

Master ID

Version

Document Name

Type

Date adopted

Review Date

Responsibility for Review

Equality Impact Assessment Performed

Approved by

Pre-Employment Screening

Contents

1. Introduction and Purpose
2. Definitions
3. Accountability and Responsibility
4. The Purpose of Pre-Employment Screening
5. The Pre-Employment Screening Procedure
6. Process for monitoring compliance with and effectiveness of the policy/guidelines/procedure
7. References
8. Process for review of the document

Appendix A: Pre-Employment Health Form Master

Appendix B: Pre-Employment Health Fitness Report Master

1. Introduction

This policy applies to all prospective employees. The process of pre-employment screening is to ensure that Oxfordshire Primary Care Trust carries out their duty of care and thereby complies with the Health and Safety at Work Act (1974), its regulations and the Disability Discrimination Act (1995) and Disability Discrimination Act amendment regulations (2005).

PTH provides the Occupational Health Pre-Employment Screening service for OPCT and recommends that Pre-Employment Screening occurs for their employees before they commence work.

2. Definitions

The following terms will be used in this policy:

Pre-Employment Screening- the health screening of prospective employees to ensure that they are fit for the proposed job and that any employment recommendations or adjustments can be considered by the employer.

Pre-employment Health Form- the form sent to employees by the recruiting officer for the employee to complete and disclose their health information in and return to PTH Occupational Health Services. See Appendix A

Pre-Employment Screening Fitness Report- the report completed by Occupational Health to Oxfordshire Primary Care Trust stating whether the prospective employee is fit for the proposed job and any recommendations or adjustments to consider including immunisation screening for health care workers.

3. Accountability and Responsibility

3.1 Prospective employees

Prospective employees should complete the form honestly and correctly.

3.2 Occupational Health

Occupational Health will treat Pre-employment Health Forms like any other confidential health record. The purpose of the fitness report is to confirm whether the employee is fit for work and to include any adjustments which should be considered by management before the prospective employee starts work. Health conditions will not be disclosed without the prospective employee's verbal consent. There are certain conditions where Occupational Health would advise prospective employees to discuss this with their prospective manager, e.g. diabetes where there may be treatment implications in an emergency situation.

Occupational Health may defer an employee until further assessment has been carried out and the advice to HR and management would be updated throughout this process.

Some employees will require Immunisations and screening for blood borne viruses.

Staff working in clinical areas but do not handle bodily fluids: can start without, but must be given and immunisation screening appointment as soon as practical.

- TB i.e. BCG scar check and Mantoux
- Rubella and measles (MMR)
- Varicella

Clinical staff handling bodily fluids, but not EPP: can start without, but must be given and immunisation screening appointment as soon as practical.

- Hepatitis B
- TB i.e. BCG scar check and Mantoux
- Rubella and measles (MMR)
- Varicella

Clinical staff undertaking EPP- must be done PRIOR to starting and must be given and immunisation screening appointment as soon as practical.

- Blood borne virus screen for HIV, Hep B and Hep C status
- Hepatitis B immunisations
- TB i.e. BCG scar check and Mantoux
- Rubella and measles (MMR)
- Varicella

All other employees including work experience people merely require their Pre-Employment Health Declaration/ Questionnaire screened. If any health problem is disclosed as per the policy this should be discussed with the prospective employee / work experience person via a telephone consultation (or face-to-face if necessary) and a feedback report sent to HR. HR should receive Pre-Employment Screening Feedback fitness reports at each stage of the process.

Change of job forms

The PCT informs Occupational Health when an employee changes job and the Occupational Health Adviser should complete Pre-Employment Screening Feedback fitness reports, stating whether the employee is fit for the new role. Where an employee is merely changing location then they do not need to complete another Pre-employment Health Form, although we should check that they have had all the necessary immunisations as the DoH have changed the guidance over the years. If an employee is doing

a different job e.g. dental nurse to Health care Assistant then they should complete a new Pre-employment Health Form. The Occupational Health Adviser should send a Pre-Employment Screening Feedback fitness report stating this and renew this once the Pre-employment Health Form has been received.

If a form is incomplete then this should be returned to the prospective employee with instructions as to which areas need completing.

Occupational Health update Human Resources three times a week using a spreadsheet to update Human Resources on the progress of new and pending Pre-employment Health Forms.

All data disclosed on the Pre-employment Health Form will be uploaded onto the Occupational Health Computer system.

3.3 *Human Resources*

Must relay the information from the Appointing Officer to the prospective manager and liaise with Occupational Health as appropriate.

Human Resources should inform Occupational Health of those employees who have not started periodically so that 6 months after they have completed their Pre-employment Health Form can be destroyed.

3.4 *Managers*

Management with assistance from Human Resources must complete the first part of the Pre-employment Health Form see Appendix A so that Occupational Health are aware of the level of immunisation screen that should take place and the risks associated with the prospective role.

Management have the final decision regarding implementing reasonable adjustments and recommendations with regard to the prospective employee's health conditions and should seek advice from Human Resources and Occupational Health as appropriate.

4. The Purpose of Pre-Employment Screening

The main purpose of Pre-Employment Screening is to ascertain whether a prospective employee is fit to work in a given proposed role. The Pre-employment Health Form should identify:

- What tasks an employee will be expected to do e.g. work at height, work at night, etc.
- Current and past health problems.
- What adjustments have previously been made in their jobs.
- If applicable what their immunisation status is.

This information then enables Occupational Health to advise their clients on an employee's personal safety and safety to others in order to comply to their duty of care under the Health and Safety at Work Act and its regulations. It also gives Occupational Health the baseline information to discuss any potential limitations that a health problem may cause a prospective employee so that advice regarding adjustments in order to comply with the Disability Discrimination Act can be made.

5. The Pre-Employment Screening Procedure

The Pre-Employment Screening process is as follows:

1. Human Resources provides the Pre-employment Health Form who complete the proforma using the information from the Appointment Checklist and send it to the prospective employee to complete.
2. The prospective employee completes the Pre-employment Health Form and sends it directly to PTH.
3. An Occupational Health Adviser at PTH screens the form and completes the Pre-Employment Screening Fitness Report and returns this to Human Resources Recruitment, within 2 working days. A spreadsheet is also completed by Occupational Health and returned to Human Resources on a three times a week basis.
4. PTH Occupational Health services arrange any telephone, face-to-face and immunisation screening appointments for prospective employees as appropriate and will complete another Pre-Employment Screening Fitness Report once this has occurred. An appointment need is identified within 1 week of receiving the Pre-employment Health Form and an appointment is offered within the following week.

Occasionally, Occupational Health may require further clinical information from the prospective employee's General Practitioner and /or Specialist. If this is required then the rationale should be explained to the prospective employee and a consent form will be sent to the prospective employee. An Occupational Health Physician assessment is rarely required for Pre-Employment Screening; although there may be odd instance when this is needed. If this is necessary, then the Occupational Health Adviser should explain to the prospective employee why this should occur and also ensure that the Occupational Health Physician understands what is required by their assessment.

6. Process for monitoring compliance and effectiveness of the policy/guidelines/procedure

Taken from PTH Confidentiality policy

PTH record keeping practices

Principle

Access to information

The highest levels of security are applied to all information held by PTH Group Limited. The principle is that information should only be available to those authorised to access it. Applying this principle results in procedures which assume no access rights to information and procedures are built from this perspective. This is broken down further as described below:

- access to buildings
- access to systems
- systems security
- access to physical records

Access to buildings

All PTH Buildings have restricted access. This is provided in a variety of ways including number controlled access panels. The principle being that physical access is provided to only those staff authorised to be in the building.

Where access is provided to visitors they are required to sign in and they are accompanied throughout their visit.

If a member of staff leaves, consideration is given to changing the numbers controlling access to the building.

Where PTH staff provide off-site clinical services all offices used have as a minimum a lock to restrict access to the offices used by them. Whenever members of staff leave the offices they are locked and checks made to ensure equipment etc is safeguarded.

Where PTH staff use the clients premises to provide clinical services the security arrangements over the access to the clients buildings are considered. In these circumstances the arrangements are discussed with and agreed with each individual client.

Access to systems

Information held on site at PTH

The importance of confidentiality is communicated regularly to all members of staff. This is done on training days and contained within their contract of employment. Working within an Occupational Health environment requires references to be taken on all recruits and direct consideration of their suitability for having access to confidential information.

Electronic Occupational Health records are held on the PTH server at Bromsgrove. All members of staff have a unique username and password which must not be disclosed to any other person. Disciplinary action would be taken for repeated breach of this rule.

Passwords are changed on a regular basis and staff members are aware that they should not be obvious or repeated. The systems at Bromsgrove have their own security over the password allocation to ensure these rules are applied. This includes checks on repeated passwords, their format and automatic enforcement of password changes.

The Systems Manager ensures that each employee has the appropriate access rights for their role and thereby can only see data required in order to do their job. The electronic records, if necessary, can be interrogated to identify which user has made changes.

Information to be held on the offsite server

The Occupational Health system ORCHID is to be held on a server managed by 1 & 1: a leading world-wide provider of hosted applications. The same principle of only those authorised to access information will be allowed to do so, is applied to the services hosted by 1 & 1.

Passwords are allocated to all users and these are verified on a tiered basis:

- Firstly passwords are required to access the server. These passwords are managed by PTH Group Limited with checks to ensure they are not repeated and enforcement over the change of password.
- Once access has been granted, security exists to limit what a user can access on the server. Over the Occupational Health system separate passwords are required to access the system which are subject to the same password controls as described above
- Finally within the ORCHID system exists the opportunity to restrict access to users once they have been granted access to ORCHID. This is used to allocate users to specific contracts, to ensure even with access to ORCHID users are restricted to only the information they are authorized to access. Again password controls exist to manage their correct use.

1 & 1 has obtained the Dedicated Secure Socket Layer certificate which provides for 256 bit encryption of all data transmitted to and from their hosted systems. It also has a unique lock icon which restricts the

possibility of anyone intercepting the information being transmitted. The company complies with all industry standard security arrangements and has 7 million customers currently using its services.

Systems Security

The Bromsgrove server:

The server is backed up at the end of every working day using a set of four weekly back up tapes in rotation. In addition another set of rotating back up tapes are used every month. At the end of each working day the most recent back-up tape is taken off site and stored in a remote location.

1&1 Hosted facilities

The company has over 55,000 servers located in several data centres around the world. All data security requirements: back-ups, systems maintenance etc., are included as part of the hosting arrangements. The data centre's have full fire protection detectors and halon extinguishers. Uninterrupted power supply (UPS) is available, together with monitoring and management of any fluctuations in the power supply. The size of the company and experience they have in hosting enable them to contract at a level of systems availability of 99%.

Access to Physical Records

The following applies to all records:

All Occupational Health records, which comply with COSHH regulations, are kept for at least 40 years, and all other Occupational Health records are kept for at least 10 years. The exceptions to this are when records are transferred to another Occupational Health provider or if a client were to cease their Occupational Health service.

In the case where another provider is to take over from PTH, PTH would ensure that the access to the Occupational Health records, whether they are paper records or electronic records would be transferred by a nurse or Occupational Health professional to another nurse or Occupational Health professional of the new provider as part of the handover.

If a client were to dispense with Occupational Health services completely then the records would be forwarded to each employee's General Practitioner.

If paper records are kept at PTH head office, they are kept in filing cabinets, which are locked at night. The keys are stored in a secure location. PTH applies this practice to all customer sites, to ensure that only Occupational Health staff has access to the client's hard copy Occupational Health records.

7. References

Health and Safety at Work Act (1974), its regulations and the Disability Discrimination Act (1995) and Disability Discrimination Act amendment regulations (2005).

8. Process for review of the document

Suggest review end of PTH contract date. This date will be brought forward if there are any legislative or process changes.

Appendix A- Pre-Employment Health Form Master

CONFIDENTIAL – to the Occupational Health Service

To be completed by HR Officer using the information from the Appointment Checklist prior to issue.

Post Applied For:

Full / Part Time:

Primary Care Trust: Oxfordshire PCT

Please indicate: Commissioning
 CHO

Department:

Appointing Officer:

Tel:

Level of patient contact:

- No or minimal patient contact
- Has patient contact, but does not handle bodily fluids e.g. Receptionist
- Has patient contact and is likely to handle bodily fluids, but not perform Exposure Prone Procedures e.g. nurse
- Has patient contact, is likely to handle bodily fluids and perform Exposure Prone Procedures e.g. dentists

Please tick if any hazards below apply.

Handling Patients	<input type="checkbox"/>	Moving Loads	<input type="checkbox"/>	VDU	<input type="checkbox"/>
Operating Machinery	<input type="checkbox"/>	Driving	<input type="checkbox"/>	Exposure to Animals	<input type="checkbox"/>
Radiation	<input type="checkbox"/>	Dust	<input type="checkbox"/>	Micro Organisms	<input type="checkbox"/>
Chemicals from Fumes	<input type="checkbox"/>	Heat	<input type="checkbox"/>	Cold	<input type="checkbox"/>
Body Fluids	<input type="checkbox"/>	Cytotoxic Drugs	<input type="checkbox"/>		

OCCUPATIONAL HEALTH SERVICE PRE-EMPLOYMENT HEALTH FORM

Please complete this form and return in the envelope provided

1. PERSONAL DETAILS

Surname

Dr/Mr/Mrs/Ms

Forenames

Date of Birth

Home Address

GP Name and Address

Home Tel No

Other Contact Tel No

2. JOB APPLIED FOR

Job Title

Full Time

Part Time

Department

Days

Nights

Shift

To carry out the proposed employment would you require any special arrangements?

Yes

No

(i.e. workplace/job modifications)

If yes, please provide details

.....

.....

.....

.....

3. PAST WORKING HISTORY

So that we can organise your occupational health care, please list all kinds of jobs you have had and when, where and how long you did them for:

(Include information about any special hazards or health risks to which you were exposed)

From	To	Job Description	Hazard Exposed to:

Have you ever worked for another Health Authority/Trust?

Yes

No

If yes, please provide details

Organisation Name	From (mm.yy)	To (mm.yy)

Have you ever retired or changed your job through ill health?

Yes

No

If yes, please specify when and for what reason

.....

.....

4. HEALTH

Do you smoke? Yes No If YES then how many per day?
 Do you drink alcohol? Yes No If YES how many units per week?
 Do you exercise regularly? Yes No
What is your weight?

Please state what periods of sickness absence you have taken in the past two years.

Approx. Dates	Length of Absence	Reason

5. MEDICAL HISTORY: PLEASE ANSWER THE FOLLOWING QUESTIONS GIVING DATES AND DETAILS

Have you ever or do you suffer from the following?

	Yes/No	At what age?	Did you see your GP?	Did you attend hospital?	No. of days Sickness?
Neck, Back, Arthritis or Joint problems					
Upper or Lower Limb Disorders					
Epilepsy or Blackouts					
Chest Problems, Asthma or Bronchitis					

Tuberculosis (TB)					
Skin Problems, Sensitivities or Allergies					
Heart Disease, Angina or High Blood Pressure					
Eyesight, Ear or Hearing problems					
Mental Illness, Anxiety or Depression					
Diabetes					
Stomach, Liver or Bowel problems					
Migraine or Frequent Headaches					
Serious Illness or Operations					
Serious Injury					
Any Other Illness or Disability not mentioned					

Do you consider yourself in good health? Please comment.

.....
.....
.....
.....

Are you presently taking medication? Please specify.

.....
.....
.....
.....

Have you had prolonged contact with anyone with tuberculosis (TB)? Please provide details.

.....

.....

 Have you ever lived or worked abroad? If so please state where, when and how long.

.....

Please tick the following diseases if you have had them:

Chickenpox Mumps Measles Rubella (German Measles)

6. IMMUNISATIONS: *(please be as accurate as you can)*

Have you ever tested positive for any blood borne virus infection e.g. hepatitis B or C, HIV, etc?	Never tested	Yes/ No	Dates	Management/ Treatment

Have you had:	Yes / No	Date	Result/ Comments
Tuberculosis (TB) immunity test (heaf or Mantoux)			Grade
BCG immunisation			Scar visible? Scar size mm
Hepatitis B immunisation course		Course Booster	
Hepatitis B antibody test			miu/litre

Hepatitis A immunisation			
Measles immunisation			
Measles antibody test			Immune / Non immune
Rubella immunisation			
Rubella antibody test			Immune / Non immune
Varicella immunisation			
Varicella antibody test			
Tetanus immunisation			
Diphtheria immunisation			
Typhoid immunisation			

PLEASE INCLUDE COPIES OF ANY DOCUMENTARY EVIDENCE OF PREVIOUS VACCINES WHEN SENDING THIS FORM TO OCCUPATIONAL HEALTH, THESE WILL REMAIN ON YOUR OCCUPATIONAL HEALTH RECORD.

This documentation is very important and can prevent you attending an immunisation check appointment for blood tests and immunisations that might not be necessary. This could also mean that your start date will be sooner.

DECLARATION:

A. I declare that the statements on this form are true and complete to the best of my knowledge and belief and I understand that giving out false information may be the cause of refusal of employment or termination of my contract of service.

B. For the purpose of fitness assessment for this post I consent to the Occupational Health Adviser seeking information from my General Practitioner if considered necessary. I understand my rights under the **Access to Medical Reports Act 1988**.

I do/do not wish to have sight of the report. I agree to be medically examined if necessary.

I give permission for details of previous immunisations to be obtained.

I consent to further immunisations or immunity checks deemed necessary for my personal protection of others, in compliance with the current Health & Safety Legislation and local policy.

Signature..... Date.....

Access to Medical Reports Act 1988

Where a Doctor, who has attended you, reports to a company on your health for occupational or insurance purposes, you have the following rights of access.

You are not obliged to exercise these rights but should indicate your wishes.

Individual's rights:-

1. To withhold permission for the Company to seek a medical report (i.e. to refuse consent to release information).
2. To have access to the medical report after completion by the doctor, either,
 - a. before it is sent to the Company (three weeks allowed).
 - b. After it is sent (up to six months)
3. If sending the report before sending to the Company, to instruct the doctor not to send the report.
4. To request amendments by the doctor to his report

Appendix B- Pre-Employment Screening Fitness Report Master

Client Name	
Surname	
Forename	
Title	
Gender	Male / Female
Date of Birth	
Job title/ Post applied for	
Department / Site location	

The above employee is:

- Fit for the proposed job based on the information disclosed in their Pre-Employment Health Questionnaire without any adjustments or recommendations.
- Fit for the proposed job based on the information disclosed in their Pre-Employment Health Questionnaire with adjustments or recommendations (please see additional comments below).
- Deferred at present pending a telephone consultation with an OHA, face-to-face consultation with an OHA, receipt of a General Practitioner's and/or Specialist report or consultation with an Occupational Health Physician (please see additional comments below). Occupational Health will update this advice as soon as this action has occurred.

Additional Comments

.....

.....

.....

.....

.....

.....
.....
.....

Signature

Print Name

Date