

## APPENDIX B: DBS RISK ASSESSMENT TEMPLATE – EMPLOYEES STARTING WORK BEFORE AN ENHANCED DBS CERTIFICATE IS RECEIVED

**All other pre-employment checks must be completed before submitting this form to the relevant CMT manager**

Name of Manager.....

Full Name of Applicant.....

Position Applied For.....

Service Area.....

Questions		Comments
1	<p>Have all necessary Pre-employment checks been completed, including where applicable:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> References checked and verified.</li> <li><input type="checkbox"/> Application form checked. (Signed &amp; Dated by applicant)</li> <li><input type="checkbox"/> Evidence of Professional Qualifications.</li> <li><input type="checkbox"/> References</li> <li><input type="checkbox"/> Right to work in UK documentation.</li> <li><input type="checkbox"/> Proof of Identity.</li> <li><input type="checkbox"/> Medical Clearance.</li> </ul>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
2	Has a DBS application has been completed?	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
3	Is this post eligible for a check of the Barred List(s)?	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
4	<p>Has the relevant Barred List check(s) been undertaken?</p> <p><b>CHILDREN'S BARRED LIST</b></p> <p><b>ADULTS' BARRED LIST</b></p> <p><b>Is the applicant barred from working with Children/Adults</b></p> <p>Checked by .....</p> <p>Signed.....Date.....</p>	<p>HR Admin Team only</p> <p><b>Yes No N/a</b></p> <p><b>Yes No N/a</b></p> <p><b>Yes No N/a</b></p>

Questions		Comments
5	What level of safeguards can be implemented, e.g. how much supervision is available from an appropriately qualified and experienced member of staff / no unsupervised contact / induction only	
6	Has the applicant advised of any disclosures that the DBS check will show? If so, what is the impact of these – see Cause for Concern Risk Assessment Proforma (Appendix C)	Yes <input type="checkbox"/> No <input type="checkbox"/>
7	Any questions/additional comments from the applicant?	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>Declaration by applicant:</p> <p>I understand that if I am allowed to start work before my enhanced DBS check is returned, it is subject to the information I have supplied and that this is complete and correct. False information, or a failure to supply the details required could lead to termination of employment.</p> <p>Signature: ..... Date.....</p>		

Additional comments by Manager:

Outcome of Risk Assessment (delete as appropriate):

Allow employee to begin before the enhanced DBS is returned?

Yes

No

Name of Authorising Manager: .....

Signature of Authorising Manager: .....

I have considered the content of this risk assessment and give approval for the applicant to start in position, with the safeguards set out above put in place, prior to the return of an enhanced DBS check.

Name of CMT Manager.....

Signature of CMT Manager .....

Date .....