



New Employee / Volunteer / Long Term (>4 weeks) Placement Risk Identification (PART 1)

Recruitment or Recruiting Manager to complete this section							
Name of Candidate:	Job Title: Registered Nurse						
Employer/Trust: CWP	Care Group: Bed Based Services, West						
Department: Bowmere							

This form <u>must</u> be completed by the manager/supervisor to identify risks relevant to the post/placement which may require occupational health involvement. Where a risk is identified please refer to the '**RISK IDENTIFICATION MANAGERS GUIDANCE**' document for further advice and to determine if OH intervention/Health Assessment is required and indicate this in final columns.

WHERE BASELINE HEALTH SURVEILLANCE IS INDICATED, THE IDENTIFIED ELEMENTS OF THIS ROLE/PLACEMENT MUST NOT BE UNDERTAKEN UNTIL ADVICE RECEIVED FROM OCCUPATIONAL HEALTH

The job will or may involve: (please indicate 'Yes' or 'No' as appropriate):-

			ISK SENT? refer to lance)	OH Health Assessment needed?	
1	Contact with patients in a Nursing/Care Home (involved in direct patient care)		No	No	
2	Contact with patients in a Nursing/Care Home (social contact in clinical environment)		No	No	
3	Drivers (of company vehicles or who transport service users)		No	No	
4	Vocational Driving (e.g LGV, PCV) Specify		No	No	
5	Food Handling/Preparation (preparation, cooking & serving)	Yes	No	No	
6	Manual Handling	Yes	No	No	
7	Contact with patients (involved in direct patient care)	Yes	No	No	
8	Contact with patients (social contact in clinical environment)	Yes	No	No	
9	Working with those who are at risk of blood borne infections		No	No	
10	Undertaking exposure prone procedures.		No	No	
11	Exposure to respiratory sensitisers Specify		No	No	
12	Working with biological agents Specify		No	No	
13	Working at heights		No	No	
14	Working in isolation		No	No	
15	Exposure to skin sensitisers Specify		No	No	

16	Exposure to noise			No	lo
17	Working with vibrating tools			No	 10
18	Working with electrical wiring			No	 10
19	Working in confined spaces			No	 10
20			Yes	No	 NO NO
21				No	 10
22	Requirement to perform control and restraint procedures			No	 10
23	Any other occupational hazards			No	 10
-	Specify				-
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Recruiting Manager (print):		Craig Hynes			
		Clarg Hylles			
Rec	ruiting Manager E-mail address:	Craig.hynes@r	hs.net		
Recruting Manager Signature:					
Care Group					
Department					
Date		16.12.21			