



# Staff Handbook

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## Staff Handbook

### Welcome to our team...

We look forward to a long & prosperous working relationship with you. Here at Peninsula we pride ourselves on providing the highest quality nursing services to our service users by ensuring that we recruit professional, qualified & experienced staff & providing them with ongoing training & support.

Here at Peninsula we not only aim to provide the best care for to our service users, but also to our dedicated employees. We are pleased to welcome you on board our team and look forward to matching you with the clients best suited to you.

This handbook is designed to provide you with all the information you need to forge a successful career here at peninsula. It provides a guide of what we expect from you and in turn what you can expect from us, as well as policies and procedures that you may come across whilst working with us.

If you have any questions about anything in the handbook, feel free to contact our office staff at either our Newtownards or Belfast branch;

Peninsula Care Services  
3a Movilla Street  
Newtownards  
BT23 7JG  
028 91828921  
[info@peninsulacareservices.co.uk](mailto:info@peninsulacareservices.co.uk)

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55/59 Adelaide St  
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BT2 8FE  
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### **What we expect from you**

We expect you to deliver the standard of care you would wish your own loved ones to receive in a similar situation.

We expect you to be punctual for your shifts.

We expect you to arrive for your shift with a properly laundered & ironed uniform, with hair tied back (if long) & portraying a professional image.

We expect you to treat everyone with dignity & respect & promote choice for service users.

We expect you to promote service users independence & safeguard their rights.

We expect you to respect & embrace peoples' equality & diversity.

We expect you to safeguard those in your care.

We expect you to keep up with relevant training and professional development

We expect you to deliver high standards of nursing and care services in a professional & caring manner, adhering to the letter & spirit of the NMC's/NISCC Code of Conduct at all times.

### **What we offer in return**

Our organisation is a very close knit team, its part of what makes us unique & what keeps our clients coming back to us. We value one another's contributions to the organisation as a whole..... & that means we value your skills & experience too. So we offer exceptionally competitive rates of pay,

whilst still providing a cost effective service for our clients. We also offer annual mandatory training sessions at very affordable rates, & access to clinical supervision sessions.

### **Self Bookings**

Employees should not assume that the client will contact us to inform us about self booked shifts. It is your duty to let us know immediately after confirming self booked shifts with clients so that we can record these on our booking system. You should provide the date and time of shifts, as well as who you confirmed them with.

### **On Call**

The office hours are from 0900 to 1700 Monday to Friday. Outside of these hours, there is a member of staff 'on call'. This on call service is for emergencies only and should not be used for non urgent matters.

### **Training Requirements**

At Peninsula we pride ourselves on having a highly trained and experienced register of employees. As such it is paramount that all compulsory training is up to date. Peninsula holds regular training sessions which rotate in each compulsory topic, and your place can be confirmed on these courses with a nominal fee.

Compulsory training can also be completed online, through the Social Care TV website, which we provide employees with logins for. These courses can be paid for by cash or by using a wage deduction form.

All compulsory training must be completed before you can start work, and Peninsula reserves the right to cancel any shifts of employees whose training is not up to date

### **Working Hours**

In compliance with the Working Time Regulations (Northern Ireland) 1998, (as amended), employees are not permitted to work more than 48 hours per week, unless otherwise agreed on the disclaimer on the application form.

### **Availability**

Staff must inform us of their weekly availability or any changes to their availability so we can still maintain the service we provide. If staff do not complete a shift within a month of starting we will achieve your details temporary and not actively contact you until you make yourself available for shifts

### **Time Sheets**

Agency staff must complete timesheets in order to be paid. These can either be delivered in person or posted to our payroll office in Newtownards at the following address;

Peninsula Care Services  
3A Movilla Street  
Newtownards  
BT23 7JG

In order to be paid on time, completed timesheets should be delivered no later than 0800 on Monday morning for your pay to be processed for payment on Friday the same week. Timesheets received after this time will be processed for the following week.

It is important that timesheets are completed correctly to avoid late payment. Timesheets should be completed in the following way;

- Employees name printed clearly
- Indicate site or location, and ward/unit if applicable
- Indicate the date of the week ending
- Under each day, print the date, start and finish time, the amount of breaks, and then the total working time to be paid, and your staff grade eg, HCA, SHCA or RN.

Timesheets should then be signed by the nurse on duty or the unit manager. One timesheet should be used for each site/location worked during the week.

In the event of a lost timesheet employees should complete a new one and return to have it signed by the appropriate nurse/manager. Timesheets cannot be processed without an appropriate signature.

Deadlines for receipt of timesheets may vary around bank holidays, but employees will be notified of any variation.

### **Pay**

Each new employee will be issued with a list of pay rates for the various shifts they may work. Staff will be notified of any change to these rates in advance of the amendments.

Employees will be paid on a weekly basis with the pay being deposited by BACS no later than a Friday. Pay slips can be collected from the Newtownards office from Thursday.

National Insurance contributions, PAYE, Income Tax, and any other deductions which Peninsula are required to take by law, will be deducted from the employees' weekly pay and made visible on their pay slip.

### **Holiday Pay**

Holidays are accrued in proportion to the number of hours you have worked. Holidays can be requested at any stage throughout the year, but the holiday year runs from 01<sup>st</sup> April to 31<sup>st</sup> March so holiday pay must be claimed by the end of the financial year (31<sup>st</sup> March), and if unclaimed, will be lost. Holidays cannot, under any circumstances, be carried over to the next year.

Holiday pay can be claimed by completing a holiday request form which should be submitted in the same way as the timesheets, by no later than 0800 on Monday morning to be paid the same week.

### **Wage Deductions**

Wage deductions can be a way for employees to pay for training courses or purchase uniform. The costs of these can be deducted by completing a wage deduction form agreeing to pay a fixed amount from you wages each week instead of paying the fees up front.

### **Absenteeism**

In the event of sickness or an emergency, employees should give Peninsula as much notice as possible to arrange cover for shifts, a minimum of 4 hours is expected. Failure to comply may result in disciplinary action being taken

### **I.D Badge and Uniform**

Your Peninsula Care Services badge must be worn at all times during any assignment and if lost or damaged you must contact the office immediately for a replacement

Uniforms are to be clean and presentable at all times

Uniforms can be purchased from the office and you can use a wage deduction form to enable you to pay for them

### **Arriving for Work**

On arrival or during assignment

- 1) Introduce yourself to the nurse in charge or co-ordinator
- 2) Identify the emergency exits and procedures, location of equipment and emergency exits
- 3) Receive a verbal handover from the previous shift nurse or care assistant
- 4 Always be seen to be taking the initiative and ask if you can help or spend time with the patients
- 5) If you are unsure pass on questions asked by patients or their family to the nurse in charge
- 6) Ensure documentation on all patient records and charts is thorough and give a clear and concise hand over to the staff on the next shift

### **Appraisals**

Appraisals gives us an opportunity to consider you and your performance at work, they are also any opportunity for you to raise any concerns or issues you may have. These will be conducted on an annual basis.

### **Roles & Responsibilities**

Dependent upon your previous experience we shall place you in a variety of health & social care settings. Whatever setting or role you find yourself in we shall still expect the same high standards of professional practice in your delivery of care to our service users. At all times you are to work within your own level of competence & report the need for assistance or advice through you line management.

#### **Your role may include, but is not limited to:**

Patient monitoring  
Team management/shift management (if suitably experienced working as a senior HCA/Nurse)  
Drug administration (if working as a senior HCA/Nurse & suitably trained)  
Safe manual handling  
Providing personal care  
Catheter care  
Working as a part of a multi-disciplinary team  
Assisting clients with eating & drinking  
Continence management

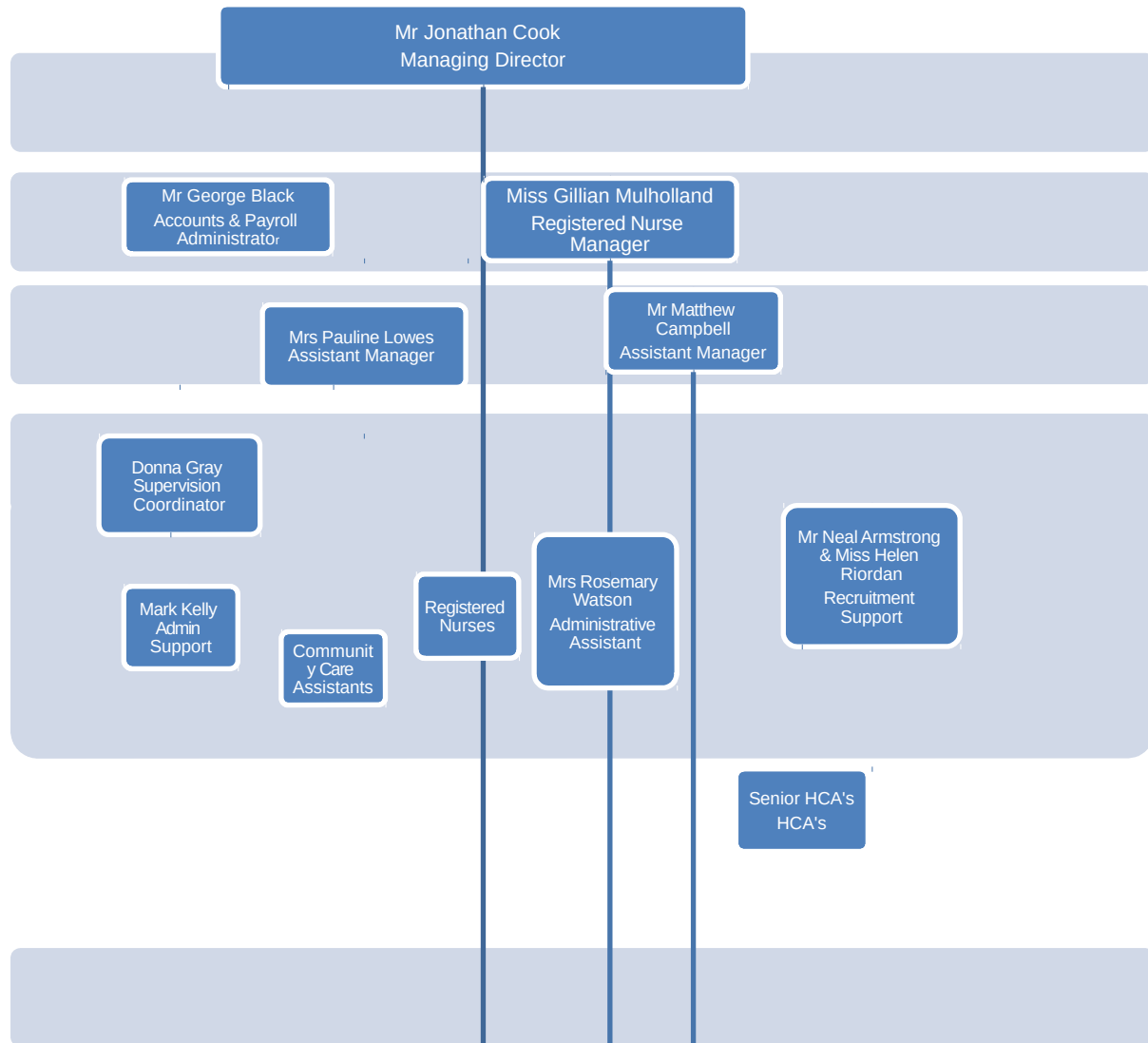
#### **Responsibilities include but are not limited to:**

Making the agency aware of your availability  
Your own transport arrangements to & from your placement  
Arriving on time or notifying the service user & the agency if you are going to be delayed

Reporting sickness in accordance with the staff sickness policy  
Complying with all organisational policies

### Management Structure

There is a defined management structure that identifies the lines of accountability, specific roles and details the areas of responsibility



In this pack you will find copies of organisational policies that may be of particular relevance to you which include:

- Confidentiality
- Infection Prevention & Control
- Moving & Handling
- Adverse Incident Reporting
- Consultation with Private Patients & their Representatives
- Gifts to Staff & Donations to the Agency
- Suspected, Alleged or Confirmed Instances of Abuse



Whistle blowing  
Complaints  
Staff Discipline  
Staff Grievance  
Smoking  
Lone worker policy  
Protection of Vulnerable Adults and Safeguarding Children  
Confidentiality

### **Confidentiality**

#### Policy

It is the policy of Peninsula Care Services that all information obtained from or about our staff members and service users will be treated as confidential and only be shared with appropriate professionals on a “need to know” basis and with the individual being made aware of same.

#### Procedures

All employees will be required to sign a confidentiality agreement on commencing employment.

Information relating to service users care will only be discussed with the following individuals;

- Service Manager
- Peninsula Care Services team members
- Key worker from Community Services
- District Nurse
- General Practitioner
- Occupational Therapist
- Physiotherapist
- Any professional known to us and recognised as being an integral part of the service user’s care
- Next of Kin

The service user to be made aware that there is a necessity to share information on a specific subject. Records maintained in the service users’ home will be legible and contain only the information required. Service users’ home file should be kept in a safe place out of eyes view from those that may enter the service user’s home.

Information of a confidential nature will not be accessible to unauthorised personnel.

Information will be held in line with Department of Health guidance as found in appendix A.

Staff and service users case note files will be held in a locked filing cabinet. Security of information will be upheld at all times.

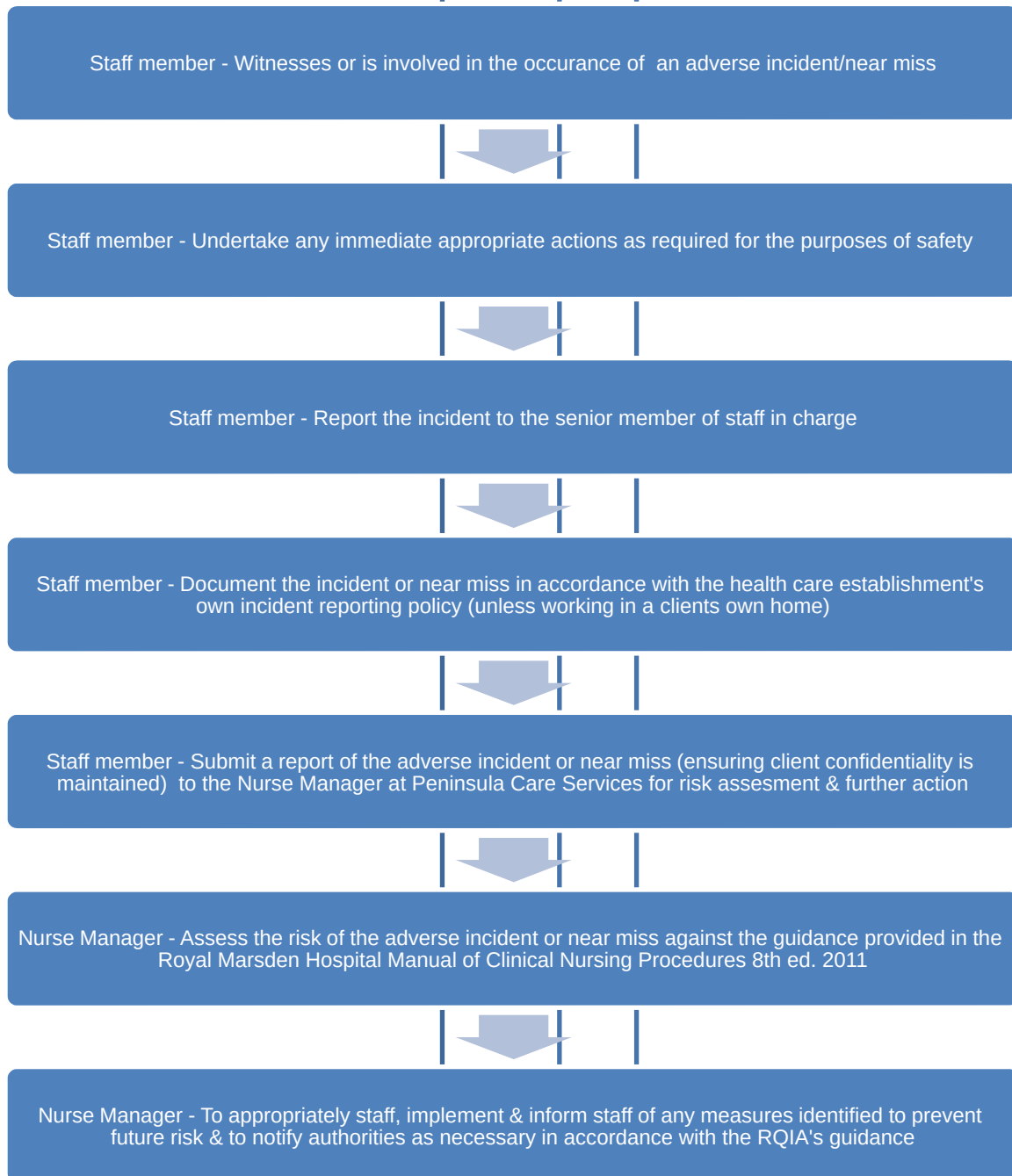
Office premises locked and secured each evening at office close.

### **Adverse Incident Reporting Policy**

#### **Adverse Incident Definition:**

The occurrence of an incident that caused or had the potential to cause harm to a client, staff member, member of the public, property or the reputation of the organisation.

Procedure In the event of an adverse incident occurring the steps in the diagram below should be taken.



Once this procedure has been completed the Nurse Manager shall be responsible for maintaining an Adverse Incident Register. It is the Nurse Manager's responsibility to:

- i. Monitor the register for reoccurring incidents
- ii. Appropriately action identified risks

- iii. Notify appropriate authorities including, but not limited to, the RQIA, NMC, GMC & the Police Service of Northern Ireland of personnel suspected of misconduct &/or illegal activity.

### Complaints

#### Policy

It is our policy that if a service user wishes to make a complaint or register a concern they should find it easy to do so. It is organisation policy to welcome complaints and look upon them as an opportunity to learn, adapt, improve and provide better services.

For the purpose of clarity within this policy the following terms apply.

The terms “service user” & “client” are interchangeable & are given to mean a person in receipt of domiciliary care, nursing care or the commissioner of nursing care services within a nursing home or other healthcare establishment providing nursing care.

This policy is applicable to both the Domiciliary & Nursing services provided by the organisation.

It is our policy to also ensure **each service user** receives a copy of this policy and procedure. This policy is intended to ensure that complaints are dealt with properly and that all complaints or comments by service users and their relatives, carers and advocates are taken seriously.

Peninsula Care Services believe that failure to listen to or acknowledge complaints will lead to an aggravation of problems, service user dissatisfaction and possible litigation. The organisation supports the concept that most complaints, if dealt with early, openly and honestly, can be resolved at a local level between just the complainant and the organisation.

If this fails due to either the organisation or the complainant being dissatisfied with the result, the complaint will be referred to the service users care key worker within Community Services. Complainants should also be aware that if they are dissatisfied with the outcome of this complaints procedure they have the right to approach the NI Commissioner of Complaints.

In the instance that a complaint is made by a child the staff dealing with the complaint should refer to The Representations Procedure (Children) Regulations (NI) 1996 which can be found at.

Peninsula Care Services will ensure that the complaints procedure is properly and effectively implemented and that service users feel confident that their complaints and worries are listened to and acted upon promptly and fairly.

Complaints are dealt with promptly, fairly and sensitively with due regard to the upset and worry that they can cause to both staff and service users.

When required, a summary of all complaints, outcomes & actions taken is made available is made available to the Regulation & Quality Improvement Authority.

Responsibility of handling complaints for Peninsula Care Services lies with senior staff under the guidance and direction of Registered Provider Mr Jonathan Cook. If the complaint is related to the Registered Provider’s failure to comply with statutory regulation, then the complainant shall be directly referred to the Regulation & Quality Improvement Authority for consideration. The details for the Regulation & Quality Improvement Authority may be found below.

## Complaints Procedure

General points for staff handling complaints:

- All complaints should be taken seriously.
- Front line care staff who receive a complaint should seek to resolve the problem in the first instance & should then report the complaint immediately and record the same.
- If front line staff cannot provide an explanation for the service users issue or concern they should inform the service user that they will report it on to senior staff. Any complaints resolved at a local level by front line staff should be reported to senior staff and a record made of the same and the outcome.
- All contact with the complainant should be polite, courteous and sympathetic. There is nothing to be gained by staff adopting a defensive or aggressive attitude. At all times staff should remain calm and respectful.
- Staff should not accept blame, make excuses or blame other staff.
- The Service Manager will maintain a log and record of all complaints within complaints file stored in office.
  1. The name and address of the service user
  2. The name and address of the complainant (where different)
  3. The nature of the complaint
  4. The date of the complaint
  5. Any details of investigation notes, statements etc.
  6. The level of satisfaction on the management of the complaint from the service user.

Stage	Complaint processing
1.	Complaint received in writing by management team.
2.	The management team appoint a named individual to handle the complaint & acknowledge the complaint within 2 working days.
3.	Complaint shall be investigated within 14 days.
	The organisation shall ensure that in the event of the complaint being against a member of staff that they are fully informed of the complaints relating to him/her. The member of staff shall be entitled to receive a copy of the complaint referred to at point 1.
4.	The member of staff will be afforded the opportunity to state their version of events and will be given seven days to respond to the complaint in writing to the organisation.
5.	Responses from the member of staff concerned will be shared with the complainant if appropriate. The organisation shall pursue a demonstrable course of action to ensure no reoccurrence of the act or omission that was the subject of the complaint.
6.	The organisation shall respond to the complainant in writing within 20 days to inform them of how the complaint has been dealt with.
7.	If at this stage the complainant is unsatisfied with the response from Peninsula Care Services, they are advised to involve the HSC Trust via their Care Manager.
8.	In the case that at this stage the complainant still feels that the outcome is unsatisfactory they are advised to complain to the Ombudsman (contact details below).
9.	Whereby the complaint shows a breach of regulation, the RQIA will then investigate the breach in regulation and make recommendations in order to resolve the issue and prevent a reoccurrence they shall also ensure recommendations have been acted upon. Legal advice will be taken if necessary.
10.	Where a complaint relates to abuse, exploitation or neglect the Regional "Safeguarding Vulnerable Adults" Policy & Procedural Guidance & the associated Protocol for Joint Investigation of Alleged or Suspected cases of Abuse of Vulnerable Adults should be activated.
11.	Where a complaint is deemed to have been concerned with a disciplinary matter the organisations disciplinary procedure shall be implemented.
12.	In the instance of a complaint being made against a Registered Nurse, the organisation may refer the Nurse to the NMC with regards to their fitness to practice. In the instance of a complaint being made against a social care worker, the organisation may refer to the NISCC. In both cases the organisation may also refer to the ISA if appropriate.

### Relevant Contact Details

The Regulation & Quality Improvement Authority  
9<sup>th</sup> Floor, Riverside Tower  
5 Lanyon Place, Belfast  
BT1 3BT  
(028) 90 51 7500

The Ombudsman  
Freepost BEL 1478  
Belfast  
BT1 6BR  
0800 34 34 24

We would also advise our service users that if they do not feel confident or need some assistance in making their complaint know they may wish to use a local advocacy service. Below is a list of a few local providers of this service.

Ards CAB	Telephone: 91819257	
North Down CAB	Telephone: 91270009	
British Deaf Association	Telephone: 90437480	Text Phone: 90437486
Age NI	Telephone: 9024 5729/0808 808 7575	

Relevant Documentation.  
Complaints log  
**Complaint Record Form**

## **Consultation with Private Patients & their Representatives**

### Policy

It is the policy of Peninsula Care Services to encourage open communication with the service users, their representatives and the staff members.

### Procedures

- Peninsula Care Services receive daily communication from Community Nursing Staff & Care Assistants about the service users.
- This can be completed by calling in to the office during office hours or by telephoning the office directly to report changes or concerns. **Text messages are not an appropriate method of reporting changes.**
- These concerns or changes should be recorded in the service users case notes file and if out of hours in the on call report diary as well as case notes.
- If appropriate concerns should be reported on to the service users key worker from Community Services.
- Community Nursing Staff & Care Assistants are encouraged to also detail concerns in the service users' home file, for the reference of other carers, professionals involved with the service user.

### Communication between Carers and Service Users Representatives

- Staff members are encouraged to contact a service users representative only if appropriate or at the request of the service user.
- This contact should be made in the presence of the service user and using the service user's telephone.
- In case of emergency or unable to gain entry to the service users home Nursing Staff & Community Care Assistants are permitted to contact the next of kin/ representative though must also inform office staff as per procedure.

## **Infection Prevention & Control Policy**

### Policy

This organisation believes that adherence to strict guidelines on infection control is of paramount importance in ensuring the safety of both service users and staff. It also believes that good basic hygiene is the most powerful weapon against infection, particularly with respect to hand washing.

The aim of the organisation is to prevent the spread of infection amongst staff, service users and the local community.

### Aims

The aims of the organisation are to ensure that:

- (a) Services users, their families and staff are as safe as possible with regards to the prevention of the acquisition of infections through work based activities.
- (b) All staff at the organisation are aware of and implement basic principles of infection prevention & control.

### Infection control procedures

In this organisation the following points should always be adhered to.

- (1) All staff should at all times, observe high standards of hygiene to protect themselves and their service users from the unnecessary spread of infection.
- (2) All staff should adhere to the organisations hand washing policy and ensure that their hands are thoroughly washed and dried on arrival and before leaving a service users home, between seeing each and every service user where direct contact is involved, after handling any bodily fluids or waste or soiled items, after handling specimens, after using the toilet and before handling foodstuffs; the organisation believes that, consistent with modern infection control evidence and knowledge, hand washing is the single most important method of preventing infection.
- (3) All staff should adhere to the organisations handling food policy.
- (4) All staff should adhere to the organisations protective clothing policy and use the disposable gloves and disposable aprons which are provided for staff who are at risk of coming into direct contact with body fluids or who are performing personal care tasks.
- (5) Staff should treat every spillage of body fluids or body waste as quickly as possible and as potentially infectious; they should wear protective gloves and aprons and use the disposable wipes provided wherever possible.
- (6) All clinical waste should be disposed of as per company policy.
- (7) Staff should never share items that may become contaminated with blood, such as towels, razor blades and toothbrushes.
- (8) All specimens should be treated with equally high levels of caution; specimens should be labelled clearly and packed into self sealing bags before being taken to the doctors, non sterile gloves should be worn when handling the specimen containers and hands should be washed afterwards.

### Reporting

The reporting of injuries and dangerous occurrences regulations 1995 (RIDDOR) oblige the organisation to report the outbreak of notifiable diseases to the HSE. Notifiable diseases include: cholera, typhoid fever, viral haemorrhagic fever, hepatitis, whooping cough, leptospirosis, tuberculosis and yellow fever.

Records of such outbreaks must be kept specifying dates and times and a completed disease report form must be sent to the HSE.

RIDDOR forms are kept in the policy manual.

### Training

All new staff should be encouraged to read the policy on infection control and take part in awareness training as part of their induction process.

## **Moving & Handling**

### Policy

The organisation recognises its responsibility to ensure that all reasonable precautions are taken to provide and maintain working conditions that are safe, healthy and compliant with all statutory requirements and codes of practice. Manual handling is also covered specifically by the following legislation:

- (a) the Health and Safety at Work, etc Act 1974
- (b) the Management of Health and Safety at Work Regulations 1999
- (c) the Manual Handling Operations Regulations 1992
- (d) the Lifting Operations and Lifting Equipment Regulations 1998.

1. Each employee should be given such information, instruction and training as is necessary to enable safe manual handling.
2. All processes and systems of work should be designed to take account of manual handling.
3. All processes and systems of work involving manual handling should be assessed and properly supervised at all times.

#### Training

Each staff member must attend yearly updates on Moving and Handling where they will learn about their responsibilities, risk assessment and also safer handling techniques. Failure to attend yearly updates will result in disciplinary action. All new staff are encouraged to read the policies on health and safety and manual handling as part of their induction process.

## Smoking

#### Policy

It is the policy of Peninsula Care Services that workplaces and vehicles are smoke-free and all employees have a right to work in a smoke-free environment.

#### Premises

Smoking is prohibited throughout the entire indoor office environment and to the front of the premises by staff members with no exceptions.

#### Vehicles

All work vehicles will be smoke-free at all times Or work vehicles will be smoke-free at all times unless they are only ever used by the same person and where passengers are never carried.

#### Employer Duties

To display No Smoking Signs as required by the legislation.

To ensure employees, customers and visitors do not smoke in smoke-free places and vehicles.

To investigate complaints regarding employees, customers and visitors smoking.

To inform, consult and train employees on this policy.

#### Employees Duties

To ensure that they or others do not interfere with no smoking signs.

To comply with the Smoke-Free Policy.

To ensure customers and visitors do not smoke in smoke-free places and vehicles.

To report incidents of smoking in smoke-free areas and vehicles.

#### Service Users/Visitors Duties

Service users / visitors are not permitted to smoke in smoke-free areas or vehicles.

**Policy enforcement**

Failure to comply with this policy will be dealt with through the company’s disciplinary procedures. Visitors or members of the public who breach the policy will be asked to stop smoking and will be asked to leave the premises if they fail to comply with this request. All breaches of this policy will be recorded in writing by the organisation. Be aware that, in addition to action taken under this policy, the local council may take legal action against individuals who smoke in smoke-free places or vehicles.

**Staff Discipline**

Policy

The following policy and procedures have been drawn up to make all staff aware of the agencies policy in relation to disciplinary matters. The object of such procedure is to give employees the opportunity to improve their behaviour.

At each stage of this procedure you shall have the right to a fair hearing with the opportunity to state your case and to be accompanied by a fellow employee if desired (except when receiving an “off the record” informal reprimand).

Warnings shall lapse after a period of satisfactory conduct. Warnings are not generally transferable unless the number of warnings in respect of different types of misconduct justifies a final general warning irrespective of the offence.

Procedures

- Your invitation to a disciplinary hearing will be made in writing.
- Ensure staff members are aware of this policy and the standards of performance, action and behaviour required and expected from them.
- Disciplinary action where necessary is taken speedily and in a fair and consistent manner.
- No disciplinary action shall be taken until there has been a full investigation into the alleged incident.
- The individual will not normally be dismissed for a first breach of discipline, except in the case of gross misconduct.
- If you are disciplined, you will receive an explanation of the penalty imposed and you will have the right to appeal against the finding and the penalty.

<b>Offence</b>	<b>First Occasion</b>	<b>Second Occasion</b>	<b>Third Occasion</b>	<b>Fourth Occasion</b>
<b>Minor Misconduct</b>	Formal Verbal Warning	Written Warning	Final written warning	Dismissal

<b>Offence</b>	<b>First Occasion</b>	<b>Second Occasion</b>	<b>Third Occasion</b>	<b>Fourth Occasion</b>
<b>Major Misconduct</b>	Written warning	Final Written Warning	Dismissal	
		OR		
	First & Final Written Warning	Dismissal		

<b>Offence</b>	<b>First Occasion</b>	<b>Second Occasion</b>	<b>Third Occasion</b>	<b>Fourth Occasion</b>
<b>Gross Misconduct</b>	Dismissal			

**Disciplinary Authority**

The operation of the Disciplinary Procedure will be implemented by each of the following representatives in the various cases.

Informal Reprimand

Senior Care Assistant / Manager / Proprietor



Formal Verbal Warning	Manager / Proprietor
Written Warning	Manager / Proprietor
Final Written Warning	Manager / Proprietor
Dismissal	Manager / Proprietor

#### Warning Periods

Formal Verbal Warning – normally disregarded after a 3 month period.

Written Warning – normally disregarded after a 6 month period.

Final Written Warning – normally disregarded after a 12 month period. (Notes – if you are in a senior position, demotion to a lower status may be considered).

In addition any nurse found to be in breach of the NMC’s Code of Conduct shall be referred to the NMC to answer their case.

In addition any carer found to be in breach of NISCC code of conduct shall be referred to the NISCC to answer their case

### Grievance Policy

#### Policy

It is the policy of Peninsula Care Services to aim for an environment where there is open communication between all individuals and that issues can be aired and resolved without causing undue stress or anxiety to those involved.

#### Procedures

Should you have a query or complaint regarding your employment, you should initially raise the matter with your immediate line manager.

If the matter is not satisfactorily resolved, you may submit your grievance in writing (within 5 working days) to the manager of Peninsula Care Services.

The manager may wish you to attend a meeting in order to discuss your grievance to explain the situation more clearly at which point you can bring a fellow employee who may act as a witness or to speak on your behalf.

Following the meeting you will be notified of the decision in writing normally within 10 working days, including your right to appeal.

If you wish to appeal the decision, you must inform the manager within 5 working days of the dated letter.

Your appeal meeting will be conducted by the Proprietor who will listen and examine the issue.

Following the meeting you will be informed of the final decision, normally within 10 working days, which will be confirmed in writing.

### Staff Training & Development

#### Policy

It is the policy that staff members share responsibility in the updating of knowledge and training in relevant key areas to be equipped to deliver the high standard of care expected by Peninsula Care Services.

All staff must attend mandatory training; the following list of training must be undertaken and updates as appropriate.

- Basic First Aid (annually unless certificate states otherwise)
- Manual Handling (annually)
- Protection of Children & Vulnerable adults (3 yearly)
- Basic Food Hygiene (2 yearly )
- Infection Control ( annually )
- Fire Safety (6 monthly)
- Medication Training (3 yearly)

#### Procedures

- Staff will be informed in advance of all training dates, the staff member must confirm their place by calling the office and reserving a place.
- Non Attendance to training sessions without prior warning and not completing mandatory training is considered a disciplinary offence.
- Other study sessions may be recommended from time to time and it is advisable to attend these sessions to help carers develop in their work role.
- Training needs analysis audits are completed on a monthly basis by Recruitments Consultants and the Nurse Manager.
- The opportunity to gain an QCF is available to all members of staff.
- Nurses are offered the opportunity for one-to-one clinical supervision with the Nurse Manager & are encouraged to utilise the network of agency nurses to partake in group supervision.
- Nurses are responsible for ensuring that they meet the NMC's prep requirements. Failing to do so may result in being referred to the NMC & not being offered work through the agency.
- It is the responsibility of the Registered Person & the Registered Nurse Manager to undertake training to ensure that they are up to date in all areas relevant to the management & provision of services.

All training completed by agency staff shall be recorded. The training record shall detail:

- The date of training
- Name & qualification of the trainer or training agency
- Content of the training programme
- Names & signatures of attendees

### **Orientation & Induction of Newly Appointed Agency Staff & Nurses**

#### Policy

It is the policy of Peninsula Care Services to ensure that new members of staff despite experience receive an induction to their new job role. In our organisation we currently provide up to 4 days induction for new staff whilst ensure supporting training is delivered to them within 4 weeks of start date if required.

#### Procedure

As part of the induction process all staff shall be given information with regards to:

- Completion & submission of timesheets
- Pay & holiday
- Availability & booking procedures

All staff must provide evidence of undertaking mandatory training or must attend mandatory training sessions prior to being placed with a service user as part of the induction process.

Mandatory training subjects for domiciliary staff are:

- Basic First Aid (annual update unless certificate states otherwise)
- Manual Handling (Induction and annual update)
- Protection of Children & Vulnerable adults (Induction and update 3 yearly)
- Basic Food Hygiene (update 2 yearly)
- Infection Prevention & Control (Induction and annual update)
- COSHH (annual update)

- Fire Safety (Induction and 6 monthly update)
- Medicines (Induction and 3 yearly)

Mandatory training for nurses consists of:

- Basic Life Support (Induction and annual update)
- Manual Handling (Induction and annual update)
- Protection of Children & Vulnerable adults (Induction and update 3 yearly)
- Infection Prevention & Control (Induction and annual update)
- Fire Safety (Induction and 6-monthly update)
- Paediatric Life Support (for children's nurses - annual update)
- Medication Training (Induction and 3 yearly)

Before providing any community based service new nursing & care staff are to attend a one to one session with a senior member of staff to explain the following organisational procedures.

- Care plans
- Client needs assessment
- Completing care records
- Recording medication given
- Reporting of abuse / Whistle blowing
- Reporting of accidents / complaints / incidents
- Unable to gain access
- Accepting gifts from service users

Domiciliary Care Staff

Once completed care staff who are going to provide domiciliary care are to shadow another more experienced carer in the community.

All policies and procedures are explained in depth and staff members are encouraged to read them thoroughly & ask questions to ensure understanding before signing to state they have understood what they have read & shall comply with organisational policies. These activities form one day of induction training.

A further 3 days of induction training are available for domiciliary care staff will consist of:

- 3 - 4.5hrs of Manual Handling Training - including theory & practical elements (dependent upon previous experience)
- 1.5 - 2hrs Medication Training – including theory on drug administration, recording as well as practical exercises on administering tablets, liquids, topical ointments and creams, eyes drops etc in line with the organisation policies and procedures
- A shadowing shift where the new member of domiciliary care staff accompanies a senior staff member on a community shift in order to put into practice their training & to familiarise themselves with the routine.
- A second shadowing shift where the new member of staff works supervised & supported by a senior member of staff

On completion of the induction training the decision is made jointly with the new member of domiciliary care staff and management on whether more training is required before they commence lone working. New domiciliary care staff with no or limited amounts of experience will be placed within homes requiring two carers to enable them more of an opportunity to learning working alongside an experienced staff member.

Nursing Staff

On completion of the induction process & full assessment of the employees nursing skills, the Nurse Manager shall identify on the employees staff file that they are ready for clinical placement as per the Nurse Managers assessment

**Lone Worker Policy**

## Lone Workers undertaking Home Visits and Travelling

Both managers and staff have a responsibility to ensure working arrangements are as safe as possible. A key factor in this is the manager (or other staff member) knowing where staff plan to be and for there to be the means for two way communication whenever possible.

Where there is a situation where members of staff are in a lone working scenario undertaking home visits or travelling, they should where possible ensure most/all of the following items are adhered to:

- a) Plan your route. Avoid having to stop to check maps etc.
- b) Try to visit in daylight or with someone else
- c) Telephone the staff member prior to the visit to confirm your visit and to ensure that they will be there
- d) If on arrival at a staff members home, you meet with a situation that you did not expect to which gives you concern, leave and make other arrangements
- e) You should never enter a house if you are suspicious
- f) If a visit takes significantly longer than planned, make contact with base to update them on your revised plan and timetable
- g) Domestic pets and other animals can present problems. If you feel unsure or unsafe ask the staff member to remove them to another room/place
- h) Keep car doors locked when travelling (If you were unfortunate enough to be involved in the accident, the emergency services will have no problem opening your car to rescue you)
- i) Keep valuables etc out of sight in the car, ideally locked in the boot
- j) Try to park in open, well-lit places
- k) If someone approaches you when you are stopped lock all doors. Open your window a fraction to allow conversation. Only offer to help if you are sure the situation is genuine.
- l) When returning to your car, have the key ready and enter quickly. Lock the doors as a routine
- m) Avoid walking in isolated or poorly lit places or in subways whenever possible supervision

Although lone workers cannot be subject to constant supervision, it is still an employer's duty to ensure their health and safety at work supervision can help to ensure that employees understand the risks associated with their work and that the necessary safety precautions are carried out.

The level of supervision required is a management decision, which should be based on the findings of risk assessment. The higher the risk, the greater the level of supervision required e.g. a line manager may arrange for the lone worker to be contacted at regular intervals through the shift

It should not be left to individuals to decide whether they require supervision or assistance.

## **Protection of Vulnerable Adults & Safeguarding Children Suspected, Alleged or Confirmed Instances of Abuse**

### Policy

It is the prime concern of Peninsula Care Services to ensure the safety of all service users.

### Procedure

It is the duty of every member of staff to ensure that they do their utmost in the protection of vulnerable adults or children in our care. Staff members are duty bound to report at the earliest opportunity any suspicion of abuse or wilful neglect.

All instances of suspected, alleged or confirmed instances of abuse are to be immediately reported to a member of the management team.

The management team shall ensure that the alleged perpetrator of the abuse/wilful neglect is immediately withdrawn from placement & arrange alternative arrangements for any service users that were due to receive care from that individual.

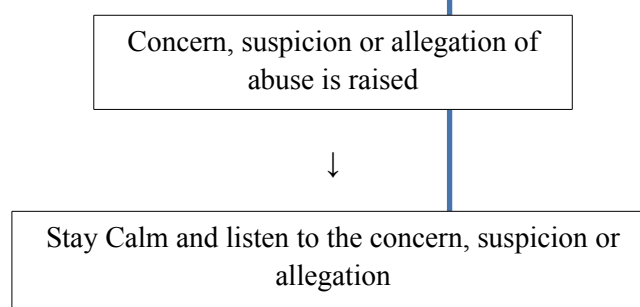
Once a case is highlighted to the management team, it shall be reported to the appropriate authorities including; RQIA, NMC, PSNI, NSPCC, for further investigation.

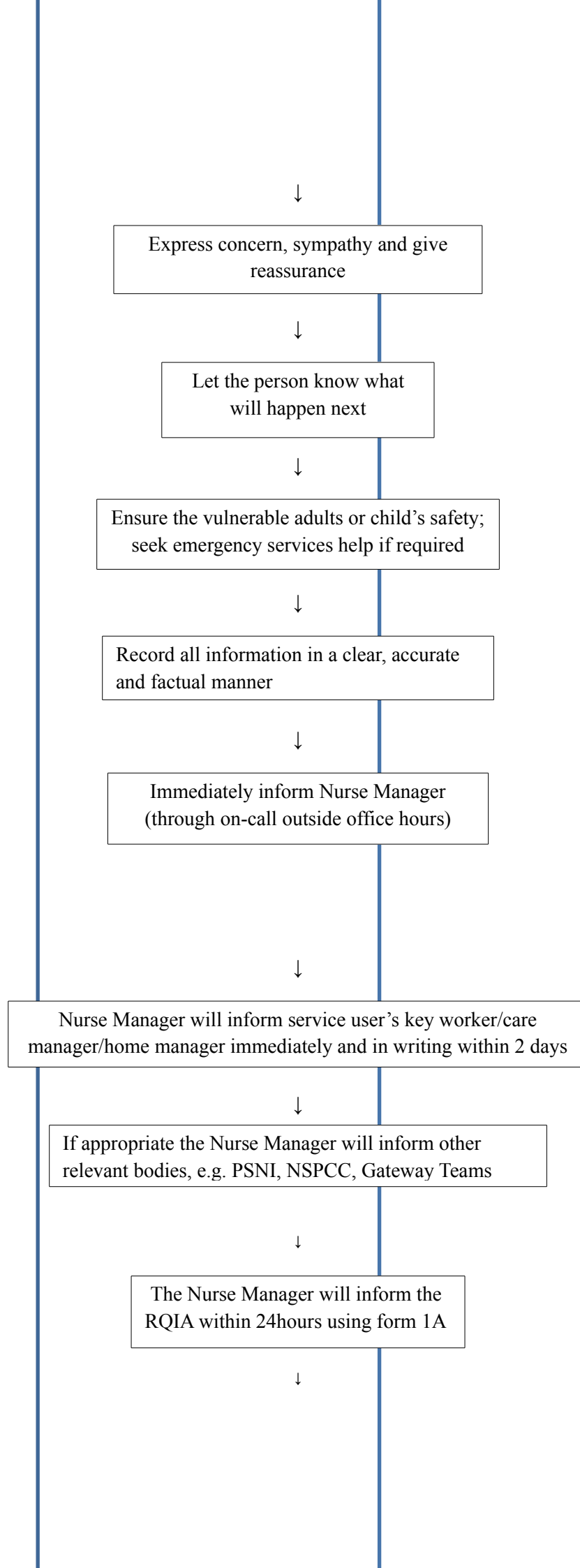
Any staff member found to be the perpetrator of abuse or wilful neglect a service user shall be considered guilty of gross misconduct & shall be dismissed through the company's disciplinary procedure.

Any staff member who has witnessed abuse & fails to report it shall also be considered guilty of gross misconduct & shall be dismissed through the company's disciplinary procedure. In a case where the witness who fails to report, was also being abused by the perpetrator, the matter shall be investigated further & treated on a case by case basis.

## Procedure for reporting abuse

Staff are not responsible for deciding if abuse has or has not occurred however **All** concerns, suspicions or allegations of abuse of a vulnerable adult or child is raised must be reported using the following process







## Confidentiality

Staff members should recognise that in order to protect vulnerable adults &/or children, it may be necessary, in some circumstances, to share information that might normally be regarded as confidential. Vulnerable adults &/or children, & where appropriate their carers or representatives should be made aware that the operation of multi-disciplinary and inter agency procedures established to protect vulnerable adults/children may, on occasion require the sharing of information to protect the vulnerable adult/child or investigate an alleged or suspected criminal offence.

## Completion of Case Records

### Policy

It is the policy of Peninsula Care Services to provide a high quality care service to all our service users whether in their own home or in a healthcare establishment. The organisation believes that an effective tool in the delivery of quality nursing services is the proper completion of case records & acknowledges that good record keeping:

helps to improve accountability

helps to show how decisions related to patient care were made

supports the delivery of services

supports the making of effective clinical judgements and decisions

supports patient care and communications

makes continuity of care easier

provides documentary evidence of services delivered

promotes better communication and sharing of information between members of the multi-professional healthcare team

helps to identify risks, and enables early detection of complications

supports clinical audit, research, allocation of resources and performance planning

helps to address complaints or legal processes

(Record Keeping, Guidance for Nurses & Midwives, NMC, 2009).

### Procedures

#### Creation of case records

Case records shall be created for private clients by nursing or care staff using the Peninsula Care Services approved documentation.

#### Use of case records



All nursing interventions & care delivered to a service user must be documented in accordance with Record Keeping Guidance for Nurses & Midwives (NMC, 2009), a copy of which is available in the office, or at <http://www.nmc-uk.org/Documents/Guidance/nmcGuidanceRecordKeepingGuidanceforNursesandMidwives.pdf>

#### Retention, storage & transfer of case records

Nursing records should be kept in the service user's home file until uplifted to be returned to the office where they will be stored in the office case notes file. All information is to be stored in accordance with the requirements of the Data Protection (1998).

Nursing records shall be retained in accordance with the Department of Health retention guidance found at appendix A to this policy.

When a client's notes are in transit from the client's home to the office they shall be transferred in a sealed envelope to be marked "PROTECTED – MEDICAL". The seal of the envelope should also be signed & dated in order to act as a means of identifying a breach of the integrity of the envelope & possible confidentiality. Notes must remain with the transferring employee at all times when in transit & should not be left unattended at any time when outside of the client's home or office.

#### Access of case records

Peninsula Care Services recognizes the importance of partnerships with both the multi-disciplinary team & our service users in the delivery of their care. Therefore, service user's access to their own nursing records whilst they are located in their own home is by an "open book" policy. This is to mean that the service user or their legal representative is welcome to view the notes at any time. This is not to suggest that information will be available to third parties whom are not part of the multi-disciplinary team that are involved in providing care for the service user.

Staff are at all times to ensure that client confidentiality is maintained in accordance with the NMC's Code of Conduct (2008).

Requests from clients or their legal representatives for access to their notes that have been archived to the office should be made in writing & shall be dealt with by the organisation in accordance with the Freedom of Information Act (2000).

#### Entries to case records

All entries to client case records are to be contemporaneous; dated, timed & signed, with the signature accompanied by the name & designation of the signatory.

Any alterations or additions are to be signed, dated & timed & are to be made in such a way that any previous entry can still be read.

Nurses employed by Peninsula Care Services are to record all care given and any recommendations for future care in the client's case records. The organisation requires all staff delivering care to adopt the approach that "if it is not written, it has not been done" with regards to their entries made into client case records.

Peninsula Care Services recognizes that some clients may not wish to have their case records kept in their own home. In this instance the client's refusal to have their records kept in their own home should be documented, dated & signed. These case records should then be retained in the office in between nursing visits.

Case records are to be kept in the homes of private clients for a period of one calendar month, or until the conclusion of the service, after which time they are transferred with the clients consent to the office for archive in accordance with appendix A.

Issue No.	Review Date	Reviewer	Reason
00	20.04.09	J.Cook	Initial Handbook
01	30.10.13	J.Cook	Change of Registered Manager
02	06.03.14	G. Mulholland	On advice from RQIA inspector