

Leatside Health Centre

New Employee Recruitment, Selection, Interview & Appointment Policy & Protocol

Document Control

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2.0	Jan 2022	FPM Toolkit	Caroline Pugh	Created for new organisation

Changes to Data Protection Law 2018

The practice processes personal data collected during the recruitment process in accordance with its Data Protection Policy. In particular, data collected as part of the recruitment process is held securely and accessed by, and disclosed to, individuals only for the purposes of managing the recruitment exercise effectively to decide to whom to offer the job. Inappropriate access or disclosure of job applicant data constitutes a data breach and should be reported in accordance with the practice's Data Protection Policy immediately. It may also constitute a disciplinary offence, which will be dealt with under the practice's Disciplinary Procedure.

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Leatside Health Centre

Practice Recruitment Policy

Applicability

The Policy sets out the process to be followed in the recruitment of staff and to all Practice Staff involved in the recruitment process.

It applies to recruitment for new posts and replacement staff, for permanent, fixed term or temporary contracts and to both full-time and part-time posts.

Policy

- The Practice will select the successful candidate on the basis of the best person for the job.
- The Practice will invest time and care in the selection process to give all candidates the initial opportunity to progress equally through the recruitment process.
- The Practice will ensure that its recruitment process is free from discrimination and follow the principles and ethos of the Equality Act 2010.

Procedure

The following procedure will be adopted whenever Practice Staff Recruitment is required:

- Prepare a Job Description for the vacancy (*see separate document “**Job Description and Person Specification Templates**” for more information on this specific topic*).
- Discuss the Job Description with the outgoing job holder.
- Agree the Job Description with Managers and/or Partners.
- Prepare a Person Specification (*see separate document “**Job Description and Person Specification Templates**” for more information on this specific topic*).
- Agree the Person Specification with Managers and/or Partners.
- Prepare an information pack for issue to candidates.
- Brief staff on handling of enquiries, with basic background and procedural information.
- Prepare a Job Advertisement Template ([See Appendix A](#)).
- Prepare an advertisement and media shortlist.
- Agree an advertisement and media to be used with Managers and/or Partners.
- Agree on the number & dates of advertising insertions with Managers and/or Partners.
- Place the advertisement in relevant media.
- Compile and issue Practice Procedure to handle enquiries (e.g. reception / a central contact person).
- Compile and issue information packs / Job Application ([See Appendix B](#)) & Equal Opportunity Policy forms ([See Appendix C](#)).

- Upon receipt of completed applications, separate the completed Equal Opportunities Form from the Application Form and pass it to Elaine White for analysis and Alison Gain for retention for a minimum of 12 months.
- Screen initial applicants using the Person Specification.
- Select successful applicants' to create 1st interview shortlist.
- A member of staff who has previously not been involved in the shortlisting will review the 1st Interview shortlist to verify that no bias (whether deliberate or unintentional) has influenced any decision.
- Issue letters to unsuccessful applicants ([See Appendix D](#)).
- Insert a record of non-discriminatory reasons for rejecting each applicant in the "For Office Use" Section of the Job Application Form ([See Appendix B](#)).
- Collate and store all rejection letters and application forms in a dedicated file and retain for 12 months.
- Issue written interview invitations, informing applicants of interview panel and details of any "Tests" to be undertaken ([See Appendix E](#)).
- Prepare 1st Interview Checklist ([See Appendix F](#)).
- Agree 1st Interview Checklist with Managers and/or Partners.
- Undertake interviews by selected panel (consider colleague inclusion)
- Select the successful applicant or consider the need for 2nd interviews.
- If 2nd Interview required:
 - Issue written 2nd interview invitations, informing applicants of interview panel and details of any "Tests" to be undertaken ([See Appendix H](#)).
 - Prepare 2nd Interview Checklist.
 - Agree 2nd Interview Checklist with Managers and/or Partners.
 - Select the successful applicant.
- Issue 2 copies of Job Offer Letter to the successful applicant, ([See Appendix I for a template letter](#)) ensuring it incorporates main terms and conditions of employment and the requirement to accept the offer by returning one signed copy within a specific timeframe.

Ensure it also incorporates the following clauses where relevant:

- "Subject to the receipt of satisfactory references" ([See Appendix J](#)) and explains that returning the signed copy gives the Practice the authority to approach referees.
- "Subject to the receipt of a satisfactory medical report". Depending on the option chosen (see 'Obtaining a Medical Report'), send a medical consent form ([See Appendix K](#)) with the Job offer letter for the applicant to complete and return. Upon receipt of this consent, a request for medical report letter will then be sent to the applicant's GP ([See Appendix L](#)) together with a Medical examination Declaration Form ([See Appendix M](#)) or Occupational Health Department ([See Appendix N](#)), as appropriate.
- "Subject to the receipt of satisfactory references by us, proof of eligibility of employment within the United Kingdom and proof of identity including a recent photograph".
- "Subject to the receipt of a suitable DBS Disclosure Document and Independent Safeguarding Authority Registration".

- “This offer of appointment is conditional on satisfactory registration, licence and qualification checks, and any information disclosed on the application form will be checked. Such registration, licence and qualification checks will only be carried out with your consent, as specified in the “Confirmation of acceptance” section of this letter”.
- “Should you cease to become qualified, unlicensed or “de-registered” at any time during your employment, then your employment will be deemed to have terminated.”
- “This offer of appointment may be withdrawn if you knowingly withhold information, or provide false or misleading information, and your employment may be terminated should any subsequent information come to light once you have been appointed”.
- Check the Practice alert notice files. In the event that the individual is subject to an alert notice then the Practice will also check whether they are suitable to be employed into the position being offered.
- Issue letters to unsuccessful interviewees. ([see Appendix P for a template letter](#))
- Collate and store all rejection letters and application forms in a dedicated file and retain for 12 months.
- Create a new Employee file for the successful applicant and store all references, medical report, registration, licence and qualification documentation.
- Prepare an induction programme (*Refer to the “**Induction Programmes**” Document for more information on this specific topic.*)
- If the Practice employs over 50 Staff, Alison Gain will submit part 3 of the P45 (new Employee details) online.

Supporting Documentation / Information:

Advertising Employment Vacancies in a Non-Discriminatory Manner

The Equality Act 2010 prohibits employers from advertising UK job vacancies in a discriminatory manner, whether or not this was intended, e.g. job titles implying a gender preference such as 'salesman'.

Indirect discrimination can also lead to a contravention of the discrimination legislation.

Examples of Discrimination include:

- Not accepting applications from a particular area or artificially excluding certain areas from the advertisement's publication circulation e.g. Moss Side, Manchester.
- Setting an unnecessary or unreasonable level of qualification required for the type or standard of job.
- Recruiting only the friends or relatives of your existing work force.
- Requiring applicants to attend an interview involving accessing an area that would be inaccessible to a disabled person.

Individuals may bring Employment Tribunal claims if they make job applications which are refused because of discriminatory selection criteria or recruitment policies and cases relating to discriminatory advertising may be taken up by the **Equality and Human Rights Commission**.

Discrimination Codes of Practice

The Equality and Human Rights Commission has a statutory remit to promote and monitor human rights; and to protect, enforce and promote equality across the nine "protected" grounds:

- 1) Age,
- 2) Disability,
- 3) Gender,
- 4) Race,
- 5) Religion and belief,
- 6) Pregnancy and maternity,
- 7) Marriage and civil partnership,
- 8) Sexual orientation and
- 9) Gender reassignment.

Their website address is: <http://www.equalityhumanrights.com>. This contains links to all their publications, the majority of which can be downloaded in .PDF and / or Word formats.

Should you wish to obtain bulk quantities of a printed publication, these will usually be supplied Free of Charge, but may take up to 28 days to be delivered, from date of ordering.

All enquiries should be directed to their helpline, which is open Mon - Fri 8:00 am-6:00 pm:

0845 604 6610 - Main number

0845 604 6620 - Textphone

0845 604 6630 - Fax

Email: englandhelpline@equalityhumanrights.com

Post: Equality and Human Rights Commission Helpline

Freepost RRLG-GHUX-CTR

Arndale House, Arndale Centre, Manchester. M4 3AQ

The Recruitment Advertisement

The Practice will ensure that the following considerations apply to the contents of all recruitment advertising:

- Any pictures used in advertisements will depict a multi-racial, non gender-specific workforce.
- No mention will be made of the desirability or otherwise of trade union membership.
- Age restrictions or implications of age requirements (e.g. must have at least 5 years' experience) should not be placed on recruitment advertisements or should be qualified with a statement that it is a guide only and candidates without this level of experience will be considered.

The Recruitment Advertisement will be based upon the details contained in a Job Advertisement Template ([See Template in Appendix A](#)), which includes elements of a **Job Description** and a **Person Specification**. (Refer to the ***"Job Description & Person Specification Templates"*** Document for more information, including specimen Templates for 14 different positions with a Practice.)

When writing the job advertisement, the Practice will avoid use of language that might imply that it would prefer someone of a certain gender, ethnic background or age, as will descriptions such as 'mature', 'young' or 'energetic'.

When using existing Job Descriptions and Person Specifications or creating new ones, the Practice will ensure that any age related qualifications or skills do not put at a disadvantage persons from a different age group, where these are not strictly necessary to the job itself.

Because educational and vocational qualifications have changed and developed significantly, particularly during the past few years, the Practice will make sure that the qualifications specified are not disadvantaging people of different ages or those with different (possibly overseas) but equally equivalent qualifications.

In situations where there is reliance on age related criteria or levels of qualification, the Practice will be able to justify these objectively and also make it clear that it will consider equivalent levels of experience / skills.

To attract a wide field of applicants, the Practice will select media that will be accessible and relevant to the target audience (for example, the Practice will avoid using a publication or employment agency that is focused on a niche market as this may limit the diversity of applicants and may constitute indirect discrimination).

Job Advertisement Checklist

- Where are the adverts placed? Will this effectively exclude a particular gender, ethnic or age group?
- Does the advertisement give the impression that applicants from a particular gender, ethnic or age group are sought?
- If the advertisement contains any qualification requirement, could this have a discriminatory effect? If so, can it be justified?
- Ensure phrases like 'only people with GCSEs need apply' are avoided. (This would rule out many older people who left school before GCSEs were introduced, even though they may have the necessary skills, or foreign workers with different but equivalent qualifications).
- Ensure specifying a minimum length of experience (such as 10 years) is avoided, as this disadvantages younger workers
- Ensure that those involved in the recruitment process do not have discriminatory prejudices.

Using Recruitment Agencies

When the Practice uses Recruitment Agencies and Vocational Organisations to source Employees, it will ensure that it does not indirectly fall foul of the Equality Act, by using Organisations that do not discriminate against Employees or prospective Employees.

The Practice will review the terms of business with Recruitment Agencies and other Vocational Providers to ensure that both parties are aware of and compliant with their obligations under the Equality Act.

In the event that the Practice uses a Recruitment Agency, the Practice's will make sure they act appropriately and in accordance with the Practice's equality and anti-discrimination policies.

Retaining Recruitment Records

The Practice will ensure that all personal data & records obtained during the recruitment process are securely stored for at least 12 months, thereby ensuring retention of the information should any applicant not selected for interview claim they have been discriminated against.

Using Application for Employment Forms

The Practice will use Job Application Forms which do not ask for age / date of birth / health and other unnecessary personal information unrelated to the role, the applicant's ability and / or suitability to perform the job (e.g. religion, child care commitments etc – these are now incorporated in the Equal Opportunities Monitoring Form).

The Practice will use the [Application for Employment Form template as found in Appendix B](#) when recruiting new staff and will be retained after interviews have been carried out.

If an application form / curriculum vitae is received from a recruitment agency, the Practice will request that the recruitment agency advise the candidate that the Practice has the candidate's information.

To avoid potential Employment Tribunal claims or court actions brought against the Practice by unsuccessful job applicants on grounds of discrimination, the Practice will ensure that the "Office Only" section at the end of the form is always completed, as this section gives genuine non-discriminatory reasons for non-employment.

All Application for Employment Forms will be kept at least 12 months in order to protect the Practice's position should it be necessary to justify a selection decision at an Employment Tribunal.

The Practice will advise the applicants of its intent to retain their application details on file (specifying the period of time this will be retained i.e. 12 months) and offer them the opportunity to have their details removed if they wish, by advising the Practice accordingly.

Monitoring the Equal Opportunities Policy

Because the Equality & Human Rights Commission's guidance on the Equality Act recommends monitoring recruitment and internal promotion, the Practice will use the [Equal Opportunity Policy Form template as found in Appendix C](#) – (the categories shown on the form are approved by the above body as appropriate for monitoring collections).

The Practice will issue this form with all application forms and upon its return, immediately separate it and pass it to Alison Gain, prior to any selection decision being made.

This will enable the Practice to compile a statistical report showing the Protected Characteristics of all applicants, those who are shortlisted and those who are eventually offered employment and demonstrate that the people offered employment are a true representation of those who apply.

This analysis will be kept on record for a period of at least 12 months.

Initial Screening and Shortlisting of Applicants

Staff undertaking the initial screening process must base their decisions on the information contained in the Applicant's Completed Job Application Form, using the previously prepared Person Specification to evaluate applicants.

The Practice will make sure assumptions are not being made about the capability or medical fitness of someone based purely on their age or other discriminatory factors. Where such a judgement is required, an occupational health or medical practitioner will be consulted.

The Practice will also ensure that staff responsible for selecting and interviewing candidates are trained in equal opportunities, thereby avoiding discrimination and minimising the risk of discrimination claims.

The decisions will be recorded in the *"For Office Use"* Section of the Job Application Form.

As a double check, a member of staff who has previously not been involved in the shortlisting will verify that no bias (whether this is deliberate or unintentional) has influenced any decision.

Rejection of Applicants not offered an Initial Interview

After the initial screening of the applications received, [a Rejection Letter using the specimen Appendix D template](#) will be sent to all those applicants who have been unsuccessful and will not be interviewed.

All rejection letters and application forms will be collated and stored in a dedicated file.

A record of non-discriminatory reasons for rejecting each applicant will be inserted in the "For Office Use" Section of the Job Application Form.

Interviews

The Practice's [Invitation to Interview Letter template can be found in Appendix E](#).

If it is envisaged that the applicant will be required to undertake any pre-interview tests (e.g. keyboard skills; ability with specific software program(s)), the Practice will ensure they are informed of this requirement prior to attending the interview and provide an outline of what the tests involve.

The Practice will also ensure any adjustments are made to such tests to enable any disabled applicants to undertake them.

When conducting interviews the interviewer will ensure that the following points are taken into consideration:

- The location and timing of the interview is suitable for all applicants.
- To ensure consistency in approach and also that nothing is overlooked, an [“Interview Checklist” form using the specimen template in Appendix F](#) will be prepared for each interview. This will also help verify that no unintentional discriminatory basis has formed part of the decision making process.
- Questions will be prepared in advance and the same questions will be asked of each applicant, enabling the interview to follow a set structure and ensures all applicants are treated fairly and equally.
- No questions will be discriminatory, or could be interpreted as such - the focus of the questions will be on the relevant skills, qualities and experience of the applicant.
- | • No questions will be asked about the applicant's protected characteristics – i.e.
 - Age,
 - Disability,
 - Gender,
 - Race,
 - Religion and belief,
 - Pregnancy and maternity,
 - Marriage and civil partnership,
 - Sexual orientation and
 - Gender reassignment.
- No questions will be asked about the applicant's health or disability, unless this is necessary to determine whether the applicant can carry out an intrinsic or absolutely fundamental function of the job, with reasonable adjustments.

[See Appendix G for an example of questions which might be asked when interviewing for a Receptionist.](#)

Interview Structure

- At the beginning of the interview, the applicant will be put at ease.
- Any others present will be introduced and an outline of their role in the interview provided.
- Relevant information of the Practice and the post in question will be given.
- The main terms and conditions of the employment, including whether or not their position is subject to a probationary period will be provided.
- Wherever possible, open-ended questions that cannot be answered with a simple “Yes” or “No” will be asked.
- The applicant will be encouraged to ask any questions, add anything to any previous answers, or make any points they may feel are relevant.
- The applicant will be advised when s/he can expect to hear the outcome of the interview.

Making and Keeping Interview Records

All Interviewing staff will record summary answers to the questions raised at the interview, as well as the results of any pre-interview testing that may have been undertaken.

All comments will be justifiable and in suitable language, as any applicant, interviewee or even successful candidate can request to see what was written about them prior to, during and after the interview.

These records will be retained for at least 12 months.

After the 1st Interview

The “Office Only” part of the application form and the interview report form will be completed, ensuring non-discriminatory reasons are given for the success or non-success of each applicant.

Should a disabled applicant be offered the job, legislation requires that the Practice must make reasonable adjustments so they can do the work (e.g. provision of special seating facilities; allowing for a level of absence due to sickness “higher than normal”) - failure to do so would be regarded as disability discrimination and any claim would succeed.

Interviewing staff will ensure that no female applicant can be refused a job solely because she is pregnant – she must be offered the job if she is considered to be the best applicant.

Interviewing staff will ensure there is no discrimination against applicants over their Age, Disability, Gender Reassignment, Marriage and Civil Partnership status, Race, Religion or Belief, Sex or Sexual orientation

2nd Interviews

If, after the 1st Interview, it is deemed necessary to hold a 2nd Interview to a final shortlist of applicants, the same procedure as undertaken for the 1st interview will to be followed.

The requirement for a different Interview Checklist will be considered and one produced if appropriate.

Applicants who are required to attend the [2nd Interview will be contacted using the Letter Template in Appendix H.](#)

Offering the Job to the Successful Applicant

The successful applicant will be offered the job, using the [Specimen Job Offer Letter template in Appendix I](#) which will incorporate the main terms of the offer and the conditions attached to the job offer (e.g. subject to satisfactory references or passing a medical examination).

2 copies of this letter will be sent to the successful applicant, requesting they return one signed copy as confirmation of acceptance of the offer.

Take-up of Satisfactory References

Should the take up and receipt of satisfactory references be required, this will be incorporated in the Job Offer Letter and the [specimen Request for Reference Letter Template in Appendix J](#) will be used. The replies to these references will be considered carefully.

Obtaining a Medical Report

After an offer of employment has been made, should a Medical Report be required (a non-discriminatory reason for insisting on a medical examination must be evident), the Practice will adopt the following procedure:

Please choose which option is applicable to your Practice and adapt the Job Offer Letter accordingly (the letter is currently written to accommodate Option 1 below):

*****Option 1*****

Produce a [Medical Report Consent Form – \(See specimen template in Appendix K\)](#) which is sent to the successful applicant with the Job Offer letter, requesting this be completed and returned with their signed acceptance of the Job Offer.

The Practice will then send a [letter \(see specimen letter in Appendix L\) to the successful applicant's GP](#)

*****Option 2*****

Arrange for a medical examination to be undertaken by an independent GP. When this has been arranged, the Practice will send the successful applicant a Medical Examination Confirmation Letter, together with a specimen template of an Employee Medical Declaration Form that the appointed applicant should complete and hand to the nominated independent GP immediately prior to the medical examination taking place – ([See the specimen templates in Appendix M](#)).

*****Option 3*****

[Send an Occupational Health Questionnaire – Work Health Assessment Form to the successful applicant \(See Example in Appendix N\)](#) with the Job Offer Letter, requesting that the questionnaire is completed and returned in the enclosed stamped envelope addressed to the Occupational Health Dept.

Should the Occupational Health Dept subsequently decide that a medical examination is necessary, they will communicate directly with the successful applicant to arrange this.

When the Occupational Health Dept have concluded their appraisal (either with or without a Medical Examination), they inform the Practice of the outcome.

Checking the Qualifications of Health Professionals Policy

The Practice will undertake checks of all newly recruited Health Professionals who require registration with an appropriate body in order to practise (*refer to the “**Professional Qualifications & Registration Policy for New & Existing Staff**” Document for more information on this specific topic*).

Providing a Written Statement of the Employee’s Terms & Conditions of Employment

A Written Statement of the Employee’s Terms & Conditions of Employment will be provided within two weeks of the Employee’s start date, and will indicate whether or not their position is subject to a probationary period (*refer to the “**Contract of Employment**” Document for more information on this specific topic*).

Issue outstanding Rejection Letters

[All outstanding rejection letters will now be issued, using the specimen letter template in Appendix O.](#) Copies will be retained with the appropriate application form & interview notes.

All unsuccessful applicants will be advised that there is an intention to keep their details on file for 12 months for future vacancies (if appropriate) and they should be given the opportunity to have their details removed if they wish, by advising you accordingly.

All applications will be collated and inserted into a dedicated file and will be retained for at least 12 months in case of an Employment Tribunal or Court action.

A new Employee file will be opened for the successful candidate.

An induction programme will be prepared (*Refer to the “**Induction Programmes**” Document for more information on this specific topic*.)

If the Practice employs over 50 Staff, Alison Gain will submit part 3 of the P45 (new Employee details) online.

Appendix A

Leatside Health Centre

Job Advertisement Template

Date:		Job Location(s):	
Job Title:			

Summarise the Job Specification Requirements:			
Summarise the Personal Specification Requirements:			
Detail the hours of work incl days per week :			
What training will be given / available?			
Identify the Salary / Pay Scale - Starting Salary & Expected Maximum:			
List any fringe benefits:			
Identify promotion opportunities:			
Full Contact Info for Application Form:			
		Closing Date:	
Interview Location(s) & Date(s)			

NOTE: Ensure advertisement includes a statement that you are an Equal Opportunities Employer.

Appendix B
Leatside Health Centre
Application for Employment Form

POSITION _____

The contents of this form will be treated as confidential

PERSONAL DETAILS

Surname

Forenames

Mr/Mrs/Ms/Miss
(delete as appropriate)

Address

Post Code

Telephone number

Do you have a current driving licence? YES ☐ NO ☐

If there any endorsements on your driving licence, please give details below:

EDUCATION HISTORY

School / College /
University attended

Qualifications Gained

EMPLOYMENT HISTORY (beginning with your most recent Employer)					
Length of Employment	Name & address of Employer	Job Title	Duties	Rate of Pay	Reason(s) for Leaving

Length of Employment	Name & address of Employer	Job Title	Duties	Rate of Pay	Reason(s) for Leaving

Notice period required with current Employer:

GENERAL COMMENTS

Please detail here your reasons for applying for this position, your main achievements to date and the strengths you would bring to this post.

This is the part of the application form where you can bring to our attention any qualities you believe we should be aware of.

Do not feel under any obligation to complete this section if you believe the rest of this form has brought out these qualities in sufficient detail.

If you find there is insufficient space, please continue on a separate sheet.

If you find there is insufficient space, please continue on a separate sheet.

[illegible]

LEISURE	
Please give details of your leisure interests, sports and hobbies and other pastimes.	

[illegible]

REFERENCES	
Please give the name and address of two people from whom we may obtain a character and work experience reference.	

1	
2	

CRIMINAL RECORD

Please give details of any criminal convictions except those spent under the Rehabilitation of Offenders Act 1974.

*****Delete as appropriate*****

For the purpose of this post you are / are not required to provide this information.

DISCLOSURE & BARRING SERVICE (DBS) CHECKS

Any person applying for a position which requires a Regulated Activity to be performed, or is exempt from the Rehabilitation of Offenders Act 1974 will require Disclosure & Barring (DBS) checks to be undertaken.

Please confirm your acceptance of this by signing below.

*****Delete as appropriate*****

For the purpose of this post you are / are not required to undertake a DBS check therefore you must / need not sign below.

Signed: Date:

DECLARATION (Please read this carefully before signing the Application Form)	
<p>I confirm the above information is complete and correct.</p> <p><i>Any offer of appointment may be withdrawn if you knowingly withhold information, or provide false or misleading information.</i></p> <p><i>If your application is successful, your employment may be terminated should any subsequent information come to light once you have been appointed.</i></p>	
<p>If my Application for Employment is successful, I authorise you to contact my doctor for further details and confirmation of my state of health.</p>	
<p style="text-align: center;">***Choose as appropriate***</p> <p style="text-align: center;">EITHER</p> <p>If my Application for Employment is successful, I agree to undergo a medical examination if this is required to ensure my suitability to carry out my duties.</p> <p style="text-align: center;">I have given my explicit consent freely.</p> <p style="text-align: center;">OR</p> <p>If my Application for Employment is successful, I agree to undergo a medical examination if this is required to ensure my suitability to carry out my duties and for provision of medical information as part of an occupational health scheme or private medical insurance scheme.</p> <p style="text-align: center;">I have given my explicit consent freely.</p>	
<p style="text-align: center;">I authorise you to contact the above two stated referees.</p>	
<p>Signed:</p>	<p>Dated:</p>

FOR PRACTICE OFFICE USE ONLY		
NAME OF APPLICANT:		
POSITION APPLIED FOR:		
Rejection letter – Yes : No		If yes – date sent:
Reasons for rejection / acceptance for 1st interview:		
1st interview date:	Rejection letter / 2nd Interview	
Notes on 1st interview:		
2nd interview date:	Offer Letter / Rejection Letter	
Notes on 2nd interview:		
Acceptance Received	YES / NO	Date Received:

Item	Received & Filed
CV / Application Form	
Job Description	
Offer Letter	
Reference 1 - Requested	
Reference 1 – Received	
Reference 2 - Requested	
Reference 2 - Received	
Signed Contract	
HMRC Starter Checklist / P45	
Pension form opt in/out	
Sight of Driving Licence	
Sight of Passport	
Sight of other ID – please state:	
Sight of Proof of Address	
DBS Sent	
Sight of DBS	
Employee Staff Handbook given	
Employee Safety Handbook	
Fire Drill	
OHSW form given	
OHSW Fit for Post received	
Vaccination History inc Covid	
Patient Charter given	
Personal Details	
Privacy Notice given	
Code of Conduct	
Confidentiality Policy	
Deductions from Pay Agreement	
Conflict of Interest (if applicable)	
Staff Consent	
NHS Smart Card	
Professional Registration Details (clinical staff)	
PCSE (GP's only)	
GMC No. (GP's only)	
Performers List (GP only)	
PIN (Nurse only)	
Revalidation date (Nurse & GP's only)	
Appraisal date (Nurse & GP's only)	

Appendix C

Leatside Health Centre

Equal Opportunity Policy Form

We are an equal opportunity Employer.

We have a policy to ensure no job applicant or Employee receives less favourable treatment on the grounds of sex, disability, marital status, civil partnership, colour, race, or ethnic origin, age, nationality, religion, religious or philosophical belief, sexual orientation, gender re-assignment or is disadvantaged by conditions or requirements that cannot be shown by us to be justifiable.

We frequently review selection criteria and procedures to ensure that individuals are selected, promoted and treated on the basis of their relevant merits.

All our Employees are given equality of opportunity and are encouraged to progress within the Practice.

We are committed to an ongoing programme of action to make this policy fully effective.

To ensure this policy is fully and fairly implemented and monitored and for no other reason, would you please complete the table overleaf and return this form to us, together with your Application for Employment Form.

Leatside Health Centre

Equal Opportunity Policy Form

(Please tick the box / enter the information to the right of your selection)

I would describe my sex and ethnic origin as follows:

Male		Female	
-------------	--	---------------	--

A. WHITE

British		Irish		Any other White background (Please specify)	
----------------	--	--------------	--	--	--

B. MIXED

White and Black Caribbean		White and Black African		White and Asian		Any other Mixed background (Please specify)	
----------------------------------	--	--------------------------------	--	------------------------	--	--	--

C. ASIAN OR ASIAN BRITISH

Indian		Pakistani		Bangladeshi		Any other Asian background (Please specify)	
---------------	--	------------------	--	--------------------	--	--	--

D. BLACK OR BLACK BRITISH

Caribbean		African		Any other Black background (Please specify)	
------------------	--	----------------	--	--	--

E. CHINESE OR OTHER ETHNIC GROUP

Chinese		Any other (Please specify)	
----------------	--	---------------------------------------	--

F. ARAB OR MIDDLE EASTERN DESCENT

Arab		North African		Iraqi		Kurdish	
Any other Middle Eastern background (Please specify)							

Date of Birth

Signed

Print name

Job Applied For

Date

When completed, please return this form to us, together with your Application for Employment Form.

Appendix D
Leatside Health Centre
Specimen template of Employee Rejection Letter,
after Receipt of Application Form & Prior to Interview

Date

Name

Address of Unsuccessful Applicant

Dear ***Insert Name***

Application for the position of *Insert Position*****

Further to your recent application, we regret to inform you that you have not been shortlisted back for interview on this occasion.

We would however like to retain your application on file for a period of 12 months, if this is acceptable, and contact you if a suitable opening appears. If you do not wish us to retain your application details on file, please advise us accordingly.

We thank you for your interest in our Practice and wish you every success in your other job applications.

Yours sincerely,

Name & Position of Person

Appendix E

Leatside Health Centre

Invitation to Interview Letter Template

Date

Name of Candidate

Address of Candidate

Dear ***Insert Name***

Application for the position of *Position*****

Further to your recent application in connection with the above vacancy, I am pleased to invite you to attend for interview on ***Date***, at ***Time***.

The Interviewing Panel will comprise ***Insert Name(s) & Position(s) of Person(s)***

Include details of any assessments / tests to be undertaken at the interview.

Option to choose a Paragraph

Either

A map indicating the location of our Practice is enclosed.

Or

You should report to:

Insert Address

On arrival would you please report to ***Insert details e.g. reception*** from where you will be collected.

Please let me know if there are any adjustments we can make to assist you with your application.

If for any reason you are unable to attend, I should be grateful if you would notify me by telephone on ***Insert telephone number***.

*****Option to Include a Paragraph*****

Please note that appointment to any position is conditional on a satisfactory registration check and qualification checks, and that any information disclosed on the application form will be checked.

Yours sincerely,

*****Name & Position of Person*****

Appendix F - Leatside Health Centre Specimen Interview Checklist

Please note that questions relating to the applicant's Protected Characteristics (i.e. Age, Disability, Gender Reassignment, Marriage and Civil Partnership Status, Race, Religion or Belief, Pregnancy and Maternity, Sex, Sexual Orientation) cannot be asked.
You should NOT ask any questions about the applicant's health.

Name of applicant		
Job Title Interviewed For		
Characteristic	Rating 5 = high 1 = low	Comments on Rating
Education / qualifications	5 4 3 2 1	
Training	5 4 3 2 1	
Skills	5 4 3 2 1	
Experience	5 4 3 2 1	
Knowledge	5 4 3 2 1	
Personality	5 4 3 2 1	
Other	5 4 3 2 1	
Other	5 4 3 2 1	
Other	5 4 3 2 1	
Other	5 4 3 2 1	
Other	5 4 3 2 1	
Special circumstances	5 4 3 2 1	

Recommendation and reasons:

Signed: _____

Name: _____

Date: _____

Please note that applicants will normally be entitled to have access to interview notes about them which are retained as part of the record of the interview.

Appendix G

Leatside Health Centre

Example of Questions which might be asked when interviewing for a Receptionist

Make introductions and explain format of Interview.

Request and answer any immediate questions.

Provide a brief history of the Practice, current situation and reason for the vacancy.

Present Application:

Why have you applied for this job?	
What do you think are the main aspects of this job?	
What appeals to you about working in a General Practice setting? What do you think you would enjoy most about the job? <i>Appropriate skills, experience, attitude</i>	
What do you think you will find most difficult about the job? <i>Understanding of what the job involves</i> <i>Realistic assessment of strengths / weaknesses</i> <i>Positive attitude to overcoming problems</i>	
Is there anything that concerns you about working in General Practice? <i>Realistic concerns</i>	

Reception Skills:

How does General Practice Reception work differ from Office Reception work?	
What past experience do you have that you feel would be relevant to this post? <i>life or work experience</i>	
What are the main skills for a good telephone technique	
Have you had to acquire new skills or knowledge 'on the job' before? How did you find this? What difficulties did you have?	
What experience do you have of being in an environment where you are required to carry out a number of tasks at a time? How do you cope with this? <i>Prioritisation of tasks</i>	
What qualities are required to work on the Front Desk? <i>Awareness / open / welcoming / professional</i>	

Teamwork:

What are the qualities of an effective team?	
How can you develop an effective team if you mainly work in shifts? How do you feel about shift work?	
Have you been in a situation where team relationships have broken down? Why did this happen and how was it resolved?	

What would you do if you were asked to perform a task that you know to be outside your level of authority?	
Have you had any experience of dealing with aggressive or difficult people? How did you feel / react / cope? Would you do anything differently next time?	

Training & Development

What areas do you feel you need training in to start work in Reception?	
What do think is the purpose of training & development? Do you think training is necessary once you feel competent in your job?	

Temperament:

How would your colleagues / boss describe you? <i>Awareness of how others see them</i>	
What 3 adjectives best describe you?	
What qualities are required for this position / Describe the ideal Receptionist? <i>Calm, Professional, Methodical</i> <i>Interpersonal skills</i>	
What particular qualities would you bring to this position? <i>Skills / experience relevant to job</i>	

Appendix H

Leatside Health Centre

Invitation to 2nd Interview Letter Template

Date

Name of Candidate

Address of Candidate

Dear ***Insert Name***

Application for the position of *Position*****

Further to your recent interview in connection with the above vacancy, I am pleased to invite you to attend a 2nd interview on ***Date***, at ***Time***.

The Interviewing Panel will comprise ***Insert Name(s) & Position(s) of Person(s)***

Include details of any assessments / tests to be undertaken at the interview.

Option to choose a Paragraph

Either

A map indicating the location of our Practice is enclosed.

Or

You should report to:

Insert Address

On arrival would you please report to ***Insert details e.g. reception*** from where you will be collected.

Please let me know if there are any adjustments we can make to assist you with your application.

If for any reason you are unable to attend, I should be grateful if you would notify me by telephone on ***Insert telephone number***.

*****Option to Include a Paragraph*****

Please note that appointment to any position is conditional on a satisfactory registration check and qualification checks, and that any information disclosed on the application form will be checked.

Yours sincerely,

*****Name & Position of Person*****

Appendix I - Leatside Health Centre Specimen Job Offer Letter Template

Date

Name

Address of Successful Applicant

Dear ***Insert Name***

Application for the position of *Position*****

Further to your interview, I am delighted to formally offer the role of ***** subject to satisfactory references, ID checks and proof of vaccinations.

The salary for the post is £.... per annum, £.... per hour, rising to £.... per hour on completion of your training/probation period. Your hours of work are hours per week, worked as follows at Leatside Health Centre.

Monday	...am – ...pm
Tuesday	...am – ...pm
Wednesday	...am – ...pm
Thursday	...am – ...pm
Friday	...am – ...pm

Your holiday entitlement is 20 working days, plus Bank Holidays, pro rata.

You have indicated a start date of the, please let me know if there is any change to this.

*****Option to Include a Paragraph*****

Your position within the Practice is subject to you completing a Probationary Period of ***Insert period e.g. 3 months***.

This offer of employment is subject to:

1. The receipt of satisfactory references by us, proof of eligibility of employment within the United Kingdom and proof of identity including a recent photograph. By signing and returning the Practice copy of this letter, you consent to the Practice taking up the references you have provided.
2. The receipt of a satisfactory medical report. I have enclosed a consent form (see letter requesting a medical report from your GP). I would be grateful if you could sign the consent and return it to the Practice in the enclosed stamped addressed envelope, so that we are able to write to your GP for the Medical Report to be compiled and returned to us.
3. The receipt of a suitable DBS Disclosure Document and Independent Safeguarding Authority Registration.

*****Option to Include a Paragraph*****

This offer of appointment is conditional on satisfactory registration, licence and qualification checks, and any information disclosed on the application form will be checked. Such registration, licence and qualification checks will only be carried out with your consent, as specified in the "Confirmation of acceptance" section of this letter.

*****Option to Include a Paragraph*****

Should you cease to become qualified, unlicensed or "de-registered" at any time during your employment, then your employment will be deemed to have terminated.

This offer of appointment may be withdrawn if you knowingly withhold information, or provide false or misleading information, and your employment may be terminated should any subsequent information come to light once you have been appointed.

I enclose your contract of employment, form SMT/3, together with the Deductions from Pay Agreement, Employee Safety Handbook and Fire Drill, and would be grateful if you could sign a copy and return to me. I also enclose a HMRC Checklist, Personal Details form, Confidentiality Policy, Staff Consent, Employee Handbook, Job Description, Code of Conduct, Conflict of Interests, Privacy Notice, Pension Opt Out form and Pension joiner documentation. I would be grateful if you could complete the documents as appropriate, and return to me also.

Finally, I enclose 3 x Occupational Health forms, and would be grateful if you could complete, and email to Occupational South West, the email address is included on the forms.

On your commencement of employment if you have a P45 available, please bring this with you.

We will also need to see three forms of identity, (two forms of name and one form of address), a list of acceptable documents is at the bottom of this letter. You cannot use one form of identification for both name and address. We will also need to see a copy of your Covid vaccination history, either via the NHS App or a letter from NHS119 and proof of your childhood immunisations (please see the enclosed vaccination information). Please bring these with you on your start date.

I would be grateful if you could let me have the names and contact details of two referees, one should be your current/most recent employer.

If you have any questions, please do not hesitate to contact me.

We very much look forward to welcoming you to the team.

Yours sincerely,

*****Name & Position of Person*****

(Copy to Employee file)

**Appendix J -
Leatside Health Centre
Specimen Request for Reference Letter Template**

Date

Name

Address

Dear ***Insert salutation***

RE. ***Insert prospective Employee's name and address***

Insert prospective Employee's name has recently applied for the position of ***Insert position*** within this Practice and has given us permission to write to you for a reference.

I would be grateful if you could complete the attached document in respect of this prospective Employee, sign and return to me as soon as possible.

Your reply will be treated in the strictest confidence.

Reference

We would be most grateful if you answer the following questions:

What is the nature of your relationship with the applicant?	
In what capacity is/was the applicant employed by your business?	
What were the dates of their employment?	
What duties and responsibilities does/did the applicant have?	
What is the applicant's reason for leaving?	
How would you describe the applicant's overall work performance?	
What would you say are the applicant's strengths?	

What would you say are the applicant's development areas (e.g. weaknesses)?	
Have you had any concerns with their performance? If yes, please explain when these issues were identified? What work was put in place to improve these concerns and what progress made?	
Would you re-employ the applicant? Why/why not?	

Please complete the table below to indicate your views on their performance whilst in your employment:

Criterion	Not Applicable	1 Very Poor	2 Poor	3 Average	4 Good	5 Excellent
Attendance/Punctuality						
Reliability						
Professionalism						
Flexibility						
Accuracy						
Integrity						
Ability to work under pressure						
Ability to learn new skills						
Use of own initiative						
Confidentiality						
Dealing with the Public						

Please provide any additional information which may be useful and relevant to this person's appointment:

Your Name:	
Your Position:	
Signature:	
Date:	

**Appendix K -
Leatside Health Centre
Specimen Medical Report Consent Form**

Name:	
Address:	
	Post Code:
Date of Birth:	

To be completed by the Successful Applicant:

To Doctor	
Address	
	Postcode

I hereby give authority for Leatside Health Centre to make contact with yourself as my GP and provide this Practice with a medical report on myself:

PRINT NAME: _____

SIGNED: _____ DATE: _____

**Appendix L -
Leatside Health Centre
Letter to the successful Applicant's GP to request a Medical Report**

STRICTLY CONFIDENTIAL – ADDRESSEE ONLY

Insert Date

Insert Dr. Name

Insert Address

Dear ***Insert Dr Name***

Re: *Insert Applicant's Name & DOB ******

Our Practice has offered this patient of yours the position of ***Insert Position Title***, subject to receipt of a satisfactory medical report.

I would be grateful if you could therefore provide me with a short medical report indicating whether there is anything in his / her medical history that would prevent him / her from undertaking this role.

Insert Applicant's Name has completed a consent form giving you authority to release the information to us and I am pleased to enclose this.

Please return the report and your invoice in the enclosed s.a.e.

Kind regards

Yours sincerely

Insert Name & Position of Person

**Appendix M -
Leatside Health Centre
Specimen templates of a Medical Examination Confirmation Letter for
a New Employee & Medical Examination Declaration Form**

Insert Date

Insert Name

Insert Address

Dear ***Insert Name***,

I now confirm that I have made arrangements for your medical examination as follows:

Insert Date

Insert Time

Insert Name of Doctor

Insert Surgery Address

Insert Surgery Telephone Number

Option to Include a Paragraph

I attach some location directions for your use.

Please ensure that you complete the attached Medical Declaration form, take it with you to the surgery and hand it over to the Doctor at the time of your medical.

Finally, if for any reason you are unable to attend this appointment please contact *****Name & Position of Person***** on *****Insert Telephone Number***** as soon as possible.

Yours sincerely,

Name

Position of Person

Leatside Health Centre
Medical Examination Declaration Form

CONFIDENTIAL - PLEASE ANSWER IN BLOCK CAPITALS

Surname:	Mr / Mrs / Miss / Ms
First Names:	
Permanent Address:	
Name and Address of your own Doctor	
Date of Birth:	National Insurance Number:

MEDICAL HISTORY Have you ever had any of the following conditions? (please tick as appropriate)							
Chest Pain		Asthma		Bronchitis		Pneumonia	
Heart Trouble		Varicose Veins		Breathlessness		Rheumatic Fever	
Stomach Trouble		Stomach Ulcer		Ear Trouble		Swollen Legs	
Fainting Attacks		Fits / Blackouts		Dizziness		Jaundice	
Nervous Trouble		High Blood Pressure		Migraine		Diabetes	
Skin Trouble		Rheumatism		Joint Trouble		Hay Fever	
Bowel Trouble		Kidney Trouble		Back Trouble		Rupture	
Repetitive Strain Injury		If the answer to any of the above conditions is 'YES' please give details below:					

Please name any other serious illness or any operations which you have had:

Please indicate the nature of any accidents (e.g. Broken Bones):
--

Do you suffer from any defect of sight? If 'YES' give details

CONFIDENTIAL PLEASE ANSWER IN BLOCK CAPITALS

Do you suffer from any defect of hearing? If 'YES' give details:

When did you last have a chest x-ray?

Have you ever injured your back? If 'YES' give details:

Have you received treatment for nervous disorder? If 'YES' give details:

Have you any condition requiring treatment at present? If 'YES' give details:

Are you a Registered Disabled Person? If 'YES' give details:

OCCUPATIONAL HISTORY
What previous jobs have you done?

Employer	Job	Dates Employed

Have you ever worked in a dusty job? If 'YES' give details:

Have you ever worked in a noisy job? If 'YES' give details:

Have you ever been advised for medical reasons not to do night work, shift work, or any other kind of work? If 'YES' give details:

Please give details of any medical condition or problem not mentioned previously:

DECLARATION:

I declare that the information I have given on this document, is to the best of my knowledge, a true and complete account of my medical history and that any failure to disclose details of my medical history may prejudice my continued employment with Leatside Health Centre

Signed _____

Date _____

**Appendix N -
Leatside Health Centre
Occupational Health – Work Health Assessment Form**

TO BE COMPLETED BY employer

SECTION A – Your Company Details	
Company:	
Contact Name:	
Job Title:	
Email Address:	
Telephone No:	
Full Address of Company (for reply):	

SECTION B – Personal Details of Job Applicant	
Full Name:	
Location / Department:	
Employee's Job Title (If possible attach job description):	
Hours of work:	
General description of activities to be undertaken:	

TO BE COMPLETED BY APPLICANT

PLEASE READ THIS SECTION CAREFULLY BEFORE COMPLETING THIS FORM

The purpose of the questionnaire is to determine whether you have any health problems that could affect your ability to undertake the duties of the post you have been offered, or place you at any risk in the workplace. As a result of this assessment we may recommend adjustments or assistance that will enable you to do your job.

The information you provide will be treated as confidential and will not be given to anyone else without your written permission. Please be aware that at the end of this form you will be asked to declare that all the statements you make are true to the best of your knowledge.

Our aim is to promote and maintain the health of all people at work. Before health clearance is given for employment, you may be contacted by OHSW Ltd and may need to be seen by an occupational health advisor or doctor.

SECTION C – Personal Details			
First Name		Surname:	
Title (Mr/Ms/Miss etc.):		Date of Birth:	
Home Address:			
Home Telephone:		Mobile Telephone:	
Name of GP:			
Address of GP:			

SECTION D – Health Questions	
Please circle YES or NO as appropriate. If you answer YES to any of these questions, please provide further details in SECTION E.	
Do you have any illness/impairment/disability (physical or psychological) which may affect your work?	YES / NO
Have you ever had any illness/impairment/disability which may have been caused or made worse by your work?	YES / NO
Are you having, or waiting, for any treatment (including medication) or investigations at present?	YES / NO
Do you think you need any adjustments or assistance to help you to do the job you have been offered?	YES / NO
Are you, or could you be, pregnant? (Under the EC Directive on Pregnant Workers, you need to advise your employer of this in confidence, in order that you can be advised about any protection that you may need from physical, chemical, or biological hazards in the workplace).	YES / NO

SECTION E – Further Information
<p>Please provide further information for questions in Section D that you have answered YES.</p> <p>Please also provide details of any other medical conditions that you are suffering from, or have suffered from in the past.</p> <p>Please continue on a separate sheet of paper if needed.</p>

SECTION F – Confirmation and Signature

General Data Protection Regulation (GDR)

Under data protection legislation on request we are required to provide you with copies of the data we hold about you and information on how we manage this data in our records. Should you have any queries, please contact OHSW Ltd at the address below.

Declaration

- I declare that all the information provided in this form is true to the best of my knowledge.
- I understand that I may be required to attend a medical consultation and undergo a physical examination.
- I understand that although this form will be treated in confidence, further medical information may be requested from my GP if considered necessary (subject to obtaining further consent under the Access to Medical Records Act).
- I give OHSW Ltd my consent to:
 - (a) hold medical information relevant to my job application;
 - (b) computerise my personal and medical information;
 - (c) contact me to arrange appointments and manage my case, including linking my medical history to sickness absence data; and
 - (d) use my medical information to prepare an assessment of my fitness for work for my prospective employer.
- I understand that OHSW Ltd will hold my information securely and give me access to my medical information should I request it in writing.

Signature:		Date:	
-------------------	--	--------------	--

Please return this form to:

Information will be shared with employee

To be completed in conjunction with the Confidential Health Assessment Questionnaire by those who:

- Are healthcare workers.

TO BE COMPLETED BY THE APPLICANT

SECTION A – Personal Details of Job Applicant

Company Name:	
Full Name:	

SECTION B – Previous Employments

Job Title	Employer	Location	Dates

SECTION C – Immunisation History (give the dates of immunisation below and provide further information if relevant)

Immunisation	1	2	3	Booster
Tetanus				
Rubella (German Measles) / MMR				
BCG				
Measles				
Hepatitis B				
Chickenpox (VzV)				
Diphtheria				
Polio				
Have you had Singles or Chickenpox?	YES / NO (Circle as appropriate)			

SECTION D – Have you ever had any of the following tests? If you have, please provide the date of the test and the result.

Test	Date	Result
------	------	--------

Rubella Antibodies		
TB Skin Test (Heaf or Mantoux)		
Hepatitis B Antibodies		
Hepatitis B Surface Antigen		

SECTION E – Do any of the following apply to you?

If you answer YES to any of the questions, please provide details (including any treatment you may have had or any absence from work in SECTION F.

Do you have a cough which has lasted for more than 3 weeks?	YES / NO
Do you have unexplained weight loss?	YES / NO
Do you have unexplained fever?	YES / NO
Do you have TB or been in recent contact with open TB?	YES / NO
Have you recently arrived or returned to the UK from abroad?	YES / NO

SECTION F – Further Information

Please provide further information for questions in Section E that you have answered YES.

Please

continue on a separate sheet of paper if needed.

SECTION G – Confirmation and Signature

You are reminded that healthcare workers have an ethical and professional responsibility to ensure that they do not put patients' safety at risk. Occupational Health South West Ltd will be able to give you confidential advice regarding any medical condition and its relation to your practice.

Vaccination Records

In order to be provided with clearance to act as a healthcare worker you will need to provide documentary evidence confirming your vaccination status for:

- Hepatitis B
- Varicella
- Rubella
- Measles
- TB (BCG scar >4mm has been seen)

Satisfactory documentary evidence consists of a photocopy of a pathology report giving your full name, date of birth, course dates and vaccination status from a recognised UK laboratory or an official document issued by an Occupational Health Department or GP practice on headed paper, signed by a qualified person.

Declaration

I declare that all the information provided in this form is true to the best of my knowledge. I also understand that any deliberate material inaccuracy in the information given may be sufficient grounds for my contract of employment to be terminated.

I have enclosed documentary evidence of the vaccination status for each condition set out above.

Signature:

Date:

Please return this form with your completed Health Assessment Questionnaire to

CONFIDENTIAL Health assessment questionnaire – Addendum

To be completed in conjunction with the Confidential Health Assessment Questionnaire by those who work:

- With children; or
- Vulnerable Adults.

TO BE COMPLETED BY THE APPLICANT

SECTION A – Personal Details of Job Applicant

Company Name:	
Full Name:	

SECTION B – Previous Employments

Job Title	Employer	Location	Dates

SECTION C – Health Questions

Please circle YES or NO as appropriate. If you answer YES to any of these questions, please provide further details in SECTION D.

Have you ever left or been denied a job on health grounds?	YES / NO
Have you ever been treated for abuse of an addictive substance?	YES / NO
Have you ever suffered from neurological conditions (incl. migraines)?	YES / NO
Have you ever suffered from mental health problems (incl. stress, anxiety etc.)?	YES / NO
Have you ever suffered from depression?	YES / NO
Have you ever suffered from specific learning difficulties?	YES / NO
Have you ever suffered from a sudden collapse?	YES / NO
Do you have any problems with your mobility?	YES / NO
Do you have any problems with your ability to lift and/or carry?	YES / NO

SECTION D – Further Information

**Please provide further information for questions in Section B that you have answered YES.
Please continue on a separate sheet of paper if needed.**

SECTION E – Confirmation and Signature

Declaration

I declare that all the information provided in this form is true to the best of my knowledge.

Signature:

Date:

**Appendix O -
Leatside Health Centre
Specimen template of Employee Rejection Letter after Interview**

Date

Name

Address of Unsuccessful Applicant

Dear

Application for the position of *Position*****

Further to your recent interview, we regret to inform you that you have not been successful on this occasion.

We would however like to retain your application on file for 12 months, if this is acceptable, and contact you if a suitable opening appears. If you do not wish us to retain your application details on file, please advise us accordingly.

We thank you for your interest in our Practice and wish you every success in your other job applications.

Yours sincerely,

Name & Position of Person