In order to ensure that we provide a safe working environment for all of our staff, the Trust has introduced a COVID specific risk assessment process during our pre-employment checking period. This aims to understand any risk factors individuals may have in connection with COVID-19 before they start work with us.

Please indicate whether you are affected by any of the risk factors identified overleaf. If you answer yes to any of these risk factors, you will be contacted by a manager from the area you will be working in who will have a more comprehensive risk assessment conversation with you. The purpose of this is to enable the Trust to consider whether any adjustments will need to be made to your role either on a temporary or permanent basis. Part of this conversation may include asking you about specific health conditions and/or medications that you take. Should you not wish to share this information with the manager who contacts you and would prefer to discuss this with our Occupational Health provider, then a referral can be made for you. Please be assured that all information you provide in relation to this will be treated confidentially. The Trust has established a risk assessment advisory panel to provide specific advice and guidance on individual risk assessments and proposed mitigation where necessary. Please be assured that should your case need to be reviewed by the panel, all information is anonymised before submission.

You will not be able to commence your new role at the Trust until such time as you have returned this form and if a risk assessment is required, that process has been undertaken and any identified measures have been implemented.

Should you have any queries or concerns, please do not hesitate to contact the recruitment team in the first instance using the communication tab on the Trac account.

Please now review and provide responses to the information on page 2 of this document.

***Insert Name***: Benjamin Hardy

***Insert Date of Birth: 18/09/1989***

***Position Applied for***: Anaesthetics ST4

*Please indicate yes or no in response to each of the following statements:*

|  |  |  |
| --- | --- | --- |
| Risk Factor | Yes | No |
| I am 60 years of age or over |  | X |
| I am from a black, Asian or minority ethnic background |  | X |
| I am currently or have previously been advised to shield by NHS England, my GP or another clinician involved in my care |  | X |
| I have chronic (long-term) respiratory diseases, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis |  | X |
| I have severe asthma, as defined by the British Thoracic Society <https://www.brit-thoracic.org.uk/document-library/quality-improvement/covid-19/bts-advice-for-healthcare-professionals-treating-patients-with-asthma/> |  | X |
| I have required regular medical treatment for asthma within the past three years |  | X |
| I have chronic heart disease, such as heart failure |  | X |
| I have chronic kidney disease |  | X |
| I have chronic liver disease, such as hepatitis |  | X |
| I have a chronic neurological condition, such as Parkinson’s disease, motor neurone disease, multiple sclerosis (MS), a learning disability or cerebral palsy |  | X |
| I have diabetes |  | X |
| I have problems with my spleen – for example, sickle cell disease or I have had my spleen removed |  | X |
| I have a weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets or chemotherapy |  | X |
| I have a BMI of 40 or above |  | X |
| I am i) 28 weeks pregnant or more or ii) I am less than 28 weeks pregnant with either underlying health conditions, BMI of 30+ and/or I am aged 35 or over |  | X |