

## Immunisation and screening checklist for Pre-Placement Health Assessment

You must provide the following documentation to the Occupational Health Service in order to complete your Pre-Placement Health Assessment.

**Without this information we will be unable to complete the necessary screening for the post applied. This may impact on your fitness to work, cause restrictions in your work practice and delays in commencing employment.**

If for any reason you are unable to provide the necessary documentation, please contact the Occupational Health Service as soon as possible and you will be advised accordingly.

<ul style="list-style-type: none"> <li>Completed Pre-Placement Health Questionnaire and Pre-Placement Tuberculosis Screening form</li> <li>Photographic ID (e.g. valid passport, driver's license or national identity card)</li> </ul>	
<b>Measles and rubella</b> <ul style="list-style-type: none"> <li><b>Two</b> vaccinations which contain Measles, Mumps and Rubella (MMR) – Those born after 1980 should check with school health/GP</li> </ul> <b>OR</b> <ul style="list-style-type: none"> <li>A blood test result to confirm immunity to Measles and Rubella</li> </ul>	
<b>Varicella/Chickenpox</b> If you have no history of chickenpox or shingles please provide: <ul style="list-style-type: none"> <li>Documentary evidence of <b>two</b> Varicella/chickenpox vaccinations</li> </ul> <b>OR</b> <ul style="list-style-type: none"> <li>A blood test result to confirm immunity to Varicella/chickenpox</li> </ul>	
<b>Evidence of BCG Vaccination and/or BCG scar</b> <b>Mantoux result where available</b>	
<b>Hepatitis B Vaccination</b> Please provide evidence of <b>ALL</b> of the following, if carried out: <ul style="list-style-type: none"> <li>A full primary and/or secondary course of Hepatitis B vaccinations</li> <li>A blood test to confirm immunity to Hepatitis B/Hepatitis B antibody titres</li> <li>Hepatitis B booster if applicable</li> </ul>	
<b>If you have travelled to a high risk TB country for more than 3 months within the past 5 years or if you have had regular contact with TB patients and/or TB infected materials for more than 4 weeks in a high risk TB country</b> <ul style="list-style-type: none"> <li>Chest x-ray and/or IGRA blood test</li> </ul>	
<b>Evidence of blood borne virus (BBV) screening – required for exposure prone procedure (EPP) worker please see overleaf.</b> (Samples must be Identity Validated Samples (IVS) from an accredited laboratory in the UK – see guidance overleaf) <ul style="list-style-type: none"> <li>Hepatitis B</li> <li>Hepatitis C</li> <li>HIV</li> </ul>	
<b>IMMUNISATION AND SCREENING DETAILS MAY BE OBTAINED FROM THE FOLLOWING SOURCES</b>	
<b>Main Sources</b>	Occupational Health Departments Student Occupational Health Providers GP practice
<b>School Health Records</b>	Belfast Area: <a href="https://belfasttrust.hscni.net/service/school-health-services/">https://belfasttrust.hscni.net/service/school-health-services/</a> Northern Area: (EMAIL) <a href="mailto:ChildHealth.Support@northerntrust.hscni.net">ChildHealth.Support@northerntrust.hscni.net</a> Southern Area: (EMAIL) <a href="mailto:School.healthrecords@southerntrust.hscni.net">School.healthrecords@southerntrust.hscni.net</a> Western Area: (CONTACT) Bridgeview House, Gransha Park, BT47 6TG South Eastern Area: <a href="https://setrust.hscni.net/service/school-nursing/">https://setrust.hscni.net/service/school-nursing/</a>
The Occupational Health Service may recommend further vaccinations or blood tests, based on a risk assessment of your role, and where evidence of your immunisation/screening is incomplete or not provided and will be discussed with you.	

### **Definition of exposure prone procedures (EPP)**

Exposure prone procedures are those invasive procedures where there is a risk that injury to the worker may result in exposure of the patients open tissues to the blood of the worker. These include procedures where the workers gloved hands may be in contact with a sharp instrument, needle-tips or sharp tissues (e.g. spicules of bone or teeth) inside a patients open body cavity, wound or confined anatomical space where the hands or fingertips may not be completely visible at all times.

In order for you to perform exposure prone procedures (EPP), you should provide documentary evidence of your status regarding:

- Hepatitis B surface antigen
- Hepatitis C antibody
- HIV antigen/antibody

To comply with the national guidance from Public Health England, Integrated guidance on health clearance and the management of HCWs living with BBVs (hepatitis B, hepatitis C and HIV): August 2020 these results must be from a UK accredited laboratory and the report must indicate that the results were derived from an identity validated sample (IVS).

[BBVs in healthcare workers: health clearance and management - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/bbvs-in-healthcare-workers-health-clearance-and-management)

**Reports that fail to meet the criteria above will not be accepted under any circumstances.**

All professional regulatory bodies require registrants to alert their employer if they are aware of any issues which would put individuals in their care at risk.

If you know or suspect you have been infected with a blood borne virus either through lifestyle or occupational exposure (e.g. needle-stick injury) that has not been followed up, you must inform your Occupational Health Service.