

Workplace Health & Wellbeing e-OPAS Portal
Pre-Placement Recruitment Guide
West Suffolk Hospital NHS Trust

Email queries to - WSFT.WHWBmailbox@nuh.nhs.uk

The Workplace Health & Wellbeing Self Service Portal can be accessed via the following link:

<https://nuh.eopas.co.uk>



When setting up an account please be aware that you can't use a tablet or a smart phone. Also, in our experience the best browsers to use are Internet Explorer 8, Chrome or Firefox.

STEP 1 – CREATING YOUR ACCOUNT:

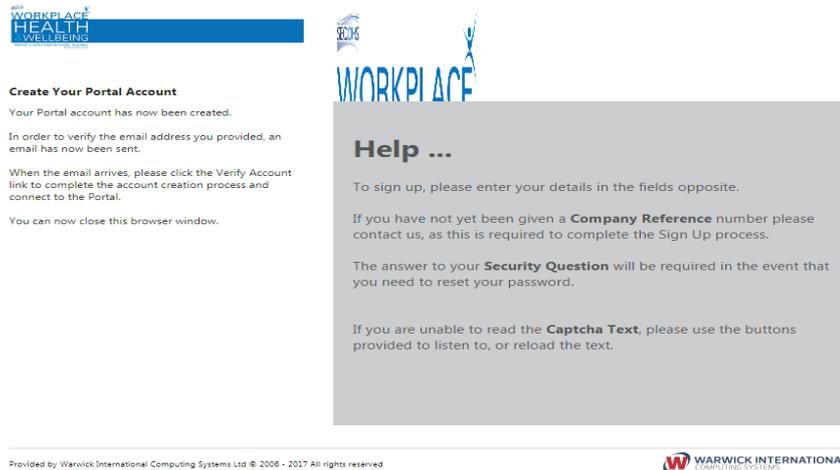
This section explains how to set up Portal user accounts:

1. Navigate to the Portal Homepage via the link above
2. Click on the on-screen 'sign up now' box
3. The Portal Account creation screen will be displayed;
 - Enter email address into the section provided (work email address please)
 - Enter your Company reference **W230DA02**
 - Enter your desired password, which should contain a minimum of 6 characters including 1 special character (a number is not classed as a special character)
 - Confirm your password
4. Select a security question from the drop-down menu
ⓘ Please ensure that you remember the question / answer since we are unable to reset this
5. Captcha verification is required for the account creation. Enter the sequence of characters displayed in the centre of the window into the space provided
6. Once you have completed all fields on the Portal account form, click the 'Continue' button to verify your account

Step 2 – PORTAL ACCOUNT VERIFICATION:

This section guides you through verifying your Portal account:

The Portal Account completion screen will be displayed



The screenshot shows two side-by-side panels from the Workplace Health & Wellbeing portal. The left panel, titled 'Create Your Portal Account', contains the following text: 'Your Portal account has now been created. In order to verify the email address you provided, an email has now been sent. When the email arrives, please click the Verify Account link to complete the account creation process and connect to the Portal. You can now close this browser window.' The right panel, titled 'Help ...', contains the following text: 'To sign up, please enter your details in the fields opposite. If you have not yet been given a **Company Reference** number please contact us, as this is required to complete the Sign Up process. The answer to your **Security Question** will be required in the event that you need to reset your password. If you are unable to read the **Captcha Text**, please use the buttons provided to listen to, or reload the text.'

When an account has been created, an email will be sent to you for you to verify your email address.



Emails are sent almost immediately, but if the email takes longer to get to you than you would expect check your Junk/Spam folders to see if it is in there.

Open the email and click on the 'Verify Account' link to activate your account.

Almost There! Portal Account Verification

To complete the creation of your new account please click the following link, [Verify Account](#)

The Portal Account creation screen will be displayed

Enter your password details into the section provided



The Account Verification step is essential. Without this step you will not be able to proceed.

The following screen will appear, please add your password into the 'Enter your password' box



**WORKPLACE
HEALTH
& WELLBEING**
NNUH Foundation Trust

Sign in using your Portal account

Your account email address has now been verified, please enter your password and sign in

Enter your email address
a.nother@anycompany.co.uk

Enter your password
●●●●●●●●

Forgotten your password?

Don't have a Portal account?

Alternatively, you can Sign In using:





Welcome ...

to your Occupational Health portal.

Then click the 'Sign In' button.

You have created your portal account!

The first time you log into your e-OPAS account, you will be asked to complete the mandatory fields within the following 3 personal details screens:

Options Settings

Personal Details

In order to access the Portal, your User account needs to be linked to a Personnel record held in the system. Please enter your details in the fields below, and click on Next to continue.

Warning: Closing the browser or signing out before clicking 'Save Changes' on the last screen will result in all entered data being lost.

Company Reference*

Secondary Reference

Title

Forename* *Please enter your Forename*

Surname* *Please enter your Surname*

Date Of Birth* *Please enter your Date Of Birth*

Gender

National Insurance

Marital Status

Nationality

Ethnic Origin

Fields marked with * are required

Options Settings

Contact Details

Please enter your contact details in the fields below, and then click on Next to continue.

Home Address

Number/Name

Street

Locality

Town

County

Post Code

Country

Home Telephone Number

Mobile Telephone Number

Options

Settings

Employment Details

Please enter your employment details in the fields below, and then click on Save Changes to confirm.

Organisation*

Site

Fields marked with * are required

Once you completed the personal details screens and clicked on 'Save Changes' as shown in the picture above, you will be taken to the 'Home Screen' below:

The home screen is where you will be taken to each time you log on to e-OPAS:

Options

My Forms - 1 record found

| Form Type | Status | Comments | Date Completed | Date Created | Appointment Date | Appointment Time |
|---|----------|----------|----------------|---------------------|------------------|------------------|
| Existing students returning from period ... | Promoted | | Wed 24/05/2017 | Wed 24/05/2017 1... | | |

Online Form Help

Navigation

Use the **Current View** option on the left hand side to display your online forms.

If configured against a specific view, further refinement can be made using the filter options on the left hand side. Use the **Refresh Results** option to apply any changes made to the filter.

Double click on an existing online form to bring up the details.

If authorised, click **Create New** on the left hand side to begin filling out a new form.

CREATING FORMS:



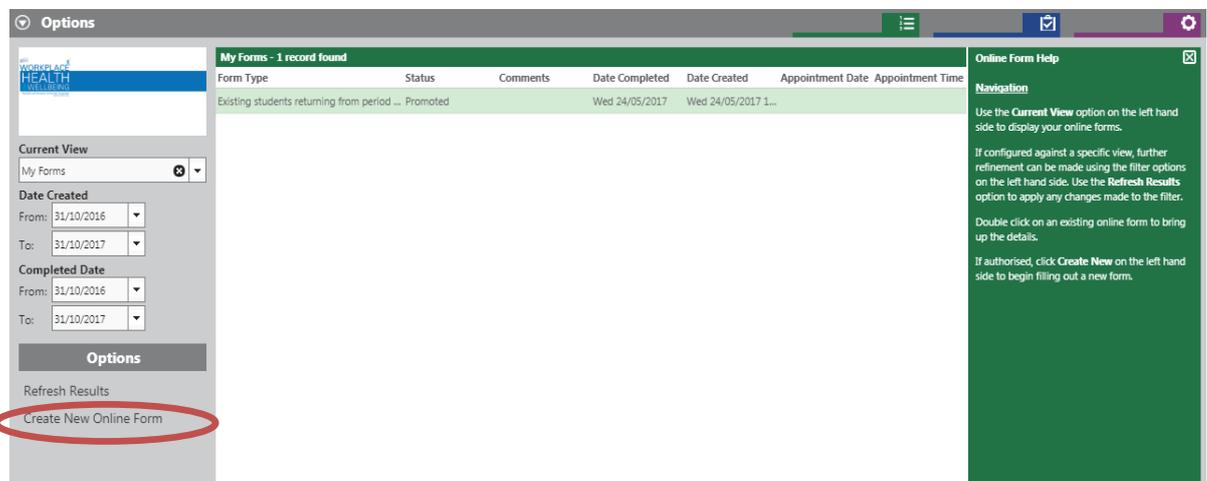
You will need to be set up as a Portal Manager by Workplace Health and Wellbeing before you can create a Management Referral or Pre-Placement form using the e-OPAS portal.
 If you require this facility, please speak with your manager so that they can request set up by your dedicated Workplace Health & Wellbeing Administrator,
 Email to WSFT.WHWBmailbox@nuh.nhs.uk

CREATING A PRE-PLACEMENT FORM :

The Workplace Health & Wellbeing Self Service Portal can be accessed via the following link:

<https://workplacehealthonline.nuh.nhs.uk/genohsisportal/login.aspx>

1. Login to the Portal Home Page, using the link above
2. Select 'Create New Online Form', you will then be taken to a new screen



3. Select 'Pre-Placement Healthcare Worker Questionnaire Combined' from the Form type drop down list and select 'continue to proceed'

i Ensure that you select the drop down arrow when selecting the form rather than clicking into the text box

Pre-Placement Healthcare Worker Questionnaire Combined

| | |
|----------------|---|
| Form Reference | Reference Generated On Save |
| Form Type* | Pre-Placement Healthcare Worker Questionnaire Combined |
| Details | For HR completion only. Recruitment complete part 1 only. Applicant complete part 2 only. Please refer to instructions provided. RECRUITMENT TO SEND A REMINDER EMAIL - COMPLETE THE REMINDER DATE BOX WITH YOUR CHOSEN REMINDER DATE |
| Status | New |
| Reminder Date | <input type="text"/> |

Fields marked with * are required

This form has multiple pages and you can navigate through the pages using 'Next Page' and 'Previous Page' buttons

PLEASE ONLY COMPLETE PART 1 OF THE FORM FOR RECRUITING OFFICERS

| | |
|---|--|
| RECRUITING OFFICER TO COMPLETE PART 1 ONLY | Form Progress |
| <p>PART 1 COMPLETE BY RECRUITMENT/MANAGER ONLY - APPLICANT IGNORE PART 1 AND GO STRAIGHT TO PART 2 FOR APPLICANT - APPLICANT EXPAND FORM PROGRESS BAR TO THE RIGHT HAND SIDE & DOUBLE CLICK PART 2</p> | |
| <input type="button" value=" < Previous Page"/> | <input type="button" value=" Next Page >"/> |

- Fill in all the details requested on the pages by either entering free text or selecting the relevant options.

Part 1 - Recruiting Officer to Complete

1 to 10 11 to 12 < >

- Name of Recruiting Officer *
- Job reference *
- Recruiting officer email address * 
- Email address(es) where WHWB are to send the outcome report. * 
- Applicant Surname *
- Applicant First Names *
- Job Title / Occupation *
- Department/Area *
- Type of contract * 
- Hours * 

< Previous Page Next Page >

Fields marked with * are required

Press next to move to the next page

Pre-Placement Healthcare Worker Questionnaire Combined

Part 1 - Recruiting Officer to Complete

1 to 10 11 to 12 < >

- Part Time Hours
- Post commences *

< Previous Page Next Page >

Fields marked with * are required

Press next to move to the next page

Part 1 - Activity Categories - Will this role include the following activities?

1 to 11 | 12 to 13

| | |
|---|--|
| 1. Direct Face to Face Patient contact * | Yes <input type="radio"/> No <input type="radio"/> |
| 2. Manual Handling * | Yes <input type="radio"/> No <input type="radio"/> |
| 3. Night working / Shift work * | Yes <input type="radio"/> No <input type="radio"/> |
| 4. VDU User * | Yes <input type="radio"/> No <input type="radio"/> |
| 5. Driving of Patients * | Yes <input type="radio"/> No <input type="radio"/> |
| 6. Blood / Body Fluid Exposure * | Yes <input type="radio"/> No <input type="radio"/> |
| 7. Prevention of Management of Aggression * | Yes <input type="radio"/> No <input type="radio"/> |
| 8. Crouching / Stooping or Kneeling * | Yes <input type="radio"/> No <input type="radio"/> |
| 9. Frequent Hand washing / Wearing gloves * | Yes <input type="radio"/> No <input type="radio"/> |
| 10. Chemical sensitisers / Dust * | Yes <input type="radio"/> No <input type="radio"/> |
| 11. Hand Arm Vibration Exposure * | Yes <input type="radio"/> No <input type="radio"/> |

Fields marked with * are required

Press next to move to the next page

Part 1 - Activity Categories - Will this role include the following activities?

1 to 11 | 12 to 13

| | |
|--------------------------|--|
| 12. Noise * | Yes <input type="radio"/> No <input type="radio"/> |
| 13. Other (please state) | <input style="width: 150px; height: 20px;" type="text"/> <input style="float: right; font-size: 8px; border: 1px solid #ccc; padding: 2px 5px;"/> abc ✓ <input style="float: right; font-size: 8px; border: 1px solid #ccc; padding: 2px 5px; margin-top: -10px;"/> ✎ |

Fields marked with * are required

Press next to move to the next page

Exposure Prone Procedures

DEFINITION OF AN EXPOSURE PRONE PROCEDURE (EPP):
(from Department of Health – HSG (93) 40 & HSC 2000/020)

Exposure Prone Procedures (EPP) are those where there is a risk of injury to the worker which may result in the exposure of the patient's open tissues to the blood of the worker.

These procedures include those where the worker's gloved hands may be in contact with sharp instruments, needletips and sharp tissues (spicules of bone or teeth) inside a patient's open body cavity, wound or confined anatomical space where the hands or fingertips may not be completely visible at all times.

1. Exposure prone procedures (Health Care Organisations) * Yes No

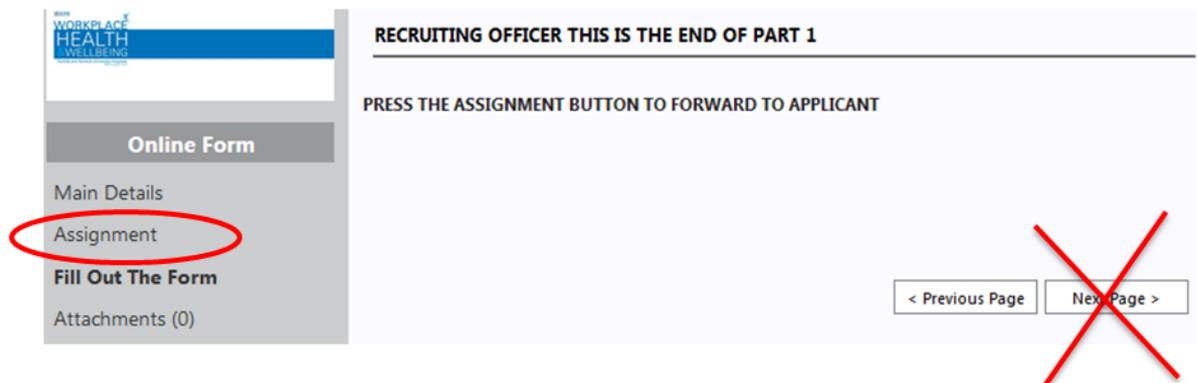
< Previous Page

Next Page >

Fields marked with * are required

Press next to move to the next page

- 5 At this point you have finished completing your part of the questionnaire.
PRESS THE ASSIGNMENT BUTTON ON THE LEFT HAND SIDE (DO NOT PRESS NEXT)



WORKPLACE HEALTH & WELLBEING

Online Form

Main Details

Assignment

Fill Out The Form

Attachments (0)

RECRUITING OFFICER THIS IS THE END OF PART 1

PRESS THE ASSIGNMENT BUTTON TO FORWARD TO APPLICANT

< Previous Page

Next Page >

Then press Assigned person

Nominate another person to complete/review this Form

| | |
|-------------------------|--------------------------|
| Assigned Person | |
| Status | |
| Document Rights | |
| Send Notification Email | <input type="checkbox"/> |

Fields marked with * are required

Complete the details for the employee you wish to send the questionnaire on to

Select Or Create Assigned Person

Please enter some details relating to the person you would like to either search for or create to assign this form to

| | |
|---------------------|------------------------|
| Secondary Reference | <input type="text"/> |
| Title | <input type="text"/> ▼ |
| Forename* | <input type="text"/> |
| Surname* | <input type="text"/> |
| Date Of Birth* | <input type="text"/> ▼ |
| Gender | <input type="text"/> ▼ |

Create new and continue to complete the employee details. Then press save changes.

Employment Details Of Person

Please enter the employment details for this new person. Once you have entered their details please

| | |
|---|--|
| Organisation* | <input type="text"/> |
| Site | <input type="text" value="x"/> ▼ |
| Department/Ward/Course | <input type="text"/> ▼ |
| Area Of Work/Ward/Cohort | <input type="text"/> ▼ |
| Zone | <input type="text"/> ▼ |
| Occupation | <input type="text"/> ▼ |
| Email Address To Use As Portal Username* | <input type="text" value="EMAIL ADDRESS TO SEND FORM TO"/> |

Fields marked with * are required

From the the drop downs select the option of employee to complete.

Then press save assignment details.

Nominate another person to complete/review this Form

| | |
|-------------------------|---------------------------------------|
| Assigned Person | 7476086343 : Mr Firstname Lastname |
| Status* | Employee to complete - Additions Only |
| Document Rights* | Employee to complete |
| Send Notification Email | <input checked="" type="checkbox"/> |

Fields marked with * are required

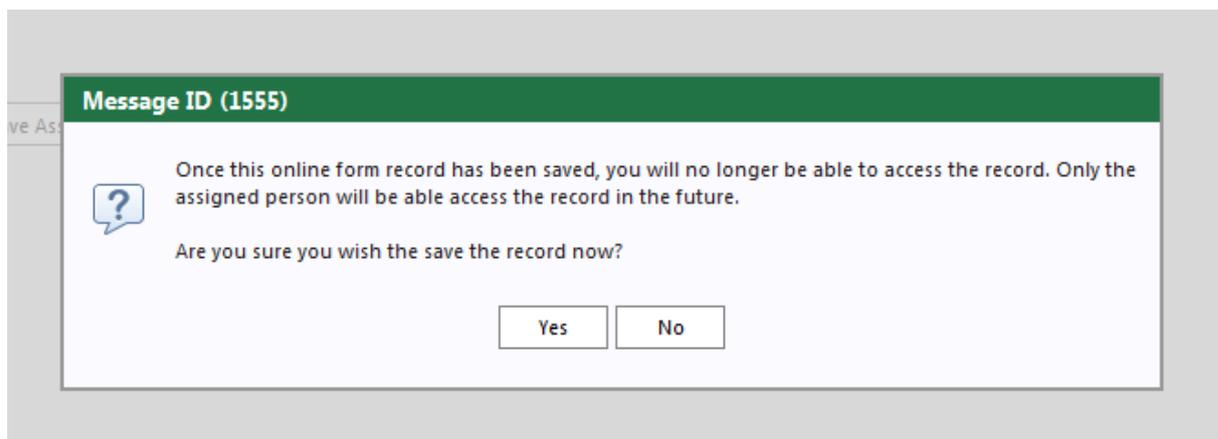
Save Assignment Details

- 6 At this point you will be prompted to save the Form as completed. If you are ready to send the Pre-Placement form to the assigned person click yes.

Please Note: that once you have clicked yes, you will not be able to make any changes to the form

If you are not ready to submit the form simply click 'no' and then return to the questionnaire at a later date. (See section titled AMENDING PORTAL FORMS)

i Pre-placement forms are only sent to Workplace Health & Wellbeing when the assigned person has completed their section and submitted it to us.



- 7 You will be returned to the online form screen.

The assigned person will now receive an email informing them to login to the portal and complete the questionnaire you have assigned to them.

COMPLETING INCOMPLETE FORMS:

This section shows you how to complete incomplete forms within the Portal:

1. Double-click on the form record displayed in the middle of the screen or select it and click on 'Open Online Form' in Options on Left hand side of screen

| Form Type | Status | Comments | Date Completed | Date Created | Appointment Da... | Appointment TL... |
|---------------------|--------------------|----------|----------------|---------------------|-------------------|-------------------|
| Management Referral | Ready for Promo... | | Tue 31/10/2017 | Tue 31/10/2017 1... | | |

Note: You may need to change the 'current view' option to "my forms" to display the form on screen

2. Use the Previous page / Next Page buttons to navigate through the pages of the form and complete the relevant entries
3. Continue to complete all questions until the Next Page button becomes disabled and then select the 'Complete option'
4. At this point you will be prompted to save the Form as completed. If you are ready to send the referral to Workplace Health & Wellbeing please click 'yes'

Please note: that once you have clicked yes, you will not be able to make any changes to the referral

If you are not ready to submit the referral simply click 'no' and then return to the questionnaire at a later date. (See section titled AMENDING PORTAL FORMS)

i Referrals are only sent to us when you set the questionnaire as complete

Message ID (1575)

Do you wish to set this Form as completed?



Note: Once set as completed, the Form will be sent to Workplace Health & Wellbeing and cannot be updated in the future. Please ensure that you have added your contact number to the form as the Occupational Health team may need to contact you if further information is required.

Yes

No

You will be returned to the online form screen.

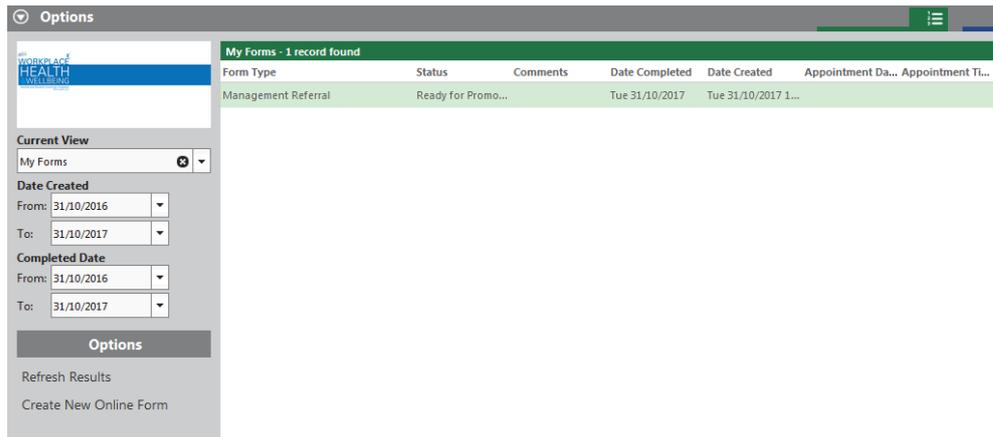
The screenshot shows a web interface for 'My Forms'. On the left is a sidebar with filters for 'Current View' (set to 'My Forms'), 'Date Created' (From: 31/10/2016, To: 31/10/2017), and 'Completed Date' (From: 31/10/2016, To: 31/10/2017). Below the filters are 'Options' including 'Refresh Results' and 'Create New Online Form' (circled in red). The main area shows a table with the header 'My Forms - 1 record found' and columns: Form Type, Status, Comments, Date Completed, Date Created, Appointment Da..., and Appointment Ti... The table contains one row: Management Referral, Ready for Promo..., Tue 31/10/2017, Tue 31/10/2017 1...

A completed form is given a status of 'Ready for promotion' until reviewed by a member of Workplace Health and Wellbeing. Once it is processed the completed form will be given a status of Promoted.

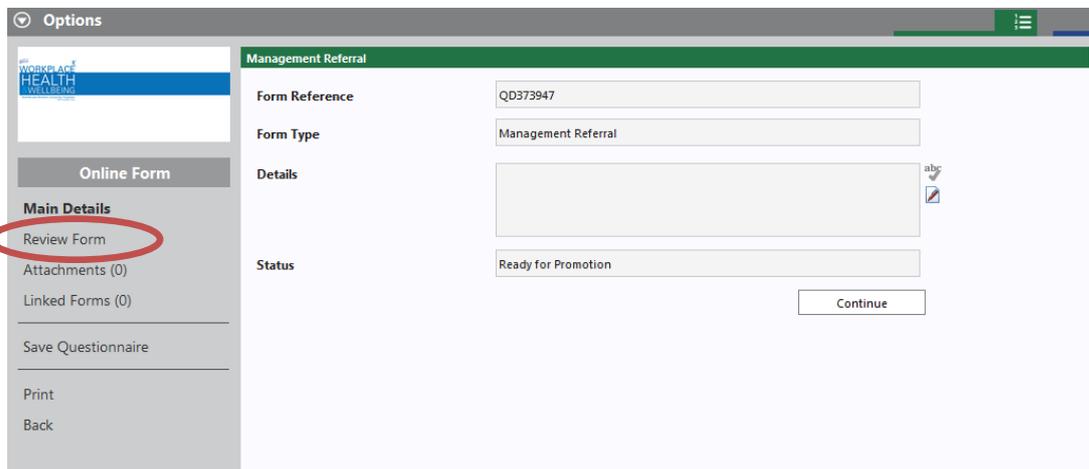
REVIEWING COMPLETED FORMS:

This section explains how to review completed forms within the Portal:

Previously completed forms will be displayed in the middle of the window



1. Double-click on the form record displayed in the middle of the screen or select it and click on 'Open Online Form' under Options on Left hand side of screen.
2. Select the 'Review Form' option



The Form details screen will be displayed.

- 3 Use the Previous page / Next Page buttons to navigate through the pages of the form to review the entries

Note: Answers given to previously completed forms are displayed in a grey box

Please note: previously given answers cannot be edited.

- Continue to review all the questions until the Next Page button becomes disabled. Select the 'back' option to return to the online forms window

The screenshot shows a web application interface for a 'Management Referral' form. On the left is a sidebar with navigation options: 'Main Details', 'Assignment', 'Fill Out The Form', 'Attachments (0)', 'Save Questionnaire', 'Save & submit form to WHWB', and 'Back'. The 'Back' button is highlighted with a red circle. The main content area is titled 'Management Referral' and contains a 'Declaration' section with four questions, each with 'Yes' and 'No' radio button options. At the bottom right, there are buttons for '< Previous Page' and 'Save Questionnaire'. A red note at the bottom left states 'Fields marked with * are required'.

Options

WORKPLACE HEALTH & WELLBEING

Online Form

Main Details

Assignment

Fill Out The Form

Attachments (0)

Save Questionnaire

Save & submit form to WHWB

Back

Management Referral

Declaration

Form Progress

1. I confirm that I am referring the above named employee to Workplace Health & Wellbeing for an Occupational Health assessment. I can confirm that the individual has been made fully aware of the purpose of the referral. Yes No
2. I understand that under the General Data Protection Regulation (GDPR) employees may request access to their occupational health records*. Yes No
3. I can confirm that the staff member has consented to this referral. Yes No
4. I understand that Workplace Health & Wellbeing (WHWB) endeavour to prepare reports within five working days of an appointment. However I understand that, if additional detail from an individual's specialist or GP is required (with the employee's consent), there will be a delay in the report being prepared. Under these circumstances WHWB will write or e-mail you to inform you of a likely delay. Yes No

< Previous Page Save Questionnaire

Fields marked with * are required

PORTAL ACCOUNT RESET

This section guides you through resetting your Portal account password:

Navigate to your Portal Homepage and then:



- Click on the 'Forgotten Your password' Link

The password reset form will be displayed

- Enter your Email Address into the section provided
- Enter your Family Name into the section provided
- The Captcha verification will be required for the password reset. Enter the sequence of characters displayed in the centre of the window into the space provided, Click the 'Continue button'
- The Portal Account Security window will be displayed. At this point you will need to answer the security question that you selected on creating the account

An email is sent with the security details for portal account reset. Follow the instructions in the email



The email verification step is essential. Without this step you will not be able to proceed.