

Pre-Employment Health Assessment Policy

Please be aware that this printed version of the Policy may NOT be the latest version. Staff are reminded that they should always refer to the Intranet for the latest version.

Purpose of Agreement	To provide Occupational Health Nurses, Trust Managers and Human Resource Recruitment Team with the necessary information & guidance to ensure that staff recruited to the Trust are fit and safe for employment		
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CONTENTS

Section No.	Title of Section	Page No.
1	Introduction & Purpose	4
2	Pre-Employment Health Assessment	4
3	Scope	4
4	Role and Responsibilities	5
5	Training	6
6	Confidentiality	6
7	Equality Act / Equality and Diversity	6
8	Access to Work and the Role of Disability Employment Advisor	6
9	Applicants Infected with Blood Borne Viruses: - Human	7
	Immunodeficiency Virus (HIV), Hepatitis B Or Hepatitis C	
10	Criteria for Undertaking a Health Assessment	7
11	Seeking Further Information From: GP or Specialists	8
12	Fitness Form	8
13	Related Policies	9
14	Review	9
15	References	9
	Appendix A – Pre-employment Health Assessment Procedures	10
	Appendix B - Definition: Exposure Prone Procedure (EPP)	14
	Appendix C - Equality Impact Assessment	15

1. INTRODUCTION AND PURPOSE

- 1.1 This policy seeks to ensure that job applicants applying for positions within the Trust are safe and competent from a health perspective to carry out the work/duties they will be employed to undertake.
- 1.2 The Policy sets out the requirements to carry out robust pre-employment health assessment to demonstrate health fitness before starting a new job.
- 1.3 It aims to increase an awareness of the Equality Act indicating that positive action will be taken where indicated to consider reasonable workplace adjustments which provide equal opportunities for employment in compliance with the Act.

2. PRE-EMPLOYMENT HEALTH ASSESSMENT

- 2.1 The Pre-Employment Health Assessment provides advice to the Trust on a job applicant's fitness to work, providing specific advice on adjustments or modifications that can be made, to fit the job/workplace to the individual.
- 2.2 The Assessment will consider
 - Is there a significant health problem?
 - Work capacity: will the illness / physical or mental impairment interfere with their ability to do this specific job?
 - Does anything in this job pose a risk to the candidate's mental health?
 - Is there any risk to the welfare of others?
- 2.3 The Assessment will identify
 - Those likely to be at excess risk, of developing work related disease from hazardous agents present in the workplace.
- 2.4 Recommendations will be made by Occupational Health & Wellbeing service to the Manager/ People Services
 - To ensure that work adjustments or modifications are made to accommodate the candidate's health problem / minimise the risk to them or their patients and / or if the Equality Act applies; offer advice about adjustments needed, to enable them to do the job.
- 2.5 This will allow people to work in the NHS regardless of physical or mental impairment.

3. SCOPE

- 3.1 This policy applies to bank, locum, permanent and fixed term contract employees (including apprentices) who hold a contract of employment or engagement with the Trust, and secondees, volunteers (including Associate Hospital Managers), Non-Executive Directors, and those undertaking research working within Solent NHS Trust, in line with Solent NHS Trust's Equality, Diversity and Human Rights Policy. It also applies to external contractors, Agency workers, and other workers who are assigned to Solent NHS Trust.
- 3.2 Please see appendix A for a definition of EPP (Exposure Prone Procedures.

4 ROLES & RESPONSIBILITIES

4.1 People Services (HR Team)

- 4.1.1 The People Services Team will be responsible for ensuring that:
 - They inform the Occupational Health & Wellbeing Department of all potential new staff to be screened.
 - Send the relevant pre-employment screening form to people that have been offered employment within the Trust, prior to a start date being agreed.
 - Confirmation of fitness to work has been received prior to employment being formalised with the job applicant.

4.2 **Staff**

- 4.2.1 Staff offered employment within the Trust are responsible for completing the preemployment form and returning it to Occupational Health in a timely manner.
- 4.2.2 Staff will be required to declare anything that could potentially affect them undertaking the role. They should be open and honest about their medical history and any concerns / limitations they are aware of that may affect them carrying out the role safely.
- 4.2.3 Staff that change roles that involve significant changes to the job tasks and responsibilities they undertake will be subject to a pre-employment health assessment review.

4.3 Role of Occupational Health & Wellbeing Service

- 4.3.1 All NHS Staff should have a Pre-employment Health Assessment. This will be carried out fairly, objectively and in accordance with equal opportunities legislation and good occupational health practice.
- 4.3.2 No applicant will be refused employment on health grounds unless expert occupational health advice has been sought. The applicant should also have the opportunity to discuss issues raised with an Occupational Health Professional, the Manager and People Services.
- 4.3.3 The employing Manager in liaison with People Services should consider all of the facts and then must decide if the potential employee is to be offered employment. However, if the Occupational Health Professional has advised that the applicant is 'not fit', but the Manager chooses to offer employment despite concerns raised, they will need to be able to fully justify their decision.
- 4.3.4 Although the responsibility for recruitment rests with the referring Manager, the Occupational Health Professional's role is to provide specialist 'confidential' advice to the employer and the applicant. This role has to be taken forward whilst recognising that the Occupational Health Professional has a 'duty' not only to the potential employee to whom they are providing a professional service, but also to that applicant's potential employer, colleagues and patients.
- 4.3.5 The Occupational Health and Wellbeing service has a responsibility to notify the employing manager of non-attendance for new entrant appointments.

4.4 Manager

- 4.4.1 To ensure that confirmation of fitness to work has been received from the Occupational Health and Wellbeing service prior to a start date being confirmed with the job applicant.
- 4.4.2 It is the Manager's responsibility to ensure that their new employee(s) book an appointment for a "New Entrant" Screen within the first two weeks of starting work with the Trust. Failure to attend could result in risk to the employee and others e.g. immunisation protection against workplace hazards has not taken place exposing the person to potential harm.

5. TRAINING

5.1 There are specific training requirements relating to the Policy.

6. CONFIDENTIALITY

- 6.1 Doctors and Nurses working within the Occupational Health and Wellbeing Service are bound by 'Professional Code of Conduct', to protect confidential information and only use it for the purpose for which it was given. Staff will be informed and should understand that some information might be made available to other members of the Occupational Health & Wellbeing team involved in provision of Occupational Health and Wellbeing Services to Staff.
- 6.2 If it is necessary to disclose 'medical' information to a third party, permission will be obtained before disclosure.
- 6.3 If the staff member withholds consent or if consent cannot be obtained for any reason, disclosure will only be made where:
 - They can be justified in the public interest (usually where disclose is essential to protect themselves or somebody else from the risk of significant harm)
 - They are required by Law or a Court Order.
 - Where there is an issue of child / adult protection.
- 6.4 Any disclosure will be documented in Occupational Health Records.

7. EQUALITY ACT 2010

- 7.1 Solent NHS Trust embraces and accepts its legal, social and moral responsibility in relation to Equality & Diversity. The organisation is committed to delivering equality of opportunities for all service users, carers and staff and wider communities and to the elimination of ALL forms of discrimination.
- 7.2 An Equality Impact Assessment has been undertaken and is attached at Appendix C.
- 7.3 In all cases the Equality Act will be considered. The individual will be assessed for their ability to undertake duties as stated in the Job Description and Person Specification and consideration of information provided on the job hazard form. When applicable, reasonable adjustments, may be advised to ensure that people can work in the NHS regardless of physical or mental impairment which may require special advice/equipment/adaptations.

8. ACCESS TO WORK AND THE ROLE OF DISABILITY EMPLOYMENT ADVISOR

- 8.1 Access to Work, provides practical advice and support to disabled people and their employers, to help overcome work related obstacles resulting from their disability. As well as giving advice and information to disabled people and Employers, Access to Work can:
 - pay a grant
 - provide specialist equipment to suit individual needs in work
 - Help with travel to or in work.
- 8.2 See Solent NHS Trust's Equality, Diversity and Human Rights Policy.
- 8.3 Disability Employment Advisors are employed within local Job Centres to help individuals with disabilities/ long term health problems, to maximise their potential to work.
- 8.4 Occupational Health and Wellbeing services may recommend that a new employee, or an existing employee, who has developed a disability, may benefit from the advantages provided under the Access to Work Scheme. In all cases, it is the individual employee's responsibility, to contact Access to Work, to apply for the application form. The Occupational Health and Wellbeing service will:
 - Inform the employee's manager that an Access to Work recommendation has been made as this may have an impact on the Manager's budget that they need to be aware of.
 - Support the employee and their manager through the Access to Work process and when appropriate, provide a report, to support their application.
- 8.5 All applications for support through this scheme should be made to: Access to Work, Telephone 020 8426 3110.

9. APPLICANTS INFECTED WITH BLOOD BORNE VIRUSES

- 9.1 This refers to applicants infected with Blood Borne Viruses: Human Immunodeficiency Virus (HIV), Hepatitis B or Hepatitis C.
- 9.2 Applicants who are known to be infected with HIV, Hepatitis B or Hepatitis C viruses will be considered using the same criteria, which apply to other applicants.
- 9.3 Refer to Solent's Healthcare Workers Screening and Immunisation Policy for further information.

10. CRITERIA FOR UNDERTAKING A PRE-EMPLOYMENT HEALTH ASSESSMENT

- 10.1 The Occupational Health Advisor/Doctor will assess an individual's fitness and capabilities under the following criteria:
 - i) Pre-employment
 - ii) Pre internal relocation/secondment when the duties or hours have changed substantially.
 - iii) Staff employed by the Trust who wish to do extra duties/hours on 'Trust Bank'.
 - iv) Staff who have short-term contracts and are offered permanent contracts.
 - v) Honorary contracts.
 - vi) Volunteers Staff Volunteer Health Assessment Questionnaire available through the Occupational Health Department.

- vii) Work Experience Work Experience Questionnaire available through the Occupational Health Department.
- 10.2 Following assessment, the Occupational Health & Wellbeing service will send the fitness form to the recruiting Manager and an appointment will be sent to the member of staff when further intervention is indicated e.g. immunisation. This will usually be within the first 2 weeks of starting work with the Trust.
- 10.3 If the Occupational Health & Wellbeing service opinion indicates that the individual is not fit to undertake the proposed job, a letter will be sent to the recruiting manager with a copy to People Services. However the decision and responsibility to employ rests with the recruiting manager.

11. SEEKING FURTHER INFORMATION FROM GP or SPECIALISTS

- 11.1 There will be a small number of cases where the nature of sickness absence or other factors suggest the applicant may be unsuitable for the post offered. Further information will be required concerning past medical history and this will be obtained from the applicant's GP or Specialist.
- 11.2 This process will require the applicant's signed consent and they will be told precisely what information is being requested. The Occupational Health Professional will make it clear what information they are seeking from the applicant's GP/Specialist, and advise the applicant of their rights and respecting confidentiality of any clinical information obtained in accordance with; Access to Medical Reports Act 1988, and Data Protection Legislation. The employee will also be informed that their manager will be made aware that additional information is being sought as this may result in a delay in the persons start date and the manager may be charged for the cost of any specialist's reports. No health details will be released.
- 11.3 The GP/Specialist may charge for a Report. The Occupational Health and Wellbeing Service will pay for this Report in the first instance, but the cost will later be passed on to the employing Manager. Consent will always need to be obtained from the member of staff prior to requesting a specialist report.

12. FITNESS FORM

12.1 The Occupational Health & Wellbeing Service will notify the relevant manager of the outcome of the assessment using a Fitness Form. This includes the following information:

Section 1	Fit for proposed placement
Section 2	This employee will undertake Exposure Prone Procedures (EPP) in this post.
	(Note this section will be signed by the OH Nurse /Doctor)
Section 3	Fit for placement subject to specific conditions
Section 4	Fit for placement proposed, but advise the following adjustments to comply
	with the Equality Act.
Section 5	Fit for placement subject to other requirements (e.g. Environmental
	Screening may be required)
Section 6	Currently unfit for placement (this is a temporary/long term problem)
Section 7	Unfit for placement proposed
Section 8	Review inweeks' time.

13. RELATED POLICIES AND DOCUMENTATION

- Solent Healthcare Workers screening and Immunisation Policy
- Recruitment and Selection Policy
- Solent Health Surveillance Policy
- Equality Act 2010
- Data Protection legislation
- Trust's Equality, Diversity and Human Rights Policy.
- Working Time Regulations 1998
- Solent Health & Safety Policies

14. REVIEW

14.1 This Policy may be reviewed at any time at the request of either staff side or management. Each time there is a change to national policy, this policy will also be reviewed so as to take account of new developments and legislation. The policy will automatically be reviewed on a three yearly basis.

15 REFERENCES

- Access to Work (Employment Services. Department for Work and Pensions) 03/02
- Access to Medical Reports Act. (1988)
- Trust Asbestos Policy
- Equality Act 2010
- Health and Safety at Work Act 1974
- Health and Safety (Display Screen Equipment) Regulations (1992)
- Immunisation against infectious disease (The Green Book) 1996
 www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book#the-green-book
- Reporting of Injuries, Disease and Dangerous Occurrences Regulations 2013 (RIDDOR)
- Department of Health Occupational Health Checks 2012
- Trust Hot Desk and Shared Desk policy

APPENDIX A

SECTION 1: PROCEDURE FOR PRE-EMPLOYMENT HEALTH ASSESSMENT

- 1. The Manager will notify the Human Resources Recruitment Team of the selected candidate.
- 2. The People Services Recruitment Team will put a job reference and the candidate will be required to complete a health questionnaire electronically via the eOPAS portal. Details of how to access this will be provided by the People Services team.
- 3. The selected candidate should complete the confidential information and post it immediately to Occupational Health and Wellbeing service, Royal South Hants Hospital.
- 4. Staff that change roles that involve significant changes to the job tasks and responsibilities they undertake will also be required to complete a health questionnaire.
- 5. Occupational Health and Wellbeing service will date stamp all paper forms for audit purposes as they are received. Those received through the eOPAS portal will automatically record the received and processed dates.
- 6. The Occupational Health Advisor will assess the fitness of the applicant to undertake their contracted duties, via a 'Screening' process.
- 7. If more information is needed, to assess fitness the Occupational Health Advisor will contact the successful applicant to undertake a telephone consultation in the first instance.
- 8. In most cases, a decision on the fitness of a selected candidate to undertake their contracted duties will be available to the Manager and People Services within 2 working days via the eOPAS portal.
- 9. When the Occupational Health Advisor is unable to give an opinion of fitness from the information provided on the Work Health Assessment form, the selected candidate will be asked to attend their local Occupational Health Department for assessment. The appointment will be within 10 working days.
- 10. The Manager will be informed of the delay within 2 working days and notified of the appointment with the Occupational Health Advisor.
- 11. Following a consultation with an Occupational Health Advisor, the Manager will be notified within 2 working days of the assessment outcome.
- 12. If the Occupational Health Advisor still has concerns about their fitness they will be referred to the Occupational Health Doctor for a medical opinion. The recruiting Manager/People Services will be informed of the delay and following assessment an opinion of fitness will be given to the recruiting Manager/Personnel by the Occupational Health Doctor.
- 13. Should the Occupational Health Doctor need to obtain further information to give an opinion of fitness this will be discussed with the applicant and their permission to write to their GP/Specialist will be obtained. (Access to Medical Reports Act 1988). The recruiting Manager/Human People Services.
- 14. The Recruiting Manager should be aware that the GP/Specialist may charge the employer for the report, although the Manager will not have any right to see the report as the information

contained is 'confidential' to the Occupational Health & Wellbeing Department. The Manager however, will be asked to pay for the cost.

SECTION 2: PROCEDURE FOR PRE-EMPLOYMENT HEALTH ASSESSMENT FOR STAFF WHO MAY UNDERTAKE EXPOSURE PRONE PORCEDURES

- 1. This applies to staff that may be required to undertake Exposure Prone Procedures as part of their contracted duties.
- 2. Exposure Prone Procedures (E.P.P) (See definition: Appendix A)
- 3. It is most important that managers make the Occupational Health & Wellbeing service aware when a job involves any exposure prone procedure (Job Hazard Form), so that the applicant is screened prior to employment. Managers must not allow this group of staff to start work or training until passed fit to undertake E.P.P by Occupational Health & Wellbeing service. In some cases when documented and validated, evidence of immunity to blood borne viruses is not available, there will be a delay in offering an opinion of fitness.

Staff required to undertake Exposure Prone Procedures, as part of their contracted duties will be asked to attend the Occupational Health and Wellbeing service for assessment and screening **before** starting work/training, to ensure that they are protected against blood borne virus, and are not a risk of infecting their patients/clients with serious communicable disease. See Healthcare Workers Screening and Immunisation Policy for more information on infected healthcare workers performing EPP.

SECTION 3: NEW ENTRANT SCREEN

- 1. A New Entrant is a member of staff who has had an initial health screen to enable them to start work with the Trust.
- 2. The Manager's must ensure that their new employee(s) attend for their Occupational Health appointment for a "New Entrant" Screen within the first two weeks of starting work with the Trust. This includes existing employees that secure new jobs with significant changes to their job tasks and responsibilities and require them to attend an appointment.
- 3. The Occupational Health Nurse will undertake a risk assessment and where indicated offer screening/vaccinations/education, as appropriate.
- 4. The purpose of New Entrant Screening is:
 - To give occupational education about potential workplace hazards and where appropriate offer information.
 - To offer the individual a prophylactic vaccination programme, to protect them at work.
 - To provide screening to ensure, that the individual does not pose a risk of infection to others; (blood test, mantoux test etc)
 - To provide screening and record a base line of health status, for future health surveillance, which will detect any potential changes in health at an early stage; (skin checks, lung function, pregnancy assessment etc)
 - To offer health education and wellness advice where appropriate.

- 5. This is in line with good practice and Department of Health guidance. Occupational Education and handouts will be given, to reflect the type of work undertaken. The New Entrant screening will be documented in the individual's records.
- 6. Managers should be aware that it is most important that New Entrants attend this appointment as failure to attend may put the individual/others health at risk and the Trust at risk of possible future litigation.

SECTION 4: HEALTH SURVEILLANCE PROCEDURE

- 1. The Occupational Health and Wellbeing Service will undertake the following as part of the employment health assessment; in accordance with Solent's Health Surveillance Policy.
 - Document a base line of health at New Entrant Screen.
 - When informed by Manager(s) that employee(s) require health surveillance; provide suitable Health Surveillance and Monitoring; document and compare range of results against predicted/normal range outcomes.
 - Ensure that the Occupational Health team reviews results outside of normal parameters, and when indicated refers for further Specialists investigations.
 - To store Occupational Health records relating to COSHH for 40 years.

SECTION 5: PROCEDURE FOR SPECIFIC SCREENING RELEVANT TO OCCUPATION

VDU	 At New Entrant screen all Visual Display Operators will be given a VDU Workstation Checklist, this should be completed by the employee and given to their Manager to form part of the department's risk assessment and reviewed yearly. If health problems are identified Occupational Health should be notified. It is the joint responsibility of employee and manager to complete the VDU assessment checklist and to take action when indicated.
Skin Checks	 At Health Assessment all Health Care Workers are asked specific questions, to try to detect possible allergy to Latex Protein. At New Entrant Screen a visual check will be made of skin, especially hands and forearms to ensure there is no evidence of skin disease/problems which may present a risk of infection to the individual and risk of cross infection to others. Gloves worn occupationally can sometimes cause health problems i.e. gloves can be irritating to skin, or cause more serious problems such as allergies. It is therefore very important when staff have health problems which they believe may relate to work, that they refer to Occupational Health & Wellbeing service. In all cases it is important that a diagnosis is made, two potential allergens are as follows: Latex Proteins Chemical Accelerators It is noted that the Trust does not routinely use Latex gloves. Therefore, Latex gloves should only be used in exceptional circumstances and where this has been risk assessed. Occupational Health & Wellbeing service will advise managers, with regard to adjustment in the workplace and provision of alternative gloves/other equipment as appropriate.
Night worker checks	Staff that regularly work nights will be subject to yearly Health Surveillance checks. As per Working Time Regulations 1998.

SECTION 6: OCCUPATIONAL / HEALTH EDUCATION & WELLNESS ADVICE

- 1. At New Entrant Screen appropriate Occupational/Health Education will be offered to reflect the type of work to be undertaken. This will include information and advice, on the following:
 - Blood borne viruses (Hepatitis B, Hepatitis C, HIV)
 - Tuberculosis/Rubella/Chicken Pox
 - Problems associated with wearing gloves occupationally
 - Information for computer operators at work
 - Respiratory sensitisers
 - · Alcohol and smoking
 - Healthy eating
 - Healthy heart
 - Stress awareness
 - Counselling Service
 - Needlestick injuries
 - Moving and Handling
 - Health and Safety
 - Working with Computers
 - Others as appropriate: to the workplace/health education.

APPENDIX B

Definition: Exposure Prone Procedure (EPP):

- 1. Exposure prone procedures are those invasive procedures where there is a risk that injury to the worker may result in the exposure of the patient's open tissues to the blood of the worker. These include procedures where the worker's gloved hands may be in contact with sharp instruments, needle tips or sharp tissues (e.g. spicules of bone or teeth) inside a patient's open body cavity, wound or confined anatomical space where the hands or fingertips may not be completely visible at all times. However, other situations, such as prehospital trauma care and care of patients where the risk of biting is regular and predictable, should be avoided by health care workers restricted from performing exposure prone procedures.
- 2. When there is any doubt about whether a procedure is exposure prone or not, advice should be sought in the first instance from a consultant occupational health physician who may in turn wish to consult the UK Advisory Panel for Health Care Workers Infected with Bloodborne Viruses (UKAP). Some examples of advice given by UKAP about exposure prone procedures are provided in Guidance on the management of HIV/AIDS infected health care workers and patient notification (issued under cover of Health Service Circular 1998/226). These may serve as guide but cannot be seen as necessarily generally applicable as the working practices of individual health care workers vary.
- 3. Procedures where the hands and fingertips of the worker are visible and outside the patient's body at all times, and internal examinations or procedures that do not involve possible injury to the worker's gloved hands from sharp instruments and/or tissues, are considered <u>not</u> exposure prone provided routine infection control procedures are adhered to at all times.
- 4. Examples of procedures that are not exposure prone procedures include:
 - taking blood (venepuncture);
 - setting up and maintaining IV lines or central lines (provided any skin tunnelling procedure used for the latter is performed in a non-exposure prone manner i.e. without the operator's fingers being at any time concealed in the patient's tissues in the presence of a sharp instrument);
 - minor surface suturing;
 - the incision of external abscesses;
 - routine vaginal or rectal examinations;
 - simple endoscopic procedures.
 - Further Guidance is awaited by Department of Health (2015) in relation to Blood Borne Viruses

Equality Impact Assessment

Equality Impact Assessment				
Step 1 – Scoping; identify the policies aims			Answer	
1. What are the main aims and objectives of the document?	To provide Occupational Health Nurses, Trust Managers and Human Resource Recruitment Team with the necessary information & guidance to ensure that staff recruited to the Trust are fit and safe for employment			
2. Who will be affected by it?	All staff offered employment within the Trust will be subject to a pre-employment screen.			
3. What are the existing performance indicators/measures	Staff e	employ	ved into the Trust are safe and	
for this? What are the outcomes you want to achieve?	compe they a	competent to undertake the work/duties they are employed to do.		
			al opportunities for staff.	
4. What information do you already have on the equality impact of this document?	Previo	•	cedure and impact	
5. Are there demographic changes or trends locally to be considered?	No			
6. What other information do you need?	None			
Step 2 - Assessing the Impact; consider the data and	Yes	No	Answer	
<u>research</u>			(Evidence)	
1. Could the document unlawfully discriminate against any group?		✓	Written in line with national guidance	
2. Can any group benefit or be excluded?		✓	policy ensures equal access for all staff being recruited into the Trust	
3. Can any group be denied fair & equal access to or treatment as a result of this document?		√	Policy ensures equal access for all staff being recruited into the Trust. For staff that are assessed as not fit following consideration of reasonable workplace adjustments, they will not be employed and justification will be provided for the decision.	
4. Can this actively promote good relations with and between different groups?		✓	Policy encourage cross working between different departments e.g. HR dept and managers	
5. Have you carried out any consultation internally/externally with relevant individual groups?		√	This is an update of original Policy written. No further formal consultations carried out.	
6. Have you used a variety of different methods of		√	As above	
,				

consultation/involvement		
Mental Capacity Act implications	✓	Unlikely as staff will usually be able to make own decisions. In the event this may not be the case the Mental Capacity Act Policy will be followed.
7. Will this document require a decision to be made by or about a service user? (Refer to the Mental Capacity Act document for further information)	√	Consent is addressed within the procedure.
<u>External considerations</u>		
8. What external factors have been considered in the development of this policy?	✓	
9. Are there any external implications in relation to this policy?	√	
10. Which external groups may be affected positively or adversely as a consequence of this policy being implemented?		N/A