



Candidate Checklist Form

Healthcare Solutions Services Ltd
Marsh Way, Rainham. RM13 8EU
Tel No: 020 8596 5067
Fax No: 020 8181 6777

Nurses, HCA's & Social Workers

- A completed application form
- 2 proofs of address dated within the last 3 months (**Inland Revenue documents, and Mobile phone bills are not accepted**)
- 4 Passport Photographs
- A CV documenting your full employment history with all gaps covered
- Passport / Visa if applicable Right to work or other
- Photographic ID
- Passport
- Driving Licence
- European ID Card
- HMR Forces Card
- A card with the pass accreditation
- Biometric Permit
- Driving Licence/insurance if applicable
- NMC statement of entry (**If you don't have this document you can request it from the NMC on 020 7333 9333**) **Only applies to nurses**
- **HCPC Registration card, diploma in social work certificate (only applies to Social Workers)**
- Qualification (**i.e. diploma or NVQ2 for HCAs**)
- RGN's medicine administration training certificate
- PMVA Training for mental health trusts
- DBS Application form and payment £55- (**Unfortunately we do not accept cheques. We accept Cash or postal orders only**). If you already have the online DBS update service we do accept. Please provide us with the certificate number and DBS certificate
- Oversea Police Check if applicable
- 2 x clinical references from your 2 most recent places of employment over three years. Or one covering five years.
- Professional Indemnity Insurance
- Proof of your National Insurance number, please note this must be in the form of your NI card, P45, P60 or other Department of Work and Pensions document



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- Contract of Services form
- Induction checklist signed and dated
- Bank details
- Starter Checklist or a P45
- Interview
- Self-Assessment form (**Qualified Nurses**)
- Occupational Health form
- Literacy Test Form Completed
- Numeracy Test Form Complete
- IR35 Form if applicable
- Certificate of incorporation
- VAT Certificate
- Proof of immunity for the following:-

-Measles

In order to get you cleared by the Occupational Health team, please provide a signed & dated statement from your family doctor or occupational health provider confirming the dates of your two vaccinations or serology result

-Rubella

In order to get you cleared by the Occupational Health team, please provide a signed & dated statement from your family doctor or occupational health provider confirming the dates of your two vaccinations or serology result

-Hepatitis B

Please provide a signed & dated statement showing the dates of your primary course, along with an Identified Validated Surface (IVS) antibody titre blood test result (HBsAb) from your family doctor or occupational health provider confirming your titre level is 100 or over

-Hepatitis B Antigen

Please provide documentary evidence of the date and result of an IVS antigen test (HBsAG). This must be dated within the last 12 months.

-TB/BCG Scar

Please provide a signed & dated statement from your family doctor or an occupational health provider confirming the date of vaccination and presence or absence of a BCG scar

-Varicella

If you have had Varicella/Chickenpox please see the Varicella self-declaration form attached



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The following mandatory skills for health aligned training certificates dated within the last 6 months:-

- Lone Worker
 - Safeguarding Adults Level 1, 2, or 3
 - Safeguarding Children Level 1, 2 or 3
 - Fire Safety
 - Health & Safety
 - Infection Control Level 1 or 2
 - Conflict Resolution
 - Information Governance
 - Manual Handling level 1 or 2
 - Resuscitation
 - Complaints Handling
 - Equality and Diversity
 - Mental Capacity Act
 - Radicalisation prevention level 1, 2 3, 4, and 5
 - ILS Certificate (Nurses)
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