**Children’s worker periodic safety checking cover sheet**

# Organisation and candidate details

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| Organisation name: |  | |
| Candidate name: |  | |
| Role: |  | |
| Role specification: | Core worker role | Non-core worker role |
| Start date: |  | |
| Date of last safety check: |  | |

# Identity confirmation/name change

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| Check the person’s identity records held on file and confirm whether they have changed their name since the last safety check. | | |
| There has been a name change | Not applicable | |
| **Supporting name change documents** | | |
| NZ full birth certificate (issued for purpose)  NZ marriage certificate (particulars of marriage is not valid)  Change of name by statutory declaration  Change of name by deed poll | NZ name change certificate  NZ civil union certificate  NZ order dissolving marriage or civil union  NZ order declaring marriage or civil union void | |
| Copy of name change documents attached | Date completed: |  |

# 2. Professional membership

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| Seek information from any relevant professional organisation, licensing authority or registration authority to confirm if the person is a current member and has been issued a licence or is registered or certificated by the authority. | | | |
| Person holds professional membership(s), has been licensed, registered or certificated | | Not applicable | |
| Name of any professional organisations, licensing authorities, or registration authorities: | | | |
|  | | | |
| Copies of relevant information from the professional organisation, licensing or registration authority attached  AND/OR  A screenshot from an online register check attached | Date completed: | |  |

# 3. Police vet

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| Conduct a police vet via the New Zealand Vetting Service. | | |
| Police vet obtained | Not applicable, person holds professional membership that police vets at least every three years | |
| Police vet results show:  No convictions  Convictions  Convictions for a [specified offence as per Schedule 2 of the Children’s Act 2014](https://www.legislation.govt.nz/act/public/2014/0040/latest/DLM5501909.html) (person must not be employed or engaged in a core children's worker role unless they have an exemption) | | |
| Conviction details: | | |
|  | | |
| Copy of police vet and results attached  OR  Evidence attached that confirms the person holds current professional membership, licence or registration that requires a police vet every three years  AND (if applicable)  If the person is employed or engaged in a core worker role and has a specified offence, evidence attached that the person holds a current core worker exemption | Date completed: |  |

# 3A. Overseas police vet (optional)

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| In addition to obtaining a NZ Police vet, you should ask people who have lived overseas to provide copies of police certificates from their countries of citizenship and from any country in which they have lived for one or more years, within the last 10 years.  If overseas police certificates cannot be provided, you should ask for proof of attempts to obtain them, and a statutory declaration stating whether they have any criminal convictions or not. | |
| Overseas police certificate(s) obtained | Not applicable |
| Details obtained from the overseas police certificate(s): | |
|  | |
| Copy of police certificate from their countries of citizenship attached | |
| Copy of police certificate from any country in which they have lived for one or more years, within the last 10 years attached | |
| When a person cannot provide an overseas police certificate:  Proof of attempts to obtain a certificate attached, and  Statutory declaration attached stating whether they have any overseas criminal convictions or not | |

# 4. Risk assessment

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| Evaluate all the information you have gathered to assess the risk the candidate poses, or would pose, to the safety of children if employed or engaged.  You must detail how all information gathered for the other components of the safety check (identity check, work history, interview, referee, membership, and police vet) have been considered for the risk assessment.  Also consider if there is any other information that may be relevant to the risk assessment, including any requirements regarding robust decision-making outlined in the Social Sector Accreditation Standards. | | | | | |
| REFLECT | Is the person safe to work with children? | | | | Yes  No |
| Would the person support and adhere to your child protection policy, and actively contribute to a culture of child protection in your organisation? | | | | Yes  No |
| Are there any inconsistencies in information supplied, e.g. information not mentioned on the person's work history or during interview that was provided by the referees or in the police vet? | | | | Yes  No |
| Are there any patterns of concerning attitudes or behaviours? These can be subtle and wider than the presence or absence of criminal convictions. | | | | Yes  No |
| Do you need to follow-up or gather any additional information, e.g. from another referee or more information from a referee already contacted? | | | | Yes  No |
| Do you need to clarify any issues with the applicant directly, e.g. allowing them an opportunity to respond to any information that is unclear or inconsistent? Did they deliberately withhold information? | | | | Yes  No |
| Do you need to talk to anyone else about the person? | | | | Yes  No |
| Assess the person to determine whether they pose, or would pose, any risk to the safety of children.  If the person does, or would, pose a risk, assess the extent of that risk. Consider actions that could be taken to eliminate or mitigate the risk. | | | | | |
| ASSESS | | I have assessed the person as posing | no risk  risk  high risk | to children | |
| Notes on the assessment of information and decision in the interest of children’s safety.  Please also note any additional information you may have also considered when determining whether the person poses, or would pose, a risk to children. | | | |
| *if the person has any convictions or comments on their police vet, ensure you include these in your assessment notes here.* | | | |

# Sign-off

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| --- | --- |
| Name of person who completed the risk assessment: |  |
| Signature: |  |
| Date: |  |
| Due date of next periodic safety check: |  |