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# Pre-Employment Health Assessment Policy

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## 1. Purpose

The Pre-Employment Health Assessment (PEHA) is a workforce tool used to support and screen applicants to ensure they possess the ability to perform the inherent duties of their proposed role. It enables the WA Country Health Service (WACHS) to provide a safer workplace environment for all healthcare workers (HCW) and consumers.

The risk of injury or illness to an individual can be eliminated or reduced through hazard identification, risk assessment, and implementation of control measures. The PEHA process will determine if the applicant is able to safely undertake the inherent requirements of the proposed position and whether reasonable workplace modifications are required to achieve this.

WACHS has duty of care obligations under Division 2, Section 19 of the *Work Health Safety Act 2020* and will ensure, so far as is reasonably practicable, that potential and current workers including volunteers are not exposed to risk of injury or harm. The PEHA process must adhere to requirements under the *Equal Opportunity Act 1984* by not unlawfully discriminating against potential employees on the grounds of impairment. WACHS is committed to building a diverse and inclusive workforce.

## 2. Policy

### 2.1 Scope

This policy applies to all workers attending WACHS sites/undertaking duties for WACHS including:

- an employee and/or prospective employee including permanent, temporary deployment or secondment
- any employee who is offered a role with significantly different duties to their current role
- an apprentice or trainee
- a volunteer.

See [Section 2.3](#) for the responsibility for pre-employment screening of following workers:

- a contractor or subcontractor
- an employee of a contractor or subcontractor
- an employee of a labour hire company who has been assigned to work in the person's business or undertaking.

See [Section 2.4](#) for screening requirements of unremunerated clinical observers.

### 2.2 Principles

A PEHA is required in the following circumstances:

- prior to engagement and/or commencement of all employees new to WACHS (N10)
- prior to employees commencing with WACHS on secondment from other Health Service Providers (HSP's) (N10)

- prior to a current WACHS employee transferring to a role with a significant change in duties e.g. non-clinical to patient-facing position (N10)
- if there is a break in service/contract (N10)
- all volunteers prior to engagement with WACHS (Volunteer PEHA form).

All offers of employment made by WACHS are conditional on the applicant being deemed fit to undertake the duties of the role including meeting the Infection Prevention and Control (IPC) and immunisation requirements related to their duties risk category (Refer to [WA Health: Health Care Worker Immunisation Policy](#)).

Certain occupations, particularly Health Care Workers (HCWs) have the potential to be at an increased risk of exposure to some Vaccine-Preventable Diseases (VPDs). This policy supports the minimum immunisation and immunity screening standards for Health Services and workers as defined in the WA Health Care Worker Immunisation Policy and recommendations from other organisations including the Australian Technical Advisory Group on Immunisation (ATAGI), the Australian Immunisation Handbook (2022)<sup>1</sup> and the National Health and Medical Research Council (NHMRC) Australian Guidelines for the Prevention and Control of Infection in Healthcare (2019)<sup>2</sup>.

The PEHA form will only be accepted and processed if it has been completed in full, with all requested evidence attached. Failure to provide requested evidence may result in contract delays. Refusal to comply with requests for further information (such as serological screening) may result in the application being declined.

### 2.3 Academic Institutions, Contractors, Agency and Medical Services Agreement Requirements

Employment agencies, contractor organisations and visiting specialties are responsible for ensuring workers attending WACHS sites are medically fit to safely meet the inherent duties of their role. Additionally, academic institutions are responsible for ensuring all tertiary students attending clinical placement at WACHS sites can safely meet the inherent duties for their role.

All workers and clinical placement students attending WACHS sites must meet the minimum mandatory requirements of the WA Health Care Worker Immunisation Policy and any additional screening and immunisation requirements as set out by WACHS<sup>6</sup>. Institutions, agencies and organisations must be able to provide proof of workers and clinical placement students' medical suitability and immunity compliance when requested.

- See [Medical Service Agreements \(MSAs\) \(sharepoint.com\)](#) for Screening and Immunisation Business Rules for WACHS Medical Service Agreements.

### 2.4 Unremunerated Clinical Observers

Unremunerated clinical observers must complete a pre-placement health assessment form prior to commencement of their WACHS placement in accordance with the WACHS [Occupational Safety and Health Policy](#) and the [WA Health Care Worker Immunisation Policy](#).

## 2.5 Confidentiality

Sensitive medical information is contained in completed PEHA forms and associated correspondence/documentation and will remain confidential. All documentation will be stored in accordance with WA Health MP 0015/16 [Information Access, Use and Disclosure Policy](#) and the WACHS [Corporate Recordkeeping Compliance Policy](#).

Information pertaining to the PEHA may only be accessed if relevant to subsequent employment matters such as:

- workplace injury/lodgement of a Workers Compensation claim
- fitness for work processes
- in the event of a workplace incident potentially related to/impacting a disclosed condition/treatment/immunity status
- false and/or misleading information on the PEHA which may result in the initiation of disciplinary processes.

Completed PEHA forms and associated documentation otherwise will only be released by WACHS:

- with the explicit permission of the applicant/employee and the Director of Work Health Safety Wellbeing
- if lawfully required to do so e.g. under subpoena
- as required by the *Freedom of Information Act 1992*.

To maintain confidentiality and to ensure applicants are hired on merit basis alone, PEHA information will not be disclosed to employing managers except to relay pertinent information related to work capacity restrictions and/or modifications to duties, e.g. healthcare workers who remain non-immune through failure to seroconvert, have medical contraindications to vaccination or conscientiously object.

**Note:** Applicants requiring assistance to complete PEHA paperwork are to contact Work Health and Safety (WHS) in the first instance in the event an applicant directly requests assistance.

For the added safety of staff, the WACHS PEHA assessor may encourage some applicants to discuss any health conditions which may have the potential to impact their workplace through first aid events e.g. seizure conditions, diabetes (hypoglycaemic events). The requirement to disclose any such medical conditions remains the decision of the applicant/employee and medical information must not be disclosed without applicant/employee consent.

## 2.6 Decision Processes

Any reasonable modifications/work restrictions recommended during the PEHA process will be communicated to the employing manager who will consider whether they can or cannot reasonably and safely be accommodated in the workplace. This decision will consider operational requirements, the *Equal Opportunity Act 1984* and WHS obligations.

The workflow process for PEHA findings indicating the applicant may be deemed unsuitable for the role is outlined below:

- PEHA will be reviewed by the WACHS Staff Health and Wellbeing Unit (SHWU).

- Applicants will be required to attend an appointment with their own General Practitioner (GP) or treating specialist for assessment and to provide further information to SHWU about their condition/s with the cost borne by the applicant.
- Following this, if deemed necessary by SHWU, applicants will be referred by SHWU for assessment by a WACHS chosen qualified provider relevant to the health concerns of the applicant (i.e. Occupational Physician, Psychologist, Physiotherapist) with the cost borne by WACHS.
- SHWU will receive the qualified provider recommendations triggering the following workflow processes:
  - Low risk - fit for appointment: SHWU will advise employing manager to continue with recruitment process
  - Medium risk – requires reasonable modifications/work restrictions: SHWU will discuss requirements with employing manager and applicant to ensure requirements can be accommodated
  - High risk – does not have capacity to meet inherent requirements of the position: SHWU will advise the employing manager the applicant is not suitable for the proposed role.

### 3. Roles and Responsibilities

Members of the **WACHS Executive** are responsible for:

- ensuring systems are in place to provide pre-employment health assessments and acceptance of any risks.

**Managers, supervisors and Head of Service** are responsible for ensuring:

- all applicants are advised that all offers of employment made by WACHS are subject to applicants being assessed fit to safely undertake the inherent requirements of the proposed position
- all applicants understand the inherent requirements of the proposed role
- that no worker commences work prior to PEHA clearance
- all efforts to accommodate reasonable workplace modifications and work restrictions as recommended
- the decision-making process is fair, consistent, unbiased, transparent, complies with public sector standards, relevant legislation, and be job-related
- contractor, agency and educational institutions are aware of their requirements to comply with this and associated policies

The **WACHS delegated PEHA assessor** is responsible for:

- ensuring all PEHA applications are reviewed and processed in a timely manner to avoid employee start delays
- ensuring specialist advice and support is offered to areas in relation to this policy
- maintaining confidentiality throughout the PEHA process and handling documentation in accordance with relevant WACHS and WA Health Policy Framework
- discussing with the employing manager and applicant any recommendations made as a result of medical assessment
- liaising with the applicant for further clarification and supply of additional information to support the PEHA process e.g. serology/immunisation evidence, Workers Compensation certificates
- organising referral of applicants to an appropriate qualified provider for further assessment as required.

All **applicants** are responsible for:

- ensuring the PEHA form is completed truthfully, in full, with required evidence/documentation to support their application, within the requested timeframe, and sent to the appropriate regional WACHS PEHA inbox
- attending any medical appointments requested by WACHS to assist in the determination of fitness status
- providing further evidence/relevant workers compensation documentation/serology /immunisation records on request
- complying with any recommendations made as a result of the review of the PEHA form including complying with recommended workplace restrictions/modifications once employed.

**Health Support Services (HSS)** is responsible for:

- ensuring all applicants receiving WACHS contracts are provided an N10
- ensuring a WACHS applicant is not cleared to commence at site until notification has been received in writing of PEHA clearance from the appropriate WACHS PEHA shared inbox.
- advising the employing manager if there is a delay in the process.

**All staff** are required to work within policies and guidelines to ensure that WACHS is a safe, equitable and positive place to be.

## 4. Monitoring and Evaluation

### 4.1 Monitoring

WACHS regional stakeholders are responsible for monitoring and ensuring their PEHA process complies with this policy. Stakeholders include but are not limited to:

- Regional Work Health and Safety Managers:
  - Monthly and Quarterly Regional Work Health and Safety Reports.
- WACHS SHWU:
  - Monthly reporting on staff commencing duties prior to PEHA clearance.

### 4.2 Evaluation

Evaluation is to be measured by auditing and reporting on SHWU key-performance-indicators as appropriate .

## 5. Compliance

This policy is a mandatory requirement under the *Work Health and Safety Act 2020*.

Failure to comply with this policy may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Integrity Policy Framework](#) issued pursuant to Section 26 of the [Health Services Act 2016](#) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies and procedures is mandatory.

## 6. References

1. Australian Technical Advisory Group on Immunisation (ATAGI). [Australian Immunisation Handbook](#), Australian Government Department of Health and Aged Care, Canberra, 2022.
2. National Health and Medical Research Council. [Australian Guidelines for the Prevention and Control of Infection in Healthcare \(2019\)](#).
3. WA Government. [Guidelines for Tuberculosis Control in Western Australia](#), 2019.
4. Communicable Diseases Network Australia. [Australian National Guidelines for the Management of HCW living with Blood Borne Virus \(BBV\) and HCW who perform Exposure Prone Procedures \(EPP's\)](#), 2019.
5. WA Department of Health, Communicable Disease Control Directorate, Public and Aboriginal Health Division. [MRSA Screening and Management of Healthcare Workers Guideline](#).
6. WACHS [Medical Services Agreements](#).

We acknowledge the following previous site endorsed work and/or contributors used to compile this document:

- [Child and Adolescent Health Service, Pre-Employment Health Assessment Policy, Revision date 10/2021](#)
- [East Metropolitan Health Service, Pre-Employment Health Screening Policy, Revision date 11/2020](#)
- [North Metropolitan Health Service, Pre-Employment Health Assessment Policy, Revision date 12/2018](#)
- [South Metropolitan Health Service, Pre-Employment Health Assessment Policy, Revision 02/2021](#)

## 7. Definitions

Term	Definition
<b>Academic Institutions</b>	Refers to accredited Australian Tertiary Institutions, Vocational Education and Training Providers, Registered Training Organisations and accredited re-registration/refresher program providers.
<b>Applicant</b>	Identified as a person suitable for the position i.e. full time, part time, casual or graduate
<b>Contractor / Agency</b>	Any worker who is employed by an independent organisation to provide services to WACHS – including but not limited to; nursing agencies, engineering contractors, security services
<b>Employee</b>	For the purposes of this document, “employee” includes both paid and unpaid workers including permanent, fixed term, casual and volunteers
<b>N10</b>	The form with several questions relating to the employee’s current health status, past medical history, and immunity status.
<b>PEHA</b>	Pre-Employment Health Assessment: a risk assessment process undertaken to assess and screen prospective workers for risk factors that may limit their ability to perform a job safely and effectively. Assessment includes health, medical and immunisation screening and review.

Term	Definition
<b>PEHA Form</b>	Refers to N10, Volunteer Health Assessment form and the Pre-Placement Health Assessment Form.
<b>Pre-employment</b>	For the purposes of this document, “pre-employment” refers to pre-commencement of duties for both paid employment and unpaid volunteer duties
<b>Pre-Placement Health Assessment form</b>	The form with several questions relating to the unremunerated clinical placement worker’s current health status, past medical history and immunity status.
<b>Unremunerated clinical placements</b>	Any placement where the unremunerated placement is part of - including but not limited to a work experience placement (including Structured Workplace Learning), clinical observers, mentorship arrangements, self-funded researcher/fellow, unregistered health practitioners
<b>Volunteer Health Assessment form</b>	The form with several questions relating to the volunteer’s current health status, past medical history and immunity status.
<b>Work Health and Safety (WHS)</b>	Work Health and Safety – referring to both WACHS regional and central WHS/Units.

## 8. Document Summary

<b>Coverage</b>	WACHS
<b>Audience</b>	All WACHS employees and workers providing services to WACHS
<b>Records Management</b>	Non Clinical: <a href="#">Corporate Recordkeeping Compliance Policy</a> Clinical: <a href="#">Health Record Management Policy</a>
<b>Related Legislation</b>	<a href="#">Work Health and Safety Act 2020 (WA)</a> <a href="#">Equal Opportunity Act 1984 (WA)</a> <a href="#">Disability Discrimination Act 1992 (Cwlth)</a> <a href="#">Human Rights and Equal Opportunity Commission Act 1986 (Cwlth)</a> <a href="#">Age Discrimination Act 2004 (Cwlth)</a> <a href="#">Sex Discrimination Act 1984 (Cwlth)</a> <a href="#">Freedom of Information Act 1992 (WA)</a>
<b>Related Mandatory Policies / Frameworks</b>	<a href="#">Health Care Worker Immunisation Policy</a> MP 0015/16 <a href="#">Information Access, Use and Disclosure Policy</a> MP 0033/16 <a href="#">Recruitment, Selection and Appointment Policy</a>
<b>Related WACHS Policy Documents</b>	<a href="#">Fitness for Work Policy</a> <a href="#">Occupational Safety and Health Policy</a> <a href="#">Nursing and Allied Health Student Clinical Placement Policy</a> <a href="#">Corporate Recordkeeping Compliance Policy</a> <a href="#">Risk Management Policy</a>
<b>Other Related Documents</b>	<a href="#">DMIRS – Labour Relations. Pre-Employment Screening Policy</a>
<b>Related Forms</b>	<a href="#">N10 – PEHA form</a> <a href="#">Unremunerated Clinical Observers Health Assessment Form</a> <a href="#">Volunteer Health Form</a>
<b>Related Training Packages</b>	Nil
<b>Aboriginal Health Impact Statement Declaration (ISD)</b>	ISD Record ID: 2046
<b>National Safety and Quality Health Service (NSQHS) Standards</b>	3.15
<b>Aged Care Quality Standards</b>	3, 7 and 8
<b>National Standards for Mental Health Services</b>	2.6



## 9. Document Control

Version	Published date	Current from	Summary of changes
3.00	16 August 2023	16 August 2023	<ul style="list-style-type: none"> <li>• Complete document review to meet operational guidelines and changes to business practice.</li> <li>• Updates to bring policy in line with new <i>Work Health and Safety Act 2020</i>.</li> <li>• Defined scope of policy to delineate volunteers, unremunerated clinical placements and contractors.</li> <li>• Removed references to fitness for work assessments.</li> <li>• Added confidentiality information and decision processes.</li> <li>• Updated roles and responsibilities including removing assessment responsibilities from Managers/HR.</li> </ul>

## 10. Approval

<b>Policy Owner</b>	Executive Director People, Culture & Capability
<b>Co-approver</b>	N/A
<b>Contact</b>	Director Work Health Safety and Wellbeing
<b>Business Unit</b>	People, Culture and Capability
<b>EDRMS #</b>	ED-CO-14-71490

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