CONTROLLED POLICY

D02 – WORKER REGISTRATION, VETTING AND COMPLIANCE POLICY

Policy Reference	D02	**Version**	1.0
Policy Owner	PHSSL Staffing Limited	**Approved By**	Lade Awosika, Director
Approval Method	Approved electronically	**Approval Date**	September 2026
Review Date	September 2027	**Status**	Controlled Document
Applies To	Candidates, agency workers and PHSSL staff involved in registration, vetting and compliance	**Supersedes**	New policy

1. Purpose

This policy defines PHSSL Staffing Limited's operational controls for registering, vetting, clearing and monitoring workers before and during supply to clients. It complements the Recruitment, Selection and Safer Employment Policy and the detailed DBS, Right to Work, References and Pre-Employment Checks Policy.

2. Scope

This policy applies to candidates, agency workers and PHSSL employees involved in registration, compliance, bookings and worker management. The precise checks required will depend on the role, client, regulated activity, professional requirements and level of risk.

3. Core Compliance Rule

A worker must not be released for an assignment until all checks designated as mandatory for that assignment are satisfactorily completed, verified and recorded. Urgency, worker shortage or client pressure must not override mandatory safeguarding, right-to-work or competence controls.

4. Registration

Candidates will complete PHSSL's registration process and provide sufficient accurate information for PHSSL to assess identity, work history, suitability, availability and relevant compliance requirements.

5. Candidate Declarations

Candidates are expected to answer material questions honestly and disclose information relevant to lawful suitability assessment. False statements, forged documents or deliberate omissions may result in withdrawal of clearance, investigation or cessation of engagement.

6. Identity Verification

PHSSL will verify identity using appropriate original or permitted digital evidence. Names, dates of birth and other key details should be reconciled across documents, and material discrepancies resolved before clearance.

7. Right to Work

Every person who requires a statutory right-to-work check must be checked in accordance with the Home Office process applicable at the time. Checks will be completed before employment or engagement begins where required, and follow-up checks will be scheduled for time-limited permission.

8. Employment History

PHSSL will obtain an appropriate employment or activity history and examine unexplained gaps where relevant to the role. The purpose is to assess suitability and safeguarding risk, not to penalise legitimate career breaks or personal circumstances.

9. References

References will be sought and verified to the level required for the role and client. Where expected evidence cannot be obtained, the matter must be assessed and documented rather than automatically marked complete.

10. Qualifications

Qualifications, certificates and licences required for an assignment will be checked for relevance and apparent authenticity. PHSSL may verify evidence with the issuing body or other legitimate source where necessary.

11. Professional Registration

Where a role requires registration with a professional regulator, PHSSL will verify current registration and any publicly available restrictions relevant to the proposed work. Expiry or renewal dates will be monitored where applicable.

12. DBS Checks

DBS checks will only be requested at the level for which the role is legally eligible. PHSSL will assess the role before determining whether a Basic, Standard or Enhanced check, and any eligible barred-list check, is appropriate.

13. Barred-List and Regulated Activity Controls

A person must not knowingly be placed in regulated activity from which they are barred. Where barred-list eligibility applies, PHSSL will follow the relevant safeguarding and DBS requirements.

14. DBS Update Service

Where PHSSL relies on the DBS Update Service, it will do so only with the worker's permission and after confirming the certificate is suitable for the role and the identity details correspond. Any status change requiring a new certificate will be addressed before relevant placement.

15. Criminal Record Information

Criminal record information will be handled lawfully, confidentially and fairly. A disclosure will not automatically exclude a candidate unless the law requires exclusion; relevance, seriousness, recency, role risks and safeguarding factors will be considered.

16. Training and Competency

Required training must be current and relevant. Practical competence will not be assumed merely because a worker has completed an online course where observation, skills assessment, delegation or client-specific competency is required.

17. Health and Fitness Requirements

PHSSL will only seek health information that is lawful and relevant to safe performance of the role. Reasonable adjustments will be considered where applicable, and decisions must not be based on unlawful discrimination.

18. Client-Specific Compliance

Clients may have additional legitimate compliance requirements. PHSSL will identify these before supply where possible and will not represent a worker as meeting a client requirement unless appropriate evidence has been obtained.

19. Compliance Checklist and Clearance

PHSSL will use a documented compliance process to show which checks are required, completed, verified, outstanding or not applicable. Final clearance should be identifiable and attributable to an authorised PHSSL staff member or system process.

20. Conditional or Restricted Clearance

Where a worker is cleared only for particular roles, clients, tasks or settings, the restriction must be clearly recorded and visible to staff responsible for bookings. Restricted clearance must not be treated as general clearance.

21. Expiry Monitoring

Time-limited items such as right-to-work permission, professional registration, training or other required evidence will be monitored. Workers may be placed on hold from affected assignments if mandatory evidence expires.

22. Ongoing Duty to Disclose Changes

Workers must promptly tell PHSSL about changes that may affect lawful or safe placement, including right-to-work status, professional registration, criminal or safeguarding matters where lawfully relevant, restrictions, health-related safety needs or loss of a required qualification.

23. Compliance Holds

PHSSL may temporarily prevent a worker from being booked while missing, expired, inconsistent or concerning information is investigated. A compliance hold is a protective control and is not necessarily a disciplinary finding.

24. Suspected Fraud or Forgery

Suspected forged or altered identity, training, qualification, reference or compliance documents must be escalated. PHSSL may verify the evidence, suspend clearance, notify an affected client and consider referral to an appropriate authority where justified.

25. Safeguarding Information

Information indicating a possible risk to a child or adult at risk must be managed under the relevant safeguarding policy. Compliance staff must not treat safeguarding information solely as an administrative discrepancy.

26. Adverse Information After Placement

If material adverse information is received after a worker has started an assignment, PHSSL will assess immediate risk, consider whether the worker should be removed or restricted, liaise appropriately with the client and undertake further enquiries.

27. DBS Referral Consideration

Where the legal referral criteria are met, PHSSL will consider and fulfil any duty to refer to the Disclosure and Barring Service. Leaving, resigning or ceasing to accept assignments must not be used to avoid a required referral.

28. Data Protection and Confidentiality

Vetting information may include sensitive personal data and criminal-offence information. Access will be limited to legitimate purposes, records will be secured, and information will not be shared more widely than necessary and lawful.

29. Record Retention

Compliance records will be retained in accordance with PHSSL's records-management schedule, legal obligations and legitimate business needs. Documents should not be retained indefinitely merely because they were collected during recruitment.

30. Audits

PHSSL will conduct proportionate compliance audits to identify missing evidence, expired items, inconsistent decisions or process weaknesses. Findings will be corrected and recurring themes escalated through governance.

31. Worker Responsibilities

- Provide accurate and genuine information and documents.
- Cooperate with lawful vetting and verification.
- Keep PHSSL informed of material changes.
- Renew time-limited evidence when required.
- Do not accept assignments outside recorded clearance or competence.
- Protect confidential information used during assignments.

32. Recruitment and Compliance Staff Responsibilities

- Apply the correct checklist for the role and assignment.
- Verify evidence rather than simply collect documents.
- Resolve discrepancies before clearance.
- Record checks, dates, restrictions and expiries accurately.
- Do not bypass mandatory controls to fill a booking.

- Escalate safeguarding, fraud, right-to-work or professional concerns.

33. Management Responsibilities

- Maintain current compliance procedures and systems.
- Ensure staff are trained for their checking responsibilities.
- Review exceptional or higher-risk decisions.
- Ensure booking systems reflect compliance restrictions and holds.
- Monitor expiry and audit information.
- Respond to changes in law, guidance and client requirements.

34. Related PHSSL Staffing Policies

- A01 Governance and Quality Assurance Policy.
- A03 Records Management, Confidentiality and Data Protection Policy.
- B01 Safeguarding Adults Policy.
- B02 Safeguarding Children and Young People Policy.
- C01 Recruitment, Selection and Safer Employment Policy.
- C02 DBS, Right to Work, References and Pre-Employment Checks Policy.
- C03 Induction, Training, Supervision and Competency Policy.
- D01 Temporary Worker / Agency Worker Management Policy.
- D03 Placement, Booking, Allocation and Cancellation Policy.

35. Monitoring and Review

This policy will be monitored through candidate-file audits, expiry reports, booking controls, incidents, safeguarding concerns, client feedback and governance review. It will be reviewed at least annually, or sooner following significant legal or regulatory change, serious compliance failures, audit findings or identified learning.

Approved by	Lade Awosika
Position	Director
Approval method	Approved electronically
Approval date / next review	September 2026 / September 2027