## **Manager's Authorisation Form**

## Manager's Authorisation Form Substantive Assignment Amendment Form- Nursing & Midwifery Professionals

Flexible Worker Information	
Name of Flexible Worker:	
NI Number:	
Date of Birth/ ESR Assignment Number:	
Authorising Manager's Details: All sections to be co	ompleted by Ward/Line Manager
Manager's Name:	
Job Title:	
Ward:	
Trust:	
Contact Telephone Number:	
Authorising Manager's E-Mail:(NHS Account Only)	
I can confirm that the person named above as a Su Trust and that the following checks were completed	
Two Satisfactory References	
Occupational Health Screening Completed	
Enhanced CRB Disclosure carried out	
Mandatory Training completed in the last 12 month (Fire, Moving & Handling, Infection Control and CPR)	s $\square$
Proof of Home Address	
I can confirm that the assignment codes selected a the area in which I am authorising this Flexible Wor	re correct and that I have appropriate experience in rker to have an additional assignment code(s).
I confirm that I understand that by authorising this a at any location within this Trust at this assignment of	amendment this Flexible Worker will be able to work code.
I am therefore verifying that they are competent to	work at this assignment code
Signature:	Date:
(Please see below the page to select the assignment	t codes)

## **Manager's Authorisation Form**

## Substantive Assignment Amendment Form- Nursing & Midwifery Professionals

Nursing & Midwifery Staff Group - to be completed by Line Manager

Please select the assignment type/s from Box 1 and then all appropriate codes in Box 2, including General Acute (00) if the Substantive Worker has the relevant experience/qualifications.

Substantive Employee Name	9:
Line Manager Name:	
Line Manager Position:	
Line Manager Signature:	

Box 1 Assignment Type	$\sqrt{}$		V		1
Care Support Worker (CSW)		Nurse Advanced (NAD)		Registered Midwife (RM)	
Care Support Worker Higher (CSWH)		Nurse Associate Practitioner (ASP)		Registered Nurse (RN)	
Community Psychiatric Nurse (CPN)		Nurse Associate Practitioner Higher (ASPH)		RM Preceptorship (RMP)	
Dental Nurse (DN)		Nurse Consultant (NC)		RN Preceptorship (RNP)	
Dental Nurse Team Leader (DNTL)		Nurse Modern Matron (NMM)		Senior Community Support Worker (SCW)	
Emergency Nurse Practitioner (ENP)		Nurse Team Leader (NTL)		Theatre Practitioner (TP)	
Health Visitor (HV)		Nurse Team Manager (NTM)		Theatre Practitioner Entry Level (TPEL)	
Health Visitor Specialist (HVSP)		Nursery Nurse (NN)		Theatre Practitioner Higher (TPHL)	
Midwife Modern Matron (MMM)		Project Worker (PW)		Theatre Practitioner Team Manager (TPTM)	
Midwife Team Manager (MTM)					

Box 2 Area of Work								
Acute								
	Code			Code	1			
Accident & Emergency	04		Neurosurgery	48				
Cardiology	13		NICU	62				
CATS Recovery	135		Oncology	24				
Child Health (Hospital)	60		Ophthalmology	49				
Coronary Care Unit	05		Orthopaedics	54				
Day Surgery	43		Paeds A&E	63				
Elderly Care	17		PICU	61				
Endoscopy	16		Plastic Surgery & Burns	51				
ENT	44		Prisons	131				
Family Planning	68		Renal	29				
General	00		Sexual Health	95				
Genitourinary	19		Theatre Anaesthetics	40				
Gynaecology	45		Theatre Circulator	57				
High Dependency Unit	07		Theatre Recovery	52				
Infection Control	36		Theatre Scrub	55				
Intensive Care Unit	08		Theatres General	59				
Liver Unit	22		Trauma & Outpatients	94				
Maternity	66		Urology	56				
Neurology	23							
Community								
General	102		Child Health (Community)	100				
Schools	111							
Mental Health								
General	03		Older Persons Learning	79				
Adult – Rehab	72		Disabilities	77				
Adult - Continuing Care	71		Forensic	76				
Adult – Acute	70		Substance Misuse/Addictions	74				
Child & Adolescent	73		Community Mental Health	120				