents can and will be pursued on the grounds of fraud with the appropriate Counter Fraud Service
- You must seek to have your timesheet authorised following the end of the required shift or assignments in a timely manner and submit this to Hallam Medical by 10:00am on the Monday following the week of the shift or assignments at the latest

Reliability, behaviour and attitude of our Temporary Workers is very important to Hallam Medical, we have an expectation that our Temporary Workers always abide by this code of conduct. After your assignment has taken place, we may contact our client to gather some feedback regarding your performance whilst on assignment, this will also include feedback on your reliability, behaviour and attitude in line with our code of conduct.

Any instance of negative feedback on these grounds is taken very seriously and recorded on your recruitment file. After the first piece of negative feedback, you will be spoken to by your Hallam Medical Consultant, who will remind you of the expectations of behaviour and abiding by this code of conduct.

If, after receiving a first piece of negative feedback on your conduct, we receive further negative feedback, you will be contacted by a member of the Hallam Medical Management Team to discuss the issues. You will once again be reminded of the conduct expected of you whilst on assignment and also that your registration with Hallam Medical could be terminated if there was a third repeat of this type of feedback.

For any third poor report on your conduct whilst on Assignment, you will be contacted by a member of Senior Management who will discuss the termination of your registration with Hallam Medical and the cancellation of any future booked assignments.

In any incident where a temporary worker refuses to follow a reasonable request by our client to accept alternative work within their site, that falls within the scope of your clinical competence, when requested to do so, will have their assignment cancelled immediately. The client will have every right to send you home if you refuse to do alternative work within the scope of your clinical competence and your shift will be recorded as cancelled by the Temporary Worker.

This will mean that, although this might be the first report of negative feedback on attitude, you may now occur a risk of your registration being terminated if you have had previous cancellations on your recruitment file. As per the following section of the handbook, we operate a similar policy of '3 strikes' for cancellations, at which point your registration can be terminated.

2.7 Lateness & Cancellations

If, in exceptional circumstances, you expect to be late for duty, you should inform the Hallam Medical Management team so they can inform the Client. The Hallam Medical team will be able to call ahead to the client to inform them of your expected time of arrival and give them the opportunity to ask another member of staff to stay on until you arrive. By calling ahead we can provide you with the assurance that the client will be made aware so that you can focus on your journey.

Lateness can happen to anyone, trains get delayed, accidents and traffic jams result in our car journey being longer than expected. However consistent lateness will be monitored by the Hallam Medical Management Team, and any Temporary Worker who is frequently late for assignment will be contacted by a member of our Management Team to discuss your general timekeeping.

You should also be aware that our client has the right to cancel your assignment without notice if you are late to arrive, in this instance there will be no financial payment for this assignment for you.

As a Temporary Worker when you have accepted an assignment you have a duty of care to attend as planned, however we do understand that emergencies happen which results in you being unable to fulfil your commitments. If you are unable to fulfil an assignment and need to cancel, we need as much notice as possible so we may endeavour to replace you. Hallam Medical expect, as a minimum, 4 hours' notice from you to cancel your assignment, anything less than 4 hours compromises our ability to source a suitable replacement for our client.

Hallam Medical operate a 24 hour a day, 7 day a week service, which means you can speak to one of our staff outside of office hours if you need to cancel your shift. If you wait until the office opens, you may then be within the 4-hour notice period. If you cannot attend an early morning assignment, you should therefore contact our office as soon as possible, calls automatically divert to our on-call service where someone will be available to speak to you.

In all instances where you may need to cancel an assignment, we expect our Temporary Workers to telephone our main office number of 0333 800 0395 and speak to a consultant or manager directly. We do not accept shift cancellations via email, text messages or other social media messaging platform.

Reliability of our Temporary Workers in attending shifts in a timely manner is very important to Hallam Medical, we have an expectation that our Temporary Workers, once booked on to an Assignment, attend as

planned. We therefore take repetitive instances of lateness and failure to arrive at our client site very seriously. After your assignment has taken place, we may contact our client to gather some feedback regarding your performance whilst on assignment, this will also include feedback on your timekeeping for your Assignment.

Any instance of lateness and/or failure to arrive is taken very seriously and recorded on your recruitment file. After the first instance of lateness and/or failure to arrive, you will be spoken to by your Hallam Medical Consultant, who will remind you of the expectations of attending shifts and correct timekeeping once you accept an Assignment.

If we receive further feedback of an instance of lateness and/or failure to arrive, you will be contacted by a member of the Hallam Medical Management Team to discuss the issues. You will once again be reminded of the expectations of attending shifts and correct timekeeping and also that your registration with Hallam Medical could be terminated if there was a third repeat of this type of feedback.

If there was a third instance regarding attendance and/or timekeeping, you will be contacted by a member of Senior Management who will discuss the termination of your registration with Hallam Medical and the cancellation of any future booked assignments.

2.8 Direct Bookings with a Client

Whilst working on Assignment, our client may approach you directly with work for future agency Assignments. It is essential that if you are booked in this way, that you inform your Hallam Medical consultant. Please note this does not mean you cannot undertake the shift.

Many clients have clear placement procedures in place and will not pay for work that has been booked outside of these arrangements. These include situations where our client operates an online booking and payment portal that requires the receipt of Purchase Order numbers to facilitate payment to us and you. If this occurs, you may not be paid for the assignment as quick as you normally would.

2.9 Direct Employment by a Client

Our Terms of Business with our Clients includes a requirement that Clients pay us an appropriate recruitment fee if they employ directly (or indirectly) any Temporary Worker who has worked for them in the previous 12 months. This applies equally to temporary or permanent posts, full or part-time.

You are required by your Hallam Medical Terms of Engagement to notify our office if you wish to take up any post with a Client of Hallam Medical for whom you have worked during the previous 6 months, even if you have terminated your status as a Temporary Worker for Hallam Medical.

2.10 Timesheets & the Payment Process

Rates of Pay

Different pay rates apply to different assignments and are dependent on day and time of day. Rates of pay are available from the Hallam Medical Management team. Details of pay rates are also noted on the confirmation sheets sent prior to commencement of an assignment.

Timesheets and Pay

Payment is made to Temporary Workers on a weekly basis on every Friday of each week.

Payment is subject to submission of a timesheet, on which all information given must be accurate, timesheets must be completed in full, and every shift must be authorised with an appropriate signature.

Timesheet Instructions

Please read the following instructions regarding completing and submitting timesheets.

Failure to comply FULLY with the instructions will mean that payment will NOT be made (please mark as N/A any areas that are not relevant on the timesheet):

- You must take your timesheet with you so that it can be signed at the end of each shift by the authorised signatory
- The authorised signatory should sign to confirm the hours worked by the Temporary Worker at the end of each shift
- You should send the completed timesheet to Hallam Medical's head office for payment
- Timesheets should be submitted on a Weekly basis.
- Completed timesheets should reach us no later than 10am on the Monday of the following week to enable the payroll to be processed:
 - All entries must be made in BLACK ink
 - No correction fluid must be used
 - Any alterations must be signed by the authorised signatory
 - Timesheets may be posted, faxed or emailed

ANY TIMESHEET WHICH IS INCOMPLETE OR ILLEGIBLE WILL RESULT IN THE FORM BEING RETURNED TO YOU AND A POSSIBLE DELAY IN PAYMENT

Method of Payment

Payment will be made by Bankers' Automated Clearing Services (BACS) and/or faster payment directly into your bank/building society account on each Friday. A payment advice detailing how pay has been calculated and deductions made will be forwarded online via secure email.

Advise the office should you change your personal circumstances, e.g. change of address or bank details. This must be done in writing.

Queries

Should you have any queries relating to your pay, please contact your Consultant in the first instance and give details of date, time and location of shift. Take the name of the person that you speak to for your reference, and we will endeavour to resolve your query as soon as possible.

If for some reason, you have been under/overpaid, the money will automatically be adjusted in your next payment. It is in your interest to cross check payment details against your copy timesheet.

2.11 Income Tax and You

Although all Temporary Workers are not employed by Hallam Medical, the company is required by law to treat you as though you were employed for the purposes of PAYE and Class 1 National Insurance

Contributions only (this applies to those temporary workers who are engaged as PAYE on a Contract for Services). Therefore, you are required to pay income tax on your earnings (if they exceed the threshold for the current financial year).

The rules affecting people working through agencies are contained in Section 134 TA 1988 (formerly Section 38, Finance (No. 2) Act 1975).

If you have any queries regarding your tax code or feel that you may be entitled to additional allowances, please contact Hallam Medical's Management team who will help you or give you details of the tax office you need to contact. If Hallam Medical is not your main source of work for tax purposes and there are issues with overpayment of tax and other income issues, it is also advisable to discuss these with the Inland Revenue direct or via their web site.

IR35 Off-Payroll working Rules

Since April 2021 the rule for the determination of whether an Assignment falls inside or outside of the IR35 off-Payroll Rules moved from the Contractor to the end Hirer. This change applies to all end clients that are not exempt under the Small Business Exemption.

The Small Business Exemption, applies to all end clients who meet 2 of the following 3 criteria: -

- An annual turnover of less than £10.2M
- A balance sheet of less than £5.1M
- Less than 50 employees

In these circumstances the new rules do not apply and the decision for determining whether an assignment is inside or outside of IR35 remains with the Limited Company Contractor.

In the cases where the end Client is responsible for determining the IR35 status, Hallam Medical will make you aware at the point of discussing the Assignment opportunity what the IR35 status will be. If the role is deemed to be inside IR35 and you normally work via a Personal Service Company (limited company), you will be informed that payments for this assignment will be subject to employment taxes deductions prior to payment to you and what the PAYE rate will be.

In providing you with the IR35 status from an end client, you may also receive a status determination statement SDS from this client that will explain how they have reached the particular IR35 decision. Hallam Medical appreciate that these SDS documents can be difficult to understand in the context of agency assignments and the regulation surrounding the engagement. To allow you to better understand an SDS, we can provide you with expert advice on IR35 and a clear explanation of the determination.

If you do not agree with the SDS outcome, you are entitled to dispute this with the end client. However, prior to doing so, we will take the time to understand which part of the SDS you do not agree with to try to resolve this on your behalf or explain the reasons why the client has come to this IR35 outcome for the assignment. If you still wish to dispute this outcome following our conversations with you, we will then provide you with the end clients IR35 Dispute Process.

As an agency worker you are under no obligation to accept any assignment and therefore accepting an assignment that is inside IR35 is your choice to make. If you do decide to take a role that is inside IR35, you will also be given the opportunity to receive payment via one of our PSL Umbrella Companies.

Our Umbrella Companies have been thoroughly vetted prior to joining our preferred supply list, to provide us with the assurance that they are making the appropriate employment tax deductions prior to making payment to you. This list is constantly reviewed, and we are obliged to regularly audit the compliance of the Umbrellas to ensure they are deducting and remitting the correct levels of PAYE and NIC from your payments.

National Insurance

Deductions in respect of Class 1 National Insurance will normally also be made by Hallam Medical on your behalf (if earnings exceed the National Insurance threshold).

If you are entitled to pay reduced National Insurance or are exempt from paying contributions, you must produce the appropriate certificate, before undertaking any assignments.

National Insurance Benefits

If you have made sufficient NI contributions, you may be eligible for certain Social Security Benefits:

Statutory Maternity Pay

In certain circumstances, pregnant Temporary Workers may be eligible for Statutory Maternity Pay through Hallam Medical or Maternity Allowance from their local Social Security Office.

If you are pregnant, you must:

- Inform the Hallam Medical Management team that you are pregnant
- Obtain your MATB1 from your Doctor or Midwife and pass this to the office
- Keep the office informed with any changes in the type of assignments you can or cannot do
- Obtain from your local Social Security Office leaflets FB8 'Babies & Benefits' and NI 17A 'A Guide to Maternity Benefits'
- Hallam Medical will pass your MATB1 form to our payroll department who will be able to determine whether SMP is payable through the Company
- Temporary workers who are considered to be ineligible will be given a completed SMP1 form, which together with their MAT B1 form should be forwarded to their local Social Security Office, with a request to consider the payment of Maternity Allowance.

Statutory Sick Pay (SSP)/Sickness Benefit

As an Agency Worker, working on a PAYE basis, you may be eligible for Statutory Sick Pay as long as relevant statutory criteria has been met. Please refer to your Terms of Engagement) Contract for Services) for further information. If you do have an assignment booked and you are unable to complete the assignment, please contact the office as soon as possible to report this so that a replacement worker can be supplied.

Pensions

Agency Workers paid under Hallam Medical's PAYE scheme are auto enrolled into the company provided pension scheme, unless you specifically request not to be. This currently is operated by NOW Pensions and The People's Pension. The current contribution level is 1% Agency and 1% matched Agency Worker. The Agency Worker can contribute a larger amount, which will not be matched by the agency.

Contribution levels are dictated by statute and will be adjusted accordingly.

Every 3 years Hallam Medical is obliged to re Auto-Enrol all staff and Agency Workers into the scheme. However, at all times the Agency Worker may opt out of the scheme.

Please note that the scheme is completely independent of Hallam Medical. The role of the company is solely to collect and remit contributions to the provider.

Other Benefits

You may be eligible for other benefits, details of which may be obtained from your local Social Security office. Queries with respect to payments should be addressed to the payroll department.

2.12 Holiday Entitlement

The holiday year runs from 1st April to 31st March.

Under the Working Time Regulations 1998 (as amended) relating to PAYE, workers (including part-timers and most agency and freelance workers) have the right to:

- 28 Day's paid leave each year (including statutory Bank Holidays)

If a worker starts work part way through the holiday year, their holiday entitlement will be based on the period from that date until the leave year ends and pro-rata to the full year entitlement.

How to Claim Holiday Pay

The holiday year runs from 1st April to 31st March.

Holiday pay is calculated at a rate of 12.07% in line with the statutory requirement to provide 5.6 weeks (or 28 days) holiday per annum (including bank holidays). 5.6 weeks as a percentage of total possible work weeks per annum is 12.07% (i.e. 5.6/46.4 weeks). This is the recognised industry standard for calculating holiday pay.

Temporary Workers must put holiday/holiday pay requests in writing to the Hallam Medical Payroll team and give a minimum of 1 weeks' notice. You may take holiday at any time during the year which will be paid on the next pay date after your period of leave.

All holiday hours must be taken by 31st March any hours not claimed by this date will be lost.

It is each Temporary Workers responsibility to claim their holiday pay, and Hallam Medical will not send reminders, nor will Hallam Medical be responsible for loss of holiday payments.

2.13 Agency Worker Regulations

From Day 1 of an Assignment, you are Entitled to:

- Access to same facilities as an employee such as staff canteens, food and drinks machines, toilets, showers, childcare, workplace crèche, car parking, or transport services
- To be informed about any job vacancies, although you may not always be eligible to apply for them
- After 12 Weeks on an Assignment you are Entitled to:
 - Equal pay* as a permanent employee doing the same job
 - Equal treatment with permanent employees in regard to rest breaks, holiday entitlement*, and working time
 - Paid time off for an ante-natal appointment

This depends on your employment status, but all agency workers are entitled to the following:

- National Minimum Wage or National Living Wage
- Adherence to the National Minimum Wage will be monitored by the payroll team. Any deviation from National Minimum Wage will be escalated immediately to Hallam Medical CEO and Directors.
- Protection from unlawful deductions from wages
- Notice Period - As this is a temporary assignment, the clinician or the client may terminate the placement by providing appropriate notice.
- Statutory Sick Pay
- Statutory Maternity and Paternity Pay, Shared Parental Pay and Adoption Pay
- Statutory holiday entitlement – 5.6 weeks paid holiday a year
- Minimum rest breaks
- Maximum working time - 48 average hours a week, or you can opt out of this if you choose
- To be automatically enrolled onto a pension if you meet the required criteria
- Protection from unlawful discrimination under the Equality Act 2010
- Protection for whistleblowing
- Health and safety protections
- Right not to be charged direct or indirect fees for finding a job
- Protections from being restricted from working elsewhere

For more information about how the Agency Worker Regulations (AWR) might affect your working assignments, please contact your Hallam Medical consultant on 0333 800 0395 for more information. (* for the purposes of calculation AWR pay and holiday entitlement can be rolled in to one figure)

2.14 Removal from Hallam Medical's Register

Temporary Workers may be removed from the company's register in the following circumstances:

- Where a Temporary Workers conduct or standard of work has seriously fallen below the level required by Hallam Medical, or the Code of Professional Conduct.
- If it is believed that a Temporary Worker has acted in an unprofessional manner, Hallam Medical reserves the right to remove you from your assignment and not re-assign until the matter has been investigated and resolved.
- If the Temporary Worker has a reason to be put onto the Group Clinical Alert Register

- If a company has been alerted by NMC, HCPC or any other regulatory bodies with regard to practicing healthcare professionals.

Examples of such conduct:

- Failure to attend an assignment having accepted an engagement, or repeated lateness.
- Failure to provide care in a fashion consistent with the professional code of conduct or in a caring and appropriate manner, e.g. sleeping on duty, non-adherence to clinical instruction etc.
- Failure to carry out reasonable instructions of the Client.
- Breach of trust involving Hallam Medical or the Client.
- Disclosure of confidential information to a third party relating to either a Patient, a Client or Hallam Medical.
- Misconduct, affecting either the Client or Hallam Medical. This includes being under the influence of alcohol or any substance that will adversely affect your performance, theft, abusive or violent behaviour, harassment, criminal conviction etc.

You are advised to read both your copy of Hallam Medical's Terms of Engagement and Temporary Workers handbook in full, to ensure you fully understand what is required of you.

Temporary Workers cannot work if their health or physical ability impedes them from carrying out their duties effectively. Whilst Temporary Workers will not be required to relinquish their work at the normal retirement age of 65, they must, like any other Temporary Worker, be in good physical and mental health. You may be requested to undertake a medical examination/assessment, at your own expense, to confirm your fitness for work.

Suspension or Removal from Register Policy

It is the duty of every qualified nurse to inform us if they are either under investigation by the NMC, suspended from the NMC register or removed from the NMC register.

This also applies to receiving a caution from the NMC.

It is the duty of every state registered Paramedic to inform us if they are either under investigation by the HPC, suspended from the HPC register or removed from the HPC register.

This also applies to receiving a caution from the HPC.

SECTION 3 - HEALTH AND SAFETY

3.1 Health and Safety and You

Since the Health & Safety at Work Act was introduced in 1974, a number of regulations have been added providing a comprehensive framework of health and safety legislation. These regulations provide both employers and temporary agency workers with detailed guidance about their responsibilities towards providing and maintaining a safe and healthy place of work.

The law in general is aimed at employers. It is they who are most able to influence whether a place of work is safe. However, the law applies equally to the Temporary Worker. Therefore, all Temporary

Workers have a general duty to ensure that their work activities do not endanger themselves or others. This duty applies irrespective of where you are undertaking work and includes home care.

Equally, the patient/establishment or owner of the house has a general duty to ensure that the work environment, which includes the home, is itself free from any dangers to health or safety.

Hallam Medical does not have any legal responsibility for your health and safety whilst you undertake an assignment through them. However, if you are a Paramedic or Registered Nurse, the NMC/HPC Codes of Practice provide its members with advice and guidance to ensure that you are fully aware of your responsibilities regarding health and safety. You are then in a position to establish and maintain safe systems of work and a safe working environment.

It is imperative that you familiarise yourself with the policies and procedures of the establishment within which you are working, particularly those relating to fire and other emergencies.

Hallam Medical will remind all Temporary Workers that the health and safety policy is unlikely to succeed without their active involvement and participation. Hallam Medical will notify you of any specific hazards relating to your place of work which have been notified to us by the client.

3.2 Identification and Reporting Hazards

All Temporary Workers need to look out for hazards at the establishment where they have accepted an assignment and report back to the Hallam Medical Management team, via the complaint's procedure, anything they feel may present a risk to anyone's health and safety.

A Risk Assessment Form can be obtained from the Hallam Medical Management team.

3.3 Accident Reporting

You are responsible for ensuring that all incidents or accidents that relate to the provision, control, and maintenance of a safe and healthy workplace are reported to the Client and the Hallam Medical Management team (and/or to the Local Authority in the case of serious accidents and/or dangerous occurrences).

It is also important that the internal reporting procedure of the establishment is carried out e.g. recording the accident in the accident report book.

In addition to internal reporting through the accident report book, the establishment must ensure the following be reported to the appropriate enforcing authority, i.e. the local Environmental Health Officer.

- Fatal accidents.
- Major injury accidents/conditions.
- Dangerous occurrences.
- Accidents causing more than three days' incapacity for work.
- Certain work-related diseases.
- Certain gas incidents.

THE TEMPORARY WORKER SHOULD REPORT THE ABOVE IMMEDIATELY BY TELEPHONE TO THE HALLAM MEDICAL MANAGEMENT TEAM AND A PERSON IN CHARGE OF THE ESTABLISHMENT BEING WORKED IN

3.4 Communicable Diseases

Assessing and treating patients involves the risk of exposure to communicable diseases (e.g. HIV, Aids, Hepatitis B, and MRSA). It is therefore important to be familiar with the measures available to minimise this risk. It is also advisable to speak to your General Practitioner regarding immunisations, if appropriate.

Temporary Workers with Communicable Diseases

Hallam Medical recognises that Temporary Workers with communicable diseases may still be capable of fulfilling assignments. The over-riding principle to be considered is the safety and wellbeing of the patient and colleagues, even where the level of risk is thought to be low. This principle should be applied by you when deciding whether to always make yourself available for work and during assignments, as well as by Hallam Medical staff considering your suitability for specific assignments.

Application to become a Temporary Worker for Hallam Medical requires the declaration of any communicable diseases. Good practice requires that you also disclose any subsequent contraction of, or exposure to, such diseases. Having an infectious disease will not be grounds for refusal or termination of temporary work but may make you temporarily unsuitable for certain assignments through the Hallam Medical or restrict the types of work to which you may be assigned.

Both you and Hallam Medical's Management team should give due consideration to ease of transmission and of the type of work that is to be undertaken. For example, care of patients who are particularly frail or suffer from lowered immunity, should not be undertaken by Temporary Workers suffering from colds, influenza, or other minor ailments. Temporary Workers with more serious conditions, including AIDS, might be suitable for a wide variety of assignments, e.g. where there is no requirement for invasive practices. In certain circumstances, such conditions, whether current or historical, may make you more suitable for a particular assignment.

In all assignments, it is your individual responsibility to take adequate precautions to protect patients from communicable diseases. If you are unsure of the appropriate measures to be taken you should discuss the assignment with one of Hallam Medical's Management team, who will advise you or suggest suitable sources of advice.

In order that Clients may make a judgement concerning the Temporary Worker to be assigned, Hallam Medical may consider it appropriate to inform them regarding communicable diseases and you may be asked for consent to disclose. Since we will not assign Temporary Workers who constitute a risk to patients, we will also make our judgement clear regarding the significance of known risks. In accordance with Company policy, all information regarding Temporary Workers will be treated as confidential and no disclosure will occur without your prior permission.

Patients with Communicable Diseases

Hallam Medical recognises the right of all patients to receive appropriate care, regardless of the condition or circumstances, which give rise to their need for care. Hallam Medical is committed to maintaining as far as possible the independence, dignity, privacy and confidentiality of patients.

Hallam Medical expects Clients to disclose any patients with known communicable diseases to which there is a risk of exposure and to give consent, where appropriate, for GPs, District Nurses and other

health professionals to disclose and discuss such information. Hallam Medical will brief you on known conditions relating specific patients, to enable you to provide appropriate care, but it should be stressed that best practice for infection-control should be followed in all cases, not just those where a specific risk is known. If the existence of such a risk becomes apparent retrospectively, Clients are expected to inform Hallam Medical as soon as possible.

It is the responsibility of the Temporary Worker to take adequate precautions to protect themselves from communicable diseases. If you are unsure of the appropriate steps to be taken, you should discuss the assignment with Hallam Medical's Management team or the PCT Manager or equivalent. All information regarding a patient's condition or circumstances will be treated as confidential.

To avoid risks of cross infection, it is essential that all incidents that may result in the spreading of a disease be reported. Incidents in a hospital, nursing home, or other institutional setting should be reported and recorded in accordance with the policies of that institution. All incidents should also be reported to Hallam Medical's Management team who will give advice on any appropriate further action.

Following an incident of exposure to a communicable disease, it will be assumed that you have been infected and, until evidence is provided that infection has not occurred, the provisions of this policy relating to Temporary Workers with communicable diseases will apply.

3.5 Reporting of injuries, Diseases and Dangerous Occurrences (RIDDOR)

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) places a legal requirement on employers, self-employed workers and people in control of premises to report work related deaths, major injuries, injuries that result in more than three days off work, work related diseases and dangerous occurrences (near miss accidents) to the Health and Safety Executive.

If during your work you identify a risk to the health, safety and welfare of your own personal safety, and/or that of your colleagues, patients or service users, you have a duty to report this to your consultant.

Please refer to your Health and Safety training guidelines for more information about RIDDOR and the role you play.

3.6 Control of Substances Hazardous to Health (COSHH)

Control of Substances Hazardous to Health Regulations 1999: COSHH requires employers to control exposures to hazardous substances to protect both employees and others who may be exposed from work activities.

All Agency Workers must adhere to the client's COSHH requirements, at their workplace.

Please refer to your Health and Safety training guidelines for more information about COSHH and the role you play.

3.7 Emergency Procedures

An emergency situation is anything that affects you or the client which needs urgent action to resolve it. Examples include:

- Serious accidents
- Sudden onset of illness
- Sudden death
- Discovery of intruders
- Being unable to gain entry to a clients' home/room

In these situations, it is important to remain calm and act in a professional manner. The following emergency contact numbers are available in these scenarios, please also call your consultant whom will be able to advise and offer you support.

Emergency contact numbers

- Emergency Services – 999
- Non-Emergency Health Advice – 111
- Non-Emergency Police - 101

3.8 Lone Working

Lone working is a risk that applies to Agency Workers working alone in a healthcare setting or in patients' own homes in fixed premises.

Lone working, therefore, is a workplace risk for which Agency Workers share responsibility.

In many ways keeping safe when working alone is very similar to remaining safe in any other area of society or social interaction. Agency Workers should always air on the side of caution. Be aware of lone working guidance/policy and always adhere to this best practice guidance.

Common sense should always apply.

- Ensure that Hallam Medical is aware of any serious medical condition you may have, e.g. diabetes
- Ensure that your mobile phone is always charged and switched on
- Programme emergency numbers into speed dial
- Always put your safety before all other consideration.
- Wear appropriate clothes for professional visits including shoes and clothes that do not hinder movement or ability to run in an emergency.
- Wear bright visible clothes to be seen on roads and in dark areas, particularly in the dark. Dress down if appropriate, e.g. in high crime risk areas.
- Keep your keys and a small amount of money separate from your work bag. Always carry and show your identity badge as appropriate
- Consider wearing suitable neck attire – trailing necklaces or ties can spread infection and can also be easily grabbed
- Assess the situation on approach and abandon or postpone a visit if there is anything at all you are uncomfortable with
- When in a private house or care home always be aware of the exit routes and keep them easily accessible in case of emergency
- Ensure heavy equipment cases have handles and wheels (or use a trolley)

- Never lift or move a patient unless trained to do so (always seek guidance and assistance where necessary)
- Where possible have a second person present, e.g. your assistant or a carer
- Ensure your mobile phone has speed dial set for an emergency. Keep it switched on and close to hand, i.e. do not leave in the car, on tables or in your bag
- Ask in advance for pet dogs (or other animals) to be restrained if necessary
- If in any doubt at any point, leave at once (“I just need to pop back to base and fetch a [XXX]”)

SECTION 4 – SAFEGUARDING & ABUSE

4.1 Safeguarding Children & Young People

Safeguarding Children and Young People: Roles and Competencies for Health Care Staff has been published by the Royal College of Paediatrics and Child Health on behalf of a number of contributing organisations to clarify the competencies required by all health staff to safeguard children and supersedes the 2006 version.

Our Policies & Procedures for all Hallam Medical Temporary Agency Workers

To protect children and young people from harm, all health staff must have the competences to recognise child maltreatment and to take effective action as appropriate to their role. They must also clearly understand their responsibilities and should be supported by their employing organisation to fulfil their duties.

Following every serious case of child abuse or neglect there is considerable consternation that greater progress has not been made to prevent such occurrences. Reviews and enquiries across the UK, over the last three decades, often identify the same issues – among them, poor communication and information sharing between professionals and agencies, inadequate training and support for staff and a failure to listen to children.

All staff who come into contact with children and young people have a responsibility to safeguard and promote their welfare and should know what to do if they have any concerns about child protection. This responsibility also applies to staff working primarily with adults who have dependent children that may be at risk because of their parent/carer’s health or behaviour. To fulfil these responsibilities, all health staff should have access to appropriate safeguarding training, learning opportunities, and support to facilitate their understanding of the clinical aspects of child welfare and information sharing.

Six levels of staffing have been identified; level one applies to all non-clinical staff working in health care settings of contact with children and young people and/or parents/carers. Level two is the minimum level required for clinical staff who have some degree of contact with children, young people and/or their parents/carers and who could potentially contribute to assessing, planning, intervening and evaluating the needs of a child or young person. Level three is for clinical staff working directly with and treating children and young people and/or parents/carers. Levels 4 to 6 are related to specific roles rather than staff categories.

As a result, you should, as a minimum:

- Understand what constitutes child abuse
- Know about the range of physical, emotional, neglect and sexual abuse

- Be able to recognise the signs of child abuse
- Know what to do when you are concerned that a child is being abused
- Be able to seek advice and report concerns, ensuring that they are listened to
- Know about local policies/procedures
- Understand the importance of sharing information, how it can help and the dangers of not sharing information
- Know what to do if they experience barriers to referring a child/family

As part of your registration with Hallam Medical, your statutory & mandatory training will include a Safeguarding Children Level 2 module which will cover these areas, and an annual subsequent refresher training will also be provided. If you have undertaken training previously on this issue, please forward the certificate to Hallam Medical, we will accept courses that are Skills for Health CSFT accredited. In addition, if your position role is identified as requiring Level 3 Safeguarding Training SOCA, Hallam Medical will arrange this for you at no cost to you.

4.2 Recognition and Response to Suspected Abuse

Definition: Vulnerable Adult

A vulnerable adult is a person who “is or may be in need of community care services by reason of mental or other disability, age or illness, and who is or may be unable to take care of themselves, or to protect themselves against significant harm or exploitation”.

Definition: Abuse

“Abuse is a violation of an individual’s human and civil right by another person or persons”

Types of Abuse:

Abuse may be:

- Physical, including hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions.
- Sexual abuse, including rape and sexual assault or sexual acts without consent.
- Psychological abuse, including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, intimidation, coercion, verbal or racial abuse, isolation or withdrawal from services or supportive networks.
- Financial or material abuse, including theft, fraud, exploitation, pressure in connection with wills, property or inheritance transactions, or the misuse or misappropriation of property, possessions or benefits.
- Neglect and acts of omission, including ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.
- Multiple forms of abuse may occur in an ongoing relationship or an abusive service setting to one person, or to more than one person at a time, making it important to look beyond single incidents or breaches in standards, to underlying dynamics and patterns of harm.

Factors to consider when assessing and reporting abuse

It is important to approach reports or allegations of abuse with an open mind about the appropriateness of intervention. Factors affecting the assessment of seriousness are:

- The vulnerability of the adult
- The extent of the abuse
- The length of time it has been occurring
- The impact on the individual
- The risk of repeated or escalating acts

Who might abuse?

Abuse of vulnerable adults may be perpetrated by a wide range of people including relatives and family members, professional staff, paid Care Workers, volunteers, other Clients, neighbours, friends and relatives.

In what settings?

Abuse can take place anywhere. It may occur when a vulnerable adult lives alone, or with a relative, it may also occur within nursing, residential or day care settings, hospitals, custodial settings and other place likely to be assumed safe, or in public areas.

Key Issues in Relation to Intervention

Authorities have a responsibility, in partnership with other agencies, towards vulnerable individuals. This will usually involve an assessment of their needs and steps taken to empower them and protect them from further harm.

Consideration should be given to the following:

- Does the vulnerable adult appreciate and understand the nature and consequences of any risk they may be subject to and do they willingly accept such risk?
- Is the vulnerable adult able to make their own decisions and choices if they wish to do so?
- Did the person subject to abuse consent willingly?
- Does the person subject to abuse have the capacity for self-determination, the capacity to understand to what they are consenting, or alternatively the capacity to refuse?

Procedure for Dealing with Abuse

In determining what action to take, account should be taken of the rights of all people to make choices and take risks, also considering their capacity to make decisions about arrangements for investigating or managing the abusive situation.

All cases of suspected abuse should be reported to the Hallam Medical Management team, who in conjunction with the relevant department and other appropriate agencies, for example the Adult Protection Team, will instigate an investigation to:

- Establish matters of fact
- Assess the needs of the vulnerable adult for protection, support & redress.
- Decide what sanctions are necessary with regard to the perpetrator

- Decide what action should be taken if the service or its management have been culpable, ineffective or negligent.

A properly co-ordinated joint investigation will achieve more than a series of separate investigations; it will ensure that evidence is shared. Repeated interviewing is avoided and will cause less distress for the person who may have suffered abuse.

When reporting an incidence of suspected abuse, you must provide the following details:

- Name and address of the vulnerable individual
- Information about the individual such as age, disability, environment, gender, ethnicity and living arrangements.
- Whether or not the person is already known to any agency, particularly social services, or whether it is a new referral.
- Information about the suspected abuse perpetrator
- Type of suspected abuse
- Setting in which suspected abuse took place.
- Time and frequency of suspected abuse
- Whether or not there is imminent danger to the victim

IF THERE IS IMMEDIATE DANGER OR THE PERSON NEEDS MEDICAL HELP, CONTACT THE POLICE OR CALL FOR AN AMBULANCE

Allegations of abuse will be taken through the following steps:

- Reporting to a single referral point
- Recording the precise factual details of the alleged abuse.
- Enquiry and verification to establish the substance of the initial reports.
- Initial co-ordination involving representatives of all agencies which might have a role in a subsequent investigation
- Investigation
- Joint discussion, decision and case planning
- Implementation of agreed actions
- Monitoring and review

Clients and Temporary Workers should be informed that complaints would be dealt with independently, treated seriously and that they will be informed of the outcome. Presumption of innocence should clearly underpin all dealings and proceedings regarding those against whom a complaint or allegation has been made, until there is evidence to the contrary and it is proved otherwise.

Complaints involving a Temporary Worker will be dealt with by the Hallam Medical Senior Management team in conjunction with the Client and appropriate authorities. An investigatory meeting may take place where the Temporary Worker will be allowed to be represented by an advocate of their choice.

Alleged perpetrators who are also vulnerable adults themselves have the right to the support of an appropriate adult whilst, they are being questioned by the Police, under the Police and Criminal Evidence Act.

Hallam Medical has a list of the Adult Protection Teams within each area of work. This is available to any practitioner on request.

Procedure in relation to crime or suspected crime

Sexual, physical or psychological abuse, financial exploitation, theft or fraud constitute criminal offences and should be reported to the police. The police have a duty to the victim to assist, support and obtain evidence of alleged abuse and a responsibility to investigate reported crimes as well as interview any identified suspects.

Confidentiality

In order to protect vulnerable adults, in some circumstances it will be necessary to share what might normally be regarded as confidential information.

General Data Protection Regulations

In certain circumstances, it will be necessary to exchange or disclose personal information, which must be done in accordance with data protection principles, as laid down in the General Data Protection Regulations 2018.

When considering whether or not to share or disclose information the following guidance principles should be followed:

- What is the purpose of information sharing?
- Is it necessary to share personal information to fulfil that purpose?
- Do the parties have the power to disclose personal information for the purpose?
- How much personal information will be shared to achieve the objectives?
- Should the consent of the individual be sought before disclosure is made?
- What action is appropriate if the consent of the individual is not sought, or is sought but withheld?

SECTION 5 - WORKING PRACTICES TO ASSIST THE TEMPORARY WORKER

5.1 Independence/Privacy/Dignity

Independence

All patients should be encouraged and enabled to live as independently as possible, emphasis should be placed on encouraging individuals to do as much as they can for themselves. They should also be encouraged to make decisions about their daily lives and exercise choice over the way their care is delivered.

The Temporary Worker should recognise the right of individuals to be left alone and free from intrusion or public attention into their affairs.

Please remember that you are responsible for up-holding confidential matters of the Client.

Dignity

All patients must be treated with respect regardless of their circumstances and should be seen as unique individuals.

Rights

Your role, as a Temporary Worker, includes safeguarding the rights and freedom of patients to make informed decisions and choices within their capability.

5.2 Administration of Medicines

Medication should only be administered by a Registered Professional i.e. Nurse or by an appropriately trained Agency Worker. If you have not had medication training do not take responsibility for a patient's medication, it will put both yourself and the patient at risk.

Administration of Medication

When administering medication, Agency Workers should act within clients' guidelines and protocols.

Mistakes should not be covered with correction fluid or scribbled out so as illegible. One line should be scored through the mistake and your initials and date written next to it.

Records should not include abbreviations, jargon, meaningless phrases, irrelevant speculations and offensive subject statements. Once medication has been given this must be recorded and signed for. Please bear in mind that full records are essential should any questions be raised about the care and standards of care delivered.

Should a client refuse medication, gently persuade them to take it, if the client continues to refuse report this to a supervising manager or your consultant.

Occasionally Agency Workers may be asked by service users to buy patented medication for them, e.g. cold cures. Agency Workers are not permitted to do so as certain products could interact with prescribed drugs.

Prescribers & Patient Group Directive (PGD)

All Temporary Workers are personally accountable for their own professional practice and must adhere to their Professional Code of Conduct and the establishment's regulations regarding the administration of medicines via patient group directives (PGD) or prescribing.

All Temporary Workers will adhere to the individual authority's policies and procedures when administering by PGD's or independent prescribing. The Temporary Worker will familiarise themselves with the local establishments PGD's and sign any relevant documentation prior to administering any medications.

Disposal of Unwanted Medication

Please refer to the client's policy on the disposal of unwanted or surplus medication.

Reporting Drug Errors

If you make an error, identify any, or have concerns over a patient or service user or their medication, you must report it immediately to your line manager at your place of work and, where appropriate to the medical practitioner or prescriber.

If you make a drug error or if you have any concerns regarding any aspect of drug administration, you should also inform Hallam Medical as soon as possible.

5.3 Handling Violence and Aggression

What is aggression?

‘Severely challenging behaviour refers to behaviour of such an intensity, frequency or duration that the physical safety of the person or others is likely to be placed in serious jeopardy, or behaviour which is likely to seriously limit or delay access to, and use of, ordinary community facilities’ (Report HMSO 1993) from Emmerson et al (1987)

What help will the Temporary Worker receive?

The management of challenging behaviour requires the Temporary Worker to think carefully about the way they work with someone and be clear about what has been agreed and why.

Hallam Medical will help you by:

- Violence and Aggression management training will be supplied by Hallam Medical if the Temporary Worker has not been given it during their substantive posts within the NHS.
- Temporary Workers will be appraised of all Client’s policies and procedures for handling and reporting challenging behaviour.
- Counselling or debriefs will be made available if a Temporary Worker is subjected to violence or aggression and requests this service from Hallam Medical.

Dos and Don’ts – Temporary Worker instructions

Although prevention is the best course of action, this will not always be effective or possible. If the Temporary Worker is presented with a patient whose behaviour is challenging, the following actions may help alleviate the situation.

What not to do:

- Do not be confrontational in your attitude, appearance or by raising your voice.
- Do not take personal offence to an accusation or assault
- Do not attempt to initiate any physical contact with the person as this may be misunderstood or resented.
- Do not approach the person from behind or too quickly
- Do not corner or crowd the person, as this will increase feelings of alarm or threat
- Do not alarm or crowd them by calling for assistance from other workers.
- Do not provoke by teasing or ridiculing
- Do not use restraints
- Do not show fear, alarm or anxiety or retaliate with violence

What to do:

- If there is an immediate physical threat to your safety, withdraw if possible and call for assistance.
- If there is no immediate physical threat to your safety, do the minimum to contain the situation
- Stay calm
- Respect the person's personal space
- Ask others to withdraw from the immediate incident area.
- Provide reassurance and encourage them to talk about their feelings.
- Ask the person what is troubling them, to identify/clarify the possible cause of behaviour.
- Listen to complaints and be flexible and accepting in your reply
- Provide alternatives to the behaviour or divert their attention.
- Check that the environment is not causing the problem
- See the person as an individual, with individual needs and not problems
- If there is an immediate physical threat to you, and you cannot withdraw, or if the person is likely to harm themselves or another person, the minimum necessary restraint or control may be used as a last resort.

Records to be kept, who needs to be informed and when:

- If you have been involved in an instance of violence or aggression, you must report this immediately to the PCT manager or equivalent who will liaise with Hallam Medical.
- Complete an incident report and give copies to the PCT manager and Hallam Medical. These forms are available from Hallam Medical's office.
- Immediately following the incident, the following should be noted in writing for your reference:
 - Name of Client
 - Location
 - Name of any other person involved (if any)
 - Date & time of the incident
- What was the behaviour, e.g., physical, verbal, self-harm, harm to others, property destruction?
- How long did the incident last?
- What were the signs or circumstances, which lead to this behaviour?
- What was the result of the behaviour?
- What action was taken?
- Was physical restraint used?
- Has the local PCT Centre Manager been informed? When?
- Have any injuries been sustained by either the patient or the temporary worker?

5.4 Working in the Patient's Home

Hallam Medical may offer you district nursing assignments that involve you working in an individual's own home. Each individual within their own home will have a Care Plan which you must refer to and make yourself familiar with on each occasion to said individual's home. You must read and understand this information as it provides you with guidelines on what care the individual requires, instructions on how to move them (if appropriate), any medication required and any hazards that you need to be

aware of within their home. If at any point you are unsure about the content of the care plan you should immediately call your supervisor on shift, which will normally be your NHS trust representative on assignment.

At the end of each visit ensure that the log sheet in the individual's care plan is completed including: -

- Time you arrived and left with your initials
- The tasks that you performed at that visit
- Any medication given
- Any changes in the individual's condition
- Information important to colleagues or others involved in the care package regarding any accidents that have occurred to the individual or yourself*

**If any accidents have occurred to the individual or yourself fill in the accident report and the log sheet. Accidents or incidents must be reported to the shift supervisor immediately.*

Follow-on sheets are included in the folder, and more can be obtained from the supervisor. Ensure that the sheet number is entered in the box at the top left-hand corner.

These records should be written objectively and state what you have actually done.

Never assume or write what you think about the individual. These are official documents, which could be used in a court of law. Ensure they are filled in accurately with a black pen. You should only ever record what you would wish an individual – they have a right to access their care records.

General Conduct

Patients, service users 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 that they may have. Patients and service users should be addressed using their preferred form of address. Care and support should be offered in the least intrusive manner possible.

The independence of individuals 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 individual's best interests.

Attending a Patient's Home

- You should announce your identity clearly on arrival and not enter an individual's home without invitation
- Where possible, the individual should be allowed to answer the door themselves
- Always ensure your Hallam Medical ID badge is worn visibly and encourage them to check it on each visit
- Upon arrival you should check whether they have any specific needs for this visit
- Remember you are a guest in their home, you should treat their property and possessions with respect

Leaving a Patient's Home

- If another nurse or carer is due to be attending the individual's home, do not leave until they have arrived. If they are late, contact the Hallam Medical Head Office or your Trust representative immediately
- Ensure the individual is aware you are leaving
- Check that they are comfortable and have everything they need within easy reach
- Check that potential sources of danger are not accessible
- Make sure that they know which windows, if any have been left open
- Ensure appliances that are no longer in use are switched off
- Please take full care in securing the home when leaving including, where appropriate, doors and windows and the safeguarding of keys

Carrying out Assignments

- Medication should be stored in a safe place, known and accessible to the individual or to relatives and other carers where appropriate
- You should not make use of a patient'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 the Hallam Medical Head Office
- All visits, incidents, observations, care and, where relevant, financial transactions should be logged on records kept securely in the patient's home. Records are kept for one month, or until the assignment is over whichever is the longer and are made available to the individual, their relatives and representatives
- If you are unable to attend any specific appointment, please let us know as soon as possible

5.5 Gifts and Gratuities

Care is provided in return for agreed fees. Under no circumstances should the Temporary Worker seek any other money, gifts, favours, or rewards for services rendered, either for you or for any third party.

It is not uncommon for a patient, their friend or relative, to offer a voluntary gift as a mark of appreciation for care they have received. Hallam Medical believes that giving and receiving such gifts is not generally appropriate to the provision of professional care. Wherever possible, any offer of a gift should be politely refused with an explanation that acceptance would be against Company policy.

If refusal is likely to cause serious offence to your client, the gift may be accepted under the following rules:

- All offers of gifts should be disclosed to the Hallam Medical Management team.
- Gifts of money may only be accepted with the stated intention that it will be passed in full to a charitable organisation nominated by Hallam Medical.
- Gifts of consumables (e.g. flowers, chocolates), if unlikely to cause offence, should be left in the patient's possession, to be shared and enjoyed by the patient and their family.
- Other gifts should be refused with the suggestion of an equivalent donation to charity.

- The Hallam Medical Management team will acknowledge all gifts in writing.

FAILURE TO COMPLY WITH THIS POLICY MAY RESULT IN REMOVAL OF THE TEMPORARY WORKER FROM HALLAM MEDICAL'S REGISTER

5.6 Wills and Bequests

Under no circumstances should you seek, invite or accept an offer of any bequest or consideration in a patient's will, either for you or any third party. Unsolicited offers should be disclosed to the Hallam Medical Management team who will discuss the matter with the relevant parties.

If a bequest is made to you without your prior knowledge, it should, again be disclosed to the Hallam Medical Management team. Following discussion with you and the executors of the patient's will, if the Management team is satisfied that this policy has been complied with, the bequest may be accepted. If the intention to bequeath is known to the Temporary Worker or the Hallam Medical Management team, it is Company policy to utilise that money, either for the benefit of the Temporary Workers e.g. training courses, or for the good of the local community.

Those providing care to vulnerable people may acquire an unusually strong position of influence over them. To avoid accusations of improper conduct, you should politely refuse to advise your patient on any aspects of making a will.

You should also avoid acting as a witness to a signature of a will, as doing so may make the will invalid. Patients should be referred to a solicitor or other independent adviser.

FAILURE TO COMPLY WITH THIS POLICY MAY RESULT IN REMOVAL OF THE TEMPORARY WORKER FROM HALLAM MEDICAL'S REGISTER

SECTION 6 – DATA PROTECTION & RECORD KEEPING

6.1 General Data Protection Regulations

Hallam Medical is a "data controller" for the purposes of the General Data Protection Regulations 2018 (the "Act"). This is because Hallam Medical holds and uses both "personal data" and "sensitive personal data" about its Temporary Workers, Clients and other individuals.

Hallam Medical processes data, including your records and Client records.

The information contained in Temporary Workers records is taken from your application form, as well as DBS Checks, references and Terms and Conditions. There may be occasions when your records could be disclosed to Clients e.g. NHS Trusts and Primary Care Providers.

Data Protection Officer

In order to ensure that Hallam Medical complies with its obligations under the Act, it has appointed a Data Protection Officer (DPO). You should refer to the DPO if you are in any doubt about any of Hallam Medical's obligations under the Act.

Consent to Process your Information

Hallam Medical will rely on legitimate interest and your consent to process the information which we collect from you at the beginning of your registration with us. There are a number of basis for gaining

consent to process your information, these are outlined in our GDPR Privacy Notice that is also available from our website to download.

Your Rights under GDPR

Under the GDPR you have a number of rights as a Data Subject regarding the Personal Data that Hallam Medical holds about you, how that data is processed and how the data is disclosed to third parties.

- Subject Access Requests – you have the right to ask for a copy of the information about you that we hold
- Withdrawal of Consent – you have the right to withdraw your consent at any time
- Right to be informed – you have the right to be informed about how your data is processed
- Right to Data Portability – under this right you will be able to receive and transmit any data you have previously provided to Hallam Medical
- Right to Object – you have the right to object to the processing of your personal data
- Rights in relation to automated decision making and profiling – you have the right not to be subjected to a decision based purely on automated processing
- Rights to Rectification – you have the right to request that Hallam Medical rectifies any inaccurate data or incomplete data.
- Right to Erasure – under certain conditions you have the right to be forgotten and have your personal data erased.

All requests made to Hallam Medical under the GDPR must be made in writing by email to a designated GDPR address: gdp@hallammedical.com

Full details of your rights under the GDPR, about the information we hold on you and how this is processed, including how we use this information can be found on our GDPR Privacy Notice which is available from our website

6.2 Record Keeping

Maintaining records is an essential and integral part of providing care.

It is the Temporary Workers responsibility to ensure that patient records are updated before the completion of each shift.

Registered Nurses

All registered nurses are personally accountable for their own professional practice and must adhere to the NMC Professional Code of Conduct.

The Code of Conduct can be electronically obtained via www.nmc-uk.org

Registered Paramedics

All registered Paramedics are personally accountable for their own professional practice and must adhere to the HPC Professional Code of Conduct.

The code of conduct can be electronically obtained via www.hpc-uk.org

6.3 Confidentiality

All temporary staff whilst undertaking assignments will at some point encounter information, which is of a confidential nature. Patient details are a matter of complete confidentiality and must not be disclosed to any third party. As an example, even chatting to a patient during your visit about whom you are going to see next, is a serious breach of confidentiality.

Each Client has an absolute right to confidentiality and privacy regarding the services they are receiving in accordance with Data Protection Act 2018 and Human Rights Act 1999 and your agreement with Hallam Medical.

Any concerns you may have regarding confidentiality can be discussed with the Hallam Medical Management team.

6.4 Caldicott Principles

This review was commissioned by the Chief Medical Officer of England owing to increasing concern about the ways in which patient information is used in the NHS in England and Wales and the need to ensure that confidentiality is not undermined.

The following principles have been identified.

Principle - Justify the purpose(s)

Every proposed use or transfer of patient-identifiable information within or from an organisation should be clearly defined and scrutinised, with continuing uses regularly reviewed by an appropriate guardian.

Principle 2- Don't use patient-identifiable information unless it is absolutely necessary

Patient-identifiable information items should not be included unless it is essential for the specified purpose(s) of that flow. The need for patients to be identified should be considered at each stage of satisfying the purpose(s)

Principle 3 - Use the minimum necessary patient-identifiable information

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

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

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

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

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

Principle 6 - Understand and comply with the law.

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

6.5 Ownership of Rights and Intellectual Property

You are not permitted at any time whilst working with Hallam Medical or at any time after you have ceased working with Hallam Medical to disclose to any person, company or third party and Confidential Information obtained during the course of any client assignment, For the purpose of this agreement, Confidential Information means information relating to Hallam Medical or our clients including patents, trademarks, rights subsisting in domain names, registered designs, unregistered designs, copyrights, database rights; and all similar or equivalent rights protecting software programs, databases, data, methodologies, technical information, know-how, inventions, technological improvements or discoveries together with all applications and rights to apply for registration of any such rights and the right to enforce past infringements of the same.

6.6 Computer Use

During the course of your assignment, you may be required to use client IT systems. Please make yourself aware of and adhere to, any client specific guidelines related to Information Technology and the use of a computer hardware and software. You must not use any computer equipment unless directed to by an authorised member of staff and it should only be used for work related purposes.

You must ensure that you:

- Don't disclose any passwords to unauthorised users
- Abide by the policies and procedures of the client
- Do not attempt to use programmes of which you do not require access
- Do not use computers for your own recreational use
- Always Abide by Data Protection law

SECTION 7 – FURTHER INFORMATION

7.1 Equal Opportunities

It is Hallam Medical 's policy to treat all office-based staff employees, agency workers and job applicants fairly and equally regardless of their sex, sexual orientation, marital status, race, colour, nationality, ethnic or national origin, religion, age or disability. In addition, Hallam Medical will ensure that no requirement or condition will be imposed without justification which could disadvantage individuals on any of the above grounds, or on the grounds of trade union membership.

For more information on Equal Opportunities see the Hallam Medicals Equal Opportunity in Employment Policy.

Temporary Workers

Equality of opportunity extends to all aspects related to being a Temporary Worker for Hallam Medical, including recruitment and selection, assignment of work, pay rates, assessment of performance, action in response to complaints by Clients, etc. Equality of opportunity covers all workers/potential workers, and you will be treated equally regardless of your sex, age, marital status, racial, ethnic or national origin, physical or mental disability, political or religious beliefs, sexual orientation or gender reassignment status.

All Temporary Workers are encouraged to make known any special skills and or knowledge, which may make you particularly suited to care for patients from specific ethnic or cultural groups.

Temporary Workers have the right to accept or refuse individual assignments but any indication that a Temporary Worker has not acted, or will not act, in accordance with this policy will be investigated and this may result in removal from our register.

Harassment/Bullying

Hallam Medical is committed to creating a working environment where every Temporary Worker is treated with dignity and respect and where each person's individuality and sense of self-worth within the workplace is maintained. All Temporary Workers and employees have a duty to treat colleagues with respect and dignity and to take all steps necessary to ensure that harassment does not occur. Whatever the form of harassment (whether by direct contact, written correspondence or by use of email/internet) behaviour of this nature can be objectionable and will not be tolerated by Hallam Medical or any of the institutions we service.

Any Temporary Worker who is considered, after proper investigation, to have subjected a member, patient, or colleague to any form of harassment/bullying will be investigated and any Temporary Worker, subject to similar findings, may be removed from our register.

If a patient is believed, after appropriate investigation, to have subjected any Temporary Worker to any form of harassment/bullying, then the circumstances will be reported and agreed action implemented, which may include withdrawal of care by Hallam Medical after a suitable warning.

For more information see Hallam Medical Bullying and Harassment Policy.

7.2 Fraud Awareness

Fraud is taken very seriously by Hallam Medical, the NHS and our clients in the private sector. If you provide false information, it may result in disciplinary action, and you may be liable to prosecution and civil recovery proceedings. Any questionable timesheets will be brought to the attention of the Local Counter Fraud Specialist. Hallam Medical actively support our clients with cases of suspected fraud and assist in our client's requirements under the National Fraud Initiatives remit.

Fraudulent activity manifests itself in many ways including deception, bribery, forgery, counterfeiting, extortion, corruption, theft, conspiracy, collusion, and embezzlement, misappropriation of assets, false representation and concealment of material facts.

Fraudulent behaviour takes many forms and can be carried out by different people: patients, professionals, managers and contracted agencies and businesses. If you provide false information, you may be liable for prosecution. The following lists common examples of fraud committed in the NHS:

- Falsely claiming for hours not worked
- Claiming sick pay when you are not ill or travel expenses for journeys not undertaken
- Working whilst on long term sick leave
- Working two places at once (e.g. failing to declare they are working for another organisation)
- Falsifying qualifications and work experience
- Excessive Study Leave
- Failing to declare criminal convictions
- Patient fraud (e.g. false travel claims, fraudulently claiming exemptions for pharmaceutical charges)
- Advertising Fraud (e.g. false invoices for placing adverts in publications / internet)
- Misappropriation of assets (e.g. falsely ordering goods for own use/ to sell)
- Procurement Fraud (e.g. the ordering and contracting of goods and services)
- Falsifying records in order to steal NHS property
- Pharmaceutical fraud by companies overcharging for their products or supplying inferior products
- Overcharging for contracted services

Reporting fraud

All Hospitals/Trusts have a nominated officer linked to a counter fraud team whom you can report to. If you suspect that a fraudulent act has been committed there are three ways in which it can be reported:

- By contacting the Hospital/Trust's Counter Fraud Specialist Team
- By calling the NHS Fraud and Corruption Reporting line:
 - 08000 284 060 England and Wales
 - 8000 963 396 Northern Ireland
 - 08000 151 628 Scotland
 - Online at www.reportnhsfraud.nhs.uk
- You can also speak to a Director of Hallam Medical in confidence

Cases of fraud can be escalated to the NHS Counter Fraud and Security Management Service (England and Wales), the NHS Scotland Counter Fraud Service or the Northern Ireland Central Services Agency Counter Fraud Unit (CFU) and the Police.

7.3 Comments and Complaints

Hallam Medical welcomes comments from patients, their representatives and Temporary Workers, as knowing their views helps us to improve our service. Compliments let us know we are getting things right and are always passed on to the appropriate people.

If a patient or Temporary Worker is unhappy with any aspect of the service, they receive and wish to complain they should contact the Hallam Medical Management team. This can be done in person, by

telephone or in writing. It is important that complaints are made as soon as possible after the event in order that an effective investigation can take place.

Please help us to respond quickly to your complaint by providing as much information as possible, particularly:

- What the complaint is about
- What happened
- Where it happened
- Who was involved
- When it happened

The Hallam Medical Management team will do their best to sort out the problem, as quickly as possible and in many cases, they will be able to resolve the issue straight away. Any written or serious verbal complaint will be dealt with as follows:

- If you have not already done so, you will be asked to confirm the complaint in writing.
- As soon as the complaint is received, it will be logged and you will receive acknowledgement of receipt of the complaint within one working day, this may be by telephone or in writing.
- We may contact you to clarify the detail of the complaint and to discuss it with you and we will follow up any conversations with you in writing.
- We will keep you informed at least every two weeks on the progress of our investigations.
- The Hallam Medical Management team will seek agreement from you that the complaint has been resolved to your satisfaction
- Throughout the investigation we will be careful to ensure that any information about you is kept confidential
- Steps will then be taken, where possible, to prevent a reoccurrence
- The client may also wish to cancel your shifts as a result of a complaint and investigation, therefore your speedy response will help in allowing you back to work.

If you are not satisfied Hallam Medical will seek to agree further action to resolve the complaint. In such cases the complaint will be referred to a Director of Hallam Medical.

You also have the right to refer your complaint to the Trading Standards Office of the Licensing Authority.

Complaint against a Temporary Worker

There may be times throughout your work with Hallam Medical that a client or patient lodges a complaint against you as the agency worker. Hallam Medical understand that receiving such a complaint can be a worrying and distressing time, which is why we are here to help you through it.

For any complaint that Hallam Medical may receive about your conduct or performance, you will be fully supported throughout the entire process by our Chief Nurse who is herself an Advanced Nurse Practitioner by background.

Our complaints policy

At Hallam Medical we are committed to providing a high-quality service to our clients and temporary workers. As a leading provider of temporary staffing services to the healthcare sector, we pride ourselves on the level of service and compliance of the healthcare professionals that we work with.

However, if part of our service or quality of agency worker is not at the level you expect, we would like you to tell us about it. This will enable us to rectify the situation and improve our standards in the future. If you have a complaint, please contact us with the details verbally and followed in writing.

We endeavour to resolve the complaint within 10 working days of receipt of the written complaint where reasonable and practicable to do so. Depending on the nature of the complaint, the level of investigation required and availability of/discussions with the Client and Temporary Worker, the complaint may take longer to resolve. In these circumstances, the Client and Temporary Worker will be kept fully informed of progress and timescales throughout the complaint process, through to resolution.

What will happen next?

1. We will send an email/letter acknowledging receipt of the complaint within 1 working day of receiving the written complaint, enclosing a copy of this procedure.
2. We will then investigate the complaint. This will normally involve passing the complaint to our management team who will review the matter and speak directly to the respondent who acted. The complaint may be escalated to our Chief Nurse for involvement depending on the nature and severity of the complaint.
3. HR Manager will assign the complaint to a member of the complaints team (usually a member of the Senior Management Team) to liaise with the Client and Temporary Worker on the matter going forward keeping the Director(s) informed.
4. The Hallam Medical team member assigned to the complaint will contact the respondent (verbally and written/email) notifying them of the complaint and request a full statement regarding their state of the incident within 2 working days of acknowledging the complaint. All documents relating to the complaint will be emailed to the respondent in a password protected compressed file. Passwords to access the compressed file will be sent to the respondent by another means of communication such as text message.
5. The respondent has 5 working days to provide the written statement and any supporting documentation/information. If the respondent is unlikely to be able to provide a statement in the required timescale (e.g. due to holiday), the complainant will be kept informed with progress and a revised timescale.

Should the complaint be of a clinical, drug or abusive nature, the respondent will be suspended until a full investigation has been completed and conclusion met – in some cases the regulating bodies will be informed (dependant on nature of complaint). These regulatory bodies will include (but not limited to)-

If an exclusion on the Temporary Worker is requested by the Client, this will be actioned until the investigation has been completed and conclusion met or advised by the Client

6. Where necessary, the respondent may be invited to a meeting following receipt of the statement to discuss and hopefully resolve the complaint.

7. Within 2 working days of the meeting, we will write to confirm what took place and any solutions s/he has agreed. Should any regulating bodies need to be contacted following this agreement, they will also be notified in writing of a meeting is not possible, the Hallam
8. Medical Chief Nurse will send a detailed written reply to the respondent, including his/her suggestions for resolving the matter within 5 working days of sending the acknowledgement letter to the complainant
9. The Hallam Medical team member assigned to the complaint will provide the statement and any corresponding documents/information to the complainant within 10 working days of the written complaint being received and logged in our system
10. We will seek written confirmation from the complainant that the complaint has been satisfactorily concluded, any follow-up actions confirmed (e.g. any exclusions removed or kept in place) and undertaken and the complaint can be closed on our system
11. Hallam Medical Ltd analyse complaints for trends and patterns as part of our commitment to continuous improvement

7.4 Insurance Guidelines

All Temporary Workers are responsible for their own actions, errors, or omissions at work. You are therefore strongly encouraged to take out individual personal accident insurance, appropriate to your needs and which will provide adequate cover.

Insurance against Personal Accident and Illness

Temporary Workers will only receive fees for work that has been undertaken. Therefore, should you for any reason be unable to undertake work you may well suffer financially as a result. The normal risks preventing Temporary Workers from working are accidents either at work, at home, or through illness. You are advised to seek and obtain insurance cover against such risks and at a level that protects your income during periods when you cannot work.

Hallam Medical advises all Temporary Workers to seek the services of an Independent Financial Adviser in the first instance to ensure you are covered in such an event.

Motor Insurance

The use of a private motor vehicle travelling to, from, or during an assignment is “own business use” and you are advised to check with your motor vehicle insurance company to confirm that you are covered for such risks and to arrange such cover where this is necessary.

7.5 Travel & Accommodation

Travel and accommodation allowances are not paid unless previously agreed with Hallam Medical.

Hallam Medical takes no responsibility for the use, maintenance and repair of Agency Workers cars and/or motorbikes. The usage of vehicles is at the Agency Worker’s complete discretion. Unless otherwise agreed Hallam Medical will not pay for staff mileage expenses.

Hallam Medical takes no responsibility for the maintenance of valid and adequate insurance cover.

7.6 Agency Worker Feedback

Your views and opinions are important to us and aid our continuous development and quality commitments to our agency workforce, please inform us of any improvements we can make, whether positive or negative by contacting your consultant.

7.7 Hallam Medical Modern Slavery Statement

Introduction

This statement is made as part of Hallam Medical's commitment to eliminating the exploitation of people under the Modern Slavery Act 2015 (the Act). It summarises how Hallam Medical operates, the policies and processes in place to minimise the possibility of any problems, any risks we have identified and how we monitor them, and how we train our staff.

This statement is published in accordance with section 54 of the Act and relates to the financial year May 2025 to April 2026. It was approved by the board of directors on 30th April 2025.

Chris Whawell

Chief Operating Officer

1. Our Business

Hallam Medical is a limited company operating in the recruitment sector. We provide introduction services and supply temporary workers in the private and public healthcare services.

Hallam Medical is an independent business.

1.1 Who we work with

All of the hirers that we work with, and all of the work-seekers we provide, are known to and identified by our staff. All of the temporary workers we supply are identified by our staff. Some of these work-seekers operate through their own limited companies. Some of our work-seekers are supplied via other businesses, who facilitate providing them to the eventual hiring company.

The hiring companies that we work with are located in the UK. The work-seekers and workers we supply live in the UK.

1.2 Other relationships

As part of our business, we also work with the following organisations:

- Nursing & Midwifery Council
- Health & Care Professionals Council
- General Pharmaceutical Council
- General Medical Council
- Royal College of Nursing
- the Recruitment and Employment Confederation (www.rec.uk.com)

2. Our Policies

Hallam Medical has a modern slavery policy.

In addition, Hallam Medical has the following policies which incorporate ethical standards for our staff.

- Corporate & Social Responsibility Policy
- Whistle Blowing Policy
- Equal Opportunities & Diversity Policy
- Equal Opportunity in Employment Policy

2.1 Policy development and review

Hallam Medical's policies are established by our directors and senior leadership, based on advice from HR professionals, industry best practice and legal advice, and in consultation with other specialist third parties. We review our policies, or as needed to adapt to changes.

3. Our Processes for Managing Risk

To assess the risk of modern slavery, we use the following processes with our suppliers:

- When engaging with suppliers, we ask for evidence of their processes and policies, including commitments around modern slavery, human trafficking, forced labour, human rights, and whistleblowing.
- We conduct audits before entering a commercial relationship with any business where there is the potential for risk. These audited businesses form the basis of our preferred supplier list.
- We review the potential for risk at regular intervals, including the possibility of re-auditing a supplier or conducting spot checks.

After due consideration, we have not identified any significant risks of modern slavery, forced labour, or human trafficking in our supply chain. However, we continue to be alert to the potential for problems.

Additionally, we have taken the following steps to minimise the possibility of any problems:

- We reserve the right to conduct spot-checks of the businesses who supply us, in order to investigate any complaints.
- We require the businesses we work with to address modern slavery concerns in their policies and publish a modern slavery statement where required.
- We collaborate with our suppliers in order to improve standards and transparency across our supply chain.
- Only senior members of staff who have undergone appropriate training for assessing modern slavery risks in the supply chain are authorised to sign contracts and establish commercial relationships in any area where we have identified the potential for risk.
- We ensure that all of our suppliers are members of appropriate industry bodies and working groups.

Our staff are encouraged to bring any concerns they have to the attention of management.

4. Our Performance

As part of monitoring the performance of Hallam Medical, we track the following general key performance indicators:

- Level of training and regularity of training amongst our internal staff
- The speed in which we investigate related complaints, and the effectiveness of any whistle-blowing procedures.
- The level of compliance and transparency that we have created within our supply chain.

Based on the potential risks we have identified, we have also established the following key performance indicators, which are regularly assessed by our board of directors:

- the percentage of suppliers who sign up to an appropriate code / provide their own modern slavery statements.
- the effectiveness of enforcement against suppliers who breach policies.
- the amount of time spent on audits, re-audits, spot checks, and related due diligence.
- the level of modern slavery training and awareness amongst our staff

We benchmark our indicators against industry best-practice, discuss our indicators with suppliers and carefully consider our indicators, in order to ensure that we do not put undue pressure on our suppliers that might increase the potential for risk.

5. Our Training

All of our staff receive training and support that is appropriate to their role. In particular:

- Our leadership team receive detailed training in identifying and resolving concerns around modern slavery and human trafficking.
- Our recruiters and staff involved in our procurement and supply chains undertake training courses that include guidance around modern slavery and human trafficking, as well as other wider human rights issues.
- All of our staff receive awareness-raising information around issues involving modern slavery and human trafficking, so that they can bring any concerns they have to the attention of management.

As part of this, our staff are encouraged to discuss any concerns that they have. Training is refreshed annually or at point of updates in legislation.

Modern Slavery Policy

1. Hallam Medical is committed to eliminating modern slavery, human trafficking, forced labour, and similar human rights abuses.
2. Hallam Medical is committed to ensuring that its staff and any workers it supplies (directly or indirectly) are not subject to behaviour or threats that may amount to modern slavery, human trafficking, forced labour, and similar human rights abuses.
3. Hallam Medical provides appropriate training and awareness information for all of its staff. In particular:
 - a. Our leadership team receive detailed training in identifying and resolving concerns around modern slavery and human trafficking.
 - b. Our recruiters and staff involved in our procurement and supply chains undertake training courses that include guidance around modern slavery and human trafficking, as well as other wider human rights issues.

- c. All of our staff receive awareness-raising information around issues involving modern slavery and human trafficking, so that they can bring any concerns they have to the attention of management.
4. Any staff, workers or other parties are strongly encouraged to report any concerns or suspicions that they might have to the Executive Board of Hallam Medical.
5. Reports surrounding these issues are taken extremely seriously by our board of directors, who are committed to ensuring that all investigations shall be prompt and effective. If our investigations reveal any issues, we are committed to taking appropriate action, including but not limited to:
 - a. Working with the appropriate organisations to improve standards,
 - b. Removing that organisation from our preferred supplier list,
 - c. Passing details to appropriate law enforcement bodies.
6. We regularly monitor our risks in this area through the use of relevant key performance indicators, including:
 - a. The percentage of suppliers who sign up to an appropriate code / provide their own modern slavery statements,
 - b. The percentage of [workers and/or candidates] supplied from audited businesses / our preferred supplier list,
 - c. The effectiveness of enforcement against suppliers who breach policies,
 - d. The amount of time spent on audits, re-audits, spot checks, and related due diligence, and the level of modern slavery training and awareness amongst our staff.
7. As part of our efforts in this area, we publish a modern slavery statement on an annual basis.
8. We would also recommend reading this in conjunction with our other policies, including our
 - a. Corporate social responsibility policy,
 - b. Ethical procurement policy,
 - c. Anti-bribery / corruption policy, and
 - d. Whistle-blowing policy.

This policy was adopted on 30th April 2025 after being agreed by our board of directors. It is reviewed annually.

7.8 Useful Contacts

Hallam Medical Limited

2nd Floor, Westfield House

60 Charter Row

Sheffield, South Yorkshire

S1 3FZ

Tel: 0333 8000 395

Fax: 0333 456 0395

Email: recruitment@hallammedical.com

Website: www.hallammedical.com

Care Quality Commission

Citygate

Gallowgate

Newcastle upon Tyne

NE1 4PA

Tel: 03000 616 161

Fax: 03000 616 171

Website: www.cqc.org.uk

Nursing & Midwifery Council

23 Portland Place

London

W1B 1PZ

Tel: 020 7333 9333

Email: advice@nmc-uk.org

Website: www.nmc-uk.org

Health Professions Council

Park House,

184 Kennington Park Road

London

SE11 4BU

Tel: 020 7582 0866

Email: ftb@hpc-uk.org

Website: www.hpc-uk.org