

Guidance for employers and frequently asked questions where returning nurse is directly employed by host employer

Last Skills for Care update 01.06.20





The following guidance and frequently asked questions have been prepared for NHS employers who will be deploying staff who returners are. Any staff being deployed to social care settings from the regional COVID-19 'hubs' will have been through the same process. We have made amendments to reflect differences, where appropriate. *Skills for Care, April 2020*

Update June 2020:

This guidance is for providers of social care who have accessed a returning Registered Nurse (RN) via the central hub/local arrangement, where there is a HOST employer organisation such as a local CCG or Community Trust, that has been identified. A host employer is the organisation that will employ the RN and who will be placing them into positions where there has been an identified need, on 'loan' or secondment; you will be the *receiving provider*. The funding that has been identified for this activity by the Department of Health and Social Care (DHSC) is set out in [Covid 19: Care home support package](#) date: 22.05.2020. The host employer organisation will be responsible for matters relating to pay and terms and conditions. You as the receiving provider, will be responsible for the direction of nursing care and indemnity.

Public Health England – guidance on staff rotation.

The government has introduced new measures to reduce the spread of infection in care homes, including limiting movement of staff. Nurses deployed to residential or nursing homes should expect to be employed in one home setting for a period of time, rather than undertake shifts across more than one home.

In readiness for deployment – for each individual RN

1.0 Pre-employment Checks

The pre-employment checks which will have been done before the returners are deployed to you all conform to the NHS Employer's Temporary COVID-19 Pre-employment standard. Full details of this can be found via this link:

<https://www.nhsemployers.org/covid19/assurance/preemployment-checks>

1.1 Registration of Clinical Practitioners

All returners will have had their registration checked and will be either on the permanent or the emergency temporary register. You should therefore not need to check this again. You will be advised of the registration number and any exceptional cases will be clearly identified in the handover documentation.

1.2 Identity Checking and Right to Work

All returners will have had their identity and their right to work checked before they come to you. The documents evidencing identity and right to work will be passed on to the host employer when the DBS process (see later) has been completed. The returner's photo ID will



have been visualised 'online' and returnees have been advised to take their photo ID with them on their first day. You should reinforce this in your first contact with them.

[1.3 DBS Clearance](#)

This will depend on if the returner is from 'Wave 1' recruitment or 'Wave 2', so please read carefully and check with the individual as to the type of clearance they have.

'Wave 1'

All returners are asked to bring to the host employer a DBS self-declaration unless they have a current (within the last 3 years) enhanced DBS with adult barred list clearance which they can show in place of a self-declaration. It has been agreed that returners who are registered can practice under supervision with a satisfactory self-declaration pending the completion of the full DBS check. These checks will be run centrally, and results provided to the host employer. The recently announced 'fast track' system will focus on checking the barred lists within 24 hours of the DBS application being submitted. The full *clearance* will take longer; however, the practitioner can practice independently as soon as the barred list has been checked.

If the returner subscribes to the online DBS service or has a DBS certificate in connection with any volunteering roles, they have been asked to produce this in order that you may make a risk assessment in relation to the role you are asking them to fulfil. They will also bring a self-declaration and will be picked up through the full DBS checking process nationally.

See sample model self-declaration at the end of this document.

'Wave 2'

Returners recruited during wave 2 will have the full enhanced DBS check with Adult and Children barred list check prior to releasing the candidate as 'deployable' – so no need for the self-declaration.

[1.4 Occupational Health Clearance](#)

All returners have been asked to complete and return to the host employer an Occupational Health self-declaration. The host employer will need to add details of the specific role to be undertaken and then these will need to be screened by the host employers Occupational Health Team.

See sample self-declaration at the end of this document.

[1.5 Previous Employment](#)

This relates to Wave 1. Please note that it has not been possible to take up references centrally in respect of these returners. Many will be returning to their previous employers and will therefore already be known to you. From a national perspective a decision was taken that returners would be allowed to take up roles without verification of previous employment.



Wave 2 we are now taking up 1 reference for registered staff and 2 for non-registered staff

1.6 Declaration of Honesty

All returners have been asked to sign and return centrally a declaration of honesty regarding the responses they have provided in their pre-employment check process. These will be sent on to the host employer with their ID documents. It should be of assistance in the unlikely event of needing to terminate employment in the light of false submissions.

Applicant declaration

I understand as a result of the current situation in relation to COVID-19 that recruitment processes are being fast tracked to enable deployment as quickly as is safely possible. This may mean that my employment is permitted to commence on a 'risk assessed' basis pending some pre-employment checks.

Should any of those employment checks come back to a standard considered as unsatisfactory to NHS England or NHS Improvement or my social care employer I understand that this will be considered a breach of trust and confidence and grounds for immediate summary dismissal.

I assert that there are no issues with my employment history and the documentary evidence I am able to provide.

Name:

Signed:

Date:

2. Induction Training

All returners have been directed to register and complete the four statutory and mandatory training modules deemed critical prior to returning to the workplace. These are:

- 1. Health, Safety and Welfare**
- 2. Fire Safety**
- 3. Infection Prevention and Control – Level 2**
- 4. Resuscitation – Level 2**

In addition, we strongly recommend:

5. Learning resources for returning Nurses

A returner who has been deployed to your establishment may have already completed the modules, be in the process of completing the modules or, on occasion they may have not started. If the returner has an active log in to e-learning for health they will be able to use this link and log into the system, <https://portal.e-lfh.org.uk/Component/Details/610770>

You should be able to check that these have been completed. Please ask the returner to print or save a copy of the completion/pass certificate to show to your employer. Further induction

NHS England and NHS Improvement amended version for social care.

Amended by Skills for Care June 2020



training including specific COVID-19 training can be accessed via eLearning for health – learning resources for returning nurses and /or should be provided locally.

If the returner does not have an active log in to e-learning for health, they can still access the learning modules here:

https://portal.e-lfh.org.uk/Catalogue/Index?HierarchyId=0_45016_45612&programmeld=45016

1. Choose folder: Statutory and mandatory training
2. Complete all of the modules
3. Choose folder: Learning resources for returning Nurses
4. Complete the modules

At the end of each module ask the returner to scroll to the bottom of the screen which will show if complete and passed, take a screen shot with date and time as evidence of completion

3. Appraisal or professional re-validation

These roles are all temporary and any normal requirement for appraisal and/or revalidation is suspended in these circumstances.

4. Pay

All staff who return to work in the NHS should be paid the substantive rate for the role they are asked to undertake.

Remuneration for returners has been agreed as follows:

Doctors, nurses, AHPs and pharmacists returning to the NHS will be remunerated at the top of the band appropriate for the role they are undertaking.

5. Contracts

Returners should be engaged by the host employer on fixed-term contracts for 3-6 months in the first instance. Working hours arrangements/protection and leave arrangements etc. should be agreed locally.

5.1 Contract End

At the point where a registered practitioner's contract comes to an end, the host employer will need to notify the relevant registration authority (NMC) as they will need to be removed from the relevant temporary register. Any practitioners who wish to continue to practice in a registered capacity will need to re-join the register permanently and should contact their registering body.

6. Returners who change their mind



There is a delicate balance here to be struck between the normal ‘employers’ expectations’ and the fact that these returners have stepped forward voluntarily in this emergency situation. The returners have been reassured that if they change their mind and do not want to work anymore, they should highlight this to their direct line manager who should arrange for steps to be taken for them to leave work safely and as appropriate. It may be that an alternative role would provide a better match for them either within your organisation or elsewhere.

7. Sickness and other Employment Policies

Returners have been advised that if they become ill whilst working, local policy and national guidance must be followed to ensure their safety and the safety of others. They should immediately inform their line manager and follow the local policy of the host employer whilst notifying you of their absence.

8. Pension Queries

The government has brought forward emergency legislation in response to the COVID-19 outbreak that contains important information on pension arrangements for extra NHS staff. It provides for the suspension of the 16-hour rule which currently prevents staff who return to work after retirement from the 1995 NHS Pension Scheme from working more than 16 hours per week, in the first four weeks after retirement.

It also provides for:

- The suspension of both the abatement for special class status holders in the 1995 Scheme
- The requirement for staff in the 2008 Section and 2015 NHS Pension Scheme to reduce their pensionable pay by 10% if they elect to ‘draw down’ a portion of their benefits and continue working.

Taken together, these measures allow skilled and experienced staff who have recently retired from the NHS to return to work, and retired staff who have already returned to work to increase their commitments if required, without having their pension benefits suspended.

A six-month notice period will be given to staff and employers before these measures will cease to apply, at which point the relevant sections of the scheme regulations will take effect again. Staff and employers will therefore have six months’ notice to readjust their working patterns.

In relation to taxation of pensions of high earners, the Chancellor has addressed this via a tax solution, which involves:

- Increasing annual allowance taper thresholds by £90,000 from 6 April 2020. The taxable pay threshold rises from £110,000 to £200,000 and adjusted income threshold from £150,000 to £240,000
- Ensuring that the very highest earners pay their fair share of pension tax by reducing the minimum level to which the annual allowance can taper down from £10,000 to £4,000



(this will only affect those with a total income (including pension accrual) over £300,000).

9. Death in service

The following statement has been agreed with the Department of Health and Social Care (29/04/2020):

“Registered Nurses, and other staff, working in social care settings are eligible for the death in service payment announced by the Government. Eligibility is work-related and applies to staff working in frontline NHS and social care roles and locations where there is a higher risk of coronavirus.”

Detailed rules for the life assurance scheme and Q&A will be published on the NHS Business Services Authority website.

10. Indemnity

The following statement has been agreed by Department of Health and Social Care (18/05/2020):

“Returning nurses who are deployed into social care settings will need to be covered by the indemnity arrangements of the receiving social care providers. All social care providers are required to have insurance and suitable indemnity arrangements in place for the services they provide, and these arrangements provide cover for all staff working under the direction of a provider. This includes staff who are working with them on a secondment or loan from another organisation, and volunteers.

Returning nurses who have returned to practice during the covid-19 pandemic may be redeployed into care homes with nursing provision. In these instances, the receiving social care provider will be directing the work of those nurses and must therefore provide the indemnity cover, even where a nurse remains employed by a loaning organisation, such as an NHS employer. The receiving provider will need to confirm with the loaning employer that existing indemnity and insurance arrangements are adequate to cover staff being loaned to them as part of the redeployment process.”

As a receiving provider you will be asked by the host employer to provide assurances regarding indemnity arrangements and insurance.

Example Disclosure and Barring Self Declaration

Disclosure and Barring Service (DBS) Declaration

We have been working closely and at pace with colleagues across the Department of Health and Social Care (DHSC), NHS Employers and the Disclosure and Barring Service (DBS) to devise a swift and effective process for obtaining DBS Certificates, as appropriate, for



compassionate, skilled and experienced individuals who are able to contribute to our collective efforts to tackle COVID-19.

To further mitigate the risk of any delays in receiving DBS Certificates, which would otherwise impact on our ability to urgently deploy you, we are asking you to complete the DBS Declaration below. The information you provide will be considered alongside other information we have obtained about you as part of our pre-employment check process. If necessary, we will make a risk-assessed decision on your appointment which ensures that even in these critical circumstances we continue to provide the appropriate protection to the most vulnerable people in our society.

It is important for us to stipulate that answering YES to any of the questions in the attached form does not mean an automatic bar to being considered for a position in the NHS. In accordance with the [DBS Code of Practice](#), any criminal record information disclosed will be considered on a case-by-case basis. We will only take account of information that is relevant to the position for which you are applying.

For more information on DBS Disclosures and the use of declarations please refer to the [DBS resources](#) developed and published NHS Employers. If you would like to discuss this requirement further.

Thank you for your understanding, your service and your kindness.

Disclosing criminal record information

When completing questions 1-4 in Model declaration form A (attached), you will need to declare all convictions that **are not protected** (i.e. eligible for filtering) as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended).

In April 2013, youth cautions and youth conditional cautions were introduced by the Legal Aid, Sentencing and Punishment of Offenders Act 2012 (LASPO) to replace reprimands and final warnings. When completing this form, you will also need to declare all cautions and/or reprimands and final warnings which are not protected.

This includes any cautions and/or reprimands and final warnings that may have been issued in another country, where an equivalent offence in England and Wales is not protected.

Convictions, cautions, reprimands and final warnings must be declared regardless as to whether they are **spent** or are still considered **unspent**. This requirement applies to certain NHS positions which involve high levels of contact with children and adults who are receiving or accessing health and care services.

If the position is eligible for an **enhanced disclosure**, any subsequent check we carry out with the Disclosure and Barring Service (known as a DBS check) may include other relevant non-conviction information held on police databases, at the discretion of the Chief Constable of the relevant police force.

If the position you are applying for is a **regulated activity** as defined under the Safeguarding Vulnerable Groups Act 2006 (amended by the Protection of Freedoms Act in 2012), the





enhanced disclosure may also include any information that is held about you on the children's and/or adults barred list(s). As outlined in the section above, applicants must not apply for or engage in a regulated activity that they are barred from working or volunteering with.



MODEL DECLARATION FORM A

Please complete and return the form only to: **[organisation to insert contact details]**.

Before completing this form, it is important for you to note the following points:

1. You must answer all the questions in this form.
2. Before ticking “yes” or “no” please ensure you read the explanatory notes underneath each question. These notes outline what information you should consider providing to support your answer.
3. If you answer “yes” to any of the questions, please use the space provided to include any information that may be relevant to the position for which you are applying.
4. If you would like to submit any additional supplementary evidence for us to consider in support of your application, please attach or upload this with the form when you return it to us.
5. When answering questions 1-4 you are not required to disclose information about parking offences.
6. You should notify us, at the earliest opportunity, if any information provided in this form subsequently changes once you have submitted it to us and before taking up the appointment.

Applicant details							
Full name (in block capitals)		Contact telephone no:					
Role applied for		Contact email address:					
<p>1. Do you have any convictions that are not protected (i.e. eligible for filtering) as outlined in the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended) (the Exceptions Order)?</p> <p>It also includes all convictions or Summary Hearings that have been issued under military law while serving in the Armed Forces, either in the UK or any other country, where the equivalent offence in England and Wales is not protected.</p> <p>You are not required to disclose any information in relation to the above if ALL convictions are protected (i.e. eligible for filtering) as outlined in the Exceptions Order. In these circumstances you should tick NO to this question.</p> <p>This requirement is regardless as to whether any conviction is spent or remains unspent.</p>			<table border="1"> <thead> <tr> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td style="height: 100px;"></td> <td style="height: 100px;"></td> </tr> </tbody> </table>	Yes	No		
Yes	No						

<p>Please ensure that you read guidance in the section on disclosing criminal history information before completing this question.</p> <p>If you have ticked YES, you now have two options on how to disclose this information.</p>		
<p>Option 1: Please provide details of the conviction or Summary Hearing, including the date and reason administered in the space below.</p>		

Option 2: You can disclose your record separately together with any statement detailing your conviction or Summary Hearing. Any supplementary information should be marked CONFIDENTIAL and state your full name and details of the position being applied for.

To do this you must mark an "X" against the statement below.

I have attached details of my conviction separately (please mark with an "X")

<p>2. Do you have any cautions, reprimands or final warnings that are not protected (i.e. eligible for filtering) as outlined in the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended) (the Exceptions Order)?</p> <p>It also includes all cautions, reprimands or final warnings that have been issued under military law while serving in the Armed Forces, either in the UK or any other country, where the equivalent offence in England and Wales is not protected. You are not required to disclose any information in relation to the above if ALL convictions are protected (i.e. eligible for filtering) as outlined in the Exceptions Order. In these circumstances you should tick NO to this question.</p> <p>This requirement is regardless as to whether any caution, reprimand or final warning is spent or remains unspent. Please ensure that you read guidance in the section on disclosing criminal history information before completing this question.</p> <p>If you have ticked YES, you now have two options on how to disclose this information.</p>	<p>Yes</p>	<p>No</p>
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Option 1: Please provide details of the caution, reprimand or final warning, including the date and reason administered in the space below.

Option 2: You can disclose your record separately together with any statement detailing your caution, reprimand, or final warning. Any supplementary information should be marked CONFIDENTIAL and state your full name and details of the position being applied for.

To do this you must mark an "X" against the statement below.

I have attached details of my conviction separately (please mark with an "X")

<p>3. Have you been formally charged with any other offence which has not yet been disposed of?</p> <p>This includes where you have been formally charged of any offence that has been issued in any other country which has not yet been disposed of.</p> <p>Please note that you must inform us immediately if you are formally charged with any offence after you complete this form and before taking up any position offered to you.</p>	<p>Yes</p>	<p>No</p>
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If you have ticked YES, please provide details of the nature of the offence with which you have been formally charged, date on which you were charged, and details of any on-going proceedings, if any, by a prosecuting body.

You may use the continuation sheet attached if necessary – please indicate which question information relates to, if doing so.

<p>4. Are you currently subject to any criminal investigations or pending prosecutions by the police which may have a bearing on your suitability for this post?</p> <p>This may also include any current criminal investigations or pending prosecutions by the police in any other country.</p>	<p>Yes</p>	<p>No</p>
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If you have ticked YES, please provide details of the nature of the allegations made against you and, if known to you, any action to be taken against you by the police.

You may use the continuation sheet attached if necessary – please indicate which question information relates to, if doing so.

<p>5. Have you ever been subject to any formal action being taken against you by the NHS Counter Fraud Authority (formerly NHS Counter Fraud and Security Management Services) or any other investigatory body in relation to allegations of fraud, which may have a bearing on your suitability for this post?</p> <p>Any other investigatory bodies may include: HM Revenue & Customs, Financial Services Authority, Department for Business, Energy and Industrial Strategy (formerly the Department of Trade & Industry), Local Authorities, Department of Work and Pensions, Home Office, and UK Visas and Immigration.</p> <p>This list is not exhaustive and should be taken as a guide only. You must declare any action taken against you by an investigatory body, following allegations of fraud.</p>	<p>Yes</p>	<p>No</p>
<p>If you have ticked YES, please provide details of the offence, formal action taken, dates and investigatory or prosecuting body, as may be relevant.</p> <p>You may use the continuation sheet attached if necessary – please indicate which question information relates to, if doing so.</p>		

<p>6. Have you ever been dismissed for misconduct from any employment, volunteering, office, or other position previously held by you, in circumstances which may have a bearing on your suitability for this post?</p>	<p>Yes</p>	<p>No</p>
<p>If you have ticked YES, please provide details of the employment, volunteering, office, or other position held, the date that you were dismissed and the nature of allegations of misconduct made against you.</p> <p>You may use the continuation sheet attached if necessary – please indicate which question information relates to, if doing so.</p>		
<p>7. Are you currently subject to a fitness to practise investigation and/or proceedings of any nature by a regulatory or licensing body, which may have a bearing on your suitability for the position you are applying for?</p> <p>This may include any fitness to practise investigation and/or proceedings of any nature that are being undertaken by a regulatory or licensing body in any other country.</p>	<p>Yes</p>	<p>No</p>
<p>If you have ticked YES, please provide the reasons given for the investigation and (where applicable) the details of any warnings, conditions or sanctions (including limitations, suspension or any other restrictions) that apply to your professional registration and, the name and address of the regulatory or licensing body concerned.</p> <p>You may use the continuation sheet attached if necessary – please indicate which question information relates to, if doing so.</p>		

<p>8. Have you ever been removed from the register, or have conditions or sanctions been placed on your registration, or have you been issued with a warning by a regulatory or licensing body in the UK or in any other country?</p> <p>You are not required to disclose any information in relation to the above where any right to appeal has been upheld and where that appeal has resulted in your case being fully exonerated. In these circumstances you should tick NO to this question.</p>	Yes	No
<p>If you have ticked YES, please provide details of any conditions or sanctions (including limitations, suspension or any other restrictions) that apply to your registration and/or any warnings issued, where relevant and, the name and address of the regulatory or licensing body concerned.</p> <p>You may use the continuation sheet attached if necessary – please indicate which question information relates to, if doing so.</p>		
<p>Declaration</p>		
<p style="text-align: center;">IMPORTANT INFORMATION</p> <p>The Data Protection Act 2018 and General Data Protection Regulation 2018 (GDPR) requires us to provide you with detailed information which explains the lawful basis for collecting special categories of personal data (previously known as sensitive personal data), how it will be processed, who information will be shared with and under what circumstances.</p>		

The General Data Protection Regulation defines special categories of personal data as racial or ethnic original, political opinions, religious or philosophical beliefs, trade union membership, genetic data, biometric data, data concerning health or data concerning a natural person's sex life or sexual orientation. It also includes data relating to criminal convictions, criminal offences or related security measures. It is important that you read the supplementary guidance we provided at the time of your application, which explains our policy on the retention and erasure of any such information in greater detail. This information also outlines your rights under the data protection and human rights laws.

The information you provide using model declaration form A will be processed in accordance with data protection law, as described above. It will used for the purpose of determining your suitability for the position you have applied for, in accordance with the NHS Employment Check Standards. It will also be used for enquiries in relation to the prevention and detection of fraud.

Once a recruitment (or other relevant) decision has been made **[insert organisation name]** will not keep any information declared in this form for any longer than is necessary. As a minimum this will be for a period of six months to allow for considerations and resolution of any disputes or complaints. There may be circumstances where we are required to retain information for longer i.e. for the purpose of demonstrating safe recruitment practice as part of any scheduled safeguarding audits.

The form and any supplementary information provided by applicants with this form, will be kept securely and separately from any personnel records and access will be strictly limited to those who are entitled to see it as part of their duties, as outlined within our local policy on the correct handling and safekeeping of special categories of personal data.

Once the retention period has elapsed, we will ensure that any information provided is destroyed by secure means, for example by shredding, pulping or burning. While awaiting destruction, the secure handling of information, as outlined above, will be adhered to.

While the form and any supplementary information applicant's chose to provide will be destroyed, a record will be retained of the date of when a self-declaration was requested/received, the position for which the self-declaration was requested, and the details of the recruitment decision taken.

Please sign and date this form as indicated below

If you need any assistance or advice before returning this form to us, or you wish to withdraw your consent at any time after you have submitted this form, please contact **[insert contact details]**.

All enquiries will be treated in strict confidence.

In signing this form, you are agreeing to the following statements:

1. I confirm that I have read and understood guidance provided to me which explains how my data will be processed and give my consent for enquiries to be made, as outlined.
2. I declare that the information I have provided in this form and in any accompanying documentation, is true to the best of my knowledge and belief.
3. I understand and accept that if I knowingly withhold relevant information or provide false or misleading information, this may result in my application being rejected; or, if I am appointed, my dismissal; and, where applicable, this may result in the employing organisation making a referral to any relevant regulatory or licensing body.
4. I agree to notify the employing organisation of any subsequent change to the information supplied in this form before I take up appointment.

Full name (in block capitals)		Signature	
Date			

Continuation sheet:

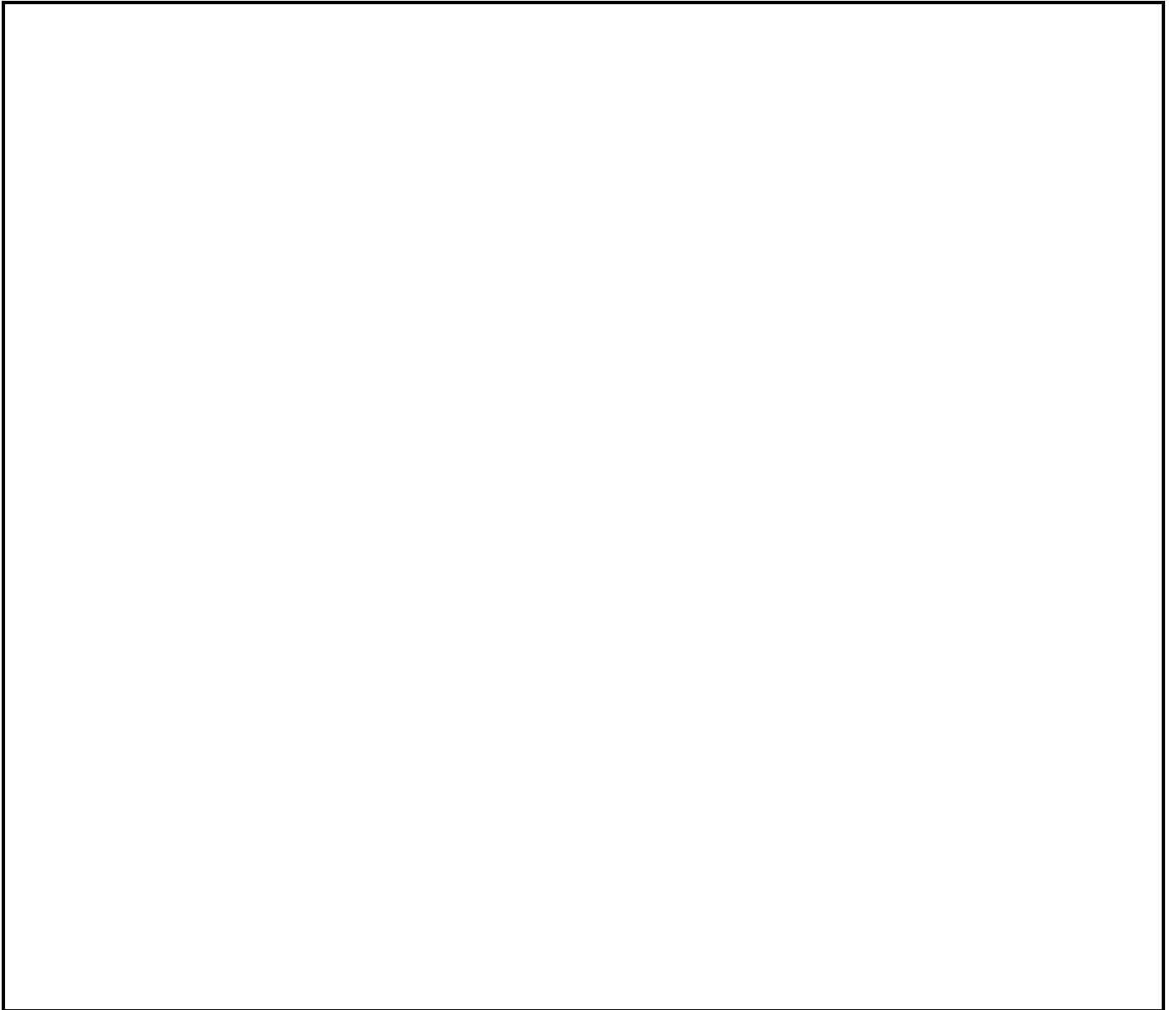
Full name:

Position applied for:

If you have ticked YES to any of the questions above, please use the space below to provide any additional information you may wish us to consider in support of your application.

Please clearly indicate the number of the question to which the information relates. You can continue on a separate sheet or attach other pieces of evidence to this form, if you wish to do so.

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Example Occupational Health Self Declaration

Guidance for completing the Work Health Assessment

The purpose of the questionnaire is to determine whether you have health problems that could affect your ability to undertake the duties of the post you have been offered or place you at risk in the workplace. It may be that adjustments or assistance is recommended as a result of this assessment to enable you to do the job. Our aim is to promote and maintain the health of all people at work. Before clearance is given for employment you may be contacted by the Occupational Health team and may need to be seen by an Occupational Health clinician.

Your answers to this questionnaire will be **confidential**. They will only be available to Occupational Health staff and will not be disclosed to anyone else without your implicit consent.

We do use anonymised information for audit purposes but will not reveal confidential information in any audit report. Specific guidance about the declaration form is given below.

Please complete all relevant sections in black pen and in block capitals.

Personal details

Title (Ms/Miss/Mrs/Mr/Dr/Other):	Gender:
Surname/Family Name:	First Name:
Previous Names (if applicable):	National Insurance number:
Date of Birth:	Proposed Job Title:
Department/Ward:	Manager (if known):
Site:	Job Hours
Home Address:	Post Code:
Email Address:	
Mobile Contact:	Tel home:

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Immunisation assessment section

To be completed by all workers whose role will involve either:–

- **Clinical or hands on patient/service user contact, or**
- **Non-clinical work but regular likely contact with patients/service users, or**
- **Potential contact with blood**

	Yes	No
Have you ever tested POSITIVE for HIV/AIDS?		
Have you ever had or tested POSITIVE for hepatitis B?		
Have you ever had or tested POSITIVE for hepatitis C?		
Have you lived outside the UK within the last 5 years?		

If yes, please list all of the countries that you have lived in over the last 5 years:

Are you up to date with immunisation/vaccinations for:

Immunisation/Vaccination	Yes	No
Hepatitis B		
Measles, Mumps and Rubella		
Chicken Pox		
Tuberculosis		

DECLARATION

I declare that the answers to the above questions are true and complete to the best of my knowledge and belief. I understand that if any recommendations to my employer are necessary as a result of this work health assessment, the Occupational Health advisor will discuss the recommendations with me before making them to my employer.

Signed..... Date.....

Reminder:
Once you have completed all the necessary sections, please provide this to your employer when requested

<u>To be completed by the employer</u>		
Employer:		
Title of Post:	Post Ref:	
Care Group/BDU:	Workplace:	
Full or Part Time:	Managers Name:	
Does the post applied for involve:		
Clinical or hands on patient / service user contact?		
Non-clinical work but regular contact with patients / service users		
Potential contact with Blood		
Night shift work (50% of annualised hours)		
New to Organisation?	Internal Transfer?	
HR Contact (this must be completed):		
Email of HR Contact (this must be completed		