# APPENDIX C: DBS RISK ASSESSMENT TEMPLATE SAFER RECRUITMENT – EMPLOYEES STARTING WORK BEFORE AN ENHANCED DBS CERTIFICATE IS COMPLETED *(All other recruitment checks must be completed before submitting this form to the Assistant Director).*

Name of Manager………………………………..…….……………………………

Full Name of Applicant……….…………………..………………………………..

Position Applied For……………………………………………………….………..

Director/Service Area…….…………………………………………………….…...

| Questions | | Comments |
| --- | --- | --- |
| 1 | Have all necessary Pre-employment checks been completed, including where applicable:   * DCCR * Mandatory registrations. e.g. HCPC/QTS etc. * Candidate Interview notes. * References checked and verified. * Application form checked. (Signed & Dated by applicant) * Job Description. * Evidence of Professional Qualifications. * References * Right to work in UK documentation. * Proof of Identity. * Medical Clearance. * Starter Form. * Bank & Personal Details Form. * Candidate Interview Assessment Form. | Yes No |
| 2 | Has the Recruitment team confirmed they have received all the required above paperwork? [recruitment@lincolnshire.gov.uk](mailto:recruitment@lincolnshire.gov.uk) | Yes No |
| 2 | Has the Disclosure team confirmed a DBS application has been received? [disclosures@lincolnshire.gov.uk](mailto:disclosures@lincolnshire.gov.uk) | Yes No |
| 3 | Is this post in Regulated Activity ([*Appendix*](http://www.lincolnshire.gov.uk/jobs/manuals/employment-manual/recruitment-selection-and-induction/disclosure-and-barring-service-(dbs)-policy-and-procedures/114222.article) *A*) and therefore eligible for a check of the Barred List(s)? | Yes No |
|  |  |  |
| 4 | Has the relevant Barred List check(s) been undertaken?  **CHILDREN'S BARRED LIST**  **ADULTS' BARRED LIST**  **Is the applicant barred from working with Children/Adults**  Checked by ………………………………………………  Signed………………………………Date………………. | DBS Admin Team only  **Yes No N/a**  **Yes No N/a**  **Yes No N/a** |
| 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 [Appendix](http://www.lincolnshire.gov.uk/jobs/manuals/employment-manual/recruitment-selection-and-induction/disclosure-and-barring-service-(dbs)-policy-and-procedures/114222.article) E: Cause for Concern Risk Assessment Proforma. | Yes No |
| 7 | Any questions/additional comments from the applicant? | Yes No |

Declaration by applicant:

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.

Signature: ……………………………..… Date…………………….………………

Additional comments by Manager:

Outcome of Risk Assessment (delete as appropriate):

Allow employee to begin before the enhanced DBS is returned?

Yes

No

Please state (if applicable) whether approval is dependent upon conditions being met, such as recommendations, restrictions or safeguards to be implemented by the employing service:

Name of Authorising Manager: ……………………………………………………….

Signature of Authorising Manager: ……………………………………………………

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| 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 Assistant Director………………………………………………………….  Signature of Assistant Director ……………………………………………………..  Date ……………………………… |

Updated RJ Jan 2016