|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Workers Name:** | |  | | |
|  | | **Date** | **Comments** | |
| **Welcome Pack Provided:** | |  |  | |
| **Application Form Received:** | |  |  | |
| **Has Self-Declaration been completed?** | | **YES / NOT REQUIRED** | **If given to you, pass unopened to AM Safeguarding Coordinator.** | |
|  | **Date requested:** | **Date received:** | **Satisfactory?** | **Comments** |
| **Employer / other Referee** |  |  | **YES / NO** |  |
| **Quaker Referee** |  |  | **YES / NO** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **DBS CHECK** | | | | |
| **Date Stage Two Pack provided:** | |  | | |
| **Date verified (if known):** |  | **Date received:** |  | **CLEAR/NOT CLEAR** |
| **If Risk Assessment required no detailed information will be shared** |  | **Date decision about suitability received from Neil Jarvis:** |  | **SUITABLE / NOT SUITABLE** |
| **Has the children’s worker joined the Update Service?** | **YES / NO** | **Update Permission Form sent to AM Safeguarding Coordinator:** | **YES / NO** | (Date) |

|  |  |  |  |
| --- | --- | --- | --- |
| **Date Clerk requested to provide Minute of Record at LM Business Meeting:** |  | **Date of Minute:** |  |
| **Date all documents sent to AM Safeguarding Coordinator for secure storage:** | |  | |
| **CYPC Member completing this process - Print Name:** | |  | |
| **Signature:** | |  | |

**FLOWCHART**

**PROVIDE WELCOME PACK TO WORKER**

**- tell them where to return the**

**completed application form.**

Send unopened envelope to Area Safeguarding Coordinator.

**COMPLETED APPLICATION FORM RECEIVED**

Is a Self-Declaration Form enclosed?

**YES**

E

**IN ALL CASES GO ON TO STAGE TWO**

DDC provide a copy of their DBS certificate to BYM Safeguarding Coordinator.

Await outcome of Risk Assessment by Safeguarding Coordinator for BYM.

**PROVIDE STAGE TWO PACK TO WORKER**

Ensure you have included contact information for your local meeting verifier

**SEND FOR TWO REFERENCES**

If email is used, print both the reference **and** the email to which it is attached, for archiving.

If sending by post, enclosing a Stamped Addressed Envelope is likely to produce a swifter response.

Await confirmation of clear DBS check, and print email. Encourage worker to join the Update Service and sign consent for AM to check at intervals.

**SECURING DOCUMENTS**

Pass all references with accompanying emails if relevant, and confirmation of DBS clearance, plus Update Consent document if appropriate, to Area Meeting Safeguarding Coordinator.

The documents will be secured in a locked cabinet at AM Office and retained for 100 years.

**CONFIRMATION OF SUITABILITY TO WORK WITH CHILDREN**

If both references are satisfactory,

AND you have either received confirmation of a clear DBS check OR confirmation that the Risk Assessment of any convictions/cautions concluded that the person is suitable to work with children, the LM Clerk should be asked to make a record of the person’s suitability at the next LBM.

***If there are any doubts about suitability, discuss with an Area Meeting Safeguarding Coordinator.***