Disclosure and Barring Service (DBS) Policy and Procedure

Date approved: 16 May 2017
**Disclosure and Barring Service (DBS) policy and procedure**

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<td>HR Advisor</td>
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**Brief summary of document**

In order to comply with legislation, NHS Kernow Clinical Commissioning Group (known as NHS Kernow) has a duty to protect vulnerable groups of people by ensuring appropriate levels of disclosure from the DBS are sought for all successful applicants for posts involving access to vulnerable adults or children. This includes volunteers, bank staff and persons holding honorary contracts. NHS Kernow also has a duty to ensure that all agency and contracted staff have been subject to the appropriate level of DBS check before commencing work for NHS Kernow.

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<tr>
<th>This document replaces (exact title of previous document or NA)</th>
<th>Criminal Record Bureau Disclosure Policy</th>
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<tr>
<td>Approved Equality Impact Assessment attached</td>
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<tr>
<td>Cross referenced to:</td>
<td>Anti-Fraud &amp; Bribery Policy</td>
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<td>Appraisal/PDR Guidance Notes &amp; Form</td>
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<td>Disciplinary Policy</td>
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<td>Disciplinary Policy</td>
<td>NHS Employers: Criminal Records and Barring Checks</td>
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<tr>
<td>Recruitment and Selection of Staff (Management Guidance)</td>
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## Version control

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<tr>
<th>Version No</th>
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<tr>
<td></td>
<td>3 March 2017</td>
<td>Jayne Marsh, HR Manager</td>
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<td>4</td>
<td>20 September 2018</td>
<td>Vicky Elliott</td>
<td>4.2.3: Annual subscription fees can be reclaimed via NHS Kernow’s expenses system.</td>
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1. **Aim**

To comply fully with the Disclosure Barring Service (DBS) code of practice in the recruitment of staff; to ensure the protection of service users (children and vulnerable adults) and the fair treatment of any subject of a disclosure certificate.

2. **Introduction**

NHS Kernow recognises the importance of pre-employment disclosure checks in line with the DBS Code of Practice, and in accordance with the following legislation and guidance:

- Criminal Justice and Court Services Act (Part II) (2000)
- Criminal Records Registration Regulations 2006
- Data Protection Act 1998
- Mental Health Act (1983)
- NHS Employers Employment Checks – Criminal Records and Barring Checks July 2013
- Police Act (Part V) 1997 (Criminal Records) (Amendment) Regulations 2013
- Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975
- Rehabilitation of Offenders Act 1974 (Exclusions and Exceptions) (Scotland) Order 2003
- Legal Aid, Sentencing and Punishment of Offenders Act 2012

Having a spent or unspent conviction, caution, reprimand or a criminal record will not necessarily prevent successful candidates from taking up employment with NHS Kernow. This will depend on the nature, circumstances and background to the offence(s) committed.

3. **Scope**

3.1 This policy and procedure applies to all new employees, volunteers and existing members of staff moving within the organisation, regardless of the contract type (e.g. substantive, fixed term, honorary, preceptee, secondment, and those returning from flexible retirement).

3.2 Agency workers and medical locums should be checked by their agency.

4. **Policy**
4.1 Recruitment of ex-offenders

4.1.1 NHS Kernow is committed to the fair treatment of its employees, potential employees and users of its services regardless of race, gender, religion, sexual orientation, responsibilities for dependents, age, physical/mental disability or offending background. We therefore welcome applications from a wide range of candidates, including those with criminal records.

4.1.2 NHS Kernow is required by the DBS Code of Practice to treat disclosure applicants who have a criminal record fairly and not to discriminate because of a conviction or other information revealed. A copy of this code is available on request.

4.1.3 NHS Kernow is committed to equality of opportunity for all job applicants and aims to select people for employment on the basis of their individual values, skills, abilities, experience, knowledge, and, where appropriate, qualifications and training. NHS Kernow will therefore consider ex-offenders for employment on their individual merits. NHS Kernow’s approach towards employing ex-offenders differs, however, depending on whether the job is or is not exempt from the provisions of the Rehabilitation of Offenders Act 1974.

4.2 Jobs that are exempt from the Rehabilitation of Offenders Act 1974

4.2.1 If the job into which NHS Kernow is seeking to recruit is one of the excluded jobs listed in the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 or the Rehabilitation of Offenders Act 1974 (Exclusions and Exceptions) (Scotland) Order 2003, NHS Kernow will require the applicant to disclose all convictions, whether spent or unspent (other than where protected cautions and protected convictions do not need to be disclosed, depending on the job concerned) on their application form or sent under separate, confidential cover, to the Human Resources (HR) team (giving full details of post applied for), and we guarantee that this information will only be seen by those who need to see it as part of the recruitment process.

4.2.2 Even in these circumstances, however, NHS Kernow will not refuse to employ an applicant unless the nature of the conviction has some relevance to the job for which the individual has applied.

4.2.3 Furthermore, if the job is exempt, NHS Kernow will, once it has selected the person to whom it wishes to offer employment, seek documentary evidence about that person's criminal convictions. NHS Kernow will seek the applicant's agreement to make a joint application to the DBS for a standard or enhanced disclosure (as appropriate). NHS Kernow will reimburse the individual the fee for obtaining the appropriate criminal records certificate. Where the individual is a
member of the DBS update service, NHS Kernow will, with his or her permission, carry out a status check on any current certificate. Annual subscription fees can be reclaimed via NHS Kernow’s expenses system.

4.2.4 NHS Kernow is committed to ensuring that all information provided about an individual's criminal convictions, including any information released in disclosures, is used fairly and stored and handled appropriately and in accordance with the provisions of the Data Protection Act 1998. Data held on file about an individual's criminal convictions will be held only as long as it is required for employment purposes and will not be disclosed to any unauthorised person.

4.2.5 Any query regarding offences declared in the recruitment process will be dealt with by the recruiting manager and the HR team.

4.2.6 At interview or in a separate discussion, we ensure that an open and measured discussion takes place on the subject of any offences or other matter that might be relevant to the position. Failure to reveal information that is directly relevant to the position sought could lead to withdrawal of an offer of employment or appropriate disciplinary action under NHS Kernow's Disciplinary Policy.

4.2.7 We undertake to discuss any matter revealed in a disclosure with the person seeking the position before withdrawing a conditional offer of employment.

4.2.8 Should you have any queries regarding the disclosure process, please contact the HR team.

5. Procedure

5.1 Responsibilities

5.1.1 Managers:

- Identifying the need for a DBS check and the level required (see managers guidance; advice can also be obtained from the HR team, gov.uk or NHS Employers) for:
  - honorary contracts
  - returning to work following flexible retirement
  - joining the organisation as a new starter or volunteer
  - moving to another position within the organisation

It is illegal to carry out a DBS check on any post that does not require one.
• Ensuring staff awaiting a satisfactory DBS check work under supervision, where appropriate, until a satisfactory DBS check is received (see managers guidance).
• Individuals requiring a children’s check are unable to commence under supervision under any circumstances.
• If a risk assessment is required, ensuring the outcome is recorded in the personal file (P file).
• Ensuring correct confirmation of check is held on the individual’s P file:
  o name and vacancy reference number (where applicable)
  o job title
  o issue date
  o disclosure number
  o level of check
• It is not permitted to hold a copy of the DBS disclosure certificate within the P file.
• Ensuring that each individual completes a self-declaration form (see managers guidance) during the appraisal process.
• Ensuring that appropriate DBS checks have been obtained for agency staff, where appropriate, within the last 12 months by seeking and evidencing assurances from the agency.
• Ensuring that appropriate DBS checks have been carried out at the correct level, where appropriate, for staff providing emergency services, support with emergency or complex cases, or speciality training in NHS Kernow from another NHS organisation.
• Discussing any unsatisfactory DBS disclosure with the HR team.
• Ensuring the job description and person specification include reference to the DBS check and level required

5.1.2 Recruitment services:

• Oversight of the TRAC recruitment system through which applicants complete their DBS form electronically for the system to process.
• Informing NHS Kernow’ HR team of any DBS disclosures received by TRAC declaring convictions.
• Monitor DBS progress on TRAC; follow-up any that have not progressed.

5.1.3 Counter-signatory (for DBS checks processed outside of the TRAC system):

• Ensuring the details completed within the DBS form satisfy the requirements of the DBS (e.g. five years’ previous address history), and comply with the Disclosure and Barring Service Code of Practice.
• Signing applications and receiving disclosures.
• Controlling the use and security of disclosures.
• Confirming the identity of the applicant.
• Checking compliance with DBS Code of Practice.

5.1.4 Interview panel/responsible manager:

• Ensuring that candidates are not unfairly discriminated against during the recruitment and selection process.
• Ensuring the fully completed interview checklist contained within the Chair of Interview Pack, is returned to the central recruitment team.

5.1.5 Individual staff:

• Informing NHS Kernow, in writing, of any criminal convictions they acquire during their employment with NHS Kernow, and as necessary their professional regulatory body.
• Completing a self-declaration form following their annual performance development review (see managers guidance). This will be held on the employee’s P file.

5.2 Recruitment process

5.2.1 Advertising

When recruiting, if the position requires a DBS disclosure then the requirement for a DBS disclosure must be included on any job description and person specification and input accurately into the TRAC system.

The job description must include:

“REHABILITATION OF OFFENDERS ACT: This post is exempt from the Rehabilitation of Offenders Act 1974. Should you be offered the post it will be subject to a criminal check from the Disclosure and Barring Service before the appointment is confirmed. This will include details of cautions, reprimands, final warnings, as well as convictions.”

The person specification must include in the essential column:

"Disclosure and Barring Service check satisfactory to NHS Kernow."

NHS Kernow will inform applicants if a DBS check is required as part of the appointment process. This information will also be on each advert placed by NHS Kernow where applicable.
5.2.2 Interviewing

Where a candidate has declared a conviction on their job application form the recruiting manager should fully explore the details of this with them at interview, or in a separate discussion.

5.3 Receipt of the DBS disclosure:

5.3.1 Employers no longer receive a copy of DBS Disclosure forms (unless they request a copy and certain criteria apply). It is therefore the responsibility of the successful applicant to show the original Disclosure to Recruitment Services.

5.3.2 If a criminal record is disclosed Recruitment Services will inform the Human Resources Team and the appointing Manager who will undertake an investigation.

5.3.3 Where a satisfactory check is received the applicant will progress through the pre-employment checks on TRAC, and a start date may be confirmed subject to any other outstanding checks.

5.4 Unsatisfactory disclosure:

5.4.1 In the event of the DBS disclosure containing relevant conviction or non-conviction information about an applicant, a decision will be made by the HR team and the appointing manager about whether the appointment should proceed. A risk assessment will be carried out by the appointing manager to determine whether the conviction is relevant to the post and whether the applicant poses any risk or potential harm to patient safety. This risk assessment and decision will be documented. If the risk assessment raises patient safety concerns the recruitment should not proceed and any provisional offer of appointment should be withdrawn. If an individual meets all other pre-employment criteria and the risk assessment decision is to recruit safeguards should be put in place as appropriate.

5.4.2 In cases where there are significant discrepancies between the information that the applicant has provided and the information on the disclosure, or if the information on the disclosure has not been disclosed on the application form:

- Refer to the Local Counter Fraud Service in accordance with NHS Kernow’s Anti-Fraud and Bribery Policy.
- Discuss the discrepancy with the applicant to determine if a mistake may have been made by the DBS; OR if they can provide another reason for the discrepancy.
If the applicant has intentionally withheld information NHS Kernow may withdraw the offer of employment, and if the applicant is already employed by NHS Kernow, disciplinary action may be considered.

5.4.3 With the exception of ‘regulated positions’ as detailed in the DBS Code of Practice, a criminal record will not necessarily be a bar to employment and NHS Kernow will not unfairly discriminate against the subject of disclosure information on the basis of a conviction or other details revealed.

5.4.4 All applicants are required to inform NHS Kernow if, at any time after application for a post, they are charged with a criminal offence in the UK or another country. Failure to comply could result in disciplinary action being taken by NHS Kernow or the matter being referred to the Local Counter Fraud Service for investigation, which may result in dismissal.

5.4.5 Following risk assessment of the DBS disclosure information, NHS Kernow’s decision to proceed with the appointment can be made conditional on an annual DBS check. This decision should be documented and in such exceptional cases, employment would be subject to the candidate’s written agreement in advance.

5.4.6 In the event of a dispute about information contained in a DBS disclosure, the applicant should register a complaint with the Disclosure and Barring Service. Until the dispute is resolved and an amended DBS disclosure has been issued, NHS Kernow will proceed on the basis of the information contained in the original disclosure.

5.5 Starting employment with NHS Kernow

5.5.1 NHS Kernow employees appointed to posts involving ‘regulated activity’ will not be allowed to commence work until the disclosure is received. NHS Kernow and the recruiting manager will be committing an offence under the Safeguarding Vulnerable Groups Act if they knowingly permit a person to engage in regulated activity from which a person is barred. The individual will also be committing a criminal offence where they engage in a regulated activity for which they are barred (see managers guidance for definitions of regulated activities).

NHS Kernow may, in exceptional circumstances, make a risk-assessed decision to appoint applicants whilst awaiting the outcomes of a DBS disclosure – for example, in order for them to do their induction training or to undertake other duties which would not include them engaging in any form of regulated activity. NHS Kernow will ensure:

- an appropriate DBS disclosure has been applied for
• safeguards are put in place to manage that individual, i.e. full supervision where given access to patients and restricted duties, until the disclosure has been obtained.

5.5.2 Temporary workers supplied by an agency

Temporary workers supplied by an agency are recommended to have DBS checks at least once a year. NHS Kernow may require more frequent checks, i.e. where assurances have not been provided by the agency, or a new post changes the level of check required, or where there is a concern about an individual's criminal history. The recommendation for annual checks does not apply to individuals who are working for a trust bank or are registered with NHS Professionals, where they are working in this capacity and hold a substantive NHS contract. The appointing manager should seek written assurances that the substantive employer has carried out appropriate checks at the correct level when they were first appointed. If, however, the individual leaves their substantive post, or where there is a break in service of three months or more prior to them applying to a trust bank or NHS Professionals, then a new DBS check should always be requested.

5.5.3 Staff providing emergency services or training

Staff who are highly mobile, such as doctors or senior clinicians who hold a substantive post within one trust but are required to provide support with emergency or complex cases, often at very short notice, or to provide specialty training in another NHS organisation, are also regarded as being in continuous employment and do not require a new DBS check.

5.6 Contractual Changes:

5.6.1 A new DBS check is not normally required where an existing member of staff has previously had a DBS check (or CRB check if prior to 10 September 2012) and is moving internally to a new job where the roles and responsibilities do not require a different level of check. The requirement for a new DBS check is triggered where:

• the individual has never had a DBS or CRB check before and is moving to a position that now requires them to have a check (including those moving from zero hours to a substantive or fixed term post)
• the new position significantly changes the individual's role, responsibilities, or level of contact with vulnerable groups, i.e. involvement in a regulated activity which requires a different level of check, or a check against one or both barred lists.
5.6.2 All staff have a contractual obligation to disclose any criminal convictions, cautions, reprimands and warnings that are subsequently acquired during their employment. The disclosure should be made in confidence to their manager or HR so that the effect of the offence against the position held can be considered. Volunteers and temporary workers are also required to make a similar disclosure.

5.6.3 Existing staff may be subject to disciplinary action and possible dismissal if they knowingly fail to disclose relevant information in relation to their criminal record or barred list status. It is a criminal offence to knowingly allow an individual to continue to engage in a regulated activity when they are barred from that activity. It is also a criminal offence for that individual to apply for, or to engage in, regulated activity when they are barred from undertaking that activity.

5.6.4 Where an individual has changed their name through marriage or otherwise, changed address or changed their contract hours, there is no need for a further check to be undertaken, unless an increase in hours means that they meet the threshold to be considered as working in a ‘regulated activity’.

5.7 Retrospective and periodic checks

5.7.1 There is no legal requirement to carry out retrospective or periodic DBS checks on staff or volunteers who are already in NHS Kernow’s workforce and are not changing positions. However, NHS Kernow encourages staff and volunteers to join the update service, and may decide to carry out periodic checks on those who have not joined the update service in line with the Lampard recommendation following investigations into Jimmy Saville. This will follow consideration of proportionate risk and in discussion with unions at a local level. NHS Kernow will ensure that any retrospective or periodic checks are at the correct level for the post.

5.8 Duties to refer to the DBS

5.8.1 Under the Safeguarding Vulnerable Groups Act, NHS Kernow has a legal duty to refer information to the Disclosure and Barring Service if an employee or volunteer has harmed, or poses a risk of harm to vulnerable groups and where they have dismissed them, or removed them from working in a regulated activity with children or adults. This duty equally applies where an individual has resigned before a formal decision to dismiss or remove them from regulated activity has been made.

5.9 Levels of disclosure used by NHS Kernow
5.9.1 The DBS carries out standard checks (detailing current unspent and spent convictions, cautions, reprimands and final warnings), and enhanced checks (which contain the same information as standard checks but also may include any relevant non-conviction information).

5.9.2 Enhanced checks may be applied for without barred list information, for positions described as work with adults in the Statutory Instrument – The Police Act 1997 (Criminal Records) (Amendment) Regulations 2013; or with barred list information for people working in positions defined as ‘regulated activity.’ (See management guidance for details).

5.9.3 It is the policy of NHS Kernow to obtain an enhanced disclosure for applicants for all posts that have access to children, vulnerable adults or their post is exempt from the Rehabilitation of Offenders Act Exceptions Order 1974.

5.9.4 Currently, DBS cannot access criminal records held overseas. When an applicant lives overseas or has done so for six months or more in the five years prior to their application, NHS Kernow will consider requesting a police check or ‘certificate of good character’ from the country (see management guidance for details).

5.10 Portability of Disclosures:

5.10.1 NHS Kernow will not re-use DBS checks obtained for a position in another organisation. However, if the applicant has subscribed to the DBS update service their DBS certificate will be kept up to date and NHS Kernow can check it online, unless a different type or level of check is required. On payment of a small annual subscription (free for volunteers) by the applicant/employee, employers that register with the DBS can, in conjunction with job applicants for designated posts, apply for access to standard and enhanced criminal records checks.

5.10.2 NHS Kernow will need sight of the original DBS certificate in order to carry out this check.

5.11 Retention and use of Disclosures and Disclosure Information:

5.11.1 Storage

All disclosure information is processed confidentially through the TRAC system or kept securely in a lockable, non-portable storage container with access strictly controlled and limited to persons who need to have access to this information in the course of their duties.
A record of the following information shall be recorded in the Electronic Staff Record (ESR) under the individual's name:

- The name of the subject.
- The type of disclosure requested.
- The position for which the disclosure was requested.
- The unique reference number of the disclosure.

5.11.2 Handling

Disclosure information is only passed to those who are authorised to receive it in the course of their duties. NHS Kernow recognises that under Section 124 of the Police Act 1997 it is a criminal offence to share criminal record information to anyone not entitled to see it.

5.11.3 Usage

Disclosure information is only used for the specific purpose for which it was requested and for which the applicant's full consent has been given.

5.11.4 Retention and disposal

Criminal record information is kept for no longer than necessary. Once a decision has been made as to whether to appoint or not, the disclosure record shall be kept for no longer than six months from appointment, and six months from where the applicant has been unsuccessful, to allow for the consideration and resolution of any disputes or complaints. If, in exceptional circumstances, it is considered necessary to keep criminal record information for a longer term than this NHS Kernow will make a request to the Disclosure and Barring Service Data Protection Manager.

Once the retention period has elapsed, all paper documentation pertaining to the disclosure is shredded.

5.11.5 How compliance with the policy will be monitored/audited

Compliance will be monitored by:

- Internal audit of records held on ESR (Electronic Staff Record)
- Monthly checks by Human Resources for any outstanding DBS checks and to ensure all documents have been removed and destroyed as appropriate.
## Equality Impact Assessment

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<th>Name of policy to be assessed</th>
<th>DBS Policy &amp; procedure</th>
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<tr>
<td>Section</td>
<td>HR</td>
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<td>Officer responsible for the assessment</td>
<td>Jayne Marsh</td>
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1. **Describe the aims, objectives and purpose of the policy.**

   To comply fully with the DBS code of practice in the recruitment of staff; to ensure the protection of service users (children and vulnerable adults) and the fair treatment of any subject of a Disclosure Certificate.

2. **Are there any associated objectives of the policy? Please explain.**

   To support the Recruitment Policy & Procedure

3. **Who is intended to benefit from this policy, and in what way?**

   - **Ex-offenders**: by stating our policy on the recruitment of ex-offenders where appropriate.
   - **NHS Kernow**: by complying with legislation and the requirements of Safeguarding.
   - **Managers/Employees**: by explaining the DBS process for pre-employment and employment checks, and by treating subjects of disclosures fairly.
   - **Patients**: by ensuring patient safety.

4. **What outcomes are wanted from this policy?**

   To set out best practice.
   The overall aim of the policy is to ensure patient safety.
5. **What factors/forces could contribute/detract from the outcomes?**

If the policy and associated guidance is not followed this could lead to checks being under-taken in error, or not being taken where required.

6. **Who are the main stakeholders in relation to the policy?**

Public, employees and employers.

7. **Who implements the policy, and who is responsible for the policy?**

Recruiting managers and relevant team managers implement the policy. Human Resources are responsible for updating the policy.

8. **What is the impact on people from Black and Minority Ethnic Groups (BME) (positive or negative)?**

Consider relevance to eliminating unlawful discrimination, promoting equality of opportunity and promoting good race relations between people of different racial groups. Issues to consider include people’s race, colour and nationality, Gypsy, Roma, Traveller communities, employment issues relating to refugees, asylum seekers, ethnic minorities, language barriers, providing translation and interpreting services, cultural issues and customs, access to services.

There is currently no information to indicate that this document will disadvantage or have a negative impact on this group if implemented and operated as described within this Policy and Procedure.

**How will any negative impact be mitigated?**

N/A

9. **What is the differential impact for male or female people (positive or negative)?**

Consider what issues there are for men and women e.g. responsibilities for dependants, issues for carers, access to
training and employment issues, attitudes towards accessing healthcare.

There is currently no information to indicate that this document will
disadvantage or have a negative impact on this group if implemented and operated as described within this Policy and Procedure

<table>
<thead>
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<th>How will any negative impact be mitigated?</th>
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10. What is the differential impact on disabled people (positive or negative)?

Consider what issues there are around each of the disabilities e.g. access to building and services, how we provide services and the way we do this, producing information in alternative formats and employment issues. Consider the requirements of the NHS Accessible Information Standard. Consider attitudinal, physical and social barriers. This can include physical disability, learning disability, people with long term conditions, communication needs arising from a disability.

Employees with a learning disability may have more difficulties understanding and completing the forms/online forms

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<td>Line managers can provide support, and can also ask HR for support about sourcing guidance easy read information</td>
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11. What is the differential impact on sexual orientation?

Consider what issues there are for the employment process and training and differential health outcomes amongst lesbian and gay people. Also consider provision of services for e.g. older and younger people from lesbian, gay, bi-sexual. Consider heterosexual people as well as lesbian, gay and bisexual people.

There is currently no information to indicate that this document will
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| **12. What is the differential impact on people of different ages (positive or negative)?** | Consider what issues there are for the employment process and training. Some of our services impact on our community in relation to age e.g. how do we engage with older and younger people about access to our services? Consider safeguarding, consent and child welfare.  
There is currently no information to indicate that this document will disadvantage or have a negative impact on this group if implemented and operated as described within this Policy and Procedure. |
| How will any negative impact be mitigated? | N/A |
| **13. What differential impact will there be due religion or belief (positive or negative)?** | Consider what issues there are for the employment process and training. Also consider the likely impact around the way services are provided e.g. dietary issues, religious holidays, days associated with religious observance, cultural issues and customs, places to worship.  
There is currently no information to indicate that this document will disadvantage or have a negative impact on this group if implemented and operated as described within this Policy and Procedure. |
<p>| How will any negative impact be mitigated? | N/A |
| <strong>14. What is the impact on marriage of civil partnership (positive or negative)?</strong> NB: this is particularly relevant for employment policies | |</p>
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<tr>
<th>15. What is the differential impact who have gone through or are going through gender reassignment, or who identify as transgender?</th>
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<tr>
<td>Consider what issues there are for people who have been through or a going through transition from one sex to another. How is this going to affect their access to services and their treatment when receiving NHS care? What are the likely implications for employment of a transgender person? This can include issues such as privacy of data and harassment.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>How will any negative impact be mitigated?</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>16. What is the differential impact on people who are pregnant or breast feeding mothers, or those on maternity leave?</th>
</tr>
</thead>
<tbody>
<tr>
<td>This characteristic applies to pregnant and breast feeding mothers with babies of up to six months, in employment and when accessing services. When developing a policy or services consider how a nursing mother will be able to nurse her baby in a particular facility and what staff may need to do to enable the baby to be nursed. Consider working</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>How will any negative impact be mitigated?</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>
arrangements, part-time working, infant caring responsibilities.

There is currently no information to indicate that this document will disadvantage or have a negative impact on this group if implemented and operated as described within this Policy and Procedure

<table>
<thead>
<tr>
<th>How will any negative impact be mitigated?</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

17. Other identified groups:

Consider carers, veterans, different socio-economic groups, people living in poverty, area inequality, income, resident status (migrants), people who are homeless, long-term unemployed, people who are geographically isolated, people who misuse drugs, those who are in stigmatised occupations, people with limited family or social networks, and other groups experiencing disadvantage and barriers to access.

This group may have more limited access to the IT systems needed to complete the online TRAC form for a DBS.

<table>
<thead>
<tr>
<th>How will any negative impact be mitigated?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paper based versions of the forms and guidance are available on request.</td>
</tr>
</tbody>
</table>

18. How have the Core Human Rights Values been considered in the formulation of this policy/strategy? If they haven’t please reconsider the document and amend to incorporate these values.

- Fairness;
- Respect;
- Equality;
- Dignity;
- Autonomy

All considered

19. Which of the Human Rights Articles does this document impact?
<table>
<thead>
<tr>
<th>The right:</th>
<th>Yes / No:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• To life</td>
<td>No</td>
</tr>
<tr>
<td>• Not to be tortured or treated in an inhuman or degrading way</td>
<td>No</td>
</tr>
<tr>
<td>• To liberty and security</td>
<td>No</td>
</tr>
<tr>
<td>• To a fair trial</td>
<td>No</td>
</tr>
<tr>
<td>• To respect for home and family life, and correspondence</td>
<td>No</td>
</tr>
<tr>
<td>• To freedom of thought, conscience and religion</td>
<td>No</td>
</tr>
<tr>
<td>• To freedom of expression</td>
<td>No</td>
</tr>
<tr>
<td>• To freedom of assembly and association</td>
<td>No</td>
</tr>
<tr>
<td>• To marry and found a family</td>
<td>No</td>
</tr>
<tr>
<td>• Not to be discriminated against in relation to the enjoyment of any of the rights contained in the European Convention</td>
<td>No</td>
</tr>
<tr>
<td>• To peaceful enjoyment of possessions</td>
<td>No</td>
</tr>
</tbody>
</table>

**a) What existing evidence (either presumed or otherwise) do you have for this?**

This policy and procedure is based on the principles of fairness and equality relating to the subjects of Disclosures and Ex-Offenders.

20. **How will you ensure that those responsible for implementing the Policy are aware of the Human Rights implications and equipped to deal with them?**

N/A

21. **Describe how the policy contributes towards eliminating discrimination, harassment and victimisation.**

This policy and procedure is based on the principles of fairness and equality relating to the subjects of Disclosures and Ex-Offenders.

22. **Describe how the policy contributes towards advancing equality of opportunity.**

It allows for the safe recruitment of ex-offenders where appropriate.

23. **Describe how the policy contributes towards promoting good relations between people with protected characteristics.**
<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>24.</td>
<td>If the differential impacts identified are positive, explain how this policy is legitimate positive action and will improve outcomes, services or the working environment for that group of people.</td>
</tr>
<tr>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>25.</td>
<td>Explain what amendments have been made to the policy or mitigating actions have been taken, and when they were made.</td>
</tr>
<tr>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>26.</td>
<td>If the negative impacts identified have been unable to be mitigated through amendment to the policy or mitigating actions, explain what your next steps are.</td>
</tr>
<tr>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

Signed (completing officer): Jayne Marsh

Date: 6 March 2017

Signed (Head of Section): .................................................................

Date: .................................................................

Please ensure that a signed copy of this form is sent to both the Policies Officer with the policy and the Equality and Diversity lead.