

## **Job Hazard Form (JHF)**

### **Background**

As an employer, the Trust is required by law to protect our employees, volunteers and others working within the organisation from harm whilst at work.

All employers have a legal responsibility under the Health and Safety at Work Act 1974 and Management of Health and Safety at Work Regulations 1999 to ensure the health, safety and welfare at work of their employees. This means that managers must:

- identify what could cause injury or illness in the workplace (hazards)
- decide how likely it is that someone could be harmed and how seriously (the risk)
- take proportionate action to eliminate the hazard, or if this isn't possible, control the risk

For those being recruited to work within the Trust, managers have a responsibility to carry out workplace assessments to identify any hazards that their staff/volunteers may be exposed to during the course of their work and specifically those that also require Health Surveillance.

Please ensure that this form is completed accurately and in full, if aspects of this form are incomplete we will request that this is completed prior to health clearance. This is likely to impact on the speed that your prospective staff member receives their occupational health clearance and is able to commence their role with you.

On completion for substantive and TWS staff, please send this form to your designated Recruitment Assistant.

For volunteers please email a completed copy of this form to the Occupational Health team [esh-tr.occupationalhealth@nhs.net](mailto:esh-tr.occupationalhealth@nhs.net)

### **Key Information**

Prospective Job Details			
Job Role	District Nurse Trainee	Department	Community Nursing
Recruiting Manager Details			
Manager Name	Ann Mouland	Manager contact Email Address	Ann.mouland@NHS.NET

## Risk Assessment

Please indicate whether this job role will involve work/exposure to any of the following:		Further Information/Definitions
Exposure Prone Procedures (EPP)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Procedures where the workers gloved hands may be in contact with sharp instruments, needle tips or sharp tissues inside a patients' open body cavity, wound or confined anatomical space, where the hands or fingertips may not be completely visible at all times. Procedures where injury to the healthcare worker could result in the workers blood contaminating the patients open tissues. <i>Reference link: <a href="https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/101444/integrated_guidance_on_health_clearance_of_healthcare_workers_living_with_bloodborne_viruses.pdf">Integrated guidance on health clearance of healthcare workers living with bloodborne viruses (publishing.service.gov.uk)</a></i>
Contact with infectious diseases from working with patients and/or contact with clinical samples, clinical equipment or clinical waste	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Exposure may be direct or indirect e.g. working in a clinical environment with close/frequent contact with patients or indirectly by working with clinical samples, equipment or waste.
Wet work and regular hand washing	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Activities where frequent "wet work" is undertaken and may cause dryness, itching or redness to the skin, which can develop into flaking, scaling, cracked, swelling or blisters to skin.
Skin/Respiratory sensitisers	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Sensitisers include those indicated as hazards on the safety data sheet. For example: <ul style="list-style-type: none"> <li>• H334</li> <li>• H317</li> <li>• H340</li> <li>• H350</li> </ul> <p><i>Please provide the relevant COSHH risk assessments and safety data sheet associated with this work exposure, demonstrating that all other controls have been explored to remove or mitigate this risk.</i></p>
Noise	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Exposure to noise levels above 80dba on a regular basis <i>Please provide evidence of the relevant risk assessments associated with this work exposure, demonstrating that all other controls have been explored to remove or mitigate this risk.</i> <a href="#">See the Noise at Work Policy</a>

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Hand Arm Vibration (HAVS)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Use of tools that cause ongoing vibration (daily values of 2.5m/s <sup>2</sup> ) of arm, hand and/or body as indicated by the equipment specification provided by the manufacturer. <b>If you do not have this, you must liaise directly with the manufacturer</b>  Please provide evidence of the relevant risk assessments associated with this work exposure, demonstrating that all other controls have been explored to remove or mitigate this risk including maintenance of specialist PPE and replacement of equipment as required
Driving Large Goods Vehicles (LGV) & Patient Carrying Vehicles (PCV) & Forklift drivers <b><u>Please state if a D4 medical is required prior to starting.</u></b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Natural rubber latex	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Please note: The Trust has adopted a non-Latex purchase position wherever practicable.  Where medical devices contain latex as an essential component, please provide the activity risk assessment associated with this exposure
Other: Employee may undertake tasks where the environment may pose a hazard i.e. working at height or confined spaces.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

**Recruiting Managers Declaration**

**I confirm that I have assessed this job role and have accurately indicated any associated hazards on this form**

**Recruiting Managers Signature:**

Ann Mouland

**Date Completed:**

1/4/24