

Protecting Vulnerable Adults from Coronavirus

Health Questionnaire

	Yes/No
I confirm that I am over the age of 70	
I am under 70 with an underlying health condition listed below (ie instructed to get a flu jab as an adult each year on medical grounds):	
chronic (long-term) respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis	
chronic heart disease, such as heart failure	
chronic kidney disease	
chronic liver disease, such as hepatitis	
chronic neurological conditions, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS), a learning disability or cerebral palsy	
diabetes	
problems with your spleen – for example, sickle cell disease or if you have had your spleen removed	
a weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets or chemotherapy	
being seriously overweight (a body mass index (BMI) of 40 or above)	

Name: Signed:.....

Business Unit:..... Line Manager.....

The Company treats personal data collected in this medical questionnaire in accordance with its data protection policy.

Information about how data is used and the basis for processing the data is provided in the Company's privacy notice.