**PVG RISK ASSESSMENT FORM**

This form should be completed where awaiting a PVG check during the COVID-19 pandemic.

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| Post: |  | Appointee: |  |
| Service: |  | Recruiting manager:  |  |

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| 1. Service area and vulnerable groups/service involved
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| 1. Frequency and type of contact with service users, including potential for lone working
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| 1. Potential risks and control measures that can be put in place to minimise risks
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| **Approved: Y / N**  | **Approving manager signature:****Date:** |
| (If not approved, please outline temporary measures to be implemented pending PVG check) |