

AGENDA ITEM

3.2.1

PEOPLE & CULTURE COMMITTEE

DISCLOSURE BARRING SERVICE (DBS) ASSURANCE UPDATE

Date of meeting	(11/05/2022)	
FOI Status	Open/Public	
If closed please indicate reason	Not Applicable - Public Report	
Prepared by	Claire Nicholas, Head of Policy, Compliance and Agenda for Change	
Presented by	Karen Wright, Assistant Director of Policy, Governance and Compliance	
Approving Executive Sponsor	r Executive Director for People	
Report purpose	FOR NOTING	

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)				
Committee/Group/Individuals	Date	Outcome		
(Insert Name)	(DD/MM/YYYY)	Choose an item.		

ACRONYMS	
DBS	Disclosure Barring Service
ESR	Electronic Staff Record
HIW	Health Inspectorate Wales
CRB	Criminal Records Bureau
NWSSP	NHS Wales Shared Services Partnership
FAQ	Frequently asked questions



1. SITUATION/BACKGROUND

- 1.1 Following the conviction of Mr W for the murder of his neighbour, Health Inspectorate Wales (HIW) undertook a review of Abertawe Bro Morgannwg Health Board's (ABMUHB) handling of the recruitment of Mr W 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 ABMUHB, 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 Following the publication of the HIW findings in mid-2019, all NHS organisations were requested by Welsh Government to review their DBS check compliance rates and take remedial action, as required.
- 1.3 In response to the HIW Report, the CTM Compliance Workforce Team undertook an internal audit of DBS check compliance, against staff ESR records. The audit found a significant number of eligible CTM staff did not have a DBS check recorded on their ESR record. This was identified an organisational risk, as the Health Board could not be sure or evidence whether these staff had been checked and deemed to be suitable to work with children and or vulnerable adults, without putting their wellbeing and safety at risk.
- 1.4 The CTM internal findings resulted in DBS check compliance being place on the Health Board's Risk Register. Consequently, regular reports are presented to the People and Culture and Quality and Safety Committees, to keep them informed of progress to mitigate and close the risk. A paper was last presented to the People and Culture Committee in July 2021.
- 1.5 This report presents an update of the current position, as at 1 April 2022, in relation to DBS compliance, progress to mitigate the risk and provide assurance of ongoing actions being taken to close it.

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

2.1 An updated ESR DBS compliance report produced on 1 April 2022 set out information regarding all eligible Health Board employees and workers who did not have a DBS check logged on their ESR record.



- 2.2 The updated position is set out in the table below. It should be noted the number of employees and workers in post alters daily, it is therefore impossible to compare the previous figures side by side, as there are constantly new starters, leavers, and employees changing posts internally, which may result in a different level of DBS check being required or indeed no DBS check required. This factor will account for the increase in missing DBS checks.
- 2.3 In the table the arrows demonstrate the progress that has been made in finding missing and matched DBS checks for new appointees and workers and those previously identifying employees and workers who were employed by CTM, or predecessor organisations, before CRB (now DBS) checks were required.

	Match	Not required	Missing	% Missing
Agenda for Change (A4C)	7807	2279	1767	14.91% 🖖
Medical and Dental (M&D)	713	0	172	19.44% 🛧
Bank	1067	173	525	29.75% 🛧
TOTAL	9587	2452	2464	16.99% 🔶

- 2.4 From 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 DBS information was missing from the ESR records of the transferring employees.
- 2.5 As reported previously, at the beginning of 2021 work was undertaken, to check all electronic systems for evidence of missing DBS checks. Additional temporary agency resources (two part-time workers) were engaged to undertake this work over a two-month period. This involved checking recruitment records on Trac and ESR, to establish whether a DBS check had been recorded on a previous staff record, electronic personnel files etc. This exercise was undertaken for bank workers, medical and dental and all other staff groups. Because of this work, 1188 DBS check records were found and updated on employee / worker ESR records.
- 2.6 To date, given the resource and time constraints imposed on the Compliance Team during COVID-19, limited work has continued over the past 12-month period, to continue to locate the identified missing DBS checks.



- 2.7 The Compliance Team has developed a new plan, using email and Microsoft Forms technology, to contact those employees who do not have evidence of a DBS check on their ESR record. This technology will collate the employee's responses automatically, which will reduce significantly the administration resource, previously required to collect and collate the information.
- 2.8 Where an employee responds they have a DBS check, they will be directed to input the details into a Microsoft Form, which will be sent automatically to their line manager and the Compliance Team Excel Spreadsheet records. The line manager will receive an email notification informing them that their employee will be submitting a DBS check for them to verify, prior to final submission of this information to the Compliance Team. Once the information is received, it will be inputted into ESR, to sit in the appropriate employee's ESR record.
- 2.9 It is anticipated, once this process is rolled out in June 2022, the Health Board will see DBS check compliance rates will begin to improve significantly within a period of three months. At the end of the three-month period, the Compliance Team will review and report updated progress to the People and Culture Committee.
- 2.10 Where an employee indicates via the process, they do not have a DBS certificate and their role requires one, the process will alert the Compliance Team of the requirement to contact them to request they undertake a new DBS check.
- 2.11 It is recognised that some employees may feel anxious and worried, especially if they have historical offence(s) and they were not requested to provide a DBS (or previous CRB) check as part of their appointment and pre-employment check process. All employees will therefore be encouraged to make a voluntary disclosure on the Microsoft Form if appropriate, and provided with assurances that CTM will take an understanding, balanced and considerate approach to this information, in the strictest of confidence.
- 2.12 The voluntary disclosure of offences process will be underpinned by a risk assessment, undertaken with the employee by their line manager. The risk assessment will consider the nature of the voluntary disclosed offence(s), the duties that are required to perform, patient contact, with particular reference to children and vulnerable adults and the circumstances in which the work is carried out, pending the completion of a new DBS check.



- 2.13 Offences previously disclosed, where a decision was made to continue with offer of employment, will have previously been noted and risk assessed at the time of appointment. This process will not overturn any decision previously made about an individual's employment.
- 2.14 A SharePoint Page will be set up, to provide employees and managers with access to useful information, Frequently Asked Questions (FAQs) and as a means to signpost employees to the CTM wellbeing resources and services, where appropriate for support.
- 2.15 As CTM is constantly recruiting new employees, monitoring continues to be undertaken by the Compliance Team, Staff Bank Team and Medical Workforce, via a monthly new starter's report, to check DBS compliance for all eligible new employees and workers.
- 2.16 The purpose of the report is to ensure that those employees who require a DBS check have completed one and the details are noted on their ESR record. Where information is missing this will be identified and followed up immediately. This approach will ensure that CTM continues to maintain high levels of DBS check compliance moving forward, while still actively taking steps to reduce the overall number of missing DBS checks.

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. However, due to transfer of data between various IT systems, the DBS record can be lost at various stages during the recruitment process. This in turn compromises compliance assurances, which is provided within this report.
- 3.2 Undertaking new or rechecks of existing employees, with no current DBS recorded on ESR may uncover historical offences that had not previously been disclosed. Managers utilising the DBS Policy and DBS Guidance for Managers and seeking advice from their Workforce Business Partner, as appropriate, can mitigate this risk.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	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.	
Related Health and Care	Governance, Leadership and Accountability	
standard(s)	If more than one Healthcare Standard applies please list below:	
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new,	No (Include further detail below)	
changed or withdrawn policies and services.	Not required	
	Yes (Include further detail below)	
Legal implications / impact	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.	
Resource (Capital/Revenue £/Workforce) implications / Impact	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.	
Link to Strategic Goals	Improving Care	

5. RECOMMENDATION

5.1 The People and Culture Committee is asked to **NOTE** the content of the paper, the action plan and timescale to roll out the new process, which should quickly and significantly increase DBS compliance rates across the Health Board.



Appendix 1 - High level action plan

Responsible Person	Deadline
Workforce Efficiency Manager	First week of every month from May 2022
Staff Bank Team Medical Workforce Compliance Team	By end of every month from May 2022
Compliance Team	June 2022
Compliance Team	Ongoing from June 2022
HR Business Partner Teams / Compliance Team / Staff Bank Team / Medical Workforce	Ongoing from June 2022
Compliance Team	Via Team Meetings
HR Business Partner Teams / Compliance Team / Staff Bank Team / Medical Workforce / Workforce Information Team	Ongoing from June 2022
	Workforce Efficiency Manager Staff Bank Team Medical Workforce Compliance Team Compliance Team Compliance Team Compliance Team HR Business Partner Teams / Compliance Team Compliance Team Compliance Team Compliance Team HR Business Partner Teams / Compliance Team HR Business Partner Teams / Compliance Team HR Business Partner Teams / Medical Workforce