



Policies and Procedures Staff Handbook

This information can be provided in other languages and formats upon request such as large print, braille, audio cassette and USB

Please note, from time to time this handbook will be updated to encompass any new changes to either legislation or developments that affect our market place

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Section 1

INTRODUCTION

Code of Conduct for Healthcare Support Workers and Adult Social Care Workers in England

As a Healthcare Support Worker or an Adult Social Care Worker, you make a valuable and important contribution to the delivery of high quality healthcare, care and support.

Following the guidance set out in this Code of Conduct will give you the reassurance that you are providing safe and compassionate care of a high standard, and the confidence to challenge others who are not.

As a Healthcare Support Worker or Adult Social Care Worker in England you must:

1. Be accountable by making sure you can answer for your actions or omissions.
2. Promote and uphold the privacy, dignity, rights, health and wellbeing of people who use health and care services and their carers at all times.
3. Work in collaboration with your colleagues to ensure the delivery of high quality, safe and compassionate healthcare, care and support.
4. Communicate in an open and effective way to promote the health, safety and wellbeing of people who use health and care services and their carers.
5. Respect a person's right to confidentiality.
6. Strive to improve the quality of healthcare, care and support through continuing professional development.
7. Uphold and promote equality, diversity and inclusion.

This Code is based on the principles of protecting the public by promoting best practice. It will ensure that you are 'working to standard', providing high quality, compassionate healthcare, care and support. The Code describes the standards of conduct, behaviour and attitude that the public and people who use health and care services should expect. You are responsible for, and have a duty of care to ensure that your conduct does not fall below the standards detailed in the Code. Nothing that you do, or omit to do, should harm the safety and wellbeing of people who use health and care services, and the public.

How does the Code help me as a Healthcare Support Worker or an Adult Social Care Worker?

It provides a set of clear standards, so you:

- Can be sure of the standards you are expected to meet.
- Can know whether you are working to these standards, or if you need to change the way you are working.
- Can identify areas for continuing professional development.
- Can fulfil the requirements of your role, behave correctly and do the right thing at all times.

This is essential to protect people who use health and care services, the public and others from harm.

How does this Code help people who use health and care services and members of the public?

The Code helps the public and those who use health and care services to understand what standards they can expect of Healthcare Support Workers and Adult Social Care Workers. The Code aims to give people who use health and care services the confidence that they will be treated with dignity, respect and compassion at all times.

How does this Code help my employer?

The Code helps employers to understand what standards they should expect of Healthcare Support Workers and Adult Social Care Workers. If there are people who do not meet these standards, it will help to identify their support and training needs.

Code Of Practice

1. Be accountable by making sure you can answer for your actions or omissions

- Be honest with yourself and others about what you can do, recognise your abilities and the limitations of your competence and only carry out or delegate those tasks agreed in your job description and for which you are competent.
- Always behave and present yourself in a way that does not call into question your suitability to work in a health and social care environment.
- Be able to justify and be accountable for your actions or your omissions – what you fail to do.
- Always ask your supervisor or employer for guidance if you do not feel able or adequately prepared to carry out any aspect of your work, or if you are unsure how to effectively deliver a task.
- Tell your supervisor or employer about any issues that might affect your ability to do your job competently and safely. If you do not feel competent to carry out an activity, you must report this.
- Establish and maintain clear and appropriate professional boundaries in your relationships with people who use health and care services, carers and colleagues at all times.
- Never accept any offers of loans, gifts, benefits or hospitality from anyone you are supporting or anyone close to them which may be seen to compromise your position. Comply with your employers' agreed ways of working.
- Report any actions or omissions by yourself or colleagues that you feel may compromise the safety or care of people who use health and care services and, if necessary use whistle blowing procedures to report any suspected wrongdoing.

2. Promote and uphold the privacy, dignity, rights, health and wellbeing of people who use health and care services and their carers at all times

- Always act in the best interests of people who use health and care services.
- Always treat people with respect and compassion.
- Put the needs, goals and aspirations of people who use health and care services first, helping them to be in control and to choose the healthcare, care and support they receive.
- Promote people's independence and ability to self-care, assisting those who use health and care services to exercise their rights and make informed choices.
- Always gain valid consent before providing healthcare, care and support. You must also respect a person's right to refuse to receive healthcare, care and support if they are capable of doing so.

- Always maintain the privacy and dignity of people who use health and care services, their carers and others.
- Be alert to any changes that could affect a person's needs or progress and report your observations in line with your employer's agreed ways of working.
- Always make sure that your actions or omissions do not harm an individual's health or wellbeing. You must never abuse, neglect, harm or exploit those who use health and care services, their carers or your colleagues.
- Challenge and report dangerous, abusive, discriminatory or exploitative behavior or practice.
- Always take comments and complaints seriously, respond to them in line with agreed ways of working and inform a senior member of staff.

3. Work in collaboration with your colleagues to ensure the delivery of high quality, safe and compassionate healthcare, care and support

- Understand and value your contribution and the vital part you play in your team.
- Recognise and respect the roles and expertise of your colleagues both in the team and from other agencies and disciplines, and work in partnership with them.
- Work openly and co-operatively with colleagues including those from other disciplines and agencies, and treat them with respect.
- Work openly and co-operatively with people who use health and care services and their families or carers and treat them with respect.
- Honour your work commitments, agreements and arrangements and be reliable, dependable and trustworthy.
- Actively encourage the delivery of high quality healthcare, care and support.

4. Communicate in an open and effective way to promote the health, safety and wellbeing of people who use health and care services and their carers

- Communicate respectfully with people who use health and care services and their carers in an open, accurate, effective and confidential way.
- Communicate effectively and consult with your colleagues as appropriate.
- Always explain and discuss the care, support or procedure you intend to carry out with the person and only continue if they give valid consent.
- Maintain clear and accurate records of the healthcare, care and support you provide. Immediately report to a senior member of staff any changes or concerns you have about a person's condition.
- Recognise both the extent and the limits of your role, knowledge and competence when communicating with people who use health and care services, carers and colleagues.

5. Respect a persons right to confidentiality

- Treat all information about people who use health and care services and their carers as confidential.
- Only discuss or disclose information about people who use health and care services and their carers in accordance with legislation and agreed ways of working.
- Always seek guidance from a senior member of staff regarding any information or issues that you are concerned about.
- Always discuss issues of disclosure with a senior member of staff.

6. Strive to improve the quality of healthcare, care and support through continuing professional development

- Ensure up to date compliance with all statutory and mandatory training, in agreement with your supervisor.
- Participate in continuing professional development to achieve the competence required for your role.
- Carry out competence-based training and education in line with your agreed ways of working.
- Improve the quality and safety of the care you provide with the help of your supervisor (and a mentor if available), and in line with your agreed ways of working.
- Maintain an up-to-date record of your training and development.
- Contribute to the learning and development of others as appropriate.
- Uphold and promote equality, diversity and inclusion

7. Uphold and promote equality, diversity and inclusion

- Respect the individuality and diversity of the people who use health and care services, their carers and your colleagues.
- Do not discriminate or condone discrimination against people who use health and care services, their carers or your colleagues.
- Promote equal opportunities and inclusion for the people who use health and care services and their carers.
- Report any concerns regarding equality, diversity and inclusion to a senior member of staff as soon as possible.

Glossary of terms:

ACCOUNTABLE: accountability is to be responsible for the decisions you make and answerable for your actions.

AGREED WAYS OF WORKING: includes policies and procedures where these exist; they may be less formally documented among individual employers and the self-employed.

BEST INTERESTS: the Mental Capacity Act (2005) sets out a checklist of things to consider when deciding what's in a person's 'best interests'.

CARE AND SUPPORT: care and support enables people to do the everyday things like getting out of bed, dressed and into work; cooking meals; seeing friends; caring for our families; and being part of our communities. It might include emotional support at a time of difficulty or stress, or helping people who are caring for a family member or friend. It can mean support from community groups or networks: for example, giving others a lift to a social event. It might also include state-funded support, such as information and advice, support for carers, housing support, disability benefits and adult social care.

COLLABORATION: the action of working with someone to achieve a common goal.

COMPASSION: descriptions of compassionate care include:., dignity and comfort: taking time and patience to listen, explain and communicate; demonstrating empathy, kindness and warmth; care centred around an individual person's needs, involving people in the decisions about their healthcare, care and support.

COMPETENCE: the knowledge, skills, attitudes and ability to practise safely and effectively without the need for direct supervision.

COMPETENT: having the necessary ability, knowledge, or skill to do something successfully.

CONTINUING PROFESSIONAL DEVELOPMENT: this is the way in which a worker continues to learn and develop throughout their careers, keeping their skills and knowledge up to date and ensuring they can work safely and effectively.

DIGNITY: covers all aspects of daily life, including respect, privacy, autonomy and self-worth. While dignity may be difficult to define, what is clear is that people know when they have not been treated with dignity and respect. Dignity is about interpersonal behaviours as well as systems and processes.

DISCRIMINATION: discrimination can be the result of prejudice, misconception and stereotyping. Whether this behaviour is intentional or unintentional does not excuse it. It is the perception of the person discriminated against that is important.

DIVERSITY: celebrating differences and valuing everyone. Diversity encompasses visible and non-visible individual differences and is about respecting those differences.

EFFECTIVE: to be successful in producing a desired or intended result.

EQUALITY: being equal in status, rights, and opportunities.

INCLUSION: ensuring that people are treated equally and fairly and are included as part of society.

MENTOR: mentoring is a work-based method of training using existing experienced staff to transfer their skills informally or semi-formally to learners.

OMISSION: to leave out or exclude.

PROMOTE: to support or actively encourage.

RESPECT: to have due regard for someone's feelings, wishes, or rights.

SELF-CARE: this refers to the practices undertaken by people towards maintaining health and wellbeing and managing their own care needs. It has been defined as: "the actions people take for themselves, their children and their families to stay fit and maintain good physical and mental health; meet social and psychological needs; prevent illness or accidents; care for minor ailments and long-term conditions; and maintain health and wellbeing after an acute illness or discharge from hospital." (Self care – A real choice: Self care support – A practical option, published by Department of Health, 2005).

UPHOLD: to maintain a custom or practice.

VALID CONSENT: for consent to be valid, it must be given voluntarily by an appropriately informed person who has the capacity to consent to the intervention in question. This will be the patient, the person who uses health and care services or someone with parental responsibility for a person under the age of 18, someone authorised to do so under a Lasting Power of Attorney (LPA) or someone who has the authority to make treatment decisions as a court appointed deputy). Agreement where the person does not know what the intervention entails is not 'consent'.

WELLBEING: a person's wellbeing may include their sense of hope, confidence, self-esteem, ability to communicate their wants and needs, ability to make contact with other people, ability to show warmth and affection, experience and showing of pleasure or enjoyment.

WHISTLEBLOWING: whistle blowing is when a worker reports suspected wrongdoing at work. Officially this is called 'making a disclosure in the public interest' and may sometimes be referred to as 'escalating concerns.' You must report things that you feel are not right, are illegal or if anyone at work is neglecting their duties. This includes when someone's health and safety is in danger; damage to the environment; a criminal offence; that the company is not obeying the law (like not having the right insurance); or covering up wrongdoing.

Section 2

HEALTH & SAFETY

Introduction

Estio Healthcare attaches great importance to the Health and Safety of its staff, service users and visitors. Estio Healthcare recognises the necessity for its staff and Service Users to communicate and co-ordinate together to achieve a situation where risk, injury or hazards to the health and safety of staff and Service Users can be reduced to a minimum, compatible with the provision of a high standard of service.

Estio Healthcare's policy has been devised to ensure that all staff, Service Users and visitors are aware of the importance of the policy and where reasonably practicable to make all working conditions safe and healthy.

Policy Statement

Section 2 of the Health and Safety at Work Act 1974 places a legal duty on Estio Healthcare to ensure, so far as is reasonably practicable, the health, safety and welfare at work of all members.

It is the policy of Estio Healthcare to observe the requirements of the Health and Safety at Work Act 1974 and any subsequent legalisation or regulations. To this end the Health and Safety Policy will be reviewed and amended as necessary.

It is Estio Healthcare's policy to provide and maintain safe and healthy working conditions, practices and equipment for all our members. Estio Healthcare will provide information, training and supervision as may be necessary for this purpose.

Where risks to safety or health need to be 'assessed' under a specific duty or regulation, we will ensure that 'assessments' are carried out and that all actions shown to be necessary will be implemented.

It is the policy of Estio Healthcare to listen carefully to any views of members or of the carer team in relation to Health and Safety issues.

A copy of The Health and Safety at Work Act 1974 is displayed in the branch.

Scope of Policy

This policy statement applies to the activities of all staff, service users and visitors of Estio Healthcare.

This policy outlines the general health and safety practices and procedures and also identifies the arrangements required for the management of Health and Safety. This policy will conform at all times to any Health and safety legislation in force and to any Health and Safety Code of Practice that may be issued by Government appointed bodies.

The Branch Manager and responsible individual are responsible for ensuring that all employees within the office are aware of the contents and location of the office's safety procedures.

General Responsibilities

Estio Healthcare will ensure there is a designated Health and Safety representative. The Health and Safety representative will ensure implementation of the Health and Safety Policy and undertake the duties listed below:

- To ensure responsibility for the maintenance of safety standards in the office and for the implementation of the Health and Safety Policy.
- The Health and Safety representative will be responsible for identifying potential hazards in the office.
- To provide such first aid facilities as required and also monitoring of the working environment of the office as is necessary to ensure healthy and safe working conditions.
- To ensure all visitors to Estio Healthcare premises including contractors and members of the public, to observe all safety procedures, rules, instructions or legislation applicable to all those premises.
- The Health and Safety representative will be responsible for liaising with candidates to seek potential hazards in the service user premises.

Members Responsibilities

Section 7 - Health and Safety at Work Act 1974 – places a legal duty on all people working on behalf of Estio Healthcare “To take reasonable care for the Health and Safety of themselves and of other persons who may be affected by their acts or omissions”.

Section 8 ‘Health and Safety at Work Act 1974’ – States that “No person shall intentionally or recklessly interfere with or misuse any item provided in the interests of Health, Safety and Welfare”.

Regulation 12 of the ‘Management of Health and Safety at Work Regulations 1992’ – further extends their possibilities.

“Every member must use machines, equipment, dangerous substances, transport equipment, means of production or safety devices provide by the employer, in accordance with training and instructions received, (whether this be written or verbal)”.

Members will be instructed to inform their branch manager:

1. Of any work situation where it is considered that the training and instruction received by themselves or a fellow member, could represent a serious and imminent danger to their health and safety.
2. Of any matter where it is considered that the training and instruction received by themselves or a fellow member could present failure in protection arrangements for their Health and Safety, even where no imminent danger exists.

Accident and Incident Policy

Working in accordance with RIDDOR 2013 we are required to report all injuries and are required to keep a log of all accidents. Where you are involved in an accident or injury please ensure that you report this to the duty manager and that you complete an accident/incident report form at the time. Please contact the agency and inform us of the nature of the accident/incident and we will require you to complete the form to enable us to report this to HSE.

In the domiciliary setting please ensure that you work in accordance with your emergency first aid and ensure that you dial 999 on discovery of an accident. Again please ensure that you contact the agency.

COSHH

Introduction

COSHH provides a legal framework to protect people against risks from hazardous substances used at work, which could include any chemicals, medications and bodily fluids. This policy outlines an approach to the control of substances hazardous to health, regulations identifying hazards, weighing up risks arising from them and deciding what actions are required if the risks are considered significant.

People can be exposed to hazardous substances at work. If the exposure is not prevented or properly controlled, it can cause serious illness, in some extremes, death.

Examples of the effects of hazardous substances are as follows:

- Skin irritation, dermatitis or even skin cancer;
- Asthma resulting from sensitisation to paints or adhesives;
- Being overcome by toxic fumes, injuries or death can be caused by the substances themselves or by falling after losing consciousness;
- Poisoning by drinking toxic liquids from bottles thought to contain water or soft drinks;
- Infection from bacteria and other micro organisms.

These substances can:

- Be used directly in work, e.g. paints or cleaning materials;
- Arise from work, e.g. dust, fumes and waste products;
- Occur naturally, e.g. fungal spores.

Hazardous substances can be located in all work environments including service user premises and unless the right precautions are taken, they can threaten health.

For the vast majority of proprietary chemicals the presence (or not) of a warning label will indicate whether COSHH is relevant. For example, there isn't a warning label on ordinary household

washing up liquid, so it is used in daily work practice COSHH does not apply. However, there is a warning label on bleach and COSHH is applicable.

Hazard and Risk

Hazard and risk have special meanings in regulations and guidance about substances at work and the difference between them is important for a correct understanding of COSHH:

Hazard - The hazard presented by a substance is its potential to cause harm.

Risk - The risk from a substance is the likelihood that it will cause harm.

What COSHH requires:

- Assessing the risks to health arising from the work environment.
- Deciding what precautions are required. Duties that could expose workers/employees to hazardous substances must be assessed for risks and the necessary precautions taken.
- Preventing or controlling exposure.
- Ensuring that control measures are utilised and maintained properly, and that safety procedure, which have been stipulated, are adhered to.
- Monitoring the exposure of employees to hazardous substances and performing appropriate health surveillance where the assessment has demonstrated these necessary or where COSHH lays down specific requirements.
- Ensuring that all employees are properly informed trained and supervised.

Preventing Exposure

- Wherever reasonably practicable, exposure must be prevented by:
- Changing the process or activity so that the hazardous substance is not utilised required or generated.
- Offering a safety alternative.
- Replacing it with a safer alternative.
- Utilising the produce etc in a safer form.

Controlling Exposure

For those circumstances where prevention is not reasonably practicable, exposure should be adequately controlled by one of the following measures:

- Total enclosure of the process.
- Partial enclosure and extraction equipment.
- General ventilation.
- Using systems of work and handling procedures, which minimise the chances of spills, leaks and other escape of hazardous materials.
- Reducing the number of employees exposed, or the duration of exposure but only after considering and, where possible, putting into effect the measures previously highlighted.

Arrangements for provision and use of work equipment

Each client should provide candidates with the appropriate protective equipment where needed. Where this has been provided, candidates should use it appropriately for the protection of themselves and the clients.

The following provides some guidelines to the appropriate use of protective clothing and gloves.

Infection - If you come into contact with clients blood and/or body fluids you may be exposed to occupational risks from blood borne infections such as Hepatitis B. The most likely means of being infected by these viruses is by a needle injury or by blood splashing onto broken skin. You should thus wear protective clothing that is available to you.

Gloves – Non-sterile latex or vinyl gloves must be worn during non-invasive procedures where there may be contamination of the hands by blood and/or body fluids. Gloves must always be worn when inserting a needle into your client's veins. Gloves must be discarded at the end of each procedure.

Aprons – Disposable aprons should be worn if there is a possibility of being splashed by body fluids.

Waste – All contaminated waste should be disposed of in accordance with the clients policy. It is important that you realise the need for thorough hand washing between all procedures even when gloves are worn.

ADMINISTRATION OF MEDICATION

The following rules must **ALWAYS** be strictly adhered to when administering medications.

- The nurse in charge should identify the name of the resident with the name on the prescription and check any drug sensitivity on 'special instructions'.
- Inspect the prescription to determine which, if any drugs are required to be administered to that resident.
- In order to ensure that the dose of the drug has not been administered previously, check the 'given' box corresponding to that time and date is still blank.
- Select the drugs required, checking the label with the prescription, and put the required dose in an appropriate container.
- Administer the drugs and record the administration on the prescription sheet.
- Nurse in charge should ensure that the correct drug is administered to the correct resident and the nurse in charge of the medication round should remain present until she/he has seen the medication taken up by the resident.
- If the drug is a controlled drug or recorded drug, complete the appropriate record.
- If, for any reason a dose, which has been prescribed, is not given, this must be noted on the prescription sheet.
- All nurses should work in accordance with the NMC Administration of medication code as issued with this handbook.
- Should medication be incorrectly administered you must contact the emergency GP immediately to gain advice on your next action. Please ensure that Estio are informed and that both the incident and all subsequent actions are documented.

PREVENTION OF CROSS INFECTION

To prevent cross infection it is important to ensure that:

- Any infection a client has does not spread to others.
- The client does not suffer from potential sources of infection in his or her surroundings.

- Others do not bring infections to the client.

RULES TO PREVENT THE SPREAD OF INFECTIONS

HANDWASHING

Frequent hand washing is the single most important thing you can do to help prevent the spread of infections.

Thorough hand washing using copious amounts of soap and hot water must take place after each task or activity even if gloves have been worn. If hot water is not available cold water can be used.

Essential Hand Washing

- Following contact with any body fluids.
- After toileting or using the toilet.
- After oral hygiene
- After removing dirty bedding
- When leaving a work area
- When entering a new work area
- Upon arrival at work
- After handling any pets.
- After sneezing/coughing/blowing nose.
- Before and after eating.
- Before and after preparing or serving food.
- After using any chemicals or handling medication
- When they look or feel dirty. Etc

OTHERS RULES INCLUDE

- Maintain a high standard of personal cleanliness.
- Avoid droplet infection by careful controlling of coughing and sneezing.
- Frequent hand washing.
- Fingernails should be clean and short. False nails and nail polish are not permitted.
- Avoid wearing jewellery apart from possibly a wedding ring.
- Keep hair short or tied back.
- Wear clean uniforms and only wear them at work.
- Clean work surfaces and equipment using the correct cleaning agent or disinfectant.
- Report any signs of infection promptly.
- Keep toilets, sinks and baths scrupulously clean with correct cleaning agents and equipment kept only for these items.
- Take care when handling pets.
- Correct handling of food to prevent food borne illness.
- Assist other professional staff in correct procedures for dealing with wound dressings.
- Wear disposable gloves when dealing with body fluids or open wounds.
- Any assistance given to users must be in a manner, which promotes their independence, dignity and privacy, and causes as little discomfort as possible.

If a candidate has any doubts or concerns about hygiene, infection, clothing or any task related to this hygiene guidance she/he must immediately contact the Manager/leader for advice.

Basic hygiene practices and routine cleaning procedures will give protection against most infection.

Candidates must always assume that they are dealing with infected material.

To prevent infection all cuts and abrasions must be covered immediately with a waterproof dressing which has adhesive at all its edges

Candidates with skin conditions should ask for medical advice about hygiene precautions e.g. from their GP.

Food Safety Policy Statement

At Estio Healthcare we have a moral obligation to safeguard each other, our customers and the environment by aspiring to operate a safe, injury free and healthy workplace, to serve food that is always safe to eat and to minimise our impact on the environment.

Our primary concern is that the food we serve is prepared to the very highest standards using quality products and ingredients and as the very minimum we will comply with all relevant legislation and approved codes of practice.

To ensure the highest standards we have developed a common set of behaviours which will be practiced at every food service location we operate. These behaviours are based on sound science, regulatory requirements, and industry best practice.

We will regularly measure compliance with these behaviours and implement performance objectives to help assure our clients and consumers that we are providing food which is safe to eat while meeting their quality expectations. Specifically, we will require that:

- Food is only purchased from authorised suppliers
- Food is always prepared under sanitary conditions that do not expose it to the risk of contamination
- All workers are provided with the information, training and tools necessary to do their job in a hygienic and compliant manner
- Estio Healthcare workers comply with all company food safety policies and procedures
- Management assume the role of supervision of our employees for compliance and conformance with this policy

We will also expect similarly high standards from our suppliers and contractors.

It is the responsibility of the Managing Director to ensure that the appropriate resources, including human and financial ones, are committed towards implementing this policy across all our operations and communicating our policies, behaviours and standards to all our employees.

GUIDELINES ON THE CONTROL OF STAPHYLOCOCCUS AUREUS (MRSA)

MRSA stands for Methicillin Resistant Staphylococcus Aureus.

This condition is relatively widespread and often originates in hospitals where there is a high level of usage of antibiotics.

- a. Colonisation:** When bacteria, which are able to cause infection, are isolated from a non-infected site, e.g. Staphylococcus Aureus in the nose.
- b. Infection:** Is the reaction to microbes lodging and multiplying in the tissues, for example abscesses, wound infections or chest infections.

Although these guidelines are to be used with patients discharged with an infection, we may not be aware of colonisation or even infection. There, constant good practice, particularly hand hygiene is necessary to prevent the spread of microbes.

Individual Assessment

Every suspected infected patient will have been assessed so that their treatment can be determined by the relevant medical staff, in conjunction with the microbiologist.

Hand Washing

Necessary after contact with infected people or contaminated articles.

Protective Clothing

- Single use seam free gloves should be used for handling contaminated dressings, linen, equipment, etc.
- Single use plastic aprons to be used for close contact with infected persons or their immediate environment.

Isolation

Not usually needed outside hospital.

Waste

Infected materials e.g. dressing, to be disposed of as clinical waste.

Linen

Follow usual laundry procedures.

Swabs

Swabs will be taken from the site of infection by the Community Nurse. Three clear swabs are needed before the individual can be said to be clear.

Education and prevention

Staff should understand the basics of infection control.

Communication

On transfer to any other location, advice about any infection should be included in the information given to other providers of health care.

RISK ASSESSMENTS

Introduction

Risk assessments are used to identify any risks that may affect the health and safety of a service user, care professional, other service users or the general public. It identifies whether activities to be undertaken have an associated risk that is particular to an individual service user's condition and circumstances. In using a risk assessment the risk of accidents and harm happening to service users and staff in the provision of personal care can be minimised.

Aims of Risk Assessment

- Assessment of risks for service users in maintaining independence.
- Details the needs of the service user through the views of both the service user and family.
- Identifies separate assessments for moving and handling procedures; this will identify the number of people required for safe moving of a service user.
- Risk assessment will be found at the service user's home.
- Risk management is reviewed annually or more frequently dependent on the needs of the individual service user, well-managed support can encourage progress and the reduction of support needed.
- New risks for instance increased mobility can lead to travel outside of previous area.

Working with risk assessments

- You must ensure that you have read and are aware of the service users risk assessment this is particularly paramount when working alone.
- You must complete any records as requested of the risk assessment.
- You must report any changes in the level of associated risk to your branch manager.
- Where there is evidence that you have knowingly worked outside the requirements of the risk assessment this will be subject to investigation.
- Only staff that are experienced and trained to undertake risk assessments will be considered for emergency assignments where the pressure of time does not allow for a risk assessment to be undertaken.

Section 3

Moving and Handling

Policy Statement:

Estio Healthcare recognises that a duty of care exists to service users and members of staff.

Our aims are:

- As far as is reasonably practicable to ensure the health and safety of service users, employees and others in relation to moving and handling;
- To ensure employees are suitably trained and competent in Moving and Handling practices
- To work with our clients to ensure that systems of work and the working environment are as safe as possible, in conjunction with the policies and procedures of local CCGs, trusts and councils we provide services to throughout the country.
- To remove or reduce the risk of moving and handling injuries through risk assessment and the promotion of safe practice.
- Staff will follow moving and handling risk assessments and care plans
- Hoists, sliding aids and other specialised equipment should always be used where they are supplied.

We expect a balanced approach to be taken which considers the person's human rights as well as the need to protect staff from injury.

Moving and handling equipment may not always be required and moving and handling techniques may be used based on an individual risk assessment and provided that they follow safe handling principles, as set out in the Manual Handling Operations Regulations 1992, as amended by the Health and Safety (Miscellaneous Amendments) Regulations 2002 and Manual handling. Manual Handling Operations Regulations 1992 Guidance on Regulations

Scope of the Policy:

This Policy applies to ALL Employees who work in our Establishment services.

Training:

Employees are required to undertake practical moving and handling training prior to commencing employment. Training may be undertaken through "in house" training with Estio, or may be undertaken elsewhere, however the course must have been undertaken within the last 12 months of starting work.

In house training is provided by an Estio Healthcare clinical trainer who has completed 'train the trainer' training through an accredited external training provider.

The Moving and Handling training will educate and train staff on safe handling of service users. All Care Homes and Hospitals will have their own safe systems of work and staff must ensure that when they attend a placement they familiarise themselves with the clients policy, and individual care plans, the must be adhered to. When undertaking Moving and Handling procedures within the Homecare environment, employees must follow the guidance within the risk assessment and care plan tailored for that individual.

On-going Training:

All Estio employees are required to attend Moving and Handling Training updates every 24 months. Employees who have not completed a suitable course will automatically become inactive at 25 months from the date previous training was completed. Employees MUST complete a practical course prior to joining and then every 24 months. After training, staff must complete a competency question and answers test. The local branch will identify staff due for training one month before the course is due and contact members to book onto a course. We do not charge our staff for their update.

The Moving and Handling training programme consists of both theory and practical elements including:

- Legislation

- Manual Handling definition
- Causes of injury (spinal awareness)
- Ergonomics and principals of safe Manual Handling
- Hazard Reporting
- Manual Handling Risk Assessment
- Client Load handling criteria
- Choice of equipment
- Communicating with patients and co-workers
- Practical safe handling techniques

Current M&H course Learning outcomes

- Understand the basic legislation of the manual handling operations regulations 1992, and the employer and employee duties of these.
- To learn how to use ELITE as a tool for a risk assessment.
- To understand the basic functions of the Spine
- To learn effective moving principles
- To understand hazards associated with manual handling, common back injuries and appropriate back care.
- Discuss controversial techniques and the outcomes of poor practice
- To learn and demonstrate safer people handling techniques.
- To identify the different types of manual handling equipment and its correct usage.

Health and Safety:

All equipment must be checked and serviced by the client every 6 months. If Estio employees identify or fear any equipment may be faulty or unsafe, then do not proceed and report the fault to the staff member in charge of the unit. Always use the procedural equipment identified on the service users risk assessment chart.

Any accidents or incidents should be reported immediately to the manager of the unit/establishment/service where the employee is working. An accident report should be completed and the incident will be investigated. Accidents and Incidents must also be reported to the local Estio Office, and a copy of the incident report should also be sent to Estio by the unit/line manager. If any injury results in loss of work from more than 3 days, the incident may be reported to RIDDOR and further statements required.

If an Estio employee has any concerns or queries relating to moving and handling then please contact your local Branch Manager who will put you in touch with a Moving and Handling trainer.

All accidents and incidents must be logged on the Estio Healthcare's incidents and complaints system and the incident must be investigated.

Where appropriate - a notification should also be raised to the regulator (CQC).

If any injury results in an employee's inability to work for more than 7 days, the incident must be reported to RIDDOR and to our insurers via the Clinical Governance team

If any Estio employee has any concerns or queries relating to moving and handling they should contact their local branch who will put them in touch with a Moving and Handling trainer.

Maximum weight limits

The Manual Handling Operations Regulations 1992 set no specific requirements such as weight limits. An ergonomic approach based on a range of relevant factors should determine the risks, however, Hunt (2017) recommends maximum limits of 16kg for women and 25kg for men.

Efficient movement principles of manual handling

There are some basic efficient moving principles that everyone should consider prior to carrying out a manual handling operation:

- Prepare the mind. Know what the task involves, when, where, who, why, what?
- Dynamic stable base. With our feet set a reasonable distance apart we gain a stable base. When the feet are also positioned in the direction of movement, we are ready to 'move on' thus; Dynamic
- Soft knees and hips. Bending our knees prepares our body for movement and allows our centre of gravity to remain within our base.
- Spine in line. S shaped spine means Safe, Strong, Secure & Stable. Weight is evenly distributed through the discs.
- Breathing. We need oxygen to survive, our muscles need oxygen too. A good breath prior to the move creates a girdle effect on the abdominal muscles therefore supporting the spine.
- Load close & not too high. Keeping the load or the patient close to you brings their centre of gravity closer to yours reducing the amount of pressure applied to the discs. Keeping the load low stops you from using your arms and shoulders to 'lift'.
- Head leading. Lifting the head brings the spine into its natural 'S' shape and helps to open up the airways allowing natural breathing. With the head facing the direction of movement, we can of course see where we are going; our body will naturally follow our head
- Avoid twisting the body as much as possible by turning your feet to position yourself with the load.

Employee Responsibilities:

Employees have a legal duty to take reasonable care of their own health and safety and that of others who may be affected by what they do or do not do. Staff must therefore:

1. Adhere to this Policy and any associated risk assessments.
2. Co-operate in the regular review of the risk assessments and control measures to ensure that they are valid and are being effectively implemented and/or updated as required.
3. Take reasonable care of their own safety, health and welfare and that of others when conducting manual handling and people handling activities.
4. Attend mandatory manual handling/moving and handling training sessions.
5. Implement the principles of good manual handling and other techniques as taught at training.
6. Make themselves aware of the safe working loads of equipment /furniture within their area.
7. Inform their line manager of any reason (e.g. musculo-skeletal injury, illness or pregnancy), which might affect their ability to perform manual handling and people handling tasks or increase the risk presented.
8. Work within their capabilities and limitations and not carry out any activity or use any equipment for which they have not received training.
9. Report any defects in equipment/machinery or the place of work and any unsafe systems of work to their line manager.
10. Report accidents, incidents and any difficulties arising (e.g. significant pain) with regard to manual handling and people handling tasks in line with local procedures.
10. Ensure that their clothing and footwear is appropriate for the tasks involved

Correct manual handling principles

As an employee, you must make full use of any safe system of manual handling your employer puts in place.

Every consideration must be given to the hierarchy of measures to reduce the risks of manual handling:

- avoid hazardous manual handling operations so far as is reasonably practicable;
- assess any hazardous manual handling operations that cannot be avoided;
- reduce the risk of injury so far as is reasonably practicable.

You must also review your assessments if they become out of date or if the tasks they refer to change.

All Employees have general health and safety duties to:

- follow appropriate systems of work laid down for their safety
- make proper use of equipment provided for their safety
- co-operate with their employer on health and safety matters
- take care to ensure that their activities do not put others at risk

Risk assessment:

A thorough Manual handling risk assessment following the MHOR recommendations **ELITE** - (load (patient), Individual, task and environment) must be made prior to every activity.

E – Environment. This means considering the area in which the load is being moved, and looking at how this could make the manual handling task unsafe. For example, are there any space constraints? Is the floor slippery or uneven? Is there sufficient lighting? Are there any trip hazards?

L – Load. This means considering the object or person that is being moved, and looking at how this may affect health and safety. For example, is the load particularly heavy, bulky, hard to grasp or unstable? Is the person confused or uncooperative, in pain, has vulnerable pressure areas/poor skin condition, Is unable to assist, Has sensory loss (deafness, blindness). Has cognitive impairment*

I – Individual. This means considering the person who will be carrying out the manual handling activity, i.e. you or another colleague. For example, how strong, fit or able is the person? Are they capable of manual handling alone? Do they need assistance?

T – Task. This means considering the manual handling activity itself, i.e. the lifting, lowering, carrying, pushing or pulling, and looking at how it may affect your health and safety. For example, does the task involve repetitive movements, strenuous movements, long distances, or uneven weight distribution?

E - Equipment

All employees are required to make a visual check prior to use of any equipment to ensure:

- It is clean and intact
- There is no sign of damage or wear and tear
- That any slings/hoists clearly indicate the maximum load bearing for safe use, and are appropriate for the hoist being used.

** These are examples only and in no way attempt to cover all risk encountered during therapy treatments, a full assessment of the individual needs are to be considered.*

All moving and handling equipment is checked and maintained every 6 months, or more frequently according to the manufacturer's recommendations and any legislation/regulations such as LOLER.

Healthcare professionals and care staff are trained to monitor equipment and must notify their BCM ahead of the schedule service date. Where faulty or unsafe equipment is identified- care staff are trained to suspend the use and report the fault to their line manager/BCM.

Other Health & Safety regulations that have relevance to Manual Handling include:

- The Workplace (health, safety & welfare) Regulations 1992
- The Health and Safety (miscellaneous Amendment) Regulations 2002
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995
- Provision and Use of Work Equipment Regulations 1998 (PUWER)
- Lifting Operations And Lifting Equipment Regulations 1998 (LOLER)

PUWER states that employer must provide suitable equipment that is maintained in an efficient working order and good repair and provide information, training and instruction in its use.

In addition to the above, **LOLER** requires employers to have lifting equipment Serviced and inspected at regular (6 month minimum) intervals

EMERGENCY SITUATIONS

- All manual lifting of a person where employees take the full body weight or most of the person's weight must be eliminated in all but life threatening and emergency situations. Whenever possible, equipment should be used.
- Some situations are foreseeable e.g. person with a history of falls or collapse. All foreseeable emergency situations must have risk assessments in place and suitable and sufficient control measures agreed to reduce injury risks.
- The manual lifting of a person is high risk and considered as a last resort. In life threatening or emergency situation, when there is no other option available, a total of 7-8 people will be required to assist depending on the situation.
- If an unforeseen emergency situation occurs in an area without suitable equipment and/or insufficient employee numbers, a risk assessment must be completed after the event and suitable control measures established for the future

References:

Manual Handling Operations

Regulations 1992, as amended by the Health and Safety (Miscellaneous Amendments) Regulations 2002
accessed at

http://www.hse.gov.uk/foi/internalops/ocs/300-399/313_5.htm

Manual handling. Manual Handling Operations Regulations 1992. Guidance on Regulations L23 accessed at

<http://www.hse.gov.uk/pubns/priced/l23.pdf>

Hunt S 2017 A Guide to Manual Handling and Lifting Techniques accessed at

<http://www.workplacesafetyadvice.co.uk/guide-manual-handling-lifting-techniques.html>

Further information can also be found at:

Moving and handling Advice guides Royal College of Nursing accessed at

<file:///C:/Users/Juliette%20Millard/Downloads/Moving%20and%20handling.pdf>

HSE Getting to grips with hoisting people accessed at

<http://www.hse.gov.uk/pubns/hsis3.pdf>

ACAS correct manual handling principles

http://www.acas.edu.au/cypertots_toolbox/toolbox12_11/shared/resources/html/res_corr_ectmanhand.htm

The following legislation may be relevant for assessing moving and handling risks:

Health and Safety at Work etc Act 1974 (HSWA)

Management of Health and Safety at Work Regulations 1999

Provision and Use of Work Equipment Regulations 1998 (PUWER)

Lifting Operations and Lifting Equipment Regulations 1998 (LOLER)

MHRA Safe use of bed rails December 2013

MHRA patient safety alert Stage One: Warning Risk of death and serious harm by falling from hoists 28 October 2015

Slips, Trips and Falls Policy

Estio Healthcare recognises slips, trips and falls to refer to any accidental slip, trip or fall which may have the potential for injury or harm to a member of staff, to a service user or to visitors and contractors. Estio healthcare understands that such falls represent one of the most common causes of workplace injury in the UK.

Estio Healthcare recognises its responsibility to ensure that all reasonable precautions are taken to minimise the risks of slips, trips and falls for our clients and staff.

Risk Control Policy

Estio Healthcare's policy that it will reduce and control risks of slips, trips and falls by:

- ensuring that all health and safety risk assessments include an assessment of the risks of slips, trips and falls for all clients but especially for service users who are elderly and / or have impaired vision or mobility
- putting in place policies and procedures for reducing the risk of slips, trips and falls in the home
- ensuring that all service users are assessed for any history of falls and those with a history of falls have a risk assessment conducted and the results added to their Care Plan
- monthly scrutinizing accident reports to identify if slip, trip and fall hazards are being effectively controlled
- ensuring that all care staff are trained in falls prevention and in the recognition and reporting of potential slip, trip and fall hazards.

To reduce the risks of slip hazards:

- non-slip floor surfaces will be used wherever possible, especially in higher risk areas such as kitchens, toilets, sluices and bathrooms
- access to areas where floors are wet after cleaning or where spillages have occurred will be restricted to authorised staff only by use of appropriate warning signs
- procedures will be in place for cleaning up spillages quickly and efficiently, including water left on the floor after baths
- the use of loose rugs and mats will be avoided
- procedures will be in place for ensuring that the clothing and footwear of clients and staff are of a satisfactory standard
- procedures will be in place for de-icing external footpaths
- good quality doormats will be used around entrances and exits to the outside with doorways protected from the weather and the ingress of rain.

To reduce the risks of trip hazards:

- activities involving electrical equipment are be planned to minimise trailing wires, i.e. staff should always use the nearest socket available
- an adequate number of fixed electrical sockets are provided in areas where electrical equipment is situated
- the use of trailing socket extension leads is discouraged
- weekly checks are carried out and recorded to ensure that worn or frayed areas of carpet, and raised carpet/flooring edges, are identified and repaired or replaced.
- good housekeeping procedures are implemented to prevent items and objects being left on the floor, especially in busy communal areas
- edges or variations in floor height, such as step and stair edges, are clearly marked wherever possible.

To reduce the risks of fall hazards:

- secure and obvious hand rails are fitted for all steps and stairs and along corridors – on both sides as necessary for stability

- a planned preventive maintenance program is in place, linked to regular risk assessment inspections, to ensure that all floor and other entry and exit routes have flat, even surfaces
- protruding or obstructing items of furniture or equipment, especially at low level, are removed
- lighting will be maintained to enable people to see obstructions and potentially slippery or uneven areas, etc so that staff can work safely and service users can move about safely
- lights will be replaced, repaired or cleaned whenever light levels become too low and new lights will be installed wherever poor lighting levels are identified as a hazard.

Estio Healthcare staff in kitchen and food preparation areas should be particularly careful to put effective measures in place to avoid slips and should:

- wherever possible, avoid the spillage of water or contamination of the floor with oil or food debris
- use lids and covers for pans and containers, especially when they are being carried
- maintain equipment effectively to prevent any leaks of oil, water, etc
- ensure that a system is in place for promptly reporting and dealing with equipment faults
- arrange the timing of routine floor cleaning so that staff are not put at risk and hygiene is not compromised
- clean up spillages immediately
- avoid leaving floors wet after cleaning
- ensure that staff working in the kitchen wear appropriate footwear.

Cleaning

Due to their high risk, cleaning activities will be given special attention in relation to slips on wet, polished or soapy surfaces. All cleaning staff will be trained in the correct use of any safety and cleaning equipment provided and cleaning methods and equipment must be suitable for the type of surface being treated. Staff should take care not to create additional slip or trip hazards while cleaning and to always use appropriate warning signs whenever floors are wet.

Falls Prevention

Estio Healthcare is committed to an active approach to falls prevention. In this context additional control measures will be considered when performing a slips, trips and falls risk assessment for high risk service users such as those with limited mobility, with conditions such as osteoporosis or with conditions affecting their balance.

To help to reduce the risk of falls among such higher risk residents, our clients will put in place the following measures:

- the provision of regular falls prevention advice from care professionals and training
- Robust falls risk assessment of all residents on admission, which includes medical, physical, psychological and environmental factors, with monthly reviews or more frequently if a change in a residents condition is seen
- systems for summoning help
- beds and chairs appropriate to individual needs and in good repair
- physiotherapist and occupational therapist support where required to implement treatment and prevention strategies
- appropriate levels of supervision
- the provision of an adequate, nutritious diet for residents.
- Staff, service users and carers will be made aware of drug side effects related to falls as Estio Healthcare understands that some medications can disturb balance and mobility.

Incident Reporting

Regular scrutiny of accident reports will be conducted to identify if slip, trip and fall hazards are being properly controlled, ie if reported incidents are reducing in number. Annual audits of the management of slips, trips and falls within the home should also highlight strengths and weakness and clarify areas where improvements may be necessary.

Falls procedure

We must not assist the resident up and must not attempt to break the fall, the service user may get up independently if they are able to do so, if not we must encourage them to stay still, make comfortable, and inform a senior. The senior will contact a local falls team or 111.

If you are lone working call 111 – or 999 if serious injury sustained.

If the fall was un-witnessed consider the possibility that the resident has hit their head, unless proven otherwise. Look for signs of a head injury and start neurological observations

If the resident is in pain or there appears to have been an injury a full assessment must be performed by a medically trained individual – a nurse, first aider, GP or Ambulance personnel
Complete Accident report and Falls Register following Falls adverse event check list and prompt sheets

Contact residents NOK and document all events in residents care plan and daily record.

Try to identify cause of the fall and review residents falls and moving and handling care plan making adjustments as appropriate.

All Estio Healthcare staff will be trained in falls prevention and in the recognition and reporting of potential slip, trip and fall hazards.

- All slip, trip and fall training includes:
- staff responsibilities, and limitations, for health and safety as defined in the clients health and safety policy
- identification of vulnerable clients and familiarity with their disabilities and conditions
- the risks and control measures associated with slips, trips and falls, both to themselves, the clients and any other visitors
- the procedures for cleaning up spillages, including any controls required by the Control of Substances Hazardous to Health Regulations 2002 (COSHH) where the substances are defined as being hazardous
- the need to maintain high levels of housekeeping and tidiness at all times.
- During training all staff should be encouraged to immediately report any slip, trip or fall hazard.

Section 4

TRAINING AND SUPERVISION

Training Policy

Our staff are the most valuable asset we have. We consider it vital that we enhance the skills our staff have and offer opportunities to learn and deliver new skills.

Aims of Training:

- To update and introduce relevant knowledge
- To explore and encourage appropriate attitudes
- To give the opportunity for developing and practising required skills
- To create awareness of responsibilities when working with various client groups
- To enable staff to carry out the necessary procedures with the maximum safety to themselves and the client
- To support reflective and progressive practice
- To support personal and professional development
- To provide opportunities to transfer skills into working with other client groups.

Through training learners will be able to:

- Demonstrate an understanding of their responsibilities and the importance of their role within the team for the effective functioning of community care
- Demonstrate a wider knowledge and understanding of various client groups, their problems and required care
- Demonstrate communication skills relevant to caring for various client groups
- Perform practical procedures in a safe and effective manner.

Training

It is the expectation that all Estio Healthcare staff will commit to required training as identified by Estio Healthcare. This is done in accordance with legislative requirements of the Care Quality Commission

Approved Training

Training is provided on a regular basis and all candidates are expected to comply with minimum requirements. Training will be provided by approved training providers and monitored by Estio Healthcare to ensure high standards of training are maintained.

Estio Healthcare reserves the right to deregister any candidate who refuses to attend or consistently fails to attend training arranged by Estio, or those candidates who do not hold the appropriate training certificates.

Where candidates attend training not arranged by Estio Healthcare then appropriate documentation must be provided as evidence of attendance.

The following matrix provides details of training required for health care assistants:

Training/Qualification	Update timescale
Moving and Handling	Bi - annual
Food Hygiene	Bi- annual
Infection Control	Bi- annual
Health & Safety	Bi- annual
Emergency First Aid	Bi - annual
Fire Safety	Bi - annual
Managing Violence and Aggression	Bi - annual
Medication	Bi - annual
Person Centred Care and Support	Bi - annual
Communication	Bi - annual
Mental Health, Dementia and Learning Disabilities awareness	Bi - annual
Safeguarding Adults and Children	Bi - annual
Handling Information	Bi - annual
Personal Care	Bi - annual
Equality, Diversity and Inclusion	Bi – annual
Dignity and Privacy	Bi - annual
NVQ Level 2	Achieve
NVQ Level 3	Achieve
NVQ Level 4	Achieve

Estio Healthcare is committed to providing up to date training and pursuing both professional and personal development of our staff. Additionally we value our employees' suggestions and requests for training that will contribute to the provision of quality care.

b. Induction

All staff registered by Estio Healthcare must have substantial experience working in a care setting: it is therefore expected that they have previously been trained in the basic skills of care. Additionally all carers will need to attend three basic mandatory induction training. Where candidates are able to provide previous certification from a recognised awarding body this will be seen as satisfactory. Induction training is provided following the successful application of a carer/nurse to the organisation. This is made up of two parts as follows:

Part 1 – Training Review

All care candidates registered with Estio Healthcare are required to supply valid certificates of previous training, where training gaps are identified and do not meet the requirements a candidate must undertake the relevant training.

Part 2 – Discussion and information session on Estio Healthcare policies and procedures

This introduces the candidate to all required policies to work both legally and professionally in the care setting with particular emphasis placed on understanding and working in accordance with a professionally recognised code of conduct; HPC for social care staff and NMC for registered nurses. Carers and nurses are invited to ask questions on any area of guidance and once they have received the induction session they are required to sign for receipt of the handbook making an agreement to work in accordance with the policies included;

- HCPC Code of Practice / NMC Code of Practice
- Company Policies and Procedures
- The Care Certificate
- Provision of training to update any mandatory qualifications.

a. Supervision Policy

Estio Healthcare will provide regular staff supervision to all candidates who are working in one-to-one settings deemed a domiciliary setting. Supervision will be delivered through a Branch Manager, Senior Consultant or Qualified Nurse. They will be responsible for ensuring that where possible candidates meet all their professional and personal aims through Estio Healthcare. Some contracts will require your attendance at meetings and supervision from a commissioning group representative.

All nursing personnel are required to undertake supervision every six months with a qualified nurse. This is a requirement of registration with Estio Healthcare.

1-to-1 Work – Domiciliary Work – to receive four supervisions per year

- 4 x Supervisions should be undertaken by the supervision manager and branch manager. These Supervision sessions should include care plan notes from current cases.
- 4 x Group Supervisions.
- One onsite supervision will be required annually.

Regular Workers

- We undertake quarterly feedback forms on individuals working in an ongoing placement to review ongoing performance and development needs.
- All individuals are invited to attend a supervision session and are able to access this service on a quarterly basis.

Qualified Nurses

- All Nurses must receive supervision from a qualified professional.
- Require onsite supervision.

Section 5

EQUALITY & DIVERSITY

Estio Healthcare is committed to a policy of equal opportunities for all and shall adhere to such a policy at all time and will review on an on-going basis on all aspects of recruitment to avoid unlawful or undesirable discrimination.

Estio Healthcare will treat everyone equally irrespective of sex, sexual orientation, marital status, age, disability, race, colour, religion, ethnic group, national origin or offending background that does not create a risk to children or vulnerable adults and places an obligation upon all staff to respect and act in accordance with the policy. Estio Healthcare is committed to providing training for all our staff in equal opportunities practice.

Estio Healthcare shall not discriminate unlawfully in deciding when an individual is submitted for a vacancy or assignment, or in any terms of appointment. Estio Healthcare will ensure that each candidate is assessed only in accordance with the candidate's merits, qualification and ability to perform the relevant duties required by the particular vacancy.

Estio Healthcare will not accept instructions from clients that indicate an intention to discriminate unlawfully.

Estio Healthcare work in accordance with the following legislation:

The Equality Act 2010 – this act legally protects people from discrimination in the workplace and in wider society. The act protects individuals against discrimination in the following areas; these are called Protected Characteristics:

- Race
- Religion or belief
- Age
- Disability
- Gender reassignment
- Marriage and Civil Partnership
- Pregnancy and Maternity
- Gender
- Sexual Orientation

The Human Rights Act 1998 – this law sets out the fundamental rights and freedoms that everyone in the UK is entitled to:

- Right to life
- Freedom from torture and inhuman or degrading treatment
- Freedom from slavery and enforced labour
- Right to liberty and security
- Right to a fair trial
- No punishment without law
- Respect for your private and family life
- Freedom of thought, belief and religion
- Freedom of expression
- Freedom of assembly and association
- Right to marry
- Protection from discrimination

3a. Estio Healthcare – Statement of Policy (From CRE Guidance)

Estio Healthcare adheres to an equal opportunities policy.

This policy covers all aspects of employment, from vacancy advertising, selection recruitment and training to conditions of service and reasons for termination of employment.

To ensure that this policy is operating effectively (and for no other purpose) Estio Healthcare maintains records of all individuals' racial origins, gender and disability.

Ongoing monitoring and regular analysis of such records provide the basis for appropriate action to eliminate unlawful direct and indirect discrimination and promote equality of opportunity.

Estio Healthcare's long-term aim is that the composition of our workforce should reflect that of the community. Timetabled targets will be set for groups in the community that are identified as being underrepresented in the workforce. Where necessary special steps as permitted by the relevant Acts of Parliament, will be taken to help disadvantaged and/or underrepresented groups to compete for jobs on a genuine basis of equality.

Estio Healthcare's EOEP, and the measures to implement it, have been devised on the basis of advice from the relevant bodies as well as in consultation with appropriate union and/or employee representatives.

The Managing Director is responsible for the effective operation of Estio Healthcare's EOEP.

3b. Estio Healthcare – Equal Opportunity Policy

1. Vacancy advertising
2. Selection and recruitment
3. Positive action – training, promotion and conditions of service
4. Personnel records
5. Sex and Race Discrimination
6. Disability Discrimination
7. Age Discrimination
8. General

Vacancy Advertising

Wherever possible, all vacancies will be advertised simultaneously internally and externally. Steps will be taken to ensure that knowledge of vacancies reaches underrepresented groups internally and externally.

Wherever possible, vacancies will be notified to job centres, careers offices, schools, colleges, with significant minority group rolls, as well as to minority press/media and organisations.

All vacancy advertisements will include an appropriate short statement on equal opportunity.

Recruitment and Selection

Selection criteria (job description and employee specification) will be kept under constant review to ensure that they are justifiable on non-discriminatory grounds as being essential for the effective performance of the job.

Wherever possible, more than one person must be involved in the selection interview and recruitment progress, and all should have received training in equal opportunities.

Wherever possible, women, minorities and disabled persons will be involved in the short listing and interviewing processes.

Reasons for selection and rejection of applicants for vacancies must be recorded.

Positive Action – training, promotion and conditions of service.

Underrepresented groups will be encouraged to apply for training and employment opportunities with Estio Healthcare. Wherever possible, special training will be provided for such groups to prepare them to compete on genuinely equal terms for jobs and promotion. However, actual recruitment to all jobs will be strictly on merit.

Wherever necessary, use will be made of lawful exceptions to recruit suitably qualified people to cater for the special needs of particular groups.

Wherever possible, efforts will be made to identify and remove unnecessary/unjustifiable barriers and provide appropriate facilities and conditions of service to meet the special needs of disadvantaged and/or underrepresented groups.

Personnel Records

In order to ensure the effective operation of the equal opportunity policy (and for no other purpose) a record will be kept of the gender, racial origins and disability of all staff and job applicants.

Where necessary, staff will be able to check/correct their own record of these details.

Otherwise, access to this information will be strictly restricted.

Such records will be analysed regularly and appropriate follow-up action taken.

Gender and Race Discrimination

Unlawful sex or race discrimination occurs in the following circumstances:

Direct Discrimination

Direct discrimination occurs where one individual treats another individual less favourably on the grounds of their sex or race than he treats or would treat other persons.

It is unlawful for a recruitment consultancy to discriminate against a person on the grounds of their sex, colour, race, and nationality, ethnic or national origins:

- In the terms on which the recruitment consultancy offers to provide any of its services;
- By refusing or omitting to provide any of its service;
- In the way it provides any of its services.

Direct discrimination would also occur if a recruitment consultancy accepted and acted upon a job registration from an employer which states that certain persons are unacceptable because of their sex, colour, race, nationality, or ethnic or national origins, unless one of the exceptions applies.

Indirect Discrimination

A claim of indirect discrimination arises when an employer applies a requirement or condition generally, but which is such a proportion of persons from one racial group who can comply with it is considerably smaller than the proportion of persons not of that racial group who can comply with it.

Indirect discrimination would also occur if a recruitment consultancy accepted and action upon an indirectly discriminatory instruction from an employer.

Estio Healthcare will not discriminate unlawfully when selecting individuals for submission for a vacancy or assignment or in any terms of appointment.

If the vacancy falls within the definition of a genuine occupational qualification or any other statutory exception, Estio Healthcare will not deal further with the vacancy unless the client provides written confirmation of the genuine occupational qualification.

Disability Discrimination

Disability discrimination occurs if for a reason which relates to the disabled person's disability an individual:

- Treats him less favourably than he treats, or would treat others to whom that reason does not or would not apply, and
- The employer cannot show that the treatment in question is justified.

Estio Healthcare will not discriminate against a disabled job applicant or employee on the grounds of disability –

- In the arrangements i.e. applicant form, interview and arrangements for selection for determining to whom a job should be offered.
- In the terms on which employment or engagement of temporary workers is offered.
- By refusing to offer, or deliberately not offering he disabled person a job for reasons connected with their disability.
- In the opportunities afforded to the person for receiving any benefit, or by refusing to afford, or deliberately not affording him or her any such opportunity.
- By subjecting him or her to any other detriment (detriment will include refusal of training, transfer, demotion, reduction of wage or harassment).

Estio Healthcare will accordingly make career opportunities available to all people with disabilities and every practical effort will be made to provide for the needs of staff, candidates and clients.

Age Discrimination

Estio Healthcare will encourage clients not to include any age criteria or other subjective criteria in job specifications and every attempt will be made to persuade clients to recruit on the basis of competence and skill and not age.

Estio Healthcare will not discriminate directly or indirectly, harass or victimise any person the grounds of their age. We will encourage clients not to include any age criteria in specifications and every attempt will be made to persuade clients to recruit on the basis of competence and skills and not age.

Estio Healthcare is committed to recruiting and retaining people whose skills, experience and attitude are suitable for the requirements of the various positions regardless of age.

No age requirements will be stated in any job advertisements on behalf of the company. Estio Healthcare will request age as part of its recruitment process but such information will not be used as selection, training or promotion criteria or in any detrimental way and is only for compilation of personal data, which the company holds on all employees and workers and as part of its equal opportunities monitoring process.

People with Criminal Records

People with criminal records applying for jobs should be treated according to their merits and to any specific criteria of the post (e.g. caring for children and vulnerable adults, which debars some in this category).

Questions are asked at short-listing stage about criminal records in order to ensure that people with such records are not inadvertently placed in vulnerable positions within the organisation. Having a criminal record, in itself, should not necessarily prevent a person from being appointed to any post, unless the offence debars the person. Where it is felt, however, that a recent or serious offence might mean that a person presents a risk to children or vulnerable adults then that person should not be appointed. Discrimination either in favour of or against those persons currently in employment who have disclosed their criminal record is not permissible (unless the offence debars them), and such information is strictly confidential.

Appointment of a person with a criminal record

Short listed applicants are required to complete a declaration of criminal record using the standard organisational form. If an applicant reveals a serious criminal record, particularly if it is recent then the 'responsible person' should consult the manager. Generally a decision to reject an applicant because of, or partly because of, a criminal record should relate to an aspect of the person specification which is seen to be unmet. If possible, an applicant in those circumstances should be advised of why their application has had to be rejected.

In circumstances in which the appointment of a person with a serious record might give rise to criticism of the organisation, the head of human resources or senior member of management should be consulted before the appointment is confirmed.

Details of person's criminal record must always be maintained as strictly confidential.

New Offences

All workers of Estio Healthcare are to inform the agency of any new criminal offence they may have committed, including motor offences.

General

The objectives of this EOEP are to:

- Ensure that Estio Healthcare has access to the widest labour market and secures the best candidates for its needs.
- Ensure that no individual receives less favourable treatment, and that, wherever possible, they are given the help they need to attain their full potential to the benefit of the company/etc and themselves.
- Achieve an ability-based workforce, which is in line with the working population mix in the relevant labour market areas.

The co-operation of all staff is essential for the success of this policy. However, ultimate responsibility for achieving the policy's objectives and for ensuring compliance with the relevant Acts of Parliament as well as the various Codes of Practice lies with Estio Healthcare. Behaviour or actions against the spirit and/or the letter of the laws on which this policy is based will be considered serious disciplinary matters and may, in some cases, lead to dismissal.

HARASSMENT POLICY

Estio Healthcare are committed to supporting the principle of equal opportunities and opposes all forms of unlawful or unfair discrimination on grounds of colour, race, nationality, ethnic origin, sex, marital status, disability, age, religion or sexual orientation.

This harassment policy forms part of the Company's general policy on equal opportunities. Harassment is one form of unlawful discrimination.

Harassment of colleagues or the public, whether on grounds of race, sexuality or gender, religion, disability, age or of any other kind, will not be tolerated under any circumstances and all employees are required not to behave in such a way as to cause offence to others.

This policy is not designed to discourage normal social relations amongst colleagues or with the public. Its aim is to prevent discrimination. The policy applies not only to interaction whilst working at the Company's offices and those of any customer, client or contact but extends to time spent travelling, away from home whilst on business, on training courses and social events organised by the Company.

It is the responsibility of all employees to be sensitive to the impact of their behaviour on others. All employees and in particular managers and supervisors must ensure that the Company's policy on harassment is implemented as quickly and as thoroughly as possible.

What is harassment?

Harassment is any unwanted, verbal or physical conduct or behaviour, including advances or abusive comments, which another employee may find intimidating, offensive or distressing and which is unwanted.

The following types of behaviour may amount to harassment:

- Suggestive comments or gestures.
- Offensive gestures, language, gossip or jokes.
- Insulting or abusive behaviour or comments.
- Isolation or exclusion.
- Bullying.
- Humiliating, demeaning or persistently criticising the individual.
- Unfair allocation of work or responsibilities.
- Display of sexually suggestive pornographic, racist or offensive pictures or other material or transmitting of any such messages or images via electronic mail.
- Physical assault.
- Threats.

The list gives examples only and is not exhaustive.

Sexual harassment by someone of the same sex as the victim is also covered by this policy.

The Company considers harassment to amount to gross misconduct, which will be dealt with under the Company's disciplinary policy and may lead to summary dismissal.

Duties of Branch Manager

Where a Branch Manager becomes aware of an allegation of harassment of an employee in connection with the Company's activities, he/she must (whether or not a formal complaint has been made) discuss it with the employee and, unless the employee expressly requests otherwise, report it to the manager. In addition, and again whether or not a formal complaint has been made, it is the Branch Manager's responsibility to discuss the unacceptable behaviour with the client.

Employee Responsibility

Every employee must take reasonable steps to ensure that harassment does not occur and must report any incidents to their Branch Manager.

Employees who believe they are the victims of harassment may raise the matter with their Branch Manager if they wish to resolve the matter informally.

Employees who believe they are the victims of harassment are encouraged to use the Company's grievance policy.

COMPLAINTS

COMPLAINTS AND COMPLIMENTS PROCEDURE

As an employee of Estio Healthcare you have the right to complain about any aspect of our home care service. In the event that you should wish to make a complaint it is recommended that you contact the Estio Healthcare Manager who will do her utmost to resolve the matter as quickly as possible. If you feel that either yourself or a member of your family and/or a friend are unable to discuss the matter with the Estio Healthcare Manager or he/she is unable to resolve the problem then you should contact the senior manager who will try to resolve the problem within 7 working days.

Please contact::

Liz Hall
Estio Healthcare
E230 Dean Clough Mills
Halifax
HX3 5AX

If you are not satisfied the way the complaint has been dealt with or you wish to seek further advice please contact:

CQC Yorkshire & Humberside Region
Citygate
Gallowgate
Newcastle NE1 4PA

As well as complaints we also like to hear your comments on the service we provide. Should you wish to comment on any aspect of this please address this to your local branch. We do appreciate compliments as well as complaints and all comments received will assist us to improve the service we provide.

Section 6

DISCIPLINARY PROCEDURE

This disciplinary procedure is only applicable to employees of Estio Healthcare and is designed to help and encourage staff of Estio Healthcare to achieve and maintain standards of conduct, attendance and job performance.

Principles

1. No disciplinary action will be taken until the situation has been investigated. Estio Healthcare may suspend you with or without pay while the investigation takes place. Such a suspension will be reviewed as soon as possible and will not normally exceed (20) working days.
2. At every stage in the procedure you will be advised of the nature of the complaint and will be given the opportunity to state your case before any decision is made.
 - You have the right to be accompanied by a work colleague of your choice during any disciplinary meetings.
 - You will not be dismissed for a first breach of discipline except in the case of gross misconduct (when the penalty may be dismissal without either notice or payment in lieu of notice).
You have the right to appeal against any disciplinary decision.
 - Misconduct will generally fall into two categories: “general” misconduct (in respect of which the general disciplinary procedure described below applies) and “gross” misconduct, which is of so serious a nature that it justifies instant dismissal for a first offence. Listed below are examples, which would normally be considered to be either general misconduct or gross misconduct. However, it should be recognised that neither list can be regarded as complete to meet every case, and also that action described as general misconduct may amount to and be treated as gross misconduct if the circumstances or the manner of the misconduct are such as to warrant serious disciplinary action. These lists should be regarded therefore as being illustrative rather than exhaustive.

Types of Disciplinary Action.

Disciplinary Action will consist of one or more of the following:

- a. Oral warning;
- b. Written warning;
- c. Final written warning;
- d. Dismissal with or without notice.

The Procedure

- **Stage 1 – Oral Warning**

If the conduct or performance is unsatisfactory, you will be given a formal oral warning, which will be recorded in writing on your personal file. The warning will be disregarded after 12 months’ satisfactory service

- **Stage 2 – Written Warning**

If the offence is serious or if there is no improvement in standards after the oral warning is given, or if a further offence occurs within 12 months after an oral warning, a written warning will be given. This written warning will include the reason for the warning and a note that, if

there is no improvement after a specified period, a final written warning will be given. A copy of the written warning will be given to you and a copy will be placed on your personal file.

- **Stage 3 – Final Written Warning**

If, following a written warning, conduct or performance remains unsatisfactory, or if a serious incident occurs, a final written warning will be given making it clear that any recurrence of the offence or other serious misconduct within a specified period will result in dismissal.

- **Stage 4 – Dismissal**

If there is no satisfactory improvement or if further serious misconduct occurs, you may be dismissed, either with or without notice or payment in lieu of notice.

- **Disciplinary Procedures**

The disciplinary procedure may be implemented at any stage if the seriousness or repetitive nature of the employee's breach warrants such action.

- **Appeals**

If you wish to appeal against any disciplinary decision you must do so in writing to the Branch Manager within 5 working days after any disciplinary decision is taken. The Branch Manager (or in the event that he/she has been involved in making the disciplinary decision against which you are appealing) the Senior Manager will hear the appeal and make the decision.

Examples of “gross” misconduct

Summary dismissal (dismissal without notice or pay in lieu of notice) may be necessary in cases of gross misconduct. For guidance, the following are examples of the offences, which may be, regarded as gross misconduct and will normally result in summary dismissal. It is emphasised that this is not an exhaustive list:

- Unauthorised use or disclosure of confidential information or business matters relating to Estio Healthcare, its clients, temporary workers or applicants.
- Acts of violence, including physical assault; unlawful discrimination; drunkenness; taking of non-prescribed drugs in such a way as to impair the ability to carry out work; conduct of any kind which endangers the health and safety of others.
- A criminal offence committed at work other than a minor road traffic offence committed in the course of employment, or an offence committed outside work, which is incompatible with the Employee remaining in employment.
- Falsification of information or references on appointment.
- Unauthorised absence or gross negligence in the performance of duties.
- Acceptance of any bribe, secret profit or unauthorised commission.
- Any conduct tending to bring Estio Healthcare or the employee into disrepute or which results in the loss of custom of a client, temporary or applicant or a loss of business.
- Working for or assisting a competitor of Estio Healthcare or seeking to establish a business which is likely to compete with Estio Healthcare or divulging confidential information concerning the company and its business.
- Refusal to obey a lawful instruction in connection with the employment.
- Disclosing details of his/her salary and remuneration to other employees of Estio Healthcare.

Examples of “general” misconduct

The following may be regarded as reasons for disciplinary action in that they deviate from accepted standards and constitute general misconduct. The Employee’s first offence will usually result in a verbal or written warning as appropriate. Repetition of offences following a warning could lead to a written warning or a final written warning as appropriate. Thereafter any repetition will result in dismissal. It is again emphasised that this is not an exhaustive list: -

- Poor job performance.
- Poor time keeping.
- Failure to comply with any other conditions in this Agreement.
- Unseemly or disruptive conduct.

Section 7

CHALLENGING BEHAVIOUR AND PHYSICAL INTERVENTIONS

MANAGING AND RESPONDING TO VIOLENT AND AGGRESSIVE BEHAVIOUR

This policy has been designed to assist with dealing with violence. It is unfortunate that staff are sometimes confronted with situations that are threatening and frightening. These occasionally may take the form of physical violence but more frequently it is verbal abuse or threats. However, any form of violence is distressing and therefore it is important that we monitor these types of situations to:

- Provide information so that training and education on ways in which to respond to and manage aggressive behaviour can be effective and to develop understanding of the causes of aggression and violence.
- Offer support to those individuals who have suffered from either verbal abuse or physical aggression.

Guidelines for dealing with violence

A definition of violence is as follows:

- Aggressive physical contact which may or may not result in pain and/or injury.
- Other aggressive behaviour directed to a member of staff, for example intimidating behaviour causing fear or concern, verbal abuse.
- Violence to property which may encompass a range of behaviour from ransacking a building to the throwing of a teacup or newspaper.

Prevention

The objective of this policy is prevention and avoidance of violence or physical abuse. One of the most important aspects in avoiding physical abuse or violence is to always treat others with courtesy and respect, even when they are aggressive and verbally abusive. It has been proved that this can prevent a violent situation developing further.

Handling an incident

It is the responsibility of all staff to consider each individual case on its merits. Even when precautions have been taken a violent, aggressive or abusive situation can still occur. Therefore all candidates of Estio Healthcare must always:

Try to keep control of the situation.

- Attempt to discuss the problem calmly and clearly with the individual.
- If possible, calmly call for help/assistance.
- If all else fails, retreat.
- It is not possible to retreat, protect yourself and others by the use of minimum physical restraint.
- Always report and record the incident by contacting the Estio Healthcare office at your earliest opportunity. Detailed statements and completion of an Estio Healthcare Incident Form will be required.

It is always important that you report all incidents irrespective of the nature or severity. This does not suggest failure to handle the situation effectively.

Summary

All individuals who have been threatened with aggressive behaviour and/or physical violence must be supported competently and sensitively. This is the responsibility of Estio Healthcare. In some instances it may be necessary to refer them to an appropriate professional body. Reasonable practical support must be provided. Equally important is to ensure that each individual incident is analysed, understood and action taken where necessary.

MANAGING AND RESPONDING TO DISRUPTIVE AND CHALLENGING BEHAVIOUR

The policy has been designed for those Service Users who may be disruptive and present Estio Healthcare staff with disruptive and challenging behaviour.

Emphasis is placed on good clear communication and prevention of disruptive and/or challenging behaviour.

Although the policy has been designed with Service Users in mind it should be remembered that disruptive and challenging behaviour may be presented by workers, Service Users' next of kin/representative and/or any other members of the multi disciplinary team.

When dealing with disruptive and challenging behaviour at all times it is paramount to remain calm, non-authoritarian, non-threatening and promote good, clear communication.

The Procedure

The objective of this procedure is to prevent disruptive and/or challenging behaviour.

1. All Service Users and their families are to be introduced to their Home Care Worker, Co-ordinator Team Leader and/or Manager. The rationale behind this process is to encourage good worker/Service User relationships.
2. All candidates are to promote good communication skills in order to gain and retain confidence. This is to foster good relationships as a basis for trust and understanding.

3. Candidates are to avoid situations where there has been a deterioration of the relationship between a Service User and/or their representative. This is to prevent and reduce the risk and potential of verbal and physical violence.
4. Service Users should be allowed to voice their feelings and worries. This enables Workers to have an insight into the Service User's condition and how he/she is feeling.
5. All candidates must be aware of their attitude and approach to any Service User. The wrong approach may precipitate an aggressive outburst.
6. All candidates must remain calm, pleasant in manner and patient. A deteriorating situation may develop if Service Users are rushed or upset.
7. All personnel must answer questions truthfully and as consistently as possible. Inconsistency to a Service User and/or their representative can cause mistrust and potentially lead to an explosive situation.

If challenging/disruptive behaviour should occur the following must be observed:

1. Remain calm and in control of the situation and summon help.
2. Talk to the Service User in a calm manner using knowledge of the person to "talk down" the situation.
3. Do not assume threatening posture.
4. Try to divert the Service User's attention to lessen the aggression.
5. Remove any person, not directly involved, from the vicinity.
6. A lead member of staff must co-ordinate all care as too many personnel becoming involved could potentially aggravate the situation.
7. The Service User must be protected from harm at all times and the minimum amount of restraint where necessary to alleviate the situation must be used.
8. The GP must be consulted as soon as possible and a care plan instituted to prevent/deal with recurrences.

Summary

The above policy is aimed at preventing disruptive and challenging behaviour. All candidates must be aware of their attitude, approach, manner and body language at all times as potentially even the slightest change could upset a Service User and/or their family. It is important that all grades of personnel are aware of the approach to dealing with disruptive and/or challenging behaviour.

RESTRAINT

Introduction

Restraint is simply any action, which immobilises, restricts and denies either by force or by the use of any piece of equipment, the freedom of mobility or the ability of a person to move or lift an object. Where or not that action is good intentioned, or for the safety and well being of the person it must always be remembered that it is still classed as RESTRAINT.

Types of Restraint

As stated above any piece of equipment that immobilises can be classified as restraining equipment. The most commonly used forms of restraint are bed safety rails, wheel chair harnesses, locked doors, stair gates, reclining chairs, or those specifically designed to impede mobility. It must never be forgotten that any form of denial can also be a form of restraint, i.e. isolation, keeping personal belongings out of reach, denying the person the opportunity to get a

drink of tea or coffee when they want one and so on. These are more subtle forms of restraint, and often sadly not seen as restraint.

Restraint Statement

Restraint is an emotive issue, on the one hand we work towards accepting the rights of the individual, to have as much choice as possible, and on the other we are looking at all times towards the protection of the person from injury or harm.

With the above in mind we operate within our service a policy of freedom of choice and self-expression for Service Users, and allow each individual User as much realistic choice as possible, in accepting the risks associated with every day life within their home environment.

There are however times when due to ill health, debility either mental or physical when for the safety and protection of the individual an agreed form of restraint may need to be used. When that situation arises the following guidelines will be implemented.

Guidelines

- Any form of restraint will only be used as a last resort measure, for the safety and well being of the Service User.
- All alternative measures will have been tried prior to the consideration of restraint.
- The need for restraint will always be as a safety measure where all alternative types of care have failed. Restraint will NEVER be used as a substitute for care or as a punishment.
- Only equipment designed specifically as a safe form of restraint will be used.
- The use of unsuitable or inappropriate equipment such as bed tables, or the use of chairs etc. to restrict mobility will not be tolerated.
 - As mentioned above the use of restraint is and always will be taken only when all alternatives to its use have failed. There after full and careful risk assessment the risk to the Service User's safety and well being is substantially higher than it would be without its use.

Reporting incidents of violence and use of restraint

Introduction

We work in accordance with The Task Force definition of violence to workers as 'Incidents where persons are abused, threatened or assaulted in circumstances relating to their work, involving an explicit or implicit challenge to their safety, well-being or health. This definition is taken to include verbal abuse or threat, threatening behaviour, any assault (and any apprehension of unlawful violence), and serious or persistent harassment, including racial or sexual harassment, and extends from what may seem to be minor incidents to serious assault and murder, and threats against the worker's family.'

The National Taskforce on Violence against social care staff research made three key findings

- Violence is often unreported
- Violence is seen as an acceptable part of the job
- Violence and abuse towards care staff is common in social care.

Our Policy

Our policy on violence works to meet the requirements of a positive work culture as far, as is possible in our role of placing social care workers on assignments. Reporting violence and incidents of restraint is clear – you MUST report any incident to the branch and to the Manager of the setting where the incident took place. In reporting violence we are able to develop policy that can:

- Support staff
- Encourage regular monitoring and reviewing of procedures
- Identify appropriate, regularly update training for staff on how to deal with violence

It is important to record and report incidents of violent behaviour and where you have been involved in a restraint procedure in such incidents Estio Healthcare will:

- Put procedures into action and provide immediate support for you
- Take responsibility for supporting anyone else involved;
- Discuss with you the sort of support you may need to recover from the incident (we all differ in our reactions to incidents and so does the support);
- Who else, if anyone, needs to be informed to keep them safe – your experience and that of others involved including Service Users and Carers, of the way the procedures work and what might need to be changed;
- The lessons for you, your colleagues, the organisation and any other organisations involved;
- What will be done and how progress will be checked;
- Re-assess and make any changes needed in procedures and support provided to reduce violence and abuse; (*Combating Violence Against Care Staff Guidance DOH*)

What you should do

- Be prepared: be familiar with and use the organisation's procedures.
- Know where you can get immediate support for yourself. It is your employer's responsibility to get support for others involved.
- Do not be surprised if your reactions or other people's are different from what you expected and be tolerant of your own and others' immediate reactions.
- Take care of yourself and contact people who will offer the support you need.
- Record details as soon as possible of the perpetrator(s) and the events and expect debriefing sessions for yourself and the perpetrator(s).
- Record and report the incident to Estio including minor incidents. There is a legal requirement under RIDDOR for the reporting of all injuries and accidents as identified in Section 1c.
- Remember nothing will change for the better unless incidents are reported.

Section 8

PROTECTION AND SAFEGUARDING

This policy applies to all staff, including senior managers, paid staff, agency staff, anyone working on behalf of Estio Healthcare.

The purpose of this policy:

- to protect children / young people, and vulnerable adults who receive Estio Healthcare's services. This includes the children of adults who use our services
- to provide staff with the overarching principles that guide our approach to safeguarding and child protection

Estio Healthcare believes that a child / young person and vulnerable adults should never experience abuse of any kind. We have a responsibility to promote the welfare of all children / young people and vulnerable adults and to keep them safe. We are committed to practice in a way that protects them.

Legal framework

This policy has been drawn up on the basis of law and guidance that seeks to protect children / young people, and adults, namely:

- Children Act 2004
- Safeguarding Vulnerable Groups Act 2006
- Protection of Freedoms Act 2012
- Children and Families Act 2014
- Care Standards Act 2000
- The Police Act – CRB 1997

Safeguarding is about embedding practices throughout the organisation to ensure the protection of children and / or vulnerable adults wherever possible.

In contrast, child and adult protection is about responding to circumstances that arise.

Abuse is a selfish act of oppression and injustice, exploitation and manipulation of power by those in a position of authority. This can be caused by those inflicting harm or those who fail to act to prevent harm. Abuse is not restricted to any socio-economic group, gender or culture.

It can take a number of forms, including the following:

- Physical abuse
- Sexual abuse
- Emotional abuse
- Bullying
- Neglect
- Financial (or material) abuse

Definition of a child

A child is under the age of 18 (as defined in the United Nations convention on the Rights of a Child).

Definition of Vulnerable Adults

A vulnerable adult is a person aged 18 years or over who may be unable to take care of themselves or protect themselves from harm or from being exploited.

This **may** include a person who:

- Is elderly and frail
- Has a mental illness including dementia
- Has a physical or sensory disability
- Has a learning disability
- Has a severe physical illness
- Is a substance misuser
- Is homeless

All staff (paid or unpaid) have responsibility to follow the guidance laid out in this policy and related policies, and to pass on any welfare concerns using the required procedures.

We expect all staff (paid or unpaid) to promote good practice by being an excellent role model, contribute to discussions about safeguarding and to positively involve people in developing safe practices.

Additional specific responsibilities

The Designated Senior Manager is Racheal Crowther. This person's responsibilities are

- The policy is in place and appropriate
- The policy is accessible
- The policy is implemented
- The policy is monitored and reviewed
- Liaison with and monitoring the Designated Senior Manager work
- Sufficient resources (time and money) are allocated to ensure that the policy can be effectively implemented
- Promoting the welfare of children and vulnerable adults
- Ensure staff (paid and unpaid) have access to appropriate training/information
- Receive staff concerns about safeguarding and respond to all seriously, swiftly and appropriately
- Keep up to date with local arrangements for safeguarding and DBS
- Develop and maintain effective links with relevant agencies.
- Take forward concerns about responses

The scope of this Safeguarding Policy is broad ranging and in practice, it will be implemented via a range of policies and procedures within the organization. These include:

- Whistleblowing – ability to inform on other staff/ practices within the organisation
- Grievance and disciplinary procedures – to address breaches of procedures/ policies
- Health and Safety policy, including lone working procedures, mitigating risk to staff and clients
- Equal Opportunities policy– ensuring safeguarding procedures are in line with this policy, in particular around discriminatory abuse and ensuring that the safeguarding policy and procedures are not discriminatory
- Data protection (how records are stored and access to those records)

- Confidentiality (or limited confidentiality policy) ensuring that service users are aware of your duty to disclose
- Staff induction
- Staff training

Safe recruitment

Estio Healthcare Ltd ensures safe recruitment through the following processes:

- Providing the following safeguarding statement in recruitment adverts or application details –‘recruitment is done in line with safe recruitment practices.’
- Job or role descriptions for all roles involving contact with children and / or vulnerable adults will contain reference to safeguarding responsibilities.
- There are person specifications for roles which contain a statement on core competency with regard to child/ vulnerable adult protection / safeguarding
- Shortlisting is based on formal application processes / forms and not on provision of CVs
- Interviews are conducted according to equal opportunity principles and interview questions are based on the relevant job description and person specification
- DBS checks will be conducted for specific roles for all staff (paid or unpaid) working with children and vulnerable adults. It is a criminal offence for individuals barred by the ISA to work or apply to work with children or vulnerable adults in a wide range of posts.
- No formal job offers are made until after checks for suitability are completed (including DBS and 2 references).

DBS Gap Management

The organisation commits resources to providing DBS check on staff (paid or unpaid) whose roles involve contact with children and /or vulnerable adults.

In order to avoid DBS gaps, the organisation will recheck all DBS information annually

Estio Healthcare Ltd commits resources for induction, training of staff (paid and unpaid), effective communications and support mechanisms in relation to Safeguarding

Induction will include

- Discussion of the Safeguarding Policy (and confirmation of understanding)
- Discussion of other relevant policies
- Ensure familiarity with reporting processes, the roles of line manager and Designated Senior
- Initial training on safeguarding including: safe working practices, safe recruitment, understanding child protection and the alert guide for adult safeguarding

Training

All staff who, through their role, are in contact with children and /or vulnerable adults will have access to safeguarding training at an appropriate level.

Commitment to the following communication methods will ensure effective communication of safeguarding issues and practice:

- Team meetings
- Board meetings
- One to one meetings (formal or informal)

Support

We recognise that involvement in situations where there is risk or actual harm can be stressful for staff concerned. The mechanisms in place to support staff include

- Debriefing support for paid and unpaid staff so that they can reflect on the issues they have dealt with.
- Seeking further support as appropriate e.g. access to counselling.

Staff who have initiated protection concerns will be contacted by line manager / DSM within 1 week

Professional boundaries are what define the limits of a relationship between a support worker and a client. They are a set of standards we agree to uphold that allows this necessary and often close relationship to exist while ensuring the correct detachment is kept in place.

Estio Healthcare Ltd expects staff to protect the professional integrity of themselves and the organisation. The following professional boundaries must be adhered to:

- **Giving and receiving gifts from clients:** Estio Healthcare Ltd does not allow paid or unpaid staff to give gifts or receive gifts from clients. However gifts may be provided by the organisation as part of a planned activity'.
- **Staff contact with user groups.** Personal relationships between a member of staff (paid or unpaid) and a client who is a current service user is prohibited. This includes relationships through social networking sites such as facebook and Twitter.

It is also prohibited to enter into a personal relationship with a person who has been a service user over the past 12 months.

The following policies also contain guidance on staff (paid or unpaid) conduct

If the professional boundaries and/or policies are breached this could result in disciplinary procedures or enactment of the allegation management procedures

The process outlined below details the stages involved in raising and reporting safeguarding concerns at Estio Healthcare Ltd

Communicate your concerns with your immediate manager



Seek medical attention for the vulnerable person if needed



Discuss with parents of child Or with vulnerable person.
Obtain permission to make referral if safe and appropriate



if needed seek advice from the Children and Families helpdesk or Adults helpdesk



Complete the Local Authority Safeguarding Vulnerable Groups Incident Report Form if required and submit to the local authority within 24 hours of making a contact



Ensure that feedback from the Local Authority is received and their response recorded

The local authority has a process for reporting and this must be adopted. Organisations will be expected to complete the local authorities initial contact form when informing them of a concern about a child. The use of this form and compliance with the policy will be mandatory and must be built into your policy. Information on reporting concerns will be found at www.gscb.org.uk

If the immediate manager is implicated, then refer to their line manager or peer.

Estio Healthcare Ltd recognises its duty to report concerns or allegations against its staff (paid or unpaid) within the organisation or by a professional from another organisation.

The process for raising and dealing with allegations is as follows:

First step: Any member of staff (paid or unpaid) from Estio Healthcare Ltd is required to report any concerns in the first instance to their line manager / safeguarding manager / peer

Second step- contact local authority for advice. In Calderdale this can be done via (for children) the Safeguarding Children Services Local Authority Designated Officer (LADO) 01422 394156 , or (for adults) the Adult Helpdesk 01422 365101

Third step – follow the advice provided

Estio Healthcare Ltd recognises its legal duty to report any concerns about unsafe practice by any of its paid or unpaid staff to the Disclosure Barring Service (DBS), according to the DBS referral guidance document

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/501318/DBS_referral_guidance_completing_the_form_v1_1_Feb_16.pdf

The organisation will monitor the following Safeguarding aspects:

- Safe recruitment practices
- DBS checks undertaken
- References applied for new staff
- Records made and kept of supervision sessions
- Training – register/ record of staff training on child/ vulnerable adult protection
- Monitoring whether concerns are being reported and actioned
- Checking that policies are up to date and relevant
- Reviewing the current reporting procedure in place
- Presence and action of Designated senior manager responsible for Safeguarding is in post

Information will be gathered, recorded and stored in accordance with the following policies Data Protection Policy, Confidentiality Policy.

All staff must be aware that they have a professional duty to share information with other agencies in order to safeguard children and vulnerable adults. The public interest in safeguarding children and vulnerable adults may override confidentiality interests. However, information will be shared on a need to know basis only, as judged by the Designated Senior Manager.

All staff must be aware that they cannot promise service users or their families / carers that they will keep secrets.

Section 9

GENERAL POLICIES

DATA PROTECTION/ACCESS TO RECORDS

The Data Protection Act 1988 places responsibility on businesses where 'personal data' which includes all data, which relates to a living individual who can be identified from the data and which includes any expression of opinion about the individual and indication of the intention of the data controller or other person in respect of the individual. This act extends to include both computer and paper-based records (enforceable 2007). Data Protection principles as outlined in the act provide 'Data Subjects' (employees, members, clients) with access to personal information relating to themselves. Estio operate in accordance with the eight data protection principles. In brief:

Personal Data

1. Shall be process fairly and lawfully and shall not be processed unless one or more conditions are met:
 - The data subject has given permission
 - Processing is necessary for the performance of the contract entered into
 - Processing is required to comply with non-contractual legal obligations
 - Processing is necessary to protect vital interests of the data subject.
2. Shall be obtained only for one or more specified and lawful purposes and shall not be processed in any manner incompatible with those purposes.
3. Shall be adequate, relevant and not excessive in relation to the purposes for which it was processed.
4. Will be kept accurate and where necessary kept up to date.
5. Shall be kept no longer than is necessary for the purposes for which it was processed.
6. Shall be processed in accordance with the rights of data subjects under the 1998 Act.
7. Appropriate technical and organisational measures shall be taken against unauthorised or unlawful processing and accidental loss, destruction or damage to personal data.
8. Shall not be transferred to a country or territory outside the European Economic Area unless that country ensures an adequate level of data protection.

Estio aims to fulfil its obligations under this Act to its fullest extent. In line with this Estio are registered with the Office of Information Commissioner.

If you wish to receive a copy of our personal information held on computer you should submit a written request to the branch manager. This request will then be submitted to the Managing Director for action who would normally respond within two weeks.

Upon receipt of such data, you should check its accuracy and inform the Managing Director of any alterations that need to be made. It is in the interest of everyone that all information is accurate and up to date. Co-operation and assistance is greatly appreciated.

Records Kept Re: Staff and User Information.

All clients and members are logged onto a candidate/client database. This is password protected in relation to the Data Protection Act. Hard copies are also kept on file, in lockable filing cabinets. All members are logged with their qualifications, full name, any relevant certificates, and their payroll and employment number. References are kept on file for each member. Copies of references can be supplied anonymously and if a previous referee has requested that the reference should not be shared, we are unable to share this data. Subsequently Estio have the right to refuse access to any reference provided by Estio. If the person is a registered nurse we ask for copies of the PIN card and their PIN Number is checked via the NMC and held on file in the office.

All Estio staff have access to their supervision notes, which are filed alongside all other personnel details, which can be accessed by management only.

All records are subject to inspection by the Care Quality Commission.

Method of identification

All members registered with Estio are issued with identity badges, stating their employment number, full name and qualification and are signed by the member themselves.

GRIEVANCE PROCEDURE

It is important that any employee, who feels dissatisfied with any matter relating to his/her work, should have an immediate means by which such a grievance can be aired and resolved.

Nothing in this procedure is intended to prevent you from informally raising any matter you may wish to mention. Informal discussion could frequently solve problems without the need for a written record, but if you wish your grievance to be formally recorded and investigated, please make this clear at the outset. If you feel aggrieved at any such matter during the course of your employment you should: -

Stage 1 - In the first instance if you have a grievance of either a personal or general concern relating to your employment the matter should be raised with the Compliance Manager. You may be required to put any such grievance into writing. The Compliance Manager will consider the grievance and will then notify you of their decision immediately.

Stage 2 - If the decision of the Compliance Manager is not acceptable you may refer the matter in writing to the Branch Manager whose decision will be final and binding.

NOTIFICATIONS OF CHANGES IN CIRCUMSTANCES

You are required to notify the Estio team immediately of changes in your circumstances. This includes:

- Personal Details – You must notify in writing of any change of name, address and bank details with supporting documentation i.e. marriage certificate.
- Health – If you are diagnosed by a GP or doctor with a medical condition or illness, i.e. pregnancy, that has not been previously disclosed to Estio at registration, you must inform the office in writing and with confirmation from your GP. Estio have the responsibility to assess your health and safety.

- Criminal Convictions – You must inform Estio of any convictions that may be received and that have not been previously disclosed at registration. This includes traffic offences.
- Insurance – If you are using your car for the purpose of business escorting or transporting service users you are required to ensure that Estio are provided with a copy of new insurance certificate. We would also recommend that anyone using a vehicle for driving between shifts also add business use onto their insurance policy.
- Disciplinary/Suspension – you are required to notify the Registered Manager if, through other employment or voluntary work you are the subject of an DBS investigation, disciplinary or suspension.

UNIFORM POLICY

You are asked to pay particular attention to your mode of dress and personal appearance

- It should be safe for the work you will undertake whilst on duty.
- It should be in keeping with the standard expected by the agency, service users and the public.

All staff may be requested to purchase an Estio uniform. This consists of either a tunic top for ladies or a polo shirt for men. Both are to be worn with either black or navy trousers or sensible length skirt.

Make up should be unobtrusive and strong perfumes should not be worn.

Fingernails should be short and clean. No nail varnish is permitted.

Hairstyle should be clean and tidy.

Shoes should be black and of suitable supportive design with low heels.

Flat, filled in shoes, not trainers are to be worn for safety reasons. The above dress code applies to all, unless otherwise stated by the client.

TELEPHONES, GIFTS AND GRATUITIES, COMPUTERS, PHOTOGRAPHIC EQUIPMENT

Estio expects their staff to act responsibly and always consider the effect of their actions. To ensure that all individuals work in a consistent manner and both staff and service users are protected the following notices have been put together.

All staff must recognise that failure to comply may result in disciplinary action by Estio and the aggrieved party taking action.

Telephones

Staff are only permitted to use the telephone for business directly related to the individual service user and not for any personal calls.

Mobile Phones

Staff must always have all personal mobile phones switched off whilst on shift, in any setting. The use of phones with cameras is strictly prohibited.

Gifts

Staff are not permitted to accept any gifts from a service user. By exception written permission may be sought from Estio. Staff must not buy gifts or treats for individual service users, especially when working a lone worker. This can cause blurring of boundaries and may lead to later accusations and again you must be especially prudent on this matter when working with children.

Meals

The provision of a light snack is at the discretion of the individual service user and therefore staff should make their own arrangements at meal times.

Computers

Computers and the Internet belonging to a service user are not to be used by an employee for their own purpose.

Photographic Equipment

No photographic equipment should be taken on shift whatsoever. Where there is a requirement for such equipment Homes Managers, Case Managers and service users will be responsible for authorising and accessing such equipment for your use in the care setting.

Personal Property

Employees should ensure they do not bring valuable items of jewellery, large sums of money or other expensive items into the work place. Estio or the individual service user will not be held responsible for loss or damage of any such items.

Social Media

More and more people are using social networking sites or blogs to communicate with friends and family

We recognise that these sites are a useful way of communicating and sharing information with friends and colleagues. Information placed on social networking sites is in the public domain and can therefore be viewed by other people.

We would only follow our disciplinary procedure if concerns were raised

For example, if we found out that a candidate had put confidential information about a service user in their blog or on their Facebook page.

You should make sure that when you use the sites, your usage is consistent with the standards that we set. The relevant standards from the standards of conduct, performance and ethics are as follows.

- You must act in the best interests of service users.
- You must respect the confidentiality of service users.
- You must keep high standards of personal conduct.
- You must behave with honesty and integrity and make sure that your behaviour does not damage the public's confidence in you or Estio Healthcare.

HOME SECURITY, ACCESS, KEY HOLDING AND PRIVACY

Clients have a right to privacy at all times. Always knock and/or announce your arrival and remember – clients with disabilities are likely to feel vulnerable. Your client should be encouraged to let you in personally and holding keys should be avoided, if possible. You must carry a photo identify card at all times and your clients should always be encouraged to check this, unless you are well known to them.

Special Arrangements for Access

In arranging care for clients with disabilities, special arrangements may have to be made for access to their home. You should give the strongest priority to security of their home.

Keys

1. Keys must be held in a secure place when they are not in use.
2. Avoid 'arrangements' to hide keys near the door, as thieves are skilled at finding such hiding places.
3. If possible, collect keys from a key holder authorised by your client before each visit and return them immediately afterwards, e.g. to a neighbour, relative, Estio branch.
4. Copies of keys should be kept to a minimum – the fewer there are the less chance of loss or theft.
5. Keys must never carry or be attached to anything identifying your client's name and address. Any 'coding' system must be kept completely separate.
6. A record must be kept in the branch of all keys held and who holds them.
7. Never pass keys to any other person without the specific authorisation from your Estio Branch Manager.
8. Take similar precautions to safeguard codes for 'combination' locks. Also to avoid suspicion of later misuse, your client may wish to change codes when the carers assigned are changed. It is accepted that this may be impractical where several people may need to gain access.
9. Always ensure that you have locked doors and windows to ensure safety of the service user.
10. Next of kin or other relevant contacts should be kept informed of other arrangements made.
11. The holding of a key does not remove your clients right of privacy.
12. In the event that keys are lost or stolen please report this immediately to Estio in order that the security of the service user can be addressed and new locks fitted. This should also be reported to the police.

No Answer – Access – Emergency

13. If you do not hold a key, have a scheduled visit and there is no response or answer to the doorbell or knocking, you may need to contact the next of kin.

14. Before contacting the next of kin or abandoning the visit you must reassure yourself and ensure that you have checked all possibilities and ascertain the service users' condition and safety.

You should check for the main reasons for no answer, which is the service user:

- Has forgotten your visit and gone out, e.g. shopping. You should check with the neighbours. If this is suspected you should notify Estio management who will organise a follow up visit.
- Safe at home but has not heard you – they may be asleep, in the garden, listening to the radio. Listen to establish whether there is noise coming from the house and ensure you look around all of the property including garage and garden.
- Has had to leave the house unexpectedly. The worker should check with the Organisation's offices and if necessary, neighbours and/or relatives to see whether the client has left an appropriate message.
- Has fallen ill or been injured in some way that prevents him/her from answering the door. Please check for signs that they have been unable to get to the front door e.g. letters still on the floor or in the door.

If you are not able to gain entry despite key holding you must contact Estio for direction and guidance. You will now need to contact next of kin and any other organisation related to the care package.

All service provision is reviewed as such and all unanswered visits must be recorded for consideration in future care planning.

In the event of discovering a service user has had an accident

- You must follow emergency first aid procedures
- Contact 999, next of kin and Estio

PLEASE REMEMBER THAT NO ATTEMPT SHOULD BE MADE TO FORCE ENTRY. THIS SHOULD BE UNDERTAKEN BY THE POLICE.

HANDLING MONEY

It is the policy of Estio that all transactions in relation to the handling of clients' monies in any form be it cash, pension books, postal order, cheques, is a serious matter. To avoid any discrepancies and to protect yourself ensure you record any transaction in the care plan '*Record of Financial Transactions*'.

Record any receipt of money from the client. Obtain and retain receipts for any expenditure, or a stamped counterfoil for bills paid.

On returning change after purchases obtain the clients or clients representatives signature for the complete transaction.

At the end of the visit or period of duty ensure all transactions are completed, signed for and recorded. DO NOT carry money, cheques, cash cards or pension books 'to settle up next time'.

Do not undertake your own shopping or financial activities at the same time as you are undertaking clients' transactions.

Under no circumstances will you buy goods from a client or sell goods to a client.

If any suggestion of a discrepancy or a discrepancy arises regarding the handling of your clients' money, report the matter to your Branch Manager, immediately.

Failure to comply with any aspect of this procedure will result in your removal from the Estio register.

CONFIDENTIALITY

To trust another person with private and personal information about yourself is a serious matter. If the person to whom that information is given is a nurse, the patient or client has a right to believe that this information, given in confidence, will only be used for the purposes for which it was given and will not be released to others without their permission. The death of a patient or client does not give you the right to break any confidence. You should recognise each patient's or clients right to have information about themselves kept secure and private.

If it is appropriate to share information gained in the course of your work with other practitioners, you must make sure that as far as is reasonable, the information will be kept in strict professional confidence and be used only for the purpose for which the information was given.

If you choose to break confidentiality because you believe that this is in the public's best interest, you must have considered the situation carefully enough to be able to justify that decision.

You should not deliberately break confidentiality other than in exceptional circumstances.

SAFE LONE WORKING PRACTICE

In working on supervised contact placements and as a family support worker you will often work alone. It is imperative that you are aware of the increased risk of working alone and some of the safeguards, in addition to the other listed policies you can make to protect yourself from allegations.

Driving alone at night

One-to-One Cases – When you are working on a one-to-one case you must not undertake to meet with friends or family during this time; this is unacceptable in any setting whether in a public place, social environment or at your own home. Should you assess that there is potential risk in working alone on a particular case then you must advise your branch immediately and a review of the associated risk will be undertaken.

Personal Information – Never give our personal information about yourself to a client as this is deemed confidential information i.e. do not share your phone number, address etc.

Report Writing Requirements – Report writing skills are an essential requirement of the role of a lone worker, as you are required to write legible reports. Where you are working in the family support role you will be required to submit a daily log which details activities, observations and recommendations and gives you the opportunity to raise concerns that warrant the review of either the risk assessment or service user plan. Again when undertaking Supervised contact work you

are required to submit written reports on the events; this must be detailed and note communication both verbally and non-verbally. Your reports must be clear, contain relevant factual information, detailed, written directly after the contact time and submitted to the branch as soon as possible and no more than 5 days after the contact. Please note that where there are concerns, submit the report as soon as possible.

POLITICAL ACTIVITY

As an agency we have no religious or political bias.

- Employees of Estio are not permitted to take part in any political activity whilst working Estio. You are permitted to accompany a service user if it is specified within their care plan.
- You are asked to refrain from 'pushing' your personal views and opinions on service users or colleagues.
- You are asked to be aware of your potential to influence vulnerable service users.

SMOKING, ALCOHOL AND DRUGS

The purpose of this policy is to safeguard the Health and Safety of Service Users and all employees of Estio.

Policy

1. Candidates are not permitted to smoke during any assignment.
2. Smoking is not permitted in any Estio office premises.
3. All staff are required to declare if they are a smoker on the health questionnaire.
4. Candidates are not permitted to consume alcoholic beverages before attending an assignment.
5. Candidates are not permitted to consume alcoholic beverages during any assignment.
6. Consumption of alcohol is not permitted in any Estio office premises.
7. All staff are required to declare on the health questionnaire if they have ever suffered from alcohol abuse.
8. Estio operate a strictly no drugs policy, no individual should be under the influence of drugs either prior to or during the undertaking of a shift; duty of care.
9. Should Estio, through investigation or self-declaration be made aware that an individual consumes illegal drugs, they will be subject to disciplinary proceedings.
10. Failure to adhere to this policy represents misconduct.

CONFLICT OF INTEREST POLICY

As a company we aim to avoid circumstances and instances where there may be a conflict of interest. This is ensured through both our relationship building with clients and our candidate vetting and skills match. Therefore should a conflict of interest be highlighted within the recruitment process, we would advise both candidate and client and recommend against placement. At all times both client and candidate would be informed of the circumstances and information would be shared. Should the client and candidate both feel that the conflict is not significant or unsubstantiated then a signed disclaimer would be required from both client and candidate stating that they are aware of the circumstances as highlighted by Estio healthcare.

Where information is revealed through additional information contained with a DBS this will be treated as instructed through DBS guidelines and data protection. Estio are able to take a professional judgement on the nature/period of additional information, however, in respect of such information we will ultimately work in line with the clients' policy.

Where there is an instance where that candidate may prove to present a conflict of interest for our clients once on placement, we would require an investigation using the following procedure.

Stage 1 – Establish the circumstances under which the conflict has arisen.

- This would involve ascertaining whether the candidate or/and client had prior knowledge of conflict of interest before undertaking the placement.
- Discussions and statements regarding the information/conflict involved required by both client and candidate.
- Whilst the candidate is under investigation it is assumed that they will be suspended from their contract until a conclusion has been reached, although there may be instances of exemption.

Stage 2 – Take Appropriate Action based on above information.

- An informed judgement will be made by both the borough, Estio and where applicable, Care Quality Commission.
- Where possible achieve a conclusion that is agreeable with all parties.
-

Record keeping

Record keeping is an integral part of any workers who works in the social care sector. It is a tool of professional practice and one that should help the care process. It is not separate from this process and it is not an optional extra to be fitted in if circumstances allow.

- Good record keeping helps to protect the welfare of patients/clients by promoting:
- high standards of clinical care,
- continuity of care;
- better communication and dissemination of information between members of the professional health care team,
- an accurate account of treatment and care planning and delivery;

The ability to identify risks and detect problems, such as changes in the service user /client's condition at an early stage;

- the concept of confidentiality.

Members of the public have the right to expect that health care professionals will practice a high standard of record keeping. The quality of a registrants record keeping is a reflection of the standard of their professional practice. Good record keeping is a mark of a skilled and safe practitioner, while careless or incomplete record keeping often highlights wider problems with that individual's practice.

The best record remains one that is the product of consultation and discussion between all members of the inter-professional health care team and the patient / client. It is one that is evaluated and adapted in response to the needs of patients / clients. The record should enable any registrant to care for the patient/client, regardless of where they are within the care process or care environment. It is an invaluable way of promoting communication between those involved in the care of service user/ clients and with the patients/clients themselves. Good record keeping is, therefore, the product of good teamwork and an important tool in promoting high quality health care.

The NMC believes that there are a number of key principles that underpin good records and record keeping. Some of these relate to the content and style of the record. In addition, there are some legal issues that all registrants should be aware of and take into account in their record keeping practice. The guidance contained within this advice sheet sets out these principles and legal aspects. They are designed to help registrants to reflect upon their current record keeping practice and how it could be developed to benefit patients/clients in their care.

The principles set out in this document apply across all care settings and to both manual and electronic held records. The record must, however, follow a logical and methodical sequence with clear milestones and goals for the record keeping process.

The NMC also advises that it is good practice to ensure that all records meet local employer requirements and clearly meet any legal requirements set out within legislation. Examples include the Human Rights Act 2000, the Caldicott Report 1997 and the Data Protection Act 1998.

Content and style

- There are a number of factors that contribute to effective record keeping. Service user/client records should;
- Be factual, consistent and accurate, written in a way that the meaning is clear;
- Be recorded as soon as possible after an event has occurred, providing current information on the care and condition of the patient/ client;
- Be recorded clearly and in such a manner that the text cannot be erased or deleted without a record of change;
- Be recorded in such a manner that any justifiable alterations or additions are dated, timed and signed or clearly attributed to a named person in an identifiable role in such a way that the original entry can still be read clearly;
- Be accurately dated, timed and signed, with the signature printed alongside the first entry where this is a written record, and attributed to a named person in an identifiable role for electronic records;
- Not include abbreviations, jargon, meaningless phrases, irrelevant speculation, offensive or subjective statements;
- Be readable when photocopied or scanned.

GOOD RECORDING GUIDELINES

- Write in BLACK pen – do not use tippex
- Keep sentences short & clear
- Use one paragraph for each topic
- Where relevant include time of day - using twenty hour clock
- Use familiar words
- Do not use jargon
- Record the ordinary & positive as well as negative.
- Avoid using words/sentences that do not explain i.e. describing a client as naughty does not say what happened.
- Use language that is respectful & avoids stereotyping
- Indicate where the information has come from
- Distinguish fact from opinion, hearsay from observation
- Use people's full name & work title e.g. Emily Davies, Support Worker

- Correct Spelling, is essential for accuracy in recording.
- Signature, each recording on the nursing notes is signed by the nurse making it. The signature includes the name and title. For example, SH.Qadous, RN.

Remember that the person you are writing about can read your recording next week, next year or in 10 years time

Further Guidance for Case Recordings

- It is important that we keep a written log regarding each client. These recordings may be needed for an assessment or court proceedings. It may also become part of a pen picture for the client.
- As well as recording any contact with family, social worker, district nurses we must also consider the following when completing the daily log:
 - **Health** – any appointments, illnesses or concerns
 - **Contact** - contact details and their behavior before and after
 - **Care Plan** – was it followed
 - The information we hold about the person is highly confidential, and we must store records and paperwork in a safe place.

Section 10

EMERGENCIES

INFORMATION PROVIDED TO STAFF ON WHAT TO DO IN CASE OF AN EMERGENCY

In the case of discovering an accident you must:

- Make the area safe
- Report to the line manager (when in a residential setting)
- Call 999
- Follow Emergency First Aid procedures.

It is important that all candidates know the procedure to adopt in case of emergency.

Upon induction, all staff are informed of the office opening hours and the out of hours service. A business card detailing telephone numbers required is issued at this time.

In the case of other emergencies staff are instructed to contact the Estio office or the out of hours on call service.

DEATH OF A SERVICE USER

This policy relates to the administrative matters pertaining to the death of a Service User in their own home.

Action prior to the expected death of a Service User:

It is the responsibility of the Estio Healthcare Co-ordinator and/or Manager to:

1. Where possible inform the next of kin of any deterioration in the condition of a Service User, which may result in death. This allows the opportunity for the family to be present if they so wish, when the Service User dies.
2. If the Service User's GP has not visited within the past 24 hours he/she should be alerted to the Service User's deterioration and an immediate visit requested (this should be recorded in the Service User's notes).
3. If the Service User is funded partly or totally by Social Services and/or any other body or organisation then the Estio Healthcare Co-ordinator and/or Manager should inform **all appropriate persons** of the deterioration in the Service User's condition.
4. All visiting family and friends should be treated sympathetically, but not intrusively.
5. At the Service User or family's request, arrangements should be made to contact a Minister of Religion of the preferred denomination.
6. All personnel and workers including out of hours Co-ordinators must be made fully aware of the situation and requested to act accordingly.
7. All Service User's notes should be factual and precise regarding all actions taken and services delivered.

Section 11

DECLARATION AND ACCEPTANCE OF CARERS' HANDBOOK

It is a contractual requirement for all workers of Estio Healthcare to read and adhere to the HCPC code of practice

I declare that I have received a copy of the carers' handbook issued by Estio. As part of my induction Estio have provided discussion on the policies and procedures enclosed. I will read thoroughly and agree to abide by its conditions; if I do not understand the handbook I will contact the office with my queries.

I also consent to documentation regarding work history and details included in my application pack to be shared with clients.

NMC & Guidance Booklets Issued and Received

Booklet	Received (Tick)
Social Care Worker Code of Conduct – HCPC	
What to do if you are worried a person is being abused – Summary (DOH)	
DBS	

CONTACT DETAILS

Important Numbers:

Estio Office 01422 357707

Adult Protection 01422 365101

CQC Local Office 03000 616161

Last reviewed 06.02.09 LH 01/04/09LH 27/04/09/LH 19/05/09LH 26/8/09 / LH 5/12/09/ LH 3/3/10 LH 30/11/10 SR 21/03/11 EH 13/07/11EH18/10/11 / LH 29/05/12 / LH 4/7/12 / 02/08/12 / 28/11/12/ LH 10/04/13 11/04/13 FS 30/08/2013 FS 22/4/14 EH 12/8/14 EH 10/11/14 / EH 14/04/15 / 11/11/2015 21/07/16 RC 28/02/2017 RC 08/05/17 RC 10/5/17 EH 11/08/17 RC 30/08/17 RC