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| **Agency name:** | City Force Healthcare | | |
| **Agency worker name:** | Patricia Osahenmwinda | **Known as:** | Patricia |
| **Address:** | Office 140  Building 3 Leeds City West  Business Park  Leeds 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  No** |
| **DBS returned:** | **Yes  No** | **DBS Risk assessment required:** | **Yes  No** |
| **Fit for work:** | **Yes  No** | **Hep B:** | **Yes  No** |
| **Job Role to be undertaken:** | Healthcare Assistant | | **VAT Applicable:**  **Yes**  **No** |

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

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

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