

**Drs James, Parnell & Albardiaz
Northiam and Broad Oak Surgery**

Employment Handbook

1 Practice Purpose

This document is intended to provide you with an overall view of the policies and procedures used within our practice and how these are applied in our day-to-day activities. This is a summary document and the **full details** of each policy can be found in the Employee Manual.

As a rural dispensing practice based in Northiam with a branch surgery at Broad Oak, Brede we aim to create a friendly team who are approachable, good-humoured working environment and atmosphere. We offer good quality care to a high standard to all our patients and aim to champion their needs with the help of our Patient Participation Group.

We have a full range of well-qualified staff at the surgery including Practice Nurses, Healthcare Assistants, Dispensary, Reception and Administration staff and have an excellent team ethos. Each of the doctors has a personal list and we believe patients to be equal partners in their care. This relationship and close co-operation means we are able to maximise patient care and also provides clarity about responsibility for that care.

We aim to provide patients with as much information as possible about the care they receive and to be open to any comments about the service we offer.

We are interested in and enjoy what we do and approach our days with a positive attitude that supports both our colleagues and our patients.

The policies outlined in this document are fully detailed in the Employee Manual where the overall objective, measures and remedies are all detailed. This document summarises those policies but the summary is not intended to replace the detail of the formal policy.

A copy can be found in the upstairs area or on the shared drive /Practice Policies & Procedures 2019/Employment_Manual.doc.

In addition to this document there are three other summary documents:

1. Patient Care Handbook which details the polices that govern how services are delivered by the practice
2. Information Security and Data Protection – how we protect personal data in the practice

Where relevant, Each section heading contains a hyperlink which will link to the relevant detailed policy, protocol or procedure.

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2 Recruitment and Selection

We are committed to ensuring that the recruitment process is fair, open and non-discriminatory, so that it selects appropriately qualified and experienced staff for new roles. Our policy is to develop existing staff to enable them to widen the scope of their roles, take on additional, more diverse duties, or change role completely.

All employees will be considered for advertised roles within the Practice and any applications should follow the process set out in any role advertisement. Promotion and advancement will be made on merit and all decisions relating to this will be made within the overall framework and principles of this policy.

2.1 Starting work

When you start work, you may be offered additional hours for training and to familiarise yourself with the job. You will be given an induction sheet which is completed gradually as they settle in to your new role. Further training is actively encouraged once you are settled in post.

A brief meeting will be held following your initial three month probationary period to check your progress and a subsequent increase in their salary is given if satisfactory progress has been made.

Formal appraisals of performance are held once a year to discuss progress and needs.

2.2 Employee Responsibilities

You will be given induction training and expected to:

- Appropriately report any sickness
- Manage their holiday entitlement and requests
- Report/request other absences
- Uphold the principles of equality
- Ensure you understand our Information Security and data protection policies
- Understand how the practice operates in the event of a major loss of service – Business Continuity
- Understand how to report and manage incidents that may occur
- Whistleblowing – reporting concerns

2.3 Employment Checks

As part of your employment the following checks will be made:

1. Verification of identity checks
2. Right to work checks
3. Professional registration and qualification checks
4. Employment history and reference checks
5. Criminal record checks
6. Occupational health checks

All staff are subject to a Criminal Records Bureau (CRB) check and you consent to this as part of your contract of employment. Staff members who have contact with patients where their duties are of a clinical nature (e.g. doctors, nurses, phlebotomists, healthcare assistants) will be subject to enhanced CRB checks where appropriate. Additional CRB checks may be requested during your employment.

Whilst employed by the Practice, you are required to immediately report any convictions or offences with which they are charged (including traffic offences) to their immediate supervisor.

3 Taking Holiday and Time-off Work

3.1 Annual Leave

Full-time employees of the practice are given 25 days (20 days in the first year of employment) annual leave (pro-rata for part-time employees) in a full year. This excludes Bank Holidays which are in addition. Annual leave is payable at the rate of a normal day’s pay. Additional days are given following specific periods of service.

The leave year is from January to December. No leave may be carried forward from one leave year to the next, except under exceptional circumstances, for example, if an employee has been unable to take the appropriate annual leave within a leave year due to practice requirements.

If any leave is outstanding at the end of the leave year then this will be lost and **no payment** will be made in exchange for the leave.

If you resign from the Practice:

- If annual leave is owed a payment in lieu of annual leave will be made.
- If a staff member has taken more than their agreed number of days paid leave, the relevant amount will be deducted from the final salary.

Annual leave is accrued from the first day of employment. A member of staff working five days a week who is entitled to 25 days leave entitlement in a full year will accrue 1.6 days of annual leave per month; for those working four days a week it is 1.3, three days a week 1.

3.2 Long service

Additional holiday is paid based on service.

Service	Days worked 5	Days worked 4	Days worked 3
After 2 years	1 extra day	1 extra day	1 extra day
From 5 - 7 years	3 extra day	2 extra days	2 extra days
From 7 - 10 years	3 extra day	3 extra day	2 extra day
After 10 years service	5 extra day	4 extra day	3 extra day

This will give a potential maximum of 30 days (pro rata) plus Bank Holidays.

If the extra days are not taken as holiday, these hours will be paid at the normal rate.

3.3 Requesting Leave

Any request for one week or more of annual leave must be submitted in writing to the Practice Manager at least one month before the intended leave dates. Annual leave is granted at the discretion of the Practice and in accordance with service needs.

- No more than two weeks annual leave should be taken during the summer period, i.e. from June to September. No holiday should be taken in the weeks prior to Christmas. One week of the annual entitlement should be taken between January and March.
- Any requests for time off between Christmas and New Year may be granted at the discretion of the Practice and will be considered depending upon service requirements.
- Reasonable notice is required for requests of less than one week of annual leave and is at the discretion of the Practice, considered depending upon service requirements.
- Where appropriate, the Practice has the right to refuse requests for annual leave depending upon service requirements.

- No more than two staff will take annual leave at the same time, e.g. one dispenser and one receptionist, provided that the member of staff requesting leave does not provide cover for the other. Only one Practice Nurse may be on leave at a time.
- All requests will be considered and will be granted if adequate cover can be provided.
- Where reasonably applicable, the Practice reserves the right to declare enforced holiday should this meet service requirements. Adequate notice will be given if this is necessary.

3.4 Overtime

Payment for approved overtime hours will be at the discretion of the Partners and, if paid, will be at the normal hourly rate. To receive payment an accurate record of all approved overtime must be recorded on the appropriate sheet.

In certain circumstances it may be possible to take time off in lieu of payment. If this is agreed it must be at a time convenient to the practice and with the prior agreement of the Practice Manager.

3.5 Continuing Professional Development

Professional staff are required to complete continuous professional development with a required number of credits (based on hours) completed. The practice will support all staff in maintaining their accreditation and in developing new skills.

3.6 Study/Training Leave

The Practice has a commitment to staff training and continuing professional development to ensure that members of staff receive the education and training required to maintain professional standards and offer high quality services to patients.

All such training/study leave is at the discretion of the Partners, particularly where this involves absences during working hours. If a study/training day has been agreed and arranged on a non-working day then the member of staff will be paid for the hours spent on the course.

Travelling expenses will be paid for all attendances at approved courses or meetings.

3.7 Compassionate Leave

Compassionate leave is at the discretion of the partners.

- A total period of 2 days compassionate leave may be taken with the agreed permission of the Partners at short notice.
- An excess of two days compassionate leave may be granted in certain circumstances at the discretion of the Partners

3.8 Unpaid Leave

Unpaid leave is normally only granted where you have exhausted your annual leave entitlement. This type of leave is discretionary and may be granted only in exceptional circumstances if and when the needs of the practice allow.

3.9 Time off for Dependents

An employee is entitled to take a reasonable amount of time off during working hours to deal with family emergencies. Time off may be paid or unpaid; this is at the discretion of the practice. The right to time off is available to all staff regardless of length of service. Time off is allowed when an employee needs to take action that is necessary:

- To provide help when a dependant is ill or injured or gives birth or is assaulted. The reference to injury includes mental illness.
- To cope when the arrangements for care of a dependant unexpectedly break down.
- When a dependant dies
- To deal with an unexpected incident involving a dependant child at a time when an educational establishment is responsible for the child.

This right is intended to cover genuine emergencies. The amount of time off should be reasonable and will vary according to the circumstances of the emergency. For most cases, one or two days should be sufficient to deal with the problem. For example, if a child falls ill with chickenpox, the leave should be enough to help the employee cope with the crisis, to deal with the immediate care of the child, visiting the doctor if necessary and to make longer term care arrangements. The employee is not entitled to take two weeks leave to look after a sick child.

3.9.1 Who counts as a dependant?

People who count as dependants are an employee's husband, wife, parent, child, or any other person who lives in the same household (except tenants, lodgers, etc.) This includes partners or elderly relatives living with the family. A dependant must also be someone who genuinely and reasonably relies on the employee for assistance.

3.9.2 What must the employee do?

An employee is only entitled to time off provided that he or she informs the practice of the reason for the absence as soon as is reasonably practicable and how long the absence is likely to last.

3.10 Other rights to time-off

In addition to holiday there are other types of leave for which you may be eligible. The types of leave described cover the following subjects and detail entitlement and both employee and employer responsibilities:

In accordance with the Employment Rights Act 1996, an employee who is a:

- Justice of the Peace
- Member of a local authority
- Member of a statutory panel
- Member of the Police Authority
- Member of a board of prison visitors or a prison visiting committee
- Member of a relevant health body
- Member of a relevant education body
- Member of the Environment Agency

will be granted reasonable unpaid time off to perform duties in connection with the above. Duties considered appropriate to qualify for paid time off include attendance at a meeting, committee, or sub-committee and any other duty involving the discharge of the functions of the relevant body.

Where requested employees can be required also to attend court for Jury Service. In such cases the practice is not obliged to pay the absent employee whose loss of earnings is refunded to a specified statutory level by the Court depending on the length of the trial.

3.11 Retirement

In the absence of a default retirement age, older employees can voluntarily retire at a time they choose. Discussions regarding employees' future plans will be held at annual appraisal and reviewed thereafter on an annual basis.

3.12 Maternity Leave

When you take time off to have a baby you might be [eligible](#) for:

- Statutory Maternity [Leave](#)
- Statutory Maternity [Pay](#)
- [paid time off for antenatal care](#)
- [extra help](#) from the government

There are rules on [when and how to claim your paid leave](#) and if you want to [change your dates](#).

You can [work out your maternity pay and leave](#) online.

You may also be eligible to get [Shared Parental Leave and Pay](#).

You are entitled to a period of 26 weeks **Ordinary Maternity Leave**, regardless of her length of service followed by a period of 26 weeks **Additional Maternity Leave**. You do not have to take 52 weeks but you must take 2 weeks' leave after your baby is born.

While on maternity leave a woman is entitled to benefit from all the normal terms and conditions of her employment, except for remuneration. At the end of it she has the right to return to her original job. If a redundancy situation arises, she must be offered a suitable alternative vacancy if one is available. If the employer cannot offer suitable alternative work, she may be entitled to redundancy pay.

3.13 Maternity Suspension

The Practice will take account of health and safety risks to new and expectant mothers when assessing risks in work activity. If the risk cannot be avoided, the Practice will take steps to remove the risk or offer suitable alternative work (with no less favourable terms and conditions); if no suitable alternative work is available, the employer must suspend the mother on full pay for as long as necessary to protect her health and safety or that of her baby.

3.14 Paternity Leave

When you take time off because your partner's having a baby, adopting a child or having a baby through a surrogacy arrangement you might be [eligible](#) for:

- 1 or 2 weeks' paid Paternity Leave
- Paternity Pay
- [Shared Parental Leave and Pay](#)

You may not get both leave and pay, and there are rules on [how to claim](#) and [when your leave can start](#).

3.14.1 Employment rights when on leave

Your [employment rights](#) are protected while on paternity leave. This includes your right to:

- pay rises
- build up (accrue) holiday
- return to work

You can get time off to accompany your partner (or the surrogate mother) to 2 antenatal appointments.

If you're adopting a child, you can get time off to attend 2 adoption appointments after you've been matched with a child.

3.15 Parental Leave

Employees who have completed one year's service are entitled to 13 weeks' unpaid parental leave for each child born or adopted. The leave can start once the child is born or placed for adoption with the employee or as soon as the employee has completed a year's service, whichever is later. It may be taken at any time up to the child's fifth birth (or until five years after placement in the case of adoption). Parents of disabled children can take 18 weeks up to the child's 18th birthday.

Employees remain employed while on parental leave and some terms of their contract, such as contractual notice and redundancy terms, still apply. At the end of parental leave they have the right to return to the same job as before or, if that is not practicable, a similar job which has the same or better status, terms and conditions as the old job. Where leave is taken for a period of four weeks or less, the employee is entitled to go back to the same job.

3.16 Flexible Working Patterns

Flexible working is a way of working that suits an employee's needs, for example having flexible start and finish times, or working from home. All employees have the legal right to request flexible working - not just parents and carers.

Eligible employees who have children aged 6 or under (or disabled children under the age of 18) have the right to request flexible working patterns to allow them to spend more time with their children. This includes term-time working, job-sharing, reduced hours, annualised hours, part-time hours, flexitime, etc. All requests will be considered, and if agreed flexible working patterns are deemed to be a permanent arrangement.

This is known as '[making a statutory application](#)'.

Employees must have worked for the same employer for at least 26 weeks to be eligible. The practice will deal with requests in a 'reasonable manner' for example by:

- assessing the advantages and disadvantages of the application
- holding a meeting to discuss the request with the employee
- offering an appeal process in the event of rejection

The practice is not obliged to accept the request, but must establish any reasons for rejection in accordance with the legislation.

4 [Staff Absence - Sickness](#)

Full details of the policy and procedures covering Sickness are available in the Employee Manual which you are required to read. The following is required:

1. On the first day of sickness, and each working day of absence (until a medical certificate has been provided to cover your absence), please telephone the Practice Manager, or Dispensary Manager if you are a dispenser, at the earliest possible opportunity. Notification is to be made personally, or if you are unable to do so, by a relative, neighbour or friend.
2. In cases of illness of up to seven days (including Saturdays and Sundays) a self-certification absence form must be completed upon return to work.
3. If your absence has been for longer than seven calendar days or you know it will be, you must obtain a certificate from your doctor.

This will cover the majority of absence reporting requirements. However, there are more detailed procedures around longer term sickness, return to work and repeated absence which are outlined in detail in the Employee Manual.

4.1 Statutory Sick Pay (SSP)

You are (if you meet the criteria) only entitled to SSP on qualifying days (generally following the first three days of absence). SSP is treated like wages and is subject to Income Tax deductions and National Insurance contributions.

The contract of employment outlines the Sick Pay scheme for long-term sickness absence. The Practice also reserves the right to withhold sick pay for a failure to comply with Practice reporting requirements.

4.2 Time-off for Medical Appointments

Where medical appointments are required due to sickness periods of any length in duration, time-off will be granted to attend these.

An appointment letter or card from the provider of the medical appointment will need to be provided by you within 48 hours of the appointment being conducted (unless previously arranged).

4.3 Returning to Work After Absence

On your return to work after any period of sickness, you must complete the Sickness Self-Certification Absence form shown in [Appendix A](#). There are further constraints depending on the length or frequency of absence. Details can be found in the Employee Manual.

5 Grievance Procedure

You can raise a grievance or concern where an issue has not been resolved through recourse to existing Practice Policy.

An informal resolution will be sought but if this is not successful then a formal three stage procedure is provided. This covers:

Stage One - Statement of Grievance the employee provides a written statement including details of the basis for the grievance

Stage Two – Consideration The Practice has five working days to consider a response. A meeting will be arranged with the employee and the Practice Manager to discuss the grievance. The employee must take all reasonable steps to attend this meeting. Following this meeting the Practice will inform the employee in writing of the outcome of the meeting. The employee has the right of appeal against the outcome of a grievance meeting.

Stage Three – Appeal If the employee wishes to appeal the decision they must inform the Practice in writing. The Practice will then invite the employee to attend a further meeting with an independent adjudicator who will consider the appeal. After the appeal meeting, the Practice will confirm in writing the outcome of the appeal. At all stages in the procedure employees may be accompanied by a work colleague or an accredited representative.

The Grievance procedure may not be used as a mechanism for appeals against dismissals in accordance with the Practice disciplinary procedure for which separate and specific routes of appeal are available within the Disciplinary procedure.

6 Equal Opportunities, Discrimination, Bullying, Harassment and Victimisation in Employment

We are an equal opportunities Employer. We are committed to ensuring that all staff and applicants for employment are protected from unlawful discrimination in employment and staff should report any suspected incidents of discriminatory acts and practices to the Practice Manager.

Bullying, harassment and victimisation in the workplace is wholly unacceptable in any form. We have an environment of mutual trust and respect amongst all staff preserving individual dignity at all times. Any form of bullying and/or harassment as unacceptable behaviour.

Both bullying and/or harassment may involve action, behaviour, comment or physical contact which is found objectionable or which causes offence; it can result in the recipient feeling threatened, humiliated or patronised and can create an intimidating work environment.

If you suffer bullying or harassment, you should:

- If possible ask the aggressor to stop.
- If this is unsuccessful, you should bring the matter to the attention of the Practice manager or Practice Lead

Bullying and/or harassment may relate to a single isolated incident or to a series of incidents.

7 Disability in Employment

The Practice recognises that, as an employer, it has clear legal obligations to ensure that people with disabilities are afforded equal opportunities to enter and maintain employment wherever practical.

8 Stress

The Practice recognises its responsibilities under the Health & Safety at Work Act which places general duties and obligations on all employers and employees in relation to Health and Safety at Work. Our policy is designed to:

- To provide a framework within which any individual at the Practice with a stress problem may be supported in an effective, appropriate and understanding manner
- To create an environment in which employees are not threatened by being honest about their experiences of stress and its effects
- To offer encouragement and assistance to all employees who know or suspect that they or their colleagues have a stress problem by encouraging self-referral to a medical specialist
- To identify and reduce the incidence of sickness absence and work impairment due to stress
- To reduce the underlying causes of stress where possible when they are work-related

9 Alcohol and Drugs

The Practice has a lawful responsibility to ensure that all employees engaged in the provision of care, or engaged in providing ancillary services to support the provision of care, must not be under the influence of alcohol or illegal drugs whilst at work which may compromise the health and safety of colleagues or patients. Practice employees are therefore not permitted to consume alcohol during contracted working hours, with the exception of any social functions held on practice premises. The Practice also forbids the use of all illegal drugs.

10 Whistleblowing

Where staff has concerns, we would encourage all staff to raise them within the practice directly and at an early stage. Staff can approach external body because feel they are not able to raise a concern internally or they have been ignored.

If you wish to raise a concern externally then you can contact NHS England about anything within the practice or any other NHS organisation. NHS England is a Prescribed Person under the Public Interest Disclosure Act.

This policy does not apply to carers or patients where there is a specific complaints procedure within the practice and escalation to the CCG if a resolution cannot be found.

‘Whistleblowing’ does not apply to personal grievances, including employment issues, which should be dealt with through internal organisational policies.

It would generally be applied to:

- Concerns about unsafe patient care;
- Poor clinical practice or other malpractice which may harm patients;
- Failure to safeguard patients;
- Maladministration of medications;
- Untrained staff;

- Unsafe working conditions
- Lack of policies;
- A bullying culture;

10.1 Raising a concern

All concerns should be raised centrally in the first instance. Contact details are

Telephone: 0300 311 22 33 Email: england.contactus@nhs.net General Post: NHS England, PO Box 16738, Redditch, B97 9PT

Any contact is confidential and, if needed anonymous.

More details of how concerns can be raised and their subsequent management are covered in the NHS Whistleblowing Policy which can be found at: <https://www.england.nhs.uk/wp-content/uploads/2016/09/external-whistleblowing-policy-v4.pdf>

11 Disciplinary Procedures

Where an employee fails to comply with the terms of their employment, a Disciplinary Procedure may be invoked to ensure there is consistency and fairness in the treatment of individuals.

We are a small Practice and will generally exercise flexibility in the application of this procedure to match specific circumstances of individual cases. All meetings concerning disciplinary matters will be held in private and must be confidential.

As an employee you are required to:

1. Observe their Contract of Employment which is covered by the Terms and Conditions referred to in the appointment letter together with any agreed Job Description, and having regard to custom and practice.
2. Perform their duties as directed by the Partners or the Practice Manager in accordance with Clause 1 above.
3. Observe all policies and procedures issued by the Practice.
4. Give due consideration to the health, safety and welfare of others.
5. Observe agreed working hours; inform the Practice Manager as soon as practicable of the reasons for and probable duration of any unexpected and avoidable absence from work.
6. Send medical certificates covering periods of sickness absence to the Practice Manager in accordance with agreed procedures.
7. Conduct themselves in all other respects in a manner consistent with the proper performance of their duties; maintain good relationships with patients and work colleagues; have due regard to any Code of Practice relevant to their employment capacity.

11.1 Disciplinary Process

The Disciplinary process has four stages to manage resolution. All issues will be managed through the disciplinary process. It is expected that minor issues will be resolved in the first stage.

Stage 1 – Informal Discussions/ Counselling It is hoped that in the majority of cases this informal counselling will resolve any possible difficulties and lead to the required improvement.

Stage 2 – Formal Verbal Warning If there is no improvement in standards, or if a further act of misconduct occurs, a first written warning may be issued. This warning will confirm the reason for the disciplinary action and the nature of the improvement required, and that the warning will be effective for a period of six months.

Stage 3 – First Written Warning	If there is no improvement in standards, or if a further act of misconduct occurs, a first written warning may be issued. This warning will confirm the reason for the disciplinary action and the nature of the improvement required, and that the warning will be effective for a period of six months.
Stage 4 – Final Written Warning	If there is no improvement in standards or if a further act of misconduct occurs, a Final Written Warning may be issued.
Stage 5 – Dismissal	If, following a final written warning, there is no improvement in standards or if a further act of misconduct occurs then the employee may be dismissed.

Employees will **not** be dismissed for a first breach of discipline except in cases of Gross Misconduct, when the penalty will normally be dismissal without notice and without pay in lieu of notice.

Employees will have the right to appeal against any formal disciplinary action.

The procedure may be implemented at any stage in accordance with the seriousness of any alleged misconduct.

Decisions to dismiss, and the issuing of formal disciplinary warnings, may only be undertaken by the Senior Partner.

11.2 Gross Misconduct

If, after investigation, reasonable evidence exists to demonstrate that an act of gross misconduct has been committed the normal consequence will be dismissal. Examples of gross misconduct can be found in the full policy.

While the allegations of gross misconduct are under investigation, it will be normal practice for employees to be suspended from duties. During any periods of suspension, pay will be as for a normal day.

11.3 The Right of Appeal

Any employee against whom formal disciplinary action has been taken has the right of appeal. The purpose of any appeal will be to consider whether the action taken is fair and reasonable in the circumstances. An appeal against any disciplinary decision should be made in writing to the Practice Manager within fourteen working days of the date of receipt of the letter containing confirmation of the disciplinary action.

12 Information Security

The security of our patient data is very important to our Practice and the trusted role we have in our community.

There are laws covering the storage and use of the personal data we hold within our practice. The Practice is legally responsible for the data we hold and we have legal obligations to report any breach or concerns around data security.

It is important that you understand:

- How we protect Patient data
- How we dispose of Patient data
- The rules around sharing Patient data particularly in the use of Phone, Letter, Email, Fax

A separate set of guidance notes covering your responsibilities for data and systems security is available and the full policy statements can be found in the Employee Manual.

As a member of the practice you will have access to sensitive patient data and we each have the responsibility to ensure our patient's data remains secure. If you have any concerns around how Patient data is managed or shared or questions, feel you need additional training, or see what you think might be a security 'incident' then please discuss it with the Practice Manager.

13 Incidents

Staff members should already understand the professional and regulatory constraints under which they operate, and under which circumstances events and incidents must be reported to the appropriate external bodies.

Internally we operate a blame-free culture where any errors or mistakes you make can be reported and openly discussed to ensure that as a Practice we can continually improve the service we provide and to ensure that we know all of any incidents that may result in a patient complaint.

If you have broader concerns over standards or actions of others this should be reported using the [Whistleblowing](#) process.

In an emergency or under business continuity [additional protocols](#) are documented

14 Health and Safety

Health and safety training is an integral part of the Practice's operations. It is essential that every employee is trained to perform their job comprehensively and safely. Each employee is trained in safe working practices and procedures relevant to their role. Training includes full instruction on the safe use of any necessary equipment provided.

14.1 Fire Safety

The practice provides fire safety with equipment on-site and training for staff in the use of this equipment. In the event of a fire, use the designated **FIRE EXITS** to evacuate the building. These are:

- FRONT DOOR
- SIDE DOOR (adjacent to Reception)
- REAR SIDE DOOR (adjacent to Dr James's room)

All staff and patients will muster in the Car Park and the Practice Manager will check that everyone is present.

For more details see the detailed fire safety policy in the Employee Manual

14.2 Manual Handling

Staff should read the Manual Handling section of the employee Manual so that we can prevent any long-term musculo-skeletal health problems by promoting an "each-and-every-time" protocol for safe lifting.

In-line with the Manual Handling Operations Regulations 1992 (amended 2002) the Practice adheres to the following:

- **Avoid** the need for hazardous manual handling, so far as is reasonably practicable;
- **Assess** the risk of injury from any hazardous manual handling that can't be avoided; and
- **Reduce** the risk of injury from hazardous manual handling, so far as is reasonably practicable.

14.3 Equipment Safety

The Practice takes appropriate steps to ensure the safety of all employees working on equipment and the safety of others who may be affected by the use of the equipment. In this regard the Practice will ensure the equipment is suitable, maintained, tested, secure and has clear controls. In using equipment you should wear any protective clothing provided and not wear clothing, jewellery or long hair in such a way as might pose a risk to their own or anyone else's safety.

Employees are prohibited from using any piece of equipment for any purpose other than its intended purpose.

14.4 First Aid and Reporting Accidents at Work

A First aid box is located in Reception. The Practice Nurses and Healthcare Assistants act as designated first aid personnel. This information is also displayed on notice boards(??).

Any injury sustained by a person at work, however small, must immediately be reported to the Practice manager and recorded in the accident book. The accident book is located in Practice Managers office.

15 **Business Continuity**

The Practice Business Continuity describes how we will respond to the loss of any key components of our service. This could be managing the failure of equipment, failure of utilities (gas/electricity) or complete loss of the surgery building.

In the event of a major incident, for example the loss of the surgery building, you will be contacted in a telephone cascade and given instructions on what you should do.

All Staff should read and be familiar with the Business Continuity Manual and senior staff should retain a copy of the plan at home.

[Emergency Drugs bags](#) and [Call handling protocols](#) are also available

16 **Good Practice Guidelines**

At Northiam & Broad Oak Surgery, all our doctors are expected to follow the good medical practice guidelines set by the GMC.

Good Medical Practice sets out the principles and values on which good practice is founded; these principles together describe medical professionalism in action.

The guidance is addressed to doctors, but it is also intended to let the public know what they can expect from their doctors at this practice.

The link below is to the good medical practice guidelines and at this Practice this guidance will always be made available to all the Practice team either by paper format or on the Practice Intranet.

16.1 **General Medical Council - Regulating Doctors to ensuring good medical practice:**

http://www.gmc-uk.org/guidance/good_medical_practice.asp

Please be aware that Good Medical Practice Guidelines are currently being reviewed and will be revised for 2012.

The GMC held a consultation on the content of the new guidance. This consultation closed on Friday 10th February 2012. The new guidance will be published by the GMC in autumn 2012.

In order to ensure all clinicians keep up-to-date with clinical standards and guidance, the Practice has regular meetings to discuss, review and implement the latest clinical evidence, e.g. NICE guidance and PACE (Prescribing and Clinical Effectiveness) bulletins.

In addition, all clinicians are required to evidence continuing professional development as part of their appraisal process.