

Participation in Occupational Assessment, Screening and **Vaccination (OASV)**

This form is for Health Care Workers (HCW) who are applying for a position within Canberra Health Services (CHS), or students on clinical placement, where they are required to complete the assessment, screening, and vaccination process as part of their Category A position. Please read the Occupational Assessment, Screening and Vaccination Procedure available at Occupational Assessment, Screening and Vaccination Policy to understand your mandatory requirements.

Please complete the form in full and follow the steps on page two to complete your compliance requirements. Return the form and attached evidence to your recruitment officer.

Your Personal Details (ple	ase print):	
 ▲ Surname	▲ First Name	▲ Date of birth
Role	▲ Telephone / Mobile	Signature
Email		▲ Date

Note: If you are a known vaccine non-responder and/or have a medical contraindication to a vaccine, please also complete and submit the Vaccine Non-Responders and Staff with a Medical Contraindication to a Vaccine form (available from HR on request).

Please follow the below steps to complete your compliance:
Step 1:
Provide evidence of up to date (two (2) doses) mandatory TGA approved COVID-19 vaccinations .
Step 2:
Provide evidence of a Diphtheria, Tetanus, Pertussis (dTpa) vaccination within the last 10 years.
Step 3
Complete the Tuberculosis (TB) screening and assessment form (Attachment A).
Follow the instructions on the form if further screening is required.

Form 1 – Category A: Health Care Workers / Students



Step 4:

Provide evidence of protection against the following diseases (only one [1] form of evidence is required, except for Hepatitis B):

• Measles, Mumps, Rubella:

o Evidence of being born in or prior to 1966

OR

 Two (2) doses of the measles mumps and rubella vaccine OR

o Blood test result with detected IgG antibody for measles, mumps and rubella.

Varicella Zoster Virus (VZV) - chickenpox/shingles

Two (2) doses of VZV vaccine

OR

Blood test result with detected IgG antibody for VZV

OR

• Result with detection of VZV taken from a swab of a chickenpox or shingles rash.

• Hepatitis B:

 Blood test confirming anti-HBs equal to, or greater than 10mIU/mL (or documented evidence of anti-HBc or HBS antigen)

AND

 Documented evidence of age-appropriate course of Hepatitis B vaccinations (usually 3 doses, please inform OMU if you are unable to provide this evidence).

NOTE: If you cannot locate evidence of vaccination, **please book an appointment** with your GP for immunisation and/or blood tests to demonstrate your immunity.

Step 5:

Once Steps 1-4 have been completed, please email the document, and attached evidence to your recruitment officer.

Exposure Prone Procedures:

Exposure Prone Procedures (EPPs) are invasive procedures where there is potential for direct contact between the skin and sharp objects (surgical instruments, needles, sharp tissues, spicules of bone or teeth etc.) in body cavities or in poorly visualised sites including the mouth. Professions that perform EPPs include but are not limited to the following: surgeons, midwives, obstetricians, trauma physicians and nurses and all medical, dental and midwifery students.

Healthcare workers (HCW) or students who perform EPP's must take reasonable steps to know their Blood Borne Viruses (BBV) status at commencement of their employment and undergo testing for HBV, HCV and HIV at least once every three years as set out in the National Guidelines. Each year, healthcare workers who perform EPPs make a declaration to the Australian Health Practitioner Regulation Agency (AHPRA) at the time of annual registration renewal, stating that they are compliant with the National Guidelines.



Attachment A: Tuberculosis (TB) Assessment Tool

You must complete this form if you are applying for a position within CHS.

High incidence of TB means a TB Incidence of ≥ 40 cases per 100,000 persons. Before completing this form, review the list of countries with a high incidence on the NSW Health website. (https://www.health.nsw.gov.au/Infectious/tuberculosis).

Are you an overseas applicant? Please Choose:	☐ Yes	□ No	
If yes and immigrating from a high-risk country, please complete the below screening tool and attach the TB			
clearance information required for your VISA purposes (chest x-ray and TB QuantiFERON (blood test).			
Please note, you will be required to follow-up with the CHS Department of Respiratory and Sleep Medicine at 2			
months from the commencement of your employment.			
You must contact the Health Undertaking Service (HUS) within 4 weeks of your arrival in Australia (see			
https://immi.homeaffairs.gov.au/form-listing/forms/815.pdf for f	urther information).		

Part 1 – Screening Questions

Risk Assessment				
What is your country of birth?				
2. Is this a country of high incidence?	□ Yes □ No	0		
3. What date did you arrive/when is yo	our intended arrival dat	e in Australia:		
 Have you ever travelled or in lived in period of more than 3 months? □ 		ountries listed in the link above for a cumulative		
 Have you had a known household co suffered from TB? ☐ Yes 	ontact, or close contact \square No	(more than 8 hours) with someone who has		
•		ory physician, work in TB clinic, bronchoscopy, and mortuaries, or laboratory scientists working		
with <i>Mycobacterium tuberculosis</i> cu		□ No		
Current Symptom Assessment				
Do you currently have any of the following symptoms?				
► Cough for longer than 2 weeks	☐ Yes	□ No		
▶ Fever	☐ Yes	□ No		
► Haemoptysis (blood in sputum)	☐ Yes	□ No		
▶ Night sweats	☐ Yes	□ No		
▶ Recent unexplained weight loss	☐ Yes	□No		

Form 1 – Category A: Health Care Workers / Students



•	positive tuberculin skin test (TST) or interferon gamma release assay/TB QuantiFERON (IGRA) in the for active TB or Latent TB?
☐ Yes	□No
Department of Res Please contact Con DRSM office use: If	Yes" to any of the above, go no further. You MUST have a clinical review & clearance by CHS spiratory & Sleep Medicine to gain compliance with the OASV Procedure. Inmunity Health Intake to make booking on (02) 5124 9977. Ithe candidate answered yes, they will require clearance from DRSM. Once clearance granted, by to OMU for compliance to be granted.

Part 2: Required Evidence

ALL new staff and students require either a TST **OR** an interferon gamma release assay/TB QuantiFERON (IGRA) (blood test) within the last 3 years. TSTs must be undertaken by the Department Respiratory & Sleep Medicine or another appropriately accredited respiratory clinic (for a list of other appropriate clinics contact OMU on ph. 5124 2321). IGRA must be conducted by a National Association of Testing Authorities Australia accredited laboratory.

There are two options for accessing a TB TST or IGRA (blood test):

- 1. See your GP and ask for an IGRA Serology test
- 2. Contact the Department of Respiratory and Sleep Medicine at CHS via Community Health Intake on 5124 9977 to book a TST.

Please attach this evidence along with your other vaccination, immunisation and serology information.

Please note: Periodic TB re-screening is required for staff with frequent exposure to tuberculosis. Please ensure you remain compliant if your employment conditions place you in this category.

For OMU office use: If candidate answered no to all and IGRA/TST negative result attached, please grant compliance. For any candidates that answer "yes," await DRSM clearance.

If the candidate is applying from overseas, please ensure they provide details from their Visa application and grant Temporary Compliance with caveat that they must present to DRSM for a review 2 months after commencing employment.

Acknowledgement of Country

Canberra Health Services acknowledges the Traditional Custodians of the land, the Ngunnawal people. We acknowledge and respect their continuing culture and contribution to the life of this city and region.



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