



**AGENDA ITEM**

4.5

**PEOPLE & CULTURE COMMITTEE**

**DISCLOSURE BARRING SERVICE (DBS)  
ASSURANCE UPDATE**

<b>Date of meeting</b>	08/02/2023
<b>FOI Status</b>	Open/Public
<b>If closed please indicate reason</b>	Not Applicable - Public Report
<b>Prepared by</b>	Claire Nicholas, Head of Policy, Compliance and Agenda for Change
<b>Presented by</b>	Karen Wright, Assistant Director of Policy, Governance and Compliance
<b>Approving Executive Sponsor</b>	Executive Director for People
<b>Report purpose</b>	FOR NOTING

**Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)**

<b>Committee/Group/Individuals</b>	<b>Date</b>	<b>Outcome</b>
(Insert Name)	(DD/MM/YYYY)	Choose an item.

**ACRONYMS**

DBS	Disclosure Barring Service
ESR	Electronic Staff Record
CRB	Criminal Records Bureau
FAQ	Frequently asked questions



## 1. SITUATION/BACKGROUND

- 1.1 Following the conviction of Mr W an Abertawe Bro Morgannwg employee, for the murder of his neighbour, HIW undertook a review of the Health Board's handling of his recruitment and the subsequent allegations made by three patients, alleging sexual misconduct. The review found that Mr W had not been required to undertake a Disclosure and Barring Service (DBS) check by the Health Board, despite the role requiring him to work with vulnerable adults with learning disabilities and it being a mandatory requirement to complete such a check.
- 1.2 In response to the HIW findings all NHS Wales Organisations were required to audit their compliance and take retrospective action to ensure all employees requiring a DBS check had one and it was documented in their ESR record.
- 1.3 This work has proved to be challenging for NHS Wales organisations. The work involved, when scoped was found to be administrative and processing resource intensive, to deal with the volume of missing DBS checks found. Some organisations have allocated dedicated resources to deal with their missing checks quickly, while others such as the Health Board are endeavouring to do this work using their current resources.
- 1.4 As there is no national solution, NHS Wales organisations have been required to implement their own local plans. The Health Board has been trying to manage this work using our limited Compliance Team staff resources, which has been challenging. This is because the staff resources to undertake the administration of locating these missing DBS checks on paper personnel files, following up those staff who have been identified as not having one on file and processing new checks is resource intensive.
- 1.5 To make progress in response to the audit requirements, the People and Culture Committee were informed in May 2022, regarding the plans to pilot modern technology to reduce the administration associated with improving the Health Board's compliance in this area.
- 1.6 This report presents an update in respect of the proposed pilot, using Microsoft Forms technology, to contact those employees who do not have evidence of a DBS check on their ESR record, collate the employee's responses automatically, which will significantly reduce

the administration resource required to collect and collate this retrospective information.

- 1.7 The pilot did not commence as quickly as anticipated due to the need to develop the process and work with an internal consultant to develop the technology and make adjustment to make it fit for purpose.
- 1.8 On 31 January 2023, 2,725 employees, employed before April 2019, still do not have a DBS Check on their ESR record, which continues to pose a significant organisational risk. While action is being taken to reduce the risk, it is acknowledged progress has been too slow and therefore, significant progress needs to be made at pace over the next few months.

## **2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)**

- 2.1 On 24 November 2022, a Staff Bulletin article informed employees, to ensure compliance with legislation and to safeguard our employees and patients, the Health Board would be contacting those employees working in regulated roles, with no record of a DBS / CRB Check on their employment record.
- 2.2 The article confirmed the Health Board would be undertaking a pilot, to increase DBS check compliance. Employees in the pilot areas were advised those without evidence of a DBS check on their ESR record, would be emailed with instructions regarding the urgent action they must take, to ensure compliance.
- 2.3 Managers and employees were informed that a SharePoint Page had been set up, to provide them with access to useful DBS information, FAQs (Frequently Asked Questions) and to signpost employees to the CTM wellbeing resources and services, where appropriate for support, should they have any undeclared historical criminal record(s) [DBS SharePoint page](#).
- 2.4 The action required by these employees was for them to provide their manager, via an online Microsoft Form with DBS evidence, either completed when appointed to a role within CTM, or another NHS Wales Organisation, by a stated deadline date.
- 2.5 At the end of November 2022, the Health Board began piloting the new process with 135 employees in the following areas:



- Bridgend Obstetrics, Gynaecology and Sexual Health;
  - Bridgend Paediatrics, Acute and Community; and
  - Bridgend CAMHS.
- 2.6 These specific areas were chosen for the pilot, as previous review data relating to the level of DBS check compliance amongst former Abertawe Bro Morgannwg University Health Board employees, at the time of transfer (1 April 2019), confirmed almost 50% of all DBS check information was missing from their ESR records.
- 2.7 The system collects response data and has an inbuilt reminder email alert, sent weekly to those piloted employees who have not responded to the request for DBS information. The reminder is also sent to the manager of the employee.
- 2.8 Where an employee indicates via the process that they do not have a DBS certificate and their role requires one, the process alerted the Compliance Team of this requirement. The People Services Team then make contact with these eligible employees to make an appointment to undertake a new DBS check.
- 2.9 Below are the statistics in respect of the responses received by the 31 January 2023:
- 135 employees contacted - 49 have responded (29% of the pilot);
  - 12 employees have provided evidence they have a DBS certificate (9% of the pilot);
  - 35 employees have responded they do not have a copy of a DBS certificate (26% of the pilot);
  - 2 employees have confirmed their current role does not require a DBS check (This is self-assessed via the NHS Employers DBS Check Eligibility Tool) (1.5% of the pilot); and
  - 86 employees have not responded (63.5% of the pilot).
- 2.10 The response rate has been very disappointing, despite the work of the Compliance Team and the inbuilt automatic reminder email alert functionality. The Compliance Team has spoken with staff who have responded to ask them of their experience of using the technology and whether any improvements could be made. These staff confirmed they found the technology user friendly and easy to use.
- 2.11 In summary the pilot has confirmed the technology works well. However, employees have not been as responsive in taking the

necessary action as expected. This is despite the technology sending the employees and their manager's weekly reminders, which should encourage participants to take the action required.

- 2.12 To understand the reasons for the very low pilot response, The Compliance Manager along with the Head of People for Primary Care, Mental Health, Children, and Families are meeting with the relevant Heads of Service and some of the pilot managers and employees who have not responded, during early February. The intelligence gained from these discussions will be used to review and amend the process, as applicable, to gain employee / manager commitment to provide the information and ensure compliance for staff in their areas.
- 2.13 It is recognised that this is not a priority for staff at this time due to the pressures on the service. Therefore, the Compliance Team will be introducing a hybrid process in February 2023. While they will continue to use the technology, they will also provide an option for staff to book to attend a local DBS surgery in their workplace, to make it easier for them to provide their DBS check, if they have one, or complete the necessary paperwork if they do not. It is anticipated this dual approach will help to increase compliance rates at pace.
- 2.14 The Compliance and the People Services Team will work together using the surgery approach, to significantly reduce the total missing DBS Check figures before the end of the current financial year. By allocating extra People Services resources, it will enable this work to gain pace to reduce non-DBS check compliance amongst those employees that historically do not have one on their ESR record.
- 2.15 To assure the Committee, when the Health Board now recruits a new employee, the Compliance Team, Staff Bank Team and Medical Workforce monitor DBS compliance via a monthly new starter's report. This approach ensures the Health Board continues to maintain high levels of DBS check compliance among all eligible new employees.

### **3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE**

- 3.1 The risk of an eligible new employee commencing work within CTM without an appropriate DBS check is limited, due to the robust on boarding / recruitment pre-employment check processes. Noting a

DBS record can be lost during the recruitment process because of the transfer of data between various IT systems. However, the



monitoring undertaken by the Compliance Team, Staff Bank Team and Medical Workforce via a monthly new starters report helps to mitigate the risk by locating the missing DBS checks.

- 3.2 As at the 31 January 2023, 2,725 employees were identified as not having a historic DBS Check on their electronic staff record. Therefore, the Health Board has no assurance it is appropriate to employ these employees in the roles, which they are currently working in.
- 3.3 Employees and their managers are not proactively engaging in the pilot scheme to locate the missing DBS Checks, despite the weekly auto-reminder emails. As set out in the report above, discussion will take place with the pilot Heads of Service, managers, and employees to understand the barriers, which are preventing them from complying with the request. This information will inform any necessary change to the new process or a change of approach.
- 3.4 Undertaking new or rechecks of existing employees, with no current DBS recorded on ESR may uncover historical offences that had not been disclosed previously to the organisation. Managers can mitigate this risk by utilising the DBS Policy and DBS Guidance for Managers and seeking advice from People Services Team, as appropriate.

#### 4. IMPACT ASSESSMENT

<b>Quality/Safety/Patient Experience implications</b>	Yes (Please see detail below)
	Patient safety may be compromised if eligible employees do not have a DBS check or the appropriate level of DBS check.
<b>Related Health and Care standard(s)</b>	Governance, Leadership and Accountability
	If more than one Healthcare Standard applies please list below:
<b>Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.</b>	No (Include further detail below)
	Not required
<b>Legal implications / impact</b>	Yes (Include further detail below)
	Potential for individuals to be working in DBS applicable posts without a suitable DBS



	check. Risk of harm to patients and legal claims against CTM.
<b>Resource (Capital/Revenue £/Workforce) implications / Impact</b>	Yes (Include further detail below)
	The cost of undertaking new DBS ranges from £18 for a standard/basic check to £38 for enhanced, per employee check.
<b>Link to Strategic Goals</b>	Improving Care

## 5. RECOMMENDATION

- 5.1 The People & Culture Committee is asked to **NOTE** the content of the report and the actions taken to date to try to improve the compliance of DBS checks among those employees who historically do not have this information on their ESR record.
- 5.2 The People & Culture Committee is asked to **NOTE** the Health Board has robust processes in place to ensure new employees that require a DBS check have this evidence on their ESR record.