

JOB TITLE Click or tap here to enter text.

COMPLETED BY Click or tap here to enter text.

Dear Candidate

MFT have a duty of care to assess your health in relation to the role you will be undertaking and to determine if any adjustments are required to support you in the workplace.

The recruiting manager has completed this document to confirm the functional requirements in relation to your health and the possible adjustments/support that may be available if you are successful.

These details are for information purposes <u>only</u> at the advertising stage. If you have any health condition/s that may require adjustments/support in the workplace, you will be required to declare these via the health declaration link that will be emailed directly to you, if you are successful in being offered the role.

If you have declared a health condition, you will be contacted by the Employee Health & Wellbeing (EHW) Service to discuss, in confidence, your health status to identify any requirements in the workplace.

Role Requirement	Confirmation as to whether Role Requirement is applicable to role (Manager to indicate Yes or No for each section)		Health problems that may affect work tasks	Adjustments/support that may be available
Section 1	Yes	No		
Direct contact with patients or handling specimens This will include most nursing and medical roles, allied health professionals, nursery workers (except the First Steps team), laboratory staff, porters, and domestics.			Low immunity due to conditions such as HIV infection, lupus, or drug treatment such as chemotherapy or high dose steroids, may make you vulnerable to some infections. Candidates must declare if they: Have a cough that has lasted more than 3 weeks Have lost weight (not as part of a weight loss programme) Are coughing up blood Have night-time sweats Have a fever associated with the above symptoms	It is essential that all workers in these roles have immunity to Hepatitis B, measles, mumps, rubella, chicken pox and tuberculosis, and an annual flu vaccination and Covid-19 vaccination is strongly advised. Candidates will be required to provide validated evidence of their immunisation and vaccination status (these can usually be obtained from current or previous occupational health departments). If a candidate cannot provide validated evidence, they will be required to attend the EHW Service, within the first 2 weeks



			 Have a history/diagnosis of tuberculosis Candidates must declare if they are currently suffering from an infectious disease. EHW will contact candidates to discuss any current symptoms to determine the most appropriate action required. Candidates must declare if they: Have lived in any of the countries in Appendix 1 in the last 5 years, or have lived abroad for more than 4 weeks in the last 12 months Have a family member or close friend who have ever been diagnosed as having Tuberculosis (TB) That you have had any recent contact with TB 	of joining the Trust for a blood test to determine immunity status. EHW will assess whether further vaccinations or blood tests are required to protect the healthcare worker and the patient.
Section 2	Yes	No		
Direct regular contact with high risk patients including immunosuppressed, pregnant women, neonates			High risk patients require a higher level of protection against infectious diseases. Staff working with this patient group must comply with immunity requirements or may need restrictions on work or redeployment.	
Section 3	Yes	No		
Undertaking *Exposure Prone Procedures (EPP) such as work in operating theatres, or trauma within ED. All surgeons (including FY1 and FY2 doctors with a rotation into one of the EPP areas), dental staff, some theatre roles, midwives, and some ED roles This does not apply to healthcare assistants and allied health professionals.			Workers with a blood borne virus (BBV) such as Hepatitis B or C infection or HIV may be able to perform EPP under certain circumstances. *Exposure Prone Procedures (EPP) are those where there is a risk that injury to the worker may result in exposure of the patient's open tissue to the blood of the worker. These procedures include those where the worker's gloved hands may be in contact with sharp instruments, needle tips, or sharp tissues (bone, teeth) inside a patient's open cavity, wound or confined anatomical space where the hands or	Candidates new to EPP work must attend the EHW service to determine their BBV status prior to commencing work at the Trust. Candidates who have previously worked in an EPP role must provide validated evidence of HICE, Hepatitis C and Hepatitis B status prior to commencing work at the Trust. If a candidate cannot provide validated evidence, they will be required to attend the EHW Service for a blood test to determine immunity status.



cannulation are not classified as EPP			*As defined in the Green Book	in strictest confidence. Adjustments for EPP workers may be required.
Section 4	Yes	No		
Ability to undertake generally physically demanding work including regularly moving/handling patients, lifting, or moving loads >5kg, frequent walking (or running in an emergency) or prolonged standing. This job may require regular pushing, pulling, lifting, and carrying of heavy loads such as patients, trolleys, equipment, and materials or wearing a lead apron, travelling across the hospital.			Musculoskeletal conditions such as back, neck, arms, shoulders, joints etc	Most musculoskeletal problems are minor and resolve with treatment. Some chronic problems may require adjustments if mobility, strength, grip, or flexibility is impaired. Patient moving and handling equipment should be available in all clinical areas. Adjustments to the workplace equipment and work practices are possible. Support is available if required from the EHW physiotherapy team, moving and handling team and the Health and Safety team. Manual handling risk assessment and workstation assessment on commencement are recommended where appropriate.
Section 5	Yes	No		
Resilience to workplace pressures including working to deadlines or in stressful environments. Working in the health service can be busy and pressurised at times and work in patient areas can be distressing due to patients with serious illness or death. Starting a new job can add additional pressures.			Mental health issues such as anxiety, or panic disorders. Depression, bipolar affective disorders, schizophrenia. Other conditions that may be affected by stress include; personality disorders, epilepsy, bowel conditions, eczema, hypertension, and some cardiac conditions	Emotional Resilience, CBT: thinking Resiliently, Emotional Intelligence, Prevention and management of Stress in the Workplace courses are available. Support is also available from the EHW service and via management. A stress risk assessment on commencement of duties will usually be advised. The Trust has a psychological wellbeing policy and process that can help minimise the effect of workplace stress.
Section 6	Yes	No		
Regular night work including on- calls			Working nights may adversely affect individuals with health conditions such as diabetes, epilepsy, heart conditions, sleep disorders such as sleep apnoea	Temporary or permanent adjustments may be required, although most people with underlying health conditions can work a variety of shifts without is adversely affecting their health.



				Yearly night worker health assessments are available for night workers.
Working alone, in confined spaces or at height. These tasks may be dangerous for those with certain health conditions and may require training and specific safety measures to protect employees' health. Section 8 Regular computer-based work or desk-based work.	Yes Yes	No No	Diabetes, epilepsy, heart conditions, mental health conditions, including anxiety or panic disorders, claustrophobia, respiratory conditions. It is important that these conditions are declared, in confidence, to the EHW Service to determine if any adjustments or restrictions need to be put in place to protect them and others. Musculoskeletal disorders (back, neck, arms, shoulders, joints, etc), eye conditions, or conditions affecting the hands or wrists.	It may be possible to put additional safe systems of work in place to protect the employee, or some minor restrictions or modifications may need to be made to their work. A workplace risk assessment will usually be advised on commencement of duties for those individuals with these conditions. Most musculoskeletal disorders are minor and resolve with treatment. Some chronic problems may require adjustments if mobility, strength, grip, or flexibility is impaired. Adjustments to the workplace, equipment and work practices are possible. Support is available if necessary, from the EHW physiotherapy service, manual handling team and the health and safety team. If you are classed as a Display Screen User, you will be required to complete a Display Screen Assessment within 2 weeks of commencing in post. *As per Health and Safety Executive – Working safely with display screen equipment
Section 9	Yes	No		
Good hearing and vision including accurate colour vision. Some aspects of this role may have safety critical features such as visual or audible alarms or colour coded			Sensory problems i.e. hearing, sight (not corrected by spectacles, lenses, or hearing aids), which may include colour blindness, detached retina, macular degeneration, or profound hearing loss. Dyslexia and other learning difficulties, can pose	EHW will advised the line manager on the requirement for a specialist assessment should this be required for any sensory deficit that may impact on patient or employee safety, e.g. audio/colour vision/vision.



components. Many roles include the necessity to accurately read patient written or electronic information quickly and in pressured situations.			additional problems for computing and reading or recording complex health information and additional specialist support may be required.	Individuals can contact Access to Work for advice. If required, they will undertake an assessment of needs which may include provision of specialist equipment.
Section 10	Yes	No		
Working with chemicals, substances or work processes that can affect the skin or respiratory system, including wet work, use of latex gloves or skin and respiratory irritants or sensitisers.			Skin conditions i.e. eczema, dermatitis, allergies, or psoriasis. Asthma, chronic obstructive pulmonary disorder, or other respiratory conditions. Working with broken skin on hands or arms is an infection control risk when working with patients or specimens.	Those with pre-existing skin problems will require skin surveillance prior to being passed fit and may need adjustments. Alternatives to soap can be provided to accommodate skin issues, and advice provided regarding general skin care. Temporary adjustments can be made for those with broken skin on their hands. Restrictions or additional precautions may be advised for those individuals suffering from respiratory conditions which could be exacerbated by exposure to certain substances.
Section 11	Yes	No		
Drive vehicles as part of their duties.			 Candidates must declare if: They have been advised by their GP or specialist that they must refrain from driving The DVLA have revoked their driving license They have a medical condition that may affect their ability to undertake driving duties that may put themselves, patients, or members of the public at risk 	Due to the medical requirements for drivers as set out by the DVLA, it is unlikely that adjustments or support can be put in place. However, if you tick 'yes' to this section, an EHW adviser will contact you to discuss your health conditions in relation to fitness to drive.



Additional considerations for candidates: If any of the following apply, the candidate must declare this on the health declaration.

Health Problem	Impact on Work	Adjustments/Support
Health conditions that may impact on ability to perform role	Some health conditions may be exacerbated by working in a health care environment or impact on a candidate's ability perform all their duties.	The candidate should discuss any health condition that they think may affect their work, in confidence, with the EHW team. EHW will advise their manager on what adjustments may be required to help them achieve their full potential in the workplace. EHW will not discuss specific health issues with the manager or any other third party without consent from the candidate.
New or expectant mothers	Whilst not a health problem new or expectant mothers will require a pregnancy risk assessment to be undertaken prior to commencement of your new job. This is to ensure that you are not exposed to hazards in the workplace that may pose a risk to the mother or their unborn child.	The candidate will be encouraged to inform their manager in writing that they are pregnant. On receipt of this information, the manager will undertake a pregnancy risk assessment. If any risks/hazards are identified, adjustments will be made to minimise/remove them.
Dyslexia and other learning disabilities	Working in healthcare involves record keeping, calculating drug doses, reading complex medical information, and processing complex information (at times under pressure).	If the candidate has a learning disability, they will be contacted by the EHW team to discuss the impact that the condition may have on their work.

Candidates please note that employees who are <u>not in clinical roles</u> but who are working in a health care setting should be up to date with the following immunisations:

- Tetanus
- Diphtheria
- Mumps
- Measles
- Rubella

You will need to see your GP if you have not had or are not sure if you have had the above immunisations.

New starters will also be required to complete a mandatory training programme which will assist in the management of work-related health risks.

References:

- Green Book https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/147882/Green-Book-Chapter-12.pdf
- Working safely with display screen equipment https://www.hse.gov.uk/msd/dse/

Manchester University NHS Foundation Trust

FUNCTIONAL REQUIREMENTS OF ROLE FORM

Appendix 1

Afghanistan	Democratic Republic of the Congo	Kenya	Nigeria	Timor-Leste
Algeria	Djibouti	Kiribati	Northern Mariana Islands	Turkmenistan
Angola	Dominican Republic	Kyrgyzstan	Pakistan	Tuvalu
Azerbaijan	Ecuador	Lao People's Democratic Republic	Papua New Guinea	Uganda
Bangladesh	El Salvador	Lesotho	Paraguay	Ukraine
Benin	Equatorial Guinea	Liberia	Peru	United Republic of Tanzania
Bhutan	Eritrea	Libya	Philippines	Uzbekistan
Bolivia (Plurinational State of)	Eswatini	Lithuania	Republic of Korea	Vanuatu
Botswana	Ethiopia	Madagascar	Republic of Moldova	Venezuela (Bolivarian Republic of)
Brazil	Fiji	Malawi	Romania	Viet Nam
Brunei Darussalam	Gabon	Malaysia	Russian Federation	Yemen
Burkina Faso	Gambia	Mali	Rwanda	Zambia
Burundi	Georgia	Marshall Islands	Sao Tome and Principe	Zimbabwe
Cabo Verde	Ghana	Mauritania	Senegal	
Cambodia	Greenland	Micronesia (Federated States of)	Sierra Leone	
Cameroon	Guam	Mongolia	Singapore	
Central African Republic	Guinea	Morocco	Solomon Islands	
Chad	Guinea-Bissau	Mozambique	Somalia	
China	Guyana	Myanmar	South Africa	
China, Hong Kong SAR	Haiti	Namibia	South Sudan	
China, Macao SAR	India	Nauru	Sri Lanka	
Congo	Indonesia	Nepal	Sudan	
Côte d'Ivoire	Iraq	Nicaragua	Tajikistan	
Democratic People's Republic of Korea	Kazakhstan	Niger	Thailand	

Sources: World Health Organisation (WHO) TB burden estimates

Data accessed: October 2020 Prepared by: TB Surveillance Team, TB Unit, National Infection Service, Public Health England