

# Goldsmiths University of London Health Check

**CONFIDENTIAL**

The completed questionnaire should **ONLY** be scanned and emailed to  
[admissionsconfidential@gold.ac.uk](mailto:admissionsconfidential@gold.ac.uk)

**PERSONAL DETAILS:**

<b>First name:</b>			
<b>Family name/s:</b>			
<b>Previous or alternate names:</b>			
<b>Title Mr/Mrs/Miss/Mx:</b>		<b>Date of birth (dd/mm/yy):</b>	
<b>Home address:</b>			
<b>Phone number:</b>			
<b>Email address:</b>			

<b>Doctor's Name and Address:</b>			
<b>Hospital specialist Name and Address: (if applicable)</b>			

<b>Programme title:</b> E.g. PGCE Secondary	
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## HEALTH AND FUNCTIONAL CAPABILITIES:

		<u>Yes</u>	<u>No</u>
<b>1</b>	<b>Do you have problems with any of the following:-</b>		
	a. <b>Mobility?</b> e.g., walking, using stairs, balance:		
	b. <b>Agility?</b> e.g., bending, reaching up, kneeling down:		
	c. <b>Dexterity?</b> e.g., getting dressed, writing, using tools:		
	d. <b>Physical Exertion?</b> e.g., lifting, carrying, running:		
	e. <b>Communication?</b> e.g., speech, hearing:		
	f. <b>Vision?</b> e.g. visual impairment, colour blindness, tunnel vision:		
	g. <b>Learning?</b> e.g. dyslexia, dyscalculia, impaired concentration		

If **YES** to any of the above, please give full details (e.g., extent of impairment, how you manage, support needs):

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<b>2.</b>	<b>Have you ever required special arrangements during your studies or work to accommodate a disability or health concern? (e.g. special equipment, extra time in exams, part-time working)?</b>	<u>Yes</u>	<u>No</u>
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If **YES** please give details: and an indication of date and duration etc

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<b>3</b>	<b>Do you have, or have you had, any of the following?</b>	<u>Yes</u>	<u>No</u>
	a. <b>Chronic Skin Condition?</b> e.g., eczema, psoriasis.		
	b. <b>Neurological Disorder?</b> e.g., epilepsy, multiple sclerosis.		
	c. <b>Allergies?</b> e.g., latex, medicines, foods.		
	d. <b>Endocrine Disease?</b> e.g., diabetes.		

If **YES** to any of the above please give details including an indication of date and duration etc (e.g. when condition developed, severity, effects and treatment / medication):

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<b>4</b>	<b>Have you ever been affected by:</b>	<u>Yes</u>	<u>No</u>
	a. <b>Sudden Loss of Consciousness?</b> e.g., fit or seizure		
	b. <b>Chronic Fatigue Syndrome?</b> (or similar condition)		
	c. <b>Mental Health Issues?</b> e.g., anxiety, depression, phobias, OCD, nervous breakdown, personality disorder, over-dose or self-harm, drug or alcohol dependency:		
	d. <b>An Eating Disorder?</b> e.g., bulimia, anorexia nervosa, compulsive eating:		
	e. <b>An illness requiring more than two weeks' absence from school or work?</b>		
If <b>YES</b> to any of the above please give details including an indication of date and duration etc. (e.g. when condition developed, severity, effects and treatment / medication):			
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.....			

<b>5</b>	<b>Have you ever received treatment from a psychiatrist, psychotherapist or counsellor?</b>	<u>Yes</u>	<u>No</u>
If <b>YES</b> to any of the above please give details including an indication of date and duration etc (e.g. when condition developed, severity, effects and treatment / medication):			
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.....			

		<u>Yes</u>	<u>No</u>
<b>6</b>	<b>Are you currently taking any medication or treatment?</b>		
If <b>YES</b> please give details: including current dose			
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.....			

		<u>Yes</u>	<u>No</u>
<b>7</b>	<b>Do you have any disability or health condition not already mentioned for which you think you may require support during your employment/ education or training?</b>		
If <b>YES</b> to any of the above please give details:			
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.....			

### **Declaration**

**By submitting this form, you declare that all of the statements and information that you have made on this questionnaire are true to the best of your knowledge.**

**You also understand that you are responsible for the expenses of any medical report, which may be required, and any fee associated with the completion of the form.**

**Submission of this form also gives consent for Goldsmiths to approach your doctor and/or specialist for further information if deemed necessary. You also submit this form on the understanding that giving false information or failing to disclose any significant information could result in the withdrawal of your offer and any subsequent enrolment at Goldsmiths**

Please send the completed form to your GP (Doctor) and request that they complete the section below. You will be responsible for any fee charged by your GP/Doctor. Please note a practice stamp is not required when the form is emailed to Goldsmiths from a NHS email address.

**BELOW SECTION TO BE COMPLETED BY YOUR DOCTOR ONLY**

## Doctor Assessment

Your patient has been offered a place to undertake a Fitness to Train programme at Goldsmiths University. All prospective students are required to complete a health questionnaire to enable the University to assess their medical fitness and where appropriate consider any reasonable adjustments or additional support needs. We require the doctor to verify the health information provided by applicants based on their knowledge of the patient. Please note this is not an occupational health assessment.

Applicant Name:	
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1. Are you a relative of the applicant?	Yes/No
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2. Are you the applicant's usual doctor?	Yes/No
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3. Do you hold the applicant's medical record?	Yes/No
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4. According to your records and knowledge of the applicant, do the answers to questions in Section 2 appear correct? (please add any comments below, if appropriate)	Yes/No
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5. Are you aware of any additional medical information that may be relevant to this application? (If yes please provide details)	Yes/No
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Details:


PLEASE NOTE. A medical examination is not required. Any fee required for completion of the form is the responsibility of the patient.

	<b>A, B, or C?</b>
After reviewing the health form is the applicant Category A, B, or C?	

Category A	Those who are in good health or who have conditions which are not likely to interfere with efficiency on their placement
Category B	Those who are in good health but who suffer from conditions which are likely to interfere to some extent with their efficiency on their placement, though these conditions are not serious enough to make the candidate unfit for the placement.
Category C	Those whose condition is such as to make them unfit for their placement.

Practice Name: _____  Doctor Name: _____  Doctor Signature: _____	Medical Practice official stamp:          Date: _____
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## **Information to prospective students**

Following the offer of a place to study at Goldsmiths University of London, we are committed to ensuring equality of opportunity for students with impairments and health conditions. Goldsmiths will provide all reasonable support to enable students with impairments and health conditions to complete the course.

Your answers to this health questionnaire will help to ensure that your placement training will not put your health at risk and will also help to determine, in terms of fitness to fulfil the requirements of programme, your suitability to work in your chosen field.

### **1 Why is fitness to train an issue?**

The reasons to address the issue of fitness to train centre round the requirement to:

- ensure the health, safety, well-being and educational progress of pupils/clients;
- provide an efficient service which will facilitate learning from pupils;
- manage any risk to the health of teachers/social workers/etc. which may arise from their duties including ensuring that those duties do not exacerbate pre-existing health problems;
- ensure the health and safety of other staff is not adversely affected by a colleague being unfit;
- enable all, including those with disabilities, who wish to pursue a career in teaching/social work/etc to achieve their potential within the bounds of reasonable adjustment.

### **2 Fitness criteria**

To be able to undertake duties safely and effectively, it is essential that individuals:

- have the health and well-being necessary to deal with the specific types of duties (adjusted, as appropriate) in which they are engaged;
- are able to communicate effectively with children, parents, clients and colleagues;
- possess sound judgement and insight;
- remain alert at all times;
- can respond to clients/pupils' needs rapidly and effectively;
- are able to manage classes/groups;
- do not constitute any risk to the health, safety or well-being of those in their care;
- can, where disabilities exist, be enabled by reasonable adjustments to meet these criteria.

The decision on fitness will be considered using the above criteria and will be based on an individual's ability to satisfy those criteria in relation to all duties undertaken as part of the specific post and in relation to all the individual's health problems.

### **3 Consideration of questionnaires**

Having considered the completed questionnaire, the GP (Doctor) will classify the applicant in one of three categories:

- A Those who are in good health or who have conditions which are not likely to interfere with efficiency on their placement
- B Those who are in good health but who suffer from conditions which are likely to interfere some extent with their efficiency on their placement, though these conditions are not serious enough to make the candidate unfit for the profession.
- C Those whose condition is such as to make them unfit for their profession. Applicants should not normally be included in this category unless they suffer from a disorder likely to interfere seriously with regular and efficient work duties.

A 'C' classification should be given to an applicant who is not in a satisfactory state of health at the time of the examination but who may, after appropriate medical treatment, may make a good recovery. It will be open to such applicants to make a fresh application once they are able to provide a satisfactory medical report following treatment. There is no appeals mechanism to the institution, its medical advisors, or the DfES/DoH. However, the applicant has the right to offer additional medical specialist advice to the College for the medical advisor to reconsider their decision.

## **4 IMPACT OF HEALTH STATUS ON FITNESS TO TRAIN: an extract from the advice provided for GP's responsible for assessing health of teachers. (This information is provided for information only. Many of these issues are the same for social work entrants)**

### **4.1 GENERAL**

Any decision to find an applicant unfit to teach should only be made after it is clear that the criteria at paragraph 2 (above) cannot be met in full after the following have been addressed:

- Appropriate treatment for an appropriate length of time has failed to produce recovery.
- Other available treatment interventions have been proved to be unsuccessful.
- Restriction on the nature of teaching duties would still not enable the teacher to be declared fit.
- Reasonable adjustments would not be sufficient to allow the individual to be fit to teach.
- Providing a blanket list of conditions that are incompatible with teaching duties is not appropriate. Cases should be considered on an individual basis and, in most circumstances, consideration should involve:
  - Full investigation of the condition, including reports from GP and Specialist as appropriate.
  - Reference to the criteria outlined above.

Discussion with senior or more experienced colleagues may be appropriate.

### **4.2 Review**

Where an individual is considered to be fit, but has a condition which may progress so that ongoing fitness would be in doubt, Medical Advisers should recommend to the training institution or employing organisation, that the individual be reviewed at clearly defined intervals. The individual concerned should be advised of this and of the need to seek earlier review if the anticipated pattern of the illness changes.