

## Functional Requirements form

**Job Title:** Consultant Psychiatrist

**Location:** As per job description (attached to advert)

**Recruiting manager:** As per job description (attached to advert)

**Date:** Dec 2021

<b>Job Hazards Associated with the Post</b>		
Exposure to blood / body fluids / tissue <input checked="" type="checkbox"/>	Work involving Manual Handling <input type="checkbox"/>	Work involving driving <input type="checkbox"/>
Control & Restraint <input checked="" type="checkbox"/>	Work Using Display Screens <input checked="" type="checkbox"/>	Shift Work/Night Work <input checked="" type="checkbox"/>
Work using skin irritants/allergens <input type="checkbox"/>	Work can be Stressful at Times <input checked="" type="checkbox"/>	Work Involving Food Handling <input type="checkbox"/>
Work using lung irritants/allergens <input type="checkbox"/>	High Noise Exposure <input type="checkbox"/>	Lone Working <input checked="" type="checkbox"/>
Manual Handling of loads <input type="checkbox"/>	Hazardous Machinery <input type="checkbox"/>	Exposure to ionising radiation <input type="checkbox"/>
Actually or Potentially performs Exposure Prone Procedures (EPPS) <input type="checkbox"/>	Exposure to Hazardous Chemicals <input type="checkbox"/>	Work at Heights <input type="checkbox"/>
Work with Natural Latex products <input checked="" type="checkbox"/>	Crossing Patrol <input type="checkbox"/>	Food Handler <input type="checkbox"/>
Use of Vibrating Tools/Equipment <input type="checkbox"/>	Confined spaces <input type="checkbox"/>	Other. Please state
<b>Will this person have direct patient contact?</b> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		