Doncaster and Bassetlaw Teaching Hospitals
NHS Foundation Trust

Working with Vulnerable Adults and Children – Disclosure and Barring Service (DBS)

This procedural document supersedes: CORP/EMP 17 v.8 - Working with Vulnerable Adults and Children – Disclosure and Barring Service (DBS)



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Amendment Form

Version	Date Issued	Brief Summary of Changes	Author
Version 9	August 2026	• Section 13 moved to section 6 • Risk assessment document when DBS returned with convictions added • Process for positive disclosure on model declaration added	Kelly Fairhurst
Version 8	July 2023	• Update on types of DBS Check • Details of overseas checks included • Job title and teams updated • Order reformatted	Kelly Fairhurst
Version 7	January 2020	• Update regarding DBS Update Service • Update to reflect Trust decision to charge prospective employees for DBS Checks • Details on process when DBS is returned with convictions	Kelly Fairhurst
Version 6	September 2015	• Title change • Updated to reflect change of arrangements (as described in paragraph 1). • Reflects Care Act 2014 terminology.	John Scott
Version 5	May 2011	• Title change • Updated to reflect introduction of mandatory ISA registration 26 July 2010.	H Selvedge
Version 4	November 2009	• Updated to reflect changes on 12.10.09 with the introduction of ISA.	H Selvedge
Version 3	June 2008	• Appendix A added to policy entitled 'Criminal Records Bureau – Information and Guidelines'. This provides further, more detailed information to support the main policy. • Page 5, section 6 – Procedure. A paragraph has been added re current members of staff being recruited into other posts within the Trust. • Page 7, Section 8 – Timescales. A paragraph on the portability of CRB disclosures has been removed. This document has been reviewed, without change.	S Francis

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1 INTRODUCTION

At Doncaster and Bassetlaw Teaching Hospitals (DBTH), our vision is simple but powerful:

Healthier Together – Delivering Exceptional Care for All.

This vision guides everything we do and reflects our ambition to deliver the very best outcomes for our patients, while ensuring our colleagues feel supported, respected, and empowered. We all have a duty to treat adult patients, children and young people, relatives and carers with respect and dignity at all times. Many of our jobs involve working with children (under 18's) or vulnerable adults (or Adults at Risk, as the Care Act 2014 describes them) and, for these jobs, there are specific safeguarding measures which must be followed. This involves checking people's background history to ensure there is nothing to prevent them from working with vulnerable adults and children.

From December 2012, the Disclosure and Barring Service (DBS) was formed by the merger of the Criminal Records Bureau (CRB) and the Independent Safeguarding Authority (ISA) under the Protection of Freedoms Act 2012. It is a legal requirement in the UK for regulated activity employers to refer safeguarding concerns to the DBS. It is illegal for anyone barred by the DBS to work or apply to work with the sector (children or adults) from which they are barred. It is also illegal for an employer to knowingly employ a barred person in the sector from which they are barred.

The DBS provides access to information across England and Wales about criminal convictions and other police records to help employers make an informed decision when recruiting new starters. This information is known as a 'disclosure'.

The Rehabilitation of Offenders Act (Exceptions) Orders 1975 allows the Trust to require healthcare workers to disclose details of criminal convictions, which would otherwise be 'spent' in terms of the Act.

2 PURPOSE

Our overriding priority is to ensure that patients are protected from anyone who may wish to harm them. We will not employ anyone who has not received clearance to work in regulated activity with vulnerable adults and children. We will not employ anyone who is held on the barred list by the DBS. Anyone found to be seeking work with vulnerable groups, whilst on the barred list will be referred to DBS and liable for criminal penalties.

3 DUTIES AND RESPONSIBILITIES

All Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust (DBTH) colleagues and volunteers must ensure they have the appropriate clearance to work in the Trust.

The People & Organisational Development (P&OD) Medical HR and Recruitment Teams* are responsible for ensuring that all pre-employment checks are carried out correctly in line with the NHS Employers standard checks.

*For recruitment administration undertaken by Divisions/Directorates they are responsible for these checks.

Line managers in areas covered by regulated activity are responsible for ensuring that their new starters have the appropriate clearance levels prior to them commencing in post. Confirmation will be received from the Recruitment/ Medical HR Team.

The Chief People Officer is responsible for the implementation of this policy and for ensuring that administrative systems are in place for managing DBS activity in accordance with the DBS Code of Practice and the Data Protection Act.

The Safeguarding Team is responsible for providing advice, guidance and support to DBTH colleagues on all aspects of safeguarding.

If an applicant for employment with DBTH fails to disclose information regarding a criminal conviction, caution, warning, reprimand, or bind over [regardless of if they are spent or unspent] and this information subsequently comes to light the applicant is potentially guilty of committing an offence under the Fraud Act 2006. This may lead to the withdrawal of the offer of employment and the matter being referred to the Trust's Local Counter Fraud Specialist.

This policy is designed to supplement the Trust's Recruitment and Selection Policy.

4 PROCEDURE

4.1 Pre-employment checks

The P&OD Medical HR and Recruitment Teams* are responsible for ensuring that all pre-employment checks are carried out correctly including DBS Disclosure checks. DBTH has engaged a partner organisation, Trac & First Advantage, to manage the checking process on our behalf.

The Medical HR and Recruitment Teams use the DBS eligibility tool to determine if a DBS check is required and the level of disclosure https://www.nhsemployers.org/articles/dbs-eligibility-tool

In addition to a DBS check all candidates with a conditional offer of appointment are required to complete a Model Declaration Form (A or B). Model Declaration Forms are a self-declaration response to a range of questions to help assess suitability for employment in the NHS including questions regarding criminal record history and professional registration. If a positive declaration is made it may not automatically exclude a candidate from being considered for a role at DBTH depending on the role and the disclosure. The process outlined in Appendix 5 will be followed to determine suitability

* Divisions/Directorates are responsible processing pre-employment checks where recruitment administration is not undertaken by the POD Medical HR/Recruitment Team

4.2 Types of DBS checks

There are four types of DBS disclosures:

Basic DBS Check

Basic checks may be obtained for positions that are covered by Rehabilitation of Offenders Act 1974, referred to within legislation as non-exempt positions. A basic check provides information about conditional cautions and convictions that are unspent only. Basic checks may be considered for any NHS position that would not normally be eligible for a standard or enhanced check. It is suggested that this level of check applies to roles which have a higher level of responsibility, accountability, or trust and where such a check would be considered proportionate to any associated risks.

Standard DBS check

Standard checks must only be obtained for professions or positions which are listed as exempt under the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended).

A standard check provides information about spent and unspent criminal convictions, cautions and other such offences that are not protected (i.e. eligible for filtering). This may also include information about any offences committed in Scotland and Northern Ireland that may equally be regarded as an offence under English law

To meet eligibility for a standard check, the position must require the individual in that role to be involved in the provision of a health service which would also give them access to persons in receipt of health services as part of their normal duties.

Enhanced DBS check

To be eligible to request an enhanced check, the position must be listed as exempt under the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended) and, in addition, be listed in the Police Act 1997 (Criminal Records) (Amendment) Regulations 2013 as work with adults and/or work with children. These are for posts that involve a far greater degree of contact with children or vulnerable adults. In general, the type of work will involve regularly caring for, supervising, training or being in sole charge of such people

The enhanced check will provide the same information as a standard check. In addition, it will also include any other relevant information that may be held on local police databases which the chief officer reasonably believes should be disclosed and considered by an employer. Including cautions or convictions that may be protected.

Enhanced DBS check with barred information

Barred list information is not routinely provided in an enhanced check. To be eligible to request information held against the adults and/or children's barred list(s), the position must involve a regulated activity as stipulated with Safeguarding Vulnerable Groups Act 2006. This level of check will include the same information as the enhanced disclosure, it will also outline whether the person is barred from carrying out certain activities with children and/or adults, as may be applicable to the role.

The Recruitment Team/Medical HR Team will check the level of DBS check selected on Trac by the Hiring Manager is the appropriate level for the role being undertaken.

The disclosure certificate will be sent directly to the individual, and they will only need to present their original copy of the disclosure certificate to the Medical HR/Recruitment Team* if it is returned with convictions.

*Or Divisional/Director recruitment administration team

4.3 DBS Update Service

In June 2013 the DBS introduced the update service with the aim of helping to improve the speed of the recruitment process by making it easier to apply for DBS checks.

The DBS update service is an online subscription service that lets individuals keep their standard or enhanced DBS certificates up to date. It allows employers to check a certificate on line, with the individuals consent, and therefore enables people to move roles within the NHS or to other sectors without the need for a new DBS check. Employees would only need a new DBS check if they were changing the type of vulnerable group they were working with e.g. from adult to child.

Joining the update service is voluntary and does carry a charge which employees would be responsible for paying for on an annual basis. Employees would need to join the update service at the same time that they are applying for a new DBS check, or within 30 days of the date on the certificate when received. Further information about the update service can be found be following this link: https://www.gov.uk/dbs-update-service.

4.4 DBS Filtering Rules

The DBS filtering rules were introduced on 29 May 2013 under the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) 2013. From this date, certain spent or minor convictions and cautions are now protected (or filtered out) when certain conditions are met, and they will never appear in a DBS disclosure certificate.

These rules were updated on 28th November 2020 as follows:

- Warnings, reprimands, youth cautions and youth conditional cautions will no longer be automatically disclosed on a DBS certificate.
- The multiple conviction rule has been removed, meaning that if an individual has more than one conviction, regardless of offence type or time passed, each conviction will be considered against the remaining rules individually, rather than all being automatically disclosed.
- the Trust must be careful to ensure that they do not inadvertently ask for or, consider information which falls under the DBS filtering rules and use this to make a recruitment or employment decision

Further information can be found at: https://www.gov.uk/government/publications/dbs-filtering-guidance/dbs-filtering-guide

4.5 Adverts

The requirement for a DBS disclosure check must be included in all job adverts and the conditional offer of appointment. Where a DBS is required any offer of employment will be subject to a satisfactory check being obtained prior to commencement in post.

4.6 DBS Costs

The Trust is passing on the cost of the DBS checks on to prospective employees. Prospective employees can pay for their DBS check over their first two months' salary. In the event that a candidate withdraws from the recruitment process or the Trust retracts an offer of employment due to unsatisfactory pre-employment checks the amount of the DBS check will still be payable by the candidate through an invoice from the Trust's Finance Department.

4.7 Commencing Prior to a DBS

As a rule, people should not start work before all pre-appointment checks are complete. In some very exceptional circumstances - for example where there is no risk to patient safety or welfare; where someone is currently working in the Trust but changing employer or where induction training is planned - it may be possible to allow commencement in post with relevant safeguards in placet. You should discuss this with the Medical HR Team (for medical recruitment) or Recruitment Team (agenda for change recruitment).

The appointing manager will be required to complete a risk assessment (appendix 3) authorised by a member of the Divisional/Directorate Senior Leadership Team e.g. Divisional General Manager, Divisional Lead Nurse, Divisional Director. The risk assessment document asks about any declarations the individual has made, any risks associated with appointing before DBS clearance is received and if there are adjustments which can be made to working arrangements until the clearance is received which would mitigate any risks, i.e. being able to be supervised at all times. On completion of the risk assessment by the hiring manager, it must be sent for final authorisation from

the Head of Recruitment and Medical HR, Recruitment Manager or Medical HR Manager before the individual can commence work.

DBS disclosure checks are not portable from other organisations, no matter how recently they were undertaken, unless the prospective employee is on the DBS Update Service.

4.8 Doctors in Training Only

Doctors on educational training rotations are regarded as being in continuous employment for the full term of their training programme.

Trainee doctors who are not subscribed to the DBS update service must have a DBS check at least once every three years. Employing organisations will need to seek written confirmation that a DBS check has been obtained within the preceding three-year period and it is at the correct level for the role they will be undertaking. This would normally be through the doctor providing the original certificate.

4.9 Existing Employees

There is no requirement to obtain a fresh DBS check on existing employees who are changing roles within the Trust where the roles and responsibilities of the new job do not change the type or level of DBS clearances required. If there is no evidence on ESR of a previous check a new DBS check will be required.

If the new role does require a DBS check the cost of the DBS check will be passed on to the employee.

All employees are required to report any police allegations, convictions, cautions, reprimands or warnings that occur during the course of their employment, whether at home or abroad to their line manager within 5 working days, or as soon as reasonably practicable. Failure to do so will be treated as a disciplinary offence and may result in dismissal. Line managers are responsible for discussing any reported incidents with the appropriate People Business Partner to identify if any action is required.

4.8 Overseas Police Checks

Where a successful applicant is currently working overseas the Trust will request an overseas police check.

Overseas police checks must be in accordance with the relevant country's justice system. Some police authorities overseas will only provide a certificate of good conduct or standing. Any such certificates issued by a police authority are valid and can be accepted. A certificate of good standing

issued by an overseas regulator is not equivalent to a police check but may still be helpful to inform the overall assessment of suitability for a role.

Any overseas police certificates will be verified in the exact same way as all other official documentary evidence to ensure they are legitimate and relate to the person presenting themselves.

In addition to any overseas police check, the Trust will obtain a DBS check to assure ourselves that the person does not have a criminal record in the UK; and, where relevant to the role, is not barred from working with children and/or adults.

5 DBS DOCUMENTATION RETURNED WITH CONVICTIONS

Applicants with a criminal conviction or criminal record are not automatically barred from employment with DBTH. However, if a positive disclosure is returned, the hiring manager will discuss this with the prospective employee and seek advice from the Medical HR or Recruitment Team

The following procedure must be followed if the DBS documents for an employee or prospective employee are returned highlighting any convictions or disclosing any other relevant information.

The Medical HR Team or the Recruitment Team receive the DBS form and will raise any issues with the relevant recruitment manager and also notify the Head of Recruitment and Medical HR.

The details will initially be reviewed by the individual's immediate manager given the potential risk to patients, colleagues and the public they will subsequently escalate to their Director, which will typically be the Chief Medical Officer, Chief Nurse or Chief Operating Officer, or deputies depending on the role being offered. The relevant Director is responsible for making the Head of Recruitment and Medical HR aware of such matters, as appropriate, even if it is felt appropriate for the immediate manager to progress the matter.

A comprehensive review should be undertaken by the manager/Director, in order to decide whether the individual can continue to be employed or be offered employment in the role as a result of this offence/conviction.

This review will need to determine whether the existence of the offence/conviction poses any potential risks to patients, colleagues, the public or others and consequently whether the individual's employment will be affected. This will need to be a clearly documented and fair investigation into the facts of the particular case.

The following questions should be considered:

- What is the nature of the offence?
- What is the nature of the individual's job role?

- When was the offence committed?
- Is there a pattern of recurring offences?
- Is there a potential risk to others?
- If so, what is the degree and nature of this risk?
- Has the individual declared this conviction at an earlier stage, e.g. at the time of completing the DBS documentation or at another stage in the recruitment procedure?
- Does further information need to be gathered as part of this review?
- Is it appropriate to escalate to Safeguarding Team, to liaise with the relevant police authorities for further investigation

In parallel to the investigation undertaken as outlined above, the relevant manager/Director should also discuss this matter with the individual concerned this can be on the telephone, virtual meeting or meeting in person. This should be handled sensitively and non-judgementally with an aim of initially establishing whether the information provided by DBS is accurate and to explore the circumstances of the offence. If the conviction has not previously been disclosed the individual should also be asked why they have not disclosed the offence/conviction at an earlier stage of completing the DBS documentation.

Once the investigatory review has been completed, the Director, in conjunction with P&OD, will make a decision as to whether the individual can be accepted for employment or continue in their current role given the nature of the offence/conviction. Following investigation if it is felt that an individual has misled the Trust or withheld relevant information on the DBS documentation or during the recruitment process their offer of employment will be withdrawn (if they are a prospective employee). If the individual is a current employee this may constitute gross misconduct and disciplinary action may be taken in line with the Trust's Disciplinary Procedure.

This decision will be discussed with the individual and confirmed in writing, with reasons for the decision. If the outcome is a recommendation to consider the dismissal of an existing employee as a result of this matter, the appropriate disciplinary proceedings will be held in line with the Trust's Disciplinary Procedure.

In these cases, the DBS documentation and relevant investigation notes will be kept on the individual's personal file or recruitment file in a sealed envelope addressed 'Only to be opened by the Chief People Officer orDeputy Director of P&OD.

For further advice, or if there is a question of accuracy of the information provided by DBS, please contact the DBS – www.homeoffice.gov.uk/disclosure-and-barring

6 REFERRALS TO DBS

We are legally required to refer information about individuals who may pose a risk to children and vulnerable adults to the Disclosure and Barring Service. This is to ensure that any potential threats

to vulnerable groups can be identified and dealt with effectively. We must refer someone to DBS if we:

- dismissed them for harming someone
- removed them from working in a regulated activity because they might harm someone, or
- planning to dismiss them for either of the above reasons, but they resigned first.

The People Business Partner Teams can advise on all cases which may lead to dismissal and will inform the Head of Safeguarding of all DBS referrals

7 LEARNING/SUPPORT

The P&OD Medical HR and Recruitment Teams can provide any guidance on DBS checks. Guidance and relevant forms are also available on the Recruitment page of the Intranet.

Learning requirements for colleagues will be determined by their role and the competencies required to work safely and effectively. These requirements include national, local and role specific mandatory learning and are set in line with Trust and professional standards.

Role specific learning will be defined by the relevant subject matter expert or topic lead and coordinated through the Trust's agreed governance arrangements.

All mandatory and role specific learning requirements, completion status and competency records will be held in the colleague's personal Electronic Staff Record (ESR).

For further guidance, please see: **CORP/EMP 66 – Mandatory Learning Policy and DBTH Mandatory Learning Framework**

8 MONITORING COMPLIANCE WITH THE PROCEDURAL DOCUMENT

What is being Monitored	Who will carry out the Monitoring	How often	How Reviewed/ Where Reported to
Non-compliance of policy by Divisions and Directorates	People & OD Recruitment Team	On Going	Issues to be reported to respective Divisions and Directorate management teams
Review of Policy	Medical HR and Recruitment Teams in consultation with the DBTH Safeguarding Team	On Going	Amendments to reflect changes in Employment Law, and DBTH processes/procedures.
Compliance of Policy	Internal Audit	As Required	As per audit practice

Compliance with Policy	Senior Responsible Manager in P&OD (Deputy Director)	Annual	Sample check of processes undertaken and results recorded. Action plans developed to resolve process failures / mitigate risks. Issues reported to respective Divisions and Directorate management teams

9 DEFINITIONS

Adult at Risk: The Care Act 2014 defines an adult at risk as a person aged 18 years or over who:

- has needs for care and support (whether or not the local authority is meeting any of those needs) and;
- is experiencing, or at risk of, abuse or neglect; and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse or neglect.

DBS: Disclosure and Barring Service

Regulated activity: Work that a barred person must not do in relation to children comprises, in summary:

(i) Unsupervised activities: teach, train, instruct, care for or supervise children, or provide advice/ guidance on well-being, or drive a vehicle only for children.

(ii) Work for a limited range of establishments ('specified places'), with opportunity for contact: e.g. schools, children's homes, childcare premises.

10 EQUALITY IMPACT ASSESSMENT

The Trust aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are disadvantaged over others. Our objectives and responsibilities relating to equality and diversity are outlined within our equality schemes. When considering the needs and assessing the impact of a procedural document any discriminatory factors must be identified.

An Equality Impact Assessment (EIA) has been conducted on this procedural document in line with the principles of the Equality Analysis Policy (CORP/EMP 27), the Equality Diversity and Inclusion Policy (CORP/EMP 59) and the Civility, Respect and Resolution Policy (CORP/EMP 58).

The purpose of the EIA is to minimise and if possible, remove any disproportionate impact on employees on the grounds of race, sex, disability, age, sexual orientation or religious belief. No detriment was identified. (See Appendix 5)

11 ASSOCIATED TRUST PROCEDURAL DOCUMENTS

CORP/EMP 14	Freedom to Speak Up Policy 'Speak up to make a difference'
CORP/EMP 27	Equality Analysis Policy
CORP/EMP 66	Mandatory Learning Policy
CORP/FIN 01 (D)	Fraud, Bribery and Corruption Policy and Response Plan
CORP/ICT 07	Data Protection Policy
CORP/RISK 33	Incident Management Policy
PAT/PA 03	Discharge of Patients from Hospital Policy
PAT/PA 19	Mental Capacity Act 2005 – Policy and Guidance, including Deprivation of Liberty Safeguards (DoLS)
PAT/PA 28	Privacy Dignity and Safety in Hospital Accommodation
PAT/PS 08	Safeguarding Adults Policy
PAT/PS 10	Safeguarding Children Policy
PAT/PS 12	Domestic Abuse Policy

12 DATA PROTECTION

Any personal data processing associated with this policy will be carried out under 'Current data protection legislation' as in the Data Protection Act 2018 and the UK General Data Protection Regulation (GDPR) 2021.

For further information on data processing carried out by the trust, please refer to our Privacy Notices and other information which you can find on the trust website: https://www.dbth.nhs.uk/about-us/our-publications/information-governance/

DBTH will comply with the DBS Code of Practice and Data Protection Act requirement on the handling, use, storage, retention and disposal of disclosures. Specifically, disclosure information will:

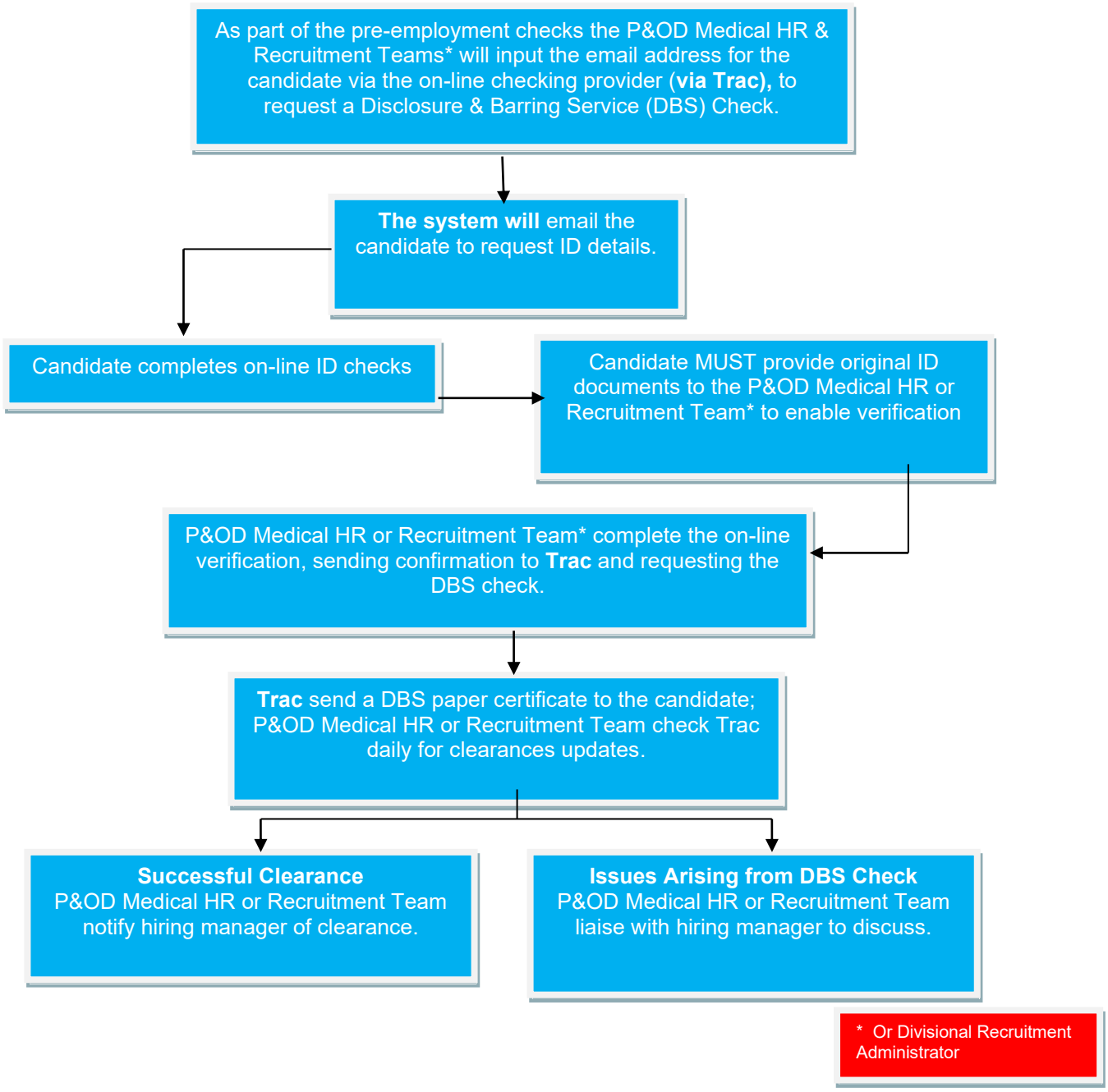
- be kept securely in P&OD
- not be shared or passed to anyone not entitled to receive it
- be used only for the specific purpose for which it was requested
- normally only be retained for 6 months and then destroyed
- record basic details of the disclosure, post title, subject title, recruitment decision taken.

13 REFERENCES

Disclosure and Barring Service https://www.gov.uk/government/organisations/disclosure-and-barring-service

The Care Act 2014. Factsheet

APPENDIX 1 – HOW TO OBTAIN DBS CLEARANCE



APPENDIX 2– DBS RISK ASSESSMENT

RISK ASSESSMENT FORM FOR RECORDING AND DETERMINING THE RISK OF A NEW EMPLOYEE STARTING BEFORE THEIR DISCLOSURE & BARRIING SERVICE (DBS) CHECK HAS BEEN RECEIVED

Please note that this form should not be completed until all other pre-employment checks, including reference and professional registration etc. have been completed and found to be satisfactory.

This form must be completed to ensure all risks have been assessed and a written record placed on their personal file of the decision made.

Name of Candidate: …… …… …….

Position Applied For:…….

Level of Disclosure requested:……

Name of Appointing Manager: ……..

Name of Department/Service: …… ……..

The Possible Risks listed are only examples and managers should ensure that they add any other appropriate risk categories

Risk Factor	Yes	No	Comments/Action/Decision*
Does this person require Independent Safeguarding Authority registration			**If you have answered YES. You must not employ this person without checking their ISA registration**
Have all pre-employment checks been completed satisfactorily (except DBS)			
Have they completed and returned their DBS as requested in their conditional offer of employment letter?			
Have they signed & returned the Trust model declaration form?			
Has the applicant declared any unspent criminal convictions/ cautions on their application/declaration form or DBS application form? If yes please provide details			
Have they worked for the Trust previously? If so when and in what role?			

Are they currently working in the NHS?			
Have they had a previous DBS? What was level of DBS check?			
Can they show us an original copy of a previous DBS disclosure?			
Do they have an overseas police check certificate, if appropriate?			
What was the nature of the job they were doing previously?			
Will they be alone with service users (particularly at night)?			
What are the risks associated to them starting without a check?			
Can measure be put in place temporarily until the DBS check is received? Please provide details. Examples include close supervision, no access to patients unsupervised, no lone working, no access to money or medicines, undertake induction only			
Overall Assessment			
Bearing in mind the nature of the job – exposure to money, expectation of trust, risk to service users, it is appropriate to employ this individual given what they have said and the nature of the work they are applying for?			
If the decision is to appoint, the manager must discuss and sign this off with their Divisional Manager and Recruitment Manager/Medical HR Manager/Head of Recruitment and Medical HR	Please tick if agreed	Please tick if not agreed	Divisional General Manager/Divisional Lead Nurse/Divisional Director Signature: Date Medical HR/Recruitment Manager Signature: Date:

***** Please continue on a separate sheet and submit with this form if required

APPENDIX 3 – DBS WITH CONVICTIONS RISK ASSESSMENT

This form must be completed to ensure all risks associated with convictions identified on the DBS have been assessed and a written record placed on their personal file of the decision made regarding continuation of an offer of appointment.

Name of Candidate: ……

Position Applied For:……

Name of Hiring Manager: ……

Name of Department/Service: ……

Review Question	Comments / Findings
What is the nature of the offence?	
What is the nature of the individual's job role?	
When was the offence committed?	
Is there a pattern of recurring offences?	
Is there a potential risk to others?	
If so, what is the degree and nature of this risk?	
Why has the individual not declared this conviction at an earlier stage, e.g. at the time of completing the DBS documentation or at another stage in the recruitment procedure?	

Does further information need to be gathered as part of this review?	
Is it appropriate to contact the relevant police authorities for further investigation? In these cases, the P&OD department would co-ordinate this request.	
Recommended Decision	Appoint: Not to approving: Name: Job Title: Date:
If decision to continue with offer of employment approval required from Chief Medical Officer, Chief Nurse,(for professionally registered practitioners) or Divisional Leadership Team (non-clinical roles)	Name: Job Title: Date:

APPENDIX 4 – MODEL DECLARATION POSITIVE DISCLOSURE

Step 1: Send Model Declaration Form to the candidate with conditional offer letter via Trac.
For clinical positions use Model Declaration Form A for non-clinical positions us Model Declaration B.

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Step 2: When applicant returns completed Model Declaration form, Medical HR/Recruitment Admin to check the form to ensure all sections have been completed and if candidate has ticked YES in any of the boxes and if so, further information has been provided.

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Step 3a: If answered NO to all sections and DBS, professional registration and HPAN are clear then can be 'succussed' on Trac and proceed with offer of employment

Step 3b:
If answered YES to any sections, then escalate internally to Medical HR/Recruitment Manager/Head of Recruitment & Medical HR along with

- DBS - if the conviction shows on DBS outcome, send DBS alongside Model Declaration to the appointing manager.
- Online Professional Registration check – Download registration information and send with Model Dec.

If DBS or fitness to practice identified a conviction/condition but nothing has been declared on Model Declaration, escalate as above.

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Step 4:
Medical HR/ Recruitment Manager/Head of Recruitment & Medical HR will discuss with the Divisional Director/Hiring Manager. If they still wish to continue with offer of appointment escalate to the Chief Medical Officer, Chief Nurse, Divisional Manager or Chief People Officer as appropriate.

Subject to the outcome of discussions follow Step 3a above or Step 5 below

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Step 5:
After the Model Dec has been discussed at the appropriate level, a decision on whether to proceed with the offer of employment will be confirmed in writing. If happy to continue, mark the Model Dec on Trac as successful and add clear notes confirming the manager's approval.

If withdrawal is required the appropriate manager must contact the applicant to inform them of the outcome follow this up in writing/email. This should be shared with the Medical HR/Recruitment Team and Trac will be updated as required.

APPENDIX 5 – EQUALITY IMPACT ASSESSMENT PART 1 INITIAL SCREENING

Service/Function/Policy/Project/Strategy	Division	Assessor (s)	New or Existing Service or policy?	Date of Assessment
Working with Vulnerable Adults and Children – Disclosure and Barring Service (DBS)	People & Organisational Development	Kelly Fairhurst	Existing Policy	August 2026

1) Who is responsible for this policy? P&OD

2) Describe the purpose of the service / function / policy / project/ strategy? Protecting patients

3) Are there any associated objectives? Legal requirement

4) What factors contribute or detract from achieving intended outcomes? – Diligence of P&OD Medical HR and Recruitment Teams in following process.

5) Does the policy have an impact in terms of age, race, disability, gender, gender reassignment, sexual orientation, marriage/civil partnership, maternity/pregnancy and religion/belief? None identified

- If yes, please describe current or planned activities to address the impact – NA

6) Is there any scope for new measures which would promote equality? NA

7) Are any of the following groups adversely affected by the policy? No

Protected Characteristics	Affected?	Impact
a) Age	No	
b) Disability	No	
c) Gender	No	
d) Gender Reassignment	No	
e) Marriage/Civil Partnership	No	
f) Maternity/Pregnancy	No	
g) Race	No	
h) Religion/Belief	No	
i) Sexual Orientation	No	

8) Provide the Equality Rating of the service / function /policy / project / strategy – tick (✓) outcome box

Outcome 1 ✓	Outcome 2	Outcome 3	Outcome 4

If you have rated the policy as having an outcome of 2, 3 or 4, it is necessary to carry out a detailed assessment and complete a* **Detailed Equality Analysis form – see CORP/EMP 27.

Date for next review:	April 2029 (Policy valid until October 2029)
Checked by:	Adam Evans
Date:	October 2026