|  |  |
| --- | --- |
| **Agency name:** | City Force Healthcare |
| **Agency worker name:** | Patricia Osahenmwinda | **Known as:** | Patricia  |
| **Address:** | Office 140 Building 3 Leeds City WestBusiness ParkLeeds LS12 6LN | **Contact number:** | 0113 2775xxx |
| **Date of birth:** | 08/11/1977 |
| **Date of last DBS/ PVG check:** | 18/10/2021 | **DBS / PVG Number:** | 00175472xxxx |
| **PIN (if applicable):** | N/A | **Enhanced DBS:** | **Yes [x]  No [ ]**  |
| **DBS returned:** | **Yes [x]  No [ ]**  | **DBS Risk assessment required:** | **Yes [ ]  No [x]**  |
| **Fit for work:** | **Yes [x]  No [ ]**  | **Hep B:** | **Yes [ ]  No [x]**  |
| **Job Role to be undertaken:** | Healthcare Assistant | **VAT Applicable:****Yes** **[ ]  No** **[ ]**  |

|  |  |  |
| --- | --- | --- |
| **Checks:** | **Confirmed:** | **Insert photo:** |
| **Staff eligible to work in the UK:** | **Yes [x]  No [ ]** **Documents provided/used:**Eu Settlement |  |
| **Confirmation of identity:** | **Yes [x]  No [ ]** **Documents provided/used:****Passport** |
| **References received:** | **Yes [x]  No [ ]**  |
| **Covid card** | **1st [x]  2nd[x]**  |
| **Driving License/Insurance:** | **Yes [ ]  No [x]**  |
| **All required paperwork checked:**  | **Yes [x]  No [ ]**  |
| **Mandatory training up to date:**  | **Yes [x]  No [ ]**  |
| **Registered under the disability act:** | **Yes [ ]  No [x]**  |
| **Staff happy to work under Lifeways Group policies and procedures: Yes [x]  No [ ]**  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Training:** | **Undertaken:** | **Date completed:** | **Certificate available:** |
| **Emergency First Aid at Work (including CPR) (3 yrs) or Basic Life Support (1 year)** | **Yes [x]  No [ ]**  | 12/11/2021 | **Yes [x]  No [ ]**  |
| **Manual Handling Theory (3 yrs)** | **Yes [x]  No [ ]**  | 12/11/2021 | **Yes [x]  No [ ]**  |
| **Food Hygiene Level 2 (3yrs)** | **Yes [x]  No [ ]**  | 12/11/2021 | **Yes [x]  No [ ]**  |
| **Health & Safety incl. Risk Assessment (3 yrs)** | **Yes [x]  No [ ]**  | 12/11/2021 | **Yes [x]  No [ ]**  |
| **Equality and Diversity (once only)** | **Yes [x]  No [ ]**  | 12/11/2021 | **Yes [x]  No [ ]**  |
| **Fire (1 year)** | **Yes [x]  No [ ]**  | 12/11/2021 | **Yes [x]  No [ ]**  |
| **Infection Control (3 years)** | **Yes [x]  No [ ]**  | 12/11/2021 | **Yes [x]  No [ ]**  |
| **Safeguarding of Vulnerable Adults (2 yrs)** | **Yes [x]  No [ ]**  | 12/11/2021 | **Yes [x]  No [ ]**  |
| **Manual Handling Practice (1 yr)** | **Yes [x]  No [ ]**  | 12/11/2021 | **Yes [x]  No [ ]**  |
| **Service specific training records:** |
| **Care certificate complete:** | **Yes [x]  No [ ]**  | 12/11/2021 | **Yes [x]  No [ ]**  |
| **If care certificate not complete, detail why:**       |
| **Other training (please specify):**       |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Completed by:** | A.Ishola | **Position:** | A.Ishola | **Date:** | 12.11.2021 |
| **Lifeways Group approval:** |
| **Approved by:** |       | **Position:** |       | **Date:** |      /     /      |