



Agreement for the Provision of Occupational Health Services

**Agreement between Sheffield Teaching Hospitals NHS FT
(Sheffield Occupational Health Service (SOHS))**

and

[Name of Purchasing Organisation]

THIS AGREEMENT is dated

PARTIES:

- (1) **Sheffield Teaching Hospitals NHS FT** whose principal office is at 8 Beech Hill Road, Sheffield, S10 2SB (**the "Provider"**)
- (2) **[Insert Company Name]** whose principal office is at **[Insert Address]** (**the "Purchaser"**)

Definitions and Interpretation

Fundamental Standards of Care – the requirements set out in regulations 9 to 19 of the 2014 Regulations

Good Practice – using standards, practices, methods and procedures conforming to the Law and reflecting up-to-date published evidence and using that degree of skill and care, diligence, prudence and foresight which would reasonably and ordinarily be expected from a skilled, efficient and experienced clinical services provider and a person providing services the same as or similar to the Services at the time the Services are provided.

Lessons Learned - experience derived from provision of the Services or otherwise, the sharing and implementation of which would be reasonably likely to lead to an improvement in the quality of the Provider's provision of the Services.

Patient Safety Incident - any unintended or unexpected incident that occurs in respect of a Service User, during and as a result of the provision of the Services, that could have led, or did lead to, harm to that Service User.

Review Meeting - a meeting to be held in accordance with Clause 15.

Service User - a patient or service user for whom a Purchaser has responsibility and who receives Services under this Agreement.

1 Introduction

- 1.1 This Agreement specifies the arrangements for the provision of a comprehensive occupational health service to the Purchaser by the Sheffield Occupational Health Service (SOHS), hereafter referred to as the Provider, in accordance with Schedule 1 – Service Specification.

2 Duration

- 2.1 This Agreement shall commence on the [insert date] for a period of 12 months (the **Initial Term**). Unless terminated in accordance Clause 18 - Termination, this Agreement shall automatically extend for 12 months (the **Extended Term**) at the end of the Initial Term, and at the end of each Extended Term.

3 Prices and Payment

- 3.1 The agreed annual charge for the provision of this service is detailed in Schedule 2 – Prices and Payment
- 3.2 The Purchaser will be invoiced on a quarterly basis. Invoices will be paid within 30 days of the date of the invoice

4 Staffing

- 4.1 The Provider will ensure that there are sufficient appropriately registered, qualified and experienced medical, nursing and other clinical and non-clinical Staff to enable the Services to be provided in all respects and at all times in accordance with this Agreement.
- 4.2 The Provider will ensure that all Staff if applicable:
 - 4.2.1 are registered with and where required have completed their revalidations by the appropriate professional regulatory body.
 - 4.2.2 have the appropriate qualifications, experience, skills and competencies to perform the duties required of them and are appropriately supervised (including where appropriate through preceptorship, clinical supervision and rotation arrangements), managerially and professionally.
 - 4.2.3 Are covered by the Provider's Indemnity Arrangements for the provision of the Services.
 - 4.2.4 carry, and where appropriate display, valid and appropriate identification.
- 4.3 The Provider will have in place systems for seeking and recording specialist professional advice including access to a named occupational health physician, and must ensure that every member of staff involved in the provision of the Services receives:
 - 4.3.1 proper and sufficient induction, continuous professional and personal development, clinical supervision, training and instruction.
 - 4.3.2 full and detailed appraisal (in terms of performance and on-going education and training); and
 - 4.3.3 professional leadership appropriate to the Services and the standards of their relevant professional body, if any.
- 4.4 Before the Provider engages or employs any person in the provision of Services or in any activity related to or connected with, the provision of Services, the Provider must, at its own cost, comply with:
 - 4.4.1 NHS Employment Check Standards or the Purchaser's employment check standards as required; and
 - 4.4.2 other checks as required by the DBS or which are to be undertaken in accordance with current and future national guidelines and policies.

5 Liability and Indemnity

- 5.1 Without affecting its liability for breach of any of its obligations under this Agreement, the Purchaser will be liable to the Provider for, and must indemnify and keep the Provider indemnified against:
 - 5.1.1 any loss, damages, costs, expenses, liabilities, claims, actions and/or proceedings (including the cost of legal and/or professional services) whatsoever in respect of:
 - 5.1.1.1 any loss of or damage to property (whether real or personal); and
 - 5.1.1.2 any injury to any person, including injury resulting in death; and;
 - 5.1.1.3 any Losses of the Provider, that result from or arise out of the Purchaser's negligence or breach of contract in connection with the performance of this Agreement except insofar as that loss, damage or injury has been caused by

any act or omission by or on the part of, or in accordance with the instructions of, the Provider, their Staff or agents.

5.2 Without affecting its liability for breach of any of its obligations under this Agreement, the Provider will be liable to the Purchaser for, and must indemnify and keep the Purchaser indemnified against:

5.2.1 any loss, damages, costs, expenses, liabilities, claims, actions and/or proceedings (including the cost of legal and/or professional services) whatsoever in respect of:

5.2.1.1 any loss of or damage to property (whether real or personal); and

5.2.1.2 any injury to any person, including injury resulting in death; and

5.2.1.3 any Losses of the Commissioner, that result from or arise out of the Provider's negligence or breach of contract in connection with the performance of this.

Agreement or the provision of the Services (including its use of Equipment or other materials or products, and the actions or omissions of Staff in the provision of the Services), except insofar as that loss, damage or injury has been caused by any act or omission by or on the part of, or in accordance with the instructions of, the Purchaser, its employees, or agents.

5.2.2 The Provider will put in place and maintain in force at its own cost (and not that of any employee) appropriate Indemnity Arrangements in respect of:

5.2.2.1 employers' liability.

5.2.2.2 clinical negligence, where the provision or non-provision of any part of the Services (or any other services under this Agreement) may result in a clinical negligence claim.

5.2.2.3 public liability; and

5.2.2.4 professional negligence.

6 Consent

6.1 The Provider will publish, maintain, and operate a Service User consent policy which complies with Good Practice and the Law.

7 Clinical Governance

7.1 The Provider will use standards, practices, methods, and procedures conforming to Good Practice and the Law and reflecting up-to-date published evidence and using that degree of skill and care, diligence, prudence, and foresight which would reasonably and ordinarily be expected from a skilled, efficient and experienced clinical services provider including compliance with the Faculty of Occupational Medicine's guidance on ethics.

7.2 The Provider will maintain an annual audit plan as required by SEQOHS standards. The Provider will participate in national audits of occupational health where appropriate.

7.3 The Provider will measure, monitor and analyse its performance, continually review and evaluate the Services, and will implement Lessons Learned from those reviews and evaluations, from feedback, complaints, Patient Safety Incidents, and Service User, Staff, and Purchaser involvement and must demonstrate at Review Meetings the extent

to which Service improvements have been made as a result and how these have been communicated to Service Users and the Purchaser.

8 Research

- 8.1 The Provider will contribute to research and development compliant with published professional guidance, as agreed with the Purchaser.

9 Service Continuity

- 9.1 The Provider will have business continuity plans in place to deal with the loss or unavailability of key members of the occupational health team or in the event of force majeure, e.g. fire, pandemic, etc.

10 Communicating with Service Users and Staff

- 10.1 The Provider will actively engage, liaise and communicate with Service Users or their representatives in an open and clear manner seeking their feedback whenever practicable

11 Purchaser's Responsibilities

- 11.1 The Purchaser will cooperate with the Provider in facilitating the maintenance of an accurate employee database.
- 11.2 The Purchaser will ensure that recruiting managers will have completed a risk assessment for each job area detailing any special requirements of the job.
- 11.3 The Purchaser's HR department will be responsible for ensuring relevant applicants identified from risk assessment receive the employment medical questionnaire for new starters and are told to return it direct to the Provider.
- 11.4 The Purchaser will ensure that all new clinical recruits identified by SSOHS as needing to be seen, make an appointment with the Provider within two weeks of the start date, to have their immunisation status updated and checks undertaken.
- 11.5 The Purchaser, as the employer, is responsible for RIDDOR reporting. Should the Provider identify a RIDDOR reportable condition, they will notify the contract lead and/or health and safety manager. If the Provider identifies or suspects that an employee has an occupational disease, the employee will be assessed by a Consultant Occupational Physician prior to informing the Purchaser (employer). Should the employee require further treatment, the COP will write to the employees GP, providing details as appropriate. The Provider will ensure that all necessary information will be available to HSE on request.

12 Facilities and Equipment

- 12.1 The Provider will ensure that any facilities they provide will comply with the Fundamental Standards of Care requirements set out in regulations 9 to 19 of the 2014 Regulations.
- 12.2 Where premises are provided by the Purchaser both parties will work together and take reasonable steps to ensure that the facilities are safe, appropriate, accessible and respect the Service Users' rights to privacy and dignity.
- 12.3 Unless stated otherwise in this Agreement, the Provider will at its own cost provide all Equipment necessary to provide the Services in accordance with the Law and any necessary Consent's.

- 12.4 The Provider will ensure there are suitable arrangements for the purchase, service, maintenance, renewal and replacement of equipment. These arrangements will make sure that they meet the requirements of current legislation and guidance, manufacturers' instructions and the Provider's policies or procedures.
- 12.5 Where the Provider is delivering an immunisation service dedicated vaccine refrigerators will be provided and maintained.
- 12.6 The Provider will ensure that all Staff using equipment have received appropriate and adequate training and have been assessed as competent in the use of that Equipment.

13 Confidentiality and Data Protection

- 13.1 The Parties will comply with Data Protection Legislation, Data Guidance, the FOIA and the EIR, and must assist each other as necessary to enable each other to comply with these obligations.
- 13.2 The Provider will report and publish any Data Breach and any Information Governance Breach in accordance with IG Guidance for Serious Incidents.
- 13.3 The Provider will have in place a communications strategy and implementation plan to ensure that Service Users are provided with or have made readily available to them Privacy Notices.
- 13.4 Service Users have the right to see and have copies of their health records, including the content of any employer referral letters. The Provider is required to inform Service Users of their right to see reports before they are sent to the Purchaser.
- 13.5 Whether or not a Party is a Data Controller or Data Processor will be determined in accordance with Data Protection Legislation and the ICO Guidance on Data Controllers and Data Processors and any further Data Guidance from a Regulatory or Supervisory Body.
- 13.6 The Parties have indicated that the Provider is a Data Controller for the purposes of this Agreement.
- 13.7 The Provider will ensure that all Personal Data processed by or on behalf of the Provider in the course of delivering the Services is processed in accordance with the relevant Parties' obligations under Data Protection Legislation and Data Guidance.
- 13.8 In relation to Personal Data processed by the Provider in the course of delivering the Services, the Provider will publish, maintain and operate:
 - 13.8.1 policies relating to confidentiality, data protection and information disclosures that comply with the Law, the Caldicott Principles and Good Practice.
 - 13.8.2 policies that describe the personal responsibilities of Staff for handling Personal Data.
 - 13.8.3 agreed protocols to govern the sharing of Personal Data with partner organisations; and
 - 13.8.4 where appropriate, a system and a policy in relation to the recording of any telephone calls or other telehealth consultations in relation to the Services, including the retention and disposal of those recordings, and apply those policies and protocols conscientiously.

14 Intellectual Property

- 14.1 Except as set out expressly in this Agreement no Party will acquire the IPR of any other Party.
- 14.2 The Provider grants the Purchaser a fully paid-up, non-exclusive, perpetual licence to use the Provider Deliverables for the purposes of the exercise of their statutory and contractual functions and obtaining the full benefit of the Services under this Agreement.
- 14.3 The Purchaser grants the Provider a fully paid-up, non-exclusive licence to use the Purchaser Deliverables for the sole purpose of providing the Services.

15 Performance Management and Metrics

- 15.1 Intervention processing times are detailed in the service specification. A summary of all interventions will be provided on a quarterly basis to support invoicing.

16 Queries and Complaints

- 16.1 Queries and complaints will be dealt with as swiftly as possible and at the local level initially. This would be between the named manager and the named OH contact.
- 16.2 If a complaint is not resolved satisfactorily it can be escalated and referred to the Clinical Director, Sheffield Occupational Health Service.
- 16.3 If complaints are unresolved after 20 working days the complaint will be escalated and referred to the Purchaser's responsible Director. At this stage both parties will consider independent arbitration if the complaint cannot be resolved.
- 16.4 Formal complaints will be anonymised and reported and monitored via the quarterly Review process.

17 Variations

- 17.1 Any Variation to this Agreement can only be made in writing and with agreement from both parties.

18 Termination

- 18.1 In accordance with Clause 2 – Duration, this Agreement will continue unless the Purchaser gives 3 months' notice in advance of the end of the Initial Term or the Extended Term.
- 18.2 The Provider may terminate this Agreement with immediate effect, by written notice if at any time the aggregate undisputed amount due to the Provider from the Purchaser exceeds 25% of the Annual Agreement Value and full payment is not made within 20 Operational Days of receipt of written notice from the Provider and requiring payment to be made.
- 18.3 The Purchaser may terminate this Agreement or any affected Service, with immediate effect, by written notice if:
 - 18.3.1 the Provider ceases to carry on its business or substantially all of its business;
 - or

- 18.3.2 a Provider Insolvency Event occurs; or
 - 18.3.3 the Provider is in persistent or repetitive breach of the Key Performance Requirements; or
 - 18.3.4 the Provider is in material breach of any regulatory compliance standards issued by any Regulatory or Supervisory Body; or
 - 18.3.5 the Provider has been issued with any enforcement or penalty notice under the DPA 2018; or
 - 18.3.6 the Provider or any member of Staff is found guilty or admits guilt in respect of an offence under the DPA 2018, in relation to any matter connected with this Agreement; or
 - 18.3.7 the Provider fails to obtain any Consent; or loses any Consent; or has any Consent varied or restricted, and that is reasonably considered by the Purchaser to have a material adverse effect on the provision of the Services.
- 18.4 On or pending expiry or termination of this Agreement or termination of any Service the Provider, and if appropriate any successor provider, will agree a Succession Plan.
- 18.5 The Provider will co-operate fully with the Purchaser and any successor provider of the terminated Services to ensure continuity and a smooth transfer of the expired or terminated Services. To avoid any inconvenience or any risk to the health and safety of Service Users, the Provider will deliver to the Purchaser all records, materials, papers, documents, and operating manuals owned by the Purchaser and used by the Provider in the provision of any terminated Services at a cost to the Purchaser. The transfer of records will be undertaken in line with the SOHS Transfer of Records Policy.
- 18.6 On expiry or termination of this Agreement or termination of any Service:
- 18.6.1 the Purchaser will ensure that no further Service Users are referred to the Provider.
 - 18.6.2 the Provider will stop accepting any Referrals that require any expired or terminated Service; and
 - 18.6.3 the Provider will immediately cease its management of Service Users requiring the expired or terminated Service.

19 Representatives

19.1 The Provider shall appoint a Provider's Representative and a deputy and the Purchaser shall appoint a Purchaser's Representative and a deputy. The Parties shall promptly notify the other of any change in the identity of the Representatives or deputies.

19.2 The Commissioner's Representative and deputy shall be:

	Representative	Deputy
Name		
Address		
Phone Number		
Email Address		

19.3 The Provider's Representative and deputy shall be:

	Representative	Deputy
Name	Rachel Henchley Head of Service	Theresa Sharpe Operational Manager
Address	Sheffield Occupational Health Service Silverwood Northern General Hospital Herries Road Sheffield S5 7AU	Sheffield Occupational Health Service Silverwood Northern General Hospital Herries Road Sheffield S5 7AU
Phone Number	0114 271 4523	0114 271 5709
Email Address	Rachel.henchley@nhs.net	T.sharpe@nhs.net

20 Governing Law and Jurisdiction

20.1 This Agreement will be considered as an Agreement made in England and will be subject to the laws of England.

Agreement for the Provision of Occupational Health Services between Sheffield Teaching Hospitals NHS FT and [Name of Purchasing Organisation]

Signatures

Signed for and on behalf of **Sheffield Teaching Hospitals NHS FT**

.....
Signature

.....
Position

.....
Date

Signed for and on behalf of **[name of purchasing organisation]**:

.....
Signature

.....
Position

.....
Date

SHEFFIELD OCCUPATIONAL HEALTH SERVICE

SERVICE DESCRIPTION

Services will be provided to the Purchaser as and when required which may not include all 'core' occupational health service provision as detailed in this description.

INTRODUCTION

This Service Description specifies the arrangements for the provision of a comprehensive occupational health service to [name of purchasing organisation], hereafter referred to as the Purchaser, by the OH service, hereafter referred to as the Provider.

Sheffield Occupational Health Service (SOHS) provides a complex managed clinical service. It provides a mix of high frequency transactions (e.g. referrals and immunisations) with lower frequency events that can have a high impact and are highly valued by managers and staff but are difficult to measure (e.g. doctors in difficulties).

The delivery of the OH service is underpinned by the following principles;

- Strong focus on a high quality, clinically-led, evidence-based service
- An equitable and accessible service
- Impartial, approachable and receptive to both clients and employer
- Contribute to improved organisational productivity
- Work in partnership with all NHS organisations and within the community
- Underpinned by innovation
- Offer diversity and depth of specialisation and training opportunities

This document defines in practical terms the responsibilities of both parties (Purchaser and Provider) and supplements the formal legal agreement as defined.

ACCREDITATION

The Provider is fully SEQOHS accredited (the national accreditation scheme for OH providers) against the six [A-F] national standards for Occupational Health (or has completed the preparation for re-accreditation and is awaiting a date for an accreditation visit from the SEQOHS assessment team). The Provider will be able to provide evidence of conformity with each SEQOHS standard whenever this is requested by the Purchaser.

A. Business probity	Business integrity and financial propriety
B. Information governance	Adequacy and confidentiality of records
C. People	Competency and supervision of occupational health staff
D. Facilities and equipment	Safe, accessible and appropriate
E. Relationships with purchasers	Fair dealing and customer focus
F. Relationships with workers	Fair treatment, respect and involvement

MINIMUM SERVICE STANDARDS

The Provider will also make services available that meet a minimum specification based on the following six core services:

Prevention	The prevention of ill health caused or exacerbated by work
Timely intervention	Early treatment of the main causes of absence in the NHS
Rehabilitation	A process to help staff stay in or return to work after illness
Health assessments for work	Supporting organisations to manage attendance and retirement
Promotion of health and wellbeing	Using the workplace to promote improved health and wellbeing
Teaching and training	Promoting the health and wellbeing approach amongst all staff and ensuring the availability of future occupational health staff

SHEFFIELD OCCUPATIONAL HEALTH SERVICE

STANDARD SERVICE DESCRIPTION

1 PRE-EMPLOYMENT SCREENING

1.1 This is carried out to:

- Identify any health problems with occupational implications
- Advise the employer and employee appropriately
- Ensure that adjustments needed to accommodate ill health or disability are identified
- Ensure that health problems that pose a risk to the organisation or its clients are appropriately managed.

1.2 An electronic questionnaire-based screening procedure will be used to undertake pre-employment health screening for successful applicants only. All successful applicants will undergo an occupational health screening prior to confirmation of appointment.

Employees who change posts within the organisation should undergo occupational health screening if the health requirements of the new post differ significantly from those of the old, or if a health problem is identified in the recruitment process.

Occupational health screening will normally be carried out by questionnaire, but for certain posts direct assessment will be required. These include: -

- All appointees with potentially significant health problems identified by questionnaire or elsewhere in the recruitment process (e.g., from references)
- Drivers responsible for the transport of patients / clients

The procedure will ensure that all relevant information about the post and the appointee is available to the Occupational Health Service at the time of screening.

1.3 Procedure for Pre-employment Screening

Assessment of fitness will be made on the basis of the questionnaire screening, and telephone or face to face assessment if required and where necessary information obtained by SOHS with the consent of the appointee from other relevant health professionals.

The successful candidate will be sent a link to the Occupational Health questionnaire which, once completed, is returned confidentially via the Cority electronic portal

The Occupational Health Nurse (OHN) will scrutinise the questionnaire and dependent on the information therein will either: -

- Issue an electronic Certificate of Health Clearance via Cority
- Arrange to telephone or see the individual
- Arrange an appointment with the Occupational Physician

If the appointee needs to be seen, the OHN will send an appointment by email to the appointee and update Cority which will notify the appointing officer within two working days of receipt of the questionnaire.

Where necessary, SOHS will seek appropriate information from the candidate's general practitioner or other clinicians. If this gives rise to further delay, the appointing officer will be notified via Cority.

On completion of the health screening procedure the appropriate Appointing Officer/Personnel Department will be issued with a Health Clearance Certificate, or a letter detailing restrictions, limitations or adjustments to be made to the proposed work via Cority.

Once the Health Clearance Certificate has been issued, the HR Officer will confirm the appointment and arrange for a commencement occupational health appointment if appropriate.

1.4 **Response times**

From receipt of adequately completed electronic questionnaire, without potential health problems identified, SOHS will provide a response within two working days.

If an appointment is required, the first appointment offered will be within ten working days.

Commencement appointments will be available for all appointees within 2 weeks of their employment, if required.

2 **COMMENCEMENT HEALTH INTERVIEW**

The "commencement health interview" will be with the OHN and, depending on the work activities may include: -

- Recording of baseline health surveillance information
- Immunisation in accordance with the agreed protocol

3 **MANAGEMENT REFERRALS**

Health assessment will be provided in the course of employment to assist in the management of: -

- Short-term sickness absence
- Long term sickness absence including return to work and rehabilitation
- Capability issue
- Termination of employment on grounds of ill health including ill health retirement
- Where health problems otherwise impact on work

SOHS will provide the organisation and its employees with impartial advice. The employer will recognise that managers must retain the responsibility for subsequent decisions based on that advice.

Health assessments will be carried out by appropriate clinicians including Specialist OH nurses, Occupational Physicians and OT and physiotherapists with OH expertise, and trainee OH clinicians working under supervision of senior staff.

3.1 Referral Procedures

- All referrals will be made electronically via Cority to a format agreed between the employer and the SOHS
- Appointments will normally be offered to employees either utilising 'Attend Anywhere', onsite at a local occupational health clinic (NGH or RHH), or telephone as clinically appropriate.
- Appointments will be notified to employees by email and mobile text message, as appropriate. Referring managers will be notified of the appointment via the Cority
- Appointments will normally be offered to the service user within 10 working days of the referral date
- Urgent appointments may be arranged if deemed appropriate by senior SOHS clinical staff only.

3.2 Information and Communication

- The manager must ensure that the employee is fully informed of the reasons for referral, and the questions being asked about his/her health prior to sending the referral to SOHS. A copy of the referral must be provided to the employee.
- The OH clinician will inform the employee of the outcome of the assessment at the end of the consultation, and a copy of the report will be sent to them routinely.
- Employees have the right to see the report prior to its despatch to the manager, where this is requested, the manager will be informed that there will be a delay.
- The results of the assessment will be conveyed to the manager via Cority. A copy of this report will also be sent electronically to the employee. Where appropriate, the Medical Staff may communicate with the employee's general practitioner.
- All management referral letters will be confidential between SOHS, the employee, the manager, and the response letter is similarly confidential.
- Employees can request a copy of their occupational health records under GDPR.

Home Visits

Home visits will be available only where the employee is genuinely housebound, and this decision will be made by the Medical Staff.

Cancellations and DNAs

All cancellations within 24 hours, and all “did not attends” will be counted as activity for the purpose invoicing

4 IMMUNISATION PROGRAMMES

The SOHS will provide programmes to ensure that employees are protected against occupationally acquired infection by appropriate immunisation programmes. Immunisation will be provided in accordance with local policies and national guidelines.

5 INFECTION PREVENTION AND CONTROL

In addition to immunisation programmes SOHS will assist the purchaser in the provision of infection prevention and control activities for its employees and third parties e.g. students working on the purchaser’s premises including provide: -

- Management of sharps injuries and blood and body fluid exposure incidents including provision of post exposure prophylaxis for HIV and Hepatitis B as appropriate
- Screening, provision of prophylaxis and advice on exclusion from workplace for staff exposed to infection in the course of their work e.g., meningitis exposure
- Advice on exclusion for staff exposed non occupationally to infectious disease which may pose a risk to patients e.g., measles exposure in family
- Advice to employees on ability to work when affected by infectious or potentially infectious conditions e.g., shingles, whitlows
- Large scale screening of contacts in outbreak or contact situations e.g., TB contacts, MRSA screening of staff
- Participation in Infection Prevention and Control committees and working groups as required
- Ad hoc participation in IPC activities as required to address staff issues

6 INVESTIGATION OF WORKPLACE HAZARDS AND POSSIBLE OCCUPATIONAL ILL HEALTH

Working with the organisation’s Health & Safety Officer, SOHS will support as requested by the Purchaser in:

The recognition of actual or potential workplace hazards prior to ill-health occurring.

The recognition of work-related health effects and, where necessary, by case finding, to determine the extent of the problem by: -

- Responding to reports of potential or actual workplace hazards or ill health by investigating the problem fully, keeping both manager and the employee informed of progress as relevant and advising managers when further investigation is required
- Developing a programme of regular visits to workplaces throughout the organisation to carry out OH surveys, looking specifically for actual and potential hazards and to discuss with managers, supervisors, and employees any occupational health concerns they may wish to raise. This programme will ensure that each area is visited at least annually, if required by the Purchaser.

7 ADVICE TO MANAGERS AND WORKFORCE ON OCCUPATIONAL HEALTH ISSUES

SOHS will provide an advisory service on occupational health issues by providing:

- Ad hoc advice in response to requests from employees, managers, or employee representatives
- Input to formal training programmes as appropriate

SOHS will assist the organisation in reviewing its procedures or advise on procedures as required.

8 HEALTH SURVEILLANCE

Working with the organisation's Health and Safety Officers and Risk Managers, SOHS will develop a programme of Health Surveillance to meet legislative requirements. This will include the requirements of: -

- The Management of Health at Work Regulations 1992
- Control of Substances Hazardous to Health Regulations 1988 and amendments
- Display Screen Equipment Regulations 1992
- Working Time Regulations 1998

As appropriate, the Health Surveillance may take the form of: -

Questionnaire screening	(Night Workers)
Vision screening	(DSE Regulations)

The programme may also extend health surveillance to employees for whom there is no legislative requirement but where good employment practice suggests it is appropriate.

Schedule 2 - Prices and Payment

For annually reviewed agreements

Prices are subject to annual review and uplift in line with inflation (CPI)]

Intervention	EMPLOYER RATE
PRE-EMPLOYMENT ACTIVITY	
Questionnaire screening	£28.39
Request for further information by email sent & received by OH	£33.52
Pre-commencement - telephone assessment (OHN)	£40.36
Pre-commencement - telephone assessment (SpN)	£61.14
Pre-commencement - Face to Face (OHN)	£40.36
Pre-commencement - Face to Face (SpN)	£61.14
Pre-commencement - Telephone or Face to Face (Doctor)	£146.30
Immunisation Screening appointment	£40.36
VACCINATIONS/IMMUNISATIONS	
Influenza Vaccination	£11.90
Hepatitis B per dose	£25.16
Hepatitis B per dose (Fendrix)	£86.07
MMR per dose	£23.78
Varicella per dose	£50.39
Pertussis	£46.32
Immunisation appointment	£26.91
BCG	£0.00
SEROLOGY	
Hepatitis B Serology AHBS	£21.88
Hepatitis B Core Antibody	£21.88
Hepatitis B Surface Antigen	£21.88
Hepatitis C Serology Antibodies	£20.95
Hepatitis C RNA	£52.24
HIV	£15.88
Rubella Serology	£22.46
Measles Serology	£27.31
Varicella Serology	£32.85
Quantiferon	£55.68
Blood appointment	£26.91
ADVICE	
Clinical (Doctor) - per episode telephone/email	£62.21
Clinical (SpN) - per episode telephone/email	£21.96
Clinical (OHN) - per episode telephone/email	£18.30
REVIEWS/ASSESSMENTS	
Skin assessment - initial face to face appointment	£41.72
Skin assessment - follow up	£23.04
MANAGEMENT REFERRALS	
Management referral initial - Doctor	£226.87
Management referral initial - SpN	£115.92