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|  | **DBS (Disclosure Barring Check) Information** |  |

**It is Nottinghamshire County Council policy for all Personal Assistants working with individuals in receipt of a Direct Payment to have an enhanced DBS check. We would therefore ask you to complete the information below.**

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| **DP Recipients Details:** This information is required so we are able to identify who has made the request and who needs to be involved in suitability decision making. **Please note that starred details must be provided otherwise we will be unable to proceed with the DBS check(s).** | | | | | | | |
| \*Name and Mosaic ID |  | | | | | | |
| \*Address |  | | | | | | |
| **Personal Assistant(s) Details:** These details will enable us to start the process and send the electronic DBS form via email to the PA(s) for them to complete. Additional space is provided under Personal Assistant 1 and 2 if you have multiple PA’s. | | | | | | | |
| PERSONAL ASSISTANT 1 | | | | | | | |
| \*First name |  | | | | | | |
| \*Surname |  | | | | | | |
| \*Email address |  | | | | | | |
| Telephone Number |  | | | | | | |
| \*DBS reference number (where current DBS in place) |  | | | Date of issue  (must be renewed  every 3 years) | |  | |
| \*Level of existing DBS Check (where current DBS in place please tick the option that applies) | Basic |  | Standard |  | Enhanced | |  |
| Has the PA been subject to any previous Suitability Decisions (Please speak to the PA to obtain this information) | Yes |  | No |  |  | |  |
| \*Does the PA’s role involve providing regulated support such as personal care? | Adults only |  | Children only |  | Both | |  |
| PERSONAL ASSISTANT 2 (if applicable) | | | | | | | |
| \*First name |  | | | | | | |
| \*Surname |  | | | | | | |
| \*Email address |  | | | | | | |
| Telephone Number |  | | | | | | |
| \*DBS reference number (where current DBS in place) |  | | | Date of issue  (must be renewed  every 3 years) | |  | |
| \*Level of existing DBS Check (where current DBS in place please tick the option that applies) | Basic |  | Standard |  | Enhanced | |  |
| Has the PA been subject to any previous Suitability Decisions (Please speak to the PA to obtain this information) | Yes |  | No |  |  | |  |
| \*Does the PA’s role involve providing regulated support such as personal care? | Adults only |  | Children only |  | Both | |  |

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| PERSONAL ASSISTANT 3 (if applicable) | | | | | | | |
| \*First name |  | | | | | | |
| \*Surname |  | | | | | | |
| \*Email address |  | | | | | | |
| Telephone Number |  | | | | | | |
| \*DBS reference number (where current DBS in place) |  | | | Date of issue  (must be renewed  every 3 years) | |  | |
| \*Level of existing DBS Check (where current DBS in place please tick the option that applies) | Basic |  | Standard |  | Enhanced | |  |
| Has the PA been subject to any previous Suitability Decisions (Please speak to the PA to obtain this information) | Yes |  | No |  |  | |  |
| \*Does the PA’s role involve providing regulated support such as personal care? | Adults only |  | Children only |  | Both | |  |

**Important Information:**

* By submitting this form you understand that the council will undertake an Enhanced DBS and barred list check on your behalf for the PA(s) named on this form where an existing check is not in place.
* The level of barred list check requested will depend on the support provided and whether this is for Adults, Children or both.
* Where the DBS check comes back as a Positive Disclosure the Council will undertake a Suitability Decision around the appropriateness of the Personal Assistant being employed through a Direct Payment on your behalf. The Council will inform you of the Suitability Decision but strongly advise that you request to see the DBS certificate yourself to decide whether to continue with the employment.
* Where a Personal Assistant has already had a DBS check undertaken by the Council, the Council will advise of the outcome of any Suitability decision that may have been made previously if applicable.
* Once the DBS check is completed the Personal Assistant will be added to your Council Mosaic record as a Worker relationship.
* The cost of the DBS check is covered by Nottinghamshire County Council.
* Your contact details will be kept securely in line with council’s [privacy statement](http://www.nottinghamshire.gov.uk/global-content/privacy) <http://www.nottinghamshire.gov.uk/global-content/privacy> and only used for the purpose of the DBS process.
* We will keep the information provided on this form for 4 years to enable us to contact you regarding renewal. The data stored on our Mosaic Information system will be retained inline with The Councils Mosaic retention period.
* Please return this form once completed to:

**The Direct Payment Enquiries Team**

**Strategic Commissioning**

**Floor 4**

**County Hall**

**Loughborough Road**

**West Bridgford**

**NG2 7QP**

Alternatively you can email this form back to:[**dpenquiries@nottscc.gov.uk**](mailto:dpenquiries@nottscc.gov.uk)

**Thank you for taking the time to complete this form.**

**We will be in touch on completion of the DBS check(s).**