

## Sir Henry Recruitment Healthcare

***\*Please bring original documents for registration.***

Registration Check List	
First Name & Surname	
Date of Birth	
Address	
Post Applied for	
Date	

No.	Document	Document Provided/Copied	Date Checked	Checked by	Counter Signed by
1	Photographic ID				
2	Proof of Address				
3	Work Permit				
4	Birth certificate				
5	National Insurance No.				
6	Bank Account No.				
7	NMC Registration No.				
8	NISCC Registration No.				
9	Driver's Licence				
10	AccessNI reference No.				
11	Indemnity Insurance (Union)				
12	Passport size Picture				

Training			
No.	MANDATORY	Date Achieved	Checked By
1	Basic Life Support & First Aid		
2	Manual Handling		
3	Infection Prevention & Control		
4	Protection of Vulnerable Adults		
5	Safeguarding Children		
6	Fire Safety		
7	Administration of Medicines		
8	Health & Safety at Work, including COSHH & RIDDOR		

9	Hand Hygiene		
10	Complaints Handling		
11	Food Hygiene		
12	Staff Handbook		
13	Conflict Resolution		
<b>Other Training</b>			
	MAPA		
	MCA & DOLs		

***You will be required to complete a Health Declaration Form which is STRICTLY CONFIDENTIAL. \*Please note all serology reports need to be of a verifiable nature (stamped/signed) and MUST be from a UK based laboratory. These can be requested from your GP.***

Disease	Please indicate if you have submitted serology reports
Hepatitis B	
Hepatitis C	
HIV 1 & 2	
Varicella (Chickenpox)	
Tuberculosis (BCG)	
Rubella (German measles)	
Measles	

## Sir Henry Recruitment Healthcare

<b>Induction Check List</b>		
<b>1</b>	Introduction to Sir Henry Recruitment	
<b>2</b>	Staff Handbook	
<b>3</b>	Job Description	
<b>4</b>	Employment History:  Experience:  Clinical Skills:  Placement preference:	
<b>5</b>	Terms & Conditions of Employment Contract	
<b>6</b>	Uniform (size )/dress code/Name Badge/ID photo	
<b>7</b>	Important Contact Numbers/On Call	
<b>8</b>	Timesheets, Induction Checklist, Self-booking	
<b>9</b>	Rates of Pay	
<b>10</b>	Policies & Procedures (incl. Privacy Policy)	
<b>11</b>	Training & Development; Revalidation; Appraisal; Supervision	
<b>12</b>	Working Time Regulations	
<b>13</b>	NMC/NISCC Registration & maintenance	
<b>14</b>	Incident Reporting Policy	
<b>15</b>	Safeguarding Vulnerable Adults	
<b>16</b>	Whistleblowing/Reporting Concerns	
<b>17</b>	Absenteeism/Sickness/Shift Cancellation	
<b>18</b>	Referral Programme	
<b>19</b>	AccessNI Application Pack	
<p><b>Interviewer:</b> _____</p> <p>Position: _____</p> <p>Signature: _____</p> <p>Date: _____</p>		

**Interviewee:** \_\_\_\_\_

I declare and confirm all the above was discussed at registration. I have read and understand the contents of the Handbook and Policies and Procedures.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\*Following a successful Interview and registration, you are required to apply for **AccessNI check** online. You will need the Agency's **PIN Number 794083**.