

# Managing Safeguarding Allegations Against Staff

## Policy and Procedure

<b>Policy Folder &amp; Policy Number</b>	General Policy Folder 5 Policy No. 5.6
<b>Version:</b>	11
<b>Ratified by:</b>	Governing Body
<b>Date ratified:</b>	February 2015
<b>Name of originator/author:</b>	Designated Nurse for Safeguarding / Lead Nurse Adult Safeguarding
<b>Name of responsible committee/individual:</b>	Quality Committee (Approved January 2015)
<b>Date issued:</b>	Proposed February 2015
<b>Review date:</b>	February 2017
<b>Date of first issue:</b>	N/A
<b>Target audience:</b>	All staff, including temporary staff and contractors for Stoke-on-Trent CCG

# CONTENTS

## POLICY & PROCEDURE GUIDANCE

### SECTION PAGE

1.	Introduction	3
2.	Clinical Commissioning Group Commitments and Values	4
3.	Application and Scope	5
4.	Management of Allegations	5
5.	Procedure for Reporting/Managing Allegations- CCG Employed Staff	6
5.2	Procedure for Reporting/Managing Allegations- Non directly Employed Staff	9
5.3	Disclosure and Barring Service (DBS)	10
6.	Record Keeping	11
7.	Post Investigation Review	11
8.	Monitoring	12
9.	Equality Impact Assessment	12
10.	Appendix 1 Process Flow Chart	13
11.	Appendix 2 Record Keeping checklist	14
12.	Appendix 3 abbreviations used	15

## MANAGING SAFEGUARDING ALLEGATIONS AGAINST STAFF POLICY

### 1.0 Introduction

1.1 This policy relates to situations where an allegation is made that a child/young person or adult at risk of abuse are suffering or likely to suffer significant harm from an employee or worker of the Stoke on Trent and North Staffordshire Clinical Commissioning Groups (hereafter called CCGs) or that an employee or workers behaviour indicates unsuitability to work with children or vulnerable adults. If your particular issue relates to the safeguarding responsibilities of the CCG toward children, young people and adults at risk, please refer to the CCG Managing Allegations Against Staff policy. The policy therefore applies to all CCG staff. It provides a framework to ensure appropriate actions are taken to manage such allegations, regardless of whether they are made in connection with an employee's/worker's duties with the CCG or if they fall outside of this i.e. in their private life or any other capacity.

1.2 The purpose of this Policy is to provide a framework for managing cases where allegations are made about health staff that indicate that children, young people or adults at risk are believed to have suffered, or are likely to suffer, significant harm. Concern may also be raised if the staff member is behaving in a way which demonstrates unsuitability for working with children, young people or adults at risk in their present position, or in any capacity. The allegation or issue may arise either in the employee's/professionals work or private life. Examples are as follows;

- Committed a criminal offence against or related to children, young people or adults at risk.
- Failing to work collaboratively with social care agencies when issues about care of children, young people or adults at risk for whom they have caring responsibilities are being investigated.
- Behaved towards children, young people or adults at risk, in a manner that indicates they are unsuitable to work with children, young people or vulnerable adults.
- Where an allegation or concern arises about a member of staff, arising from their private life such as perpetration of domestic violence or where inadequate steps have been taken to protect vulnerable other's from the impact of violence or abuse. Consideration also applies to other roles, which could bring that individual in contact with children, young people or adults at risk.
- Where an allegation of abuse is made against someone closely associated with a member of staff e.g. partner, member of the family or other household member, the risk to children, young people or adults at risk for whom the member of staff is responsible must be assessed to ensure that the children, young people or adults at risk are protected and appropriate action taken.

1.3 Safeguarding Adults –Categories of abuse: Detailed definitions of harm can be found in the Safeguarding Children and Young People, Adults at Risk Policy.

There are eight categories of abuse:

- Neglect
- Emotional Abuse
- Physical Abuse
- Sexual Abuse
- Discrimination
- Institutional
- Financial
- An unauthorised deprivation of liberty

1.4 Safeguarding children – Categories of Abuse

There are four categories of abuse:

- Neglect
- Sexual
- Emotional
- Physical

1.5 As such, this policy is focused on management of risk, regardless of the substantive role of the individual while an employee of, or working on behalf of the CCG. The policy covers all allegations made where an employee or worker has behaved within the examples given above.

1.6 This policy should be read alongside the CCG Safeguarding Children and Young People, Adults at Risk and Prevent Policy; Voicing Your Concerns (Whistleblowing) Policy, Disciplinary Policy, Serious Incident Framework and National Framework for Reporting and Learning from Serious Incidents requiring Investigation.

## 2.0 CCG commitments and values

2.1 The NHS Constitution establishes the principles and values of the CCG. It sets out rights to which patients, public and staff are entitled. It sets out the pledges which the NHS is committed to achieve, together with responsibilities, which the public, patients and staff owe to one another to ensure that the NHS operates fairly and effectively.

2.2 As a publicly funded NHS body, the CCG expects high standards from all of its employees and, in line with the key principles of the Constitution, The CCG aspires to the highest standards of excellence and professionalism in the people it employs, the education, training and development they receive and in the leadership and management of the organisation.

2.3 The CCG as with all other NHS bodies has a statutory duty to ensure that it makes arrangements to safeguard and promote the welfare of children and young people, to protect adults at risk from abuse or the risk of abuse and support the Home Office Counter Terrorism strategy CONTEST which includes a specific focus on Prevent (preventing violent extremism/radicalisation). Throughout this document safeguarding children, young people and vulnerable adults at risk includes those vulnerable to violent extremism/radicalisation. The key legislative framework includes The Children Act 1989 (2004), No Secrets (2000), Crime and Disorder Act (1998), The Care Act (2014) and the Counter-Terrorism and security Bill 2014.(Appendix 1 sets out the legislation framework in detail).

### **3.0 Application and Scope**

3.1 This policy applies to all employees and workers of the CCG, including secondees into and out of the organisation, volunteers, students, honorary appointees, trainees, contractors, and temporary workers, including locum doctors and those working on a bank or agency contract.

3.2 For ease of reference, all employees and workers who fall under these groups will be uniformly referred to as “staff” in this document.

3.3 It covers allegations made against staff in the course of the CCG duties and outside of this, including their private life and family home.

3.4 Although Managing Safeguarding Allegations Against Staff is required under the Children Act (2004), this policy also applies to vulnerable adults at risk of abuse. Working Together to Safeguard Children and Young People (2013) sets out expectations that all statutory organisations will have a procedure for managing allegations against staff. The CCG will adopt the same principles in relation to Safeguarding Adults at risk.

### **4.0 Management of Allegations**

4.1 There may be three strands in consideration of an allegation:

- A police investigation of a possible criminal offence
- Enquiries and assessment by children’s/adult’s Social Care about whether a child/young person/vulnerable adult at risk of abuse is in need of protection or in need of services
- Consideration of disciplinary action (including consideration of suspension)

4.2 Careful consideration of issues relating to wider reputational damage also need to be considered, especially, but not exclusively, where the staff member works in a team focussed on direct patient care and support.

4.3 The safety of the child, young people or vulnerable adult at risk is of paramount importance. Reputational issues must be managed appropriately by discussion with the relevant communications team, but immediate action may be required to safeguard investigations and

- any other children, young people or vulnerable adults at risk. Any concern that children, young people or vulnerable adults may be at risk of harm, must immediately be reported.
- 4.4 All staff must be familiar with referral procedures to protect a vulnerable adult/child. The concern must also be reported to the staff member's line manager, who should take advice from the CCG Safeguarding Team. The CCG will have a nominated senior safeguarding officer with significant seniority to make decisions on behalf of the CCG. Where there is no-one appointed to this role, the Director of Nursing will act as the point of contact to identify and appoint the nominated Safeguarding Senior Officer to lead and co-ordinate investigations. Each Local Authority has a Local Designated Officer (LADO) to act on their behalf.
- 4.5 The CCGs as statutory members of their Local Safeguarding Children Board (LSCB) and Safeguarding Adult Board (SAB), will need to understand their local multi-agency policies. LSCBS and SABs have their own websites which set out their policies and procedures for safeguarding children/young people/vulnerable adults at risk.

[www.stopabuse.info](http://www.stopabuse.info)  
[www.safeguardingchildren.stoke.gov.uk](http://www.safeguardingchildren.stoke.gov.uk)  
[www.staffsscb.org.uk](http://www.staffsscb.org.uk)

- 4.6 Any action taken by the CCG to manage an allegation must not jeopardise any external investigations. This would include reporting the allegation against a healthcare or non-healthcare professional on the Strategic Executive Information System (STEIS). The STEIS system is used across the NHS to report serious incidents. See NHS England Serious Incident Framework (2013) and National Patient Safety Agency (2010) National Framework for Reporting and Learning from Serious Incidents Requiring Investigation. Available at <http://www.nrls.npsa.nhs.uk/resources/?entryid45=75173>

## **5.0 Procedure for Reporting/Managing Allegations; CCG employed staff**

- 5.1 It is essential that every effort must be made to maintain confidentiality and manage communications while an allegation is being investigated.
- 5.1.1 On becoming aware of an issue of concern (as outlined in section 1 above) all staff have a duty to inform their Line Manager immediately who will report the allegation for information to the Nominated Senior Officer (Designated Nurse Safeguarding Children/Nurse Lead Safeguarding Adults. The CCG has agreed with Human Resources (HR) a dedicated member of staff to support this process. **See appendix 1 for managing Safeguarding allegations procedure.**
- 5.1.2 The Nominated Safeguarding Senior Officer must:
- Ensure (if appropriate) that a child protection/adults at risk referral is made (or has been made) to the relevant Children's/Adult's Social Care Team or the Police. The referral must be put in writing to Children's/Adult's Social Care by the individual reporting the concerns within

24 hours or in the event of a weekend the earliest opportunity of the next working day (referrer of the original concern).

- Where the issue is in relation to safeguarding children, the nominated safeguarding senior officer will liaise with the Local Authority Designated Officer (LADO), who will agree with the Nominated Safeguarding Senior Officer (NSSO) any information that needs to be shared with other geographical areas depending on where the staff member lives. The LADO can be contacted through the local Social Care team or the LSCB contact lead. Immediate issues of investigation and management of the employee should be discussed and agreed at this time, including what information should be passed to the staff member concerned at this point.

- In the cases referring to children please follow the links below to the relevant Local Authority;

Staffordshire

<http://www.staffsscb.org.uk/Professionals/Procedures/Section-Four/Section-Four-Docs/Section-4-A-Managing-Allegations-of-Abuse-against-a-Person-who-Works-with-Children.pdf>

Stoke

<http://www.safeguardingchildren.stoke.gov.uk/ccm/content/safeguarding-children/professionals-folder/procedure-manuals/d---cyp-specific-circumstances.en>

- Where the issue is in relation to vulnerable adults at risk, the NSSO will discuss the case and allegations with the police and the relevant adult social care department manager and identify which agency will be leading on the investigation.

[www.stopabuse.info](http://www.stopabuse.info)

- For both children, young people and adults at risk contact the HR department for advice regarding action to be taken in relation to the employee. In conjunction with HR and the staff member's line manager, decide whether suspension (which will be at full pay) is appropriate during the period of investigation. HR will advise on the authority levels and process requirements for this action. HR will advise whether the CCG Disciplinary Procedure is followed. HR advice will be particularly pertinent to staff who are agency, secondees, or self-employed staff working on behalf of the CCG
- Following notification to the LADO (and referral to children's/adult's Social Care and/or the Police as necessary), convene a (Strategy) Planning Meeting (see below) with the appropriate personnel to decide how to manage the allegation. This group should include the Line; Nominated Safeguarding Senior Officer; Safeguarding Lead; and a senior member of staff from the HR team to offer specific HR advice. Designated Professionals may also be invited. This group will be the 'Investigation Team'.
- Report the allegation for information to the Director of Nursing of the CCG

### 5.1.3 (Strategy) Planning Meeting.

At this meeting the following issues should be considered;

- The safety of the child/young person/vulnerable adult at risk of abuse is of paramount importance.
- Review what action has already been undertaken so far.
- Decide the in-house investigation strategy to be undertaken. The Police and/or Social Care should be consulted when they are involved in any ongoing investigation and/or criminal proceedings are pending. The police will also make a referral to the Professional Regulatory body should the member of staff be a registered professional such as the General Medical Council (GMC) for doctors, or the Nursing and Midwifery Council (NMC) for nurses. A decision should then be made as to whether any internal investigation should be delayed until external investigations are complete.
- Decide how to present the allegations to the relevant staff member concerned and how to manage the investigatory process. Agreement should be reached with children's/adult's Social Care and the Police about what information should be passed to the staff member concerned. The Line Manager should be asked to provide appropriate support to the individual while the case is ongoing and keep them regularly informed. Where police investigations are ongoing, any internal action could be delayed, pending police findings. Further engagement will be required with the police throughout this period, and support for the staff member considered. Further support may be considered necessary from Occupational Health.
- Decide how the person/child/vulnerable adult, or their nominated parent/guardian/nominated carer making the allegation is to be kept informed of what is happening to their allegation, but also bearing in mind the requirements of maintaining confidentiality and observing the requirements of the Human Rights Act and The Data Protection Act. The sharing of information must not 'contaminate' any Police or children's/adult's Social Care investigations that are ongoing. Also decide whether the allegation requires formal acknowledgement in line with the CCG Complaints Procedure.
- Consider what contact is required with Police/children's/adult's Social Care. A member of the Investigation Team should be nominated as the link person for the Police/children/adult
- Review the need for engagement and involvement from Social Care.
- Decide how to handle any queries from the media concerning the allegation. Additional support and advice should be obtained from the CCG Communications team.
- Decide the frequency and format of review meetings which need to be set up to manage the ongoing investigation and the various actions required.

## 5.2 Procedure for Reporting/Managing Allegations; Non-directly employed staff

5.2.1 If a Safeguarding Allegation is made against a worker working for the CCG who is not an employee of the CCG, the allegation must also be shared with their employer or the body that engaged them at the earliest opportunity. The following are examples of some potential scenarios that might arise, but this is not exhaustive;

- Allegations made against agency workers must be reported to the appointing agency and referred to the CCG.
- Allegations made against workers employed by external contractors should be referred to the contractor and the relevant lead body in the CCG responsible for managing the service level agreement with the contractor.
- Allegations made against workers seconded in from another employer to the CCG, or embedded with the CCG but employed elsewhere, should be reported to the relevant employer.
- Allegations made against workers engaged under a Contract for Services should be referred to CCG contract management.

5.2.2 In such circumstances it will be necessary for the CCG to engage with the other relevant parties outlined above to decide how the allegation should be managed. These scenarios are likely to be complex and the CCG managers should take early advice from their local safeguarding and HR leads. It is recommended that a case conference is held between the CCG and the other party/parties at the earliest opportunity, noting the responsibility to report issues to the Police and/or Social Care teams within 48 hours of the allegation being received.

5.2.3 Despite the fact that allegations against such workers should be reported as above, The CCG still retains a responsibility to consider how the allegations should be managed if the allegation has a connection with, or relevance to, the duties that the worker undertakes with the CCG. All such allegations also need to be reported and escalated by the lead CCG manager in accordance with the requirements of this policy.

5.2.4 Assumptions should not be made that the other party has referred the matter to the police or relevant other body – evidence needs to be promptly provided and if this is not forthcoming then the CCG Nominated Safeguarding Senior Officer appointed to deal with the case should do so on behalf of the CCG and advise the other party accordingly.

5.2.5 Following the assessment of the issues above, the Nominated Senior Officer will complete a formal report to the Governing Board of the CCG. The Accountable Officer who is ultimately responsible on behalf of the CCG.

### 5.3 Disclosure and Barring Service (DBS)

5.3.1 As an employer of staff in a 'regulated activity' the CCG also has a responsibility to refer concerns to the DBS in accordance with the Safeguarding Vulnerable Groups Act 2006. Managers must report concerns to their local HR team, who should seek advice from the CCG Safeguarding Team.

The following groups may be referred for information to the Disclosure and Barring Service:

- If an employee or worker of the CCG has been permanently removed from 'regulated activity' through dismissal or permanent transfer from 'regulated activity', or where they would have removed or transferred that person from regulated activity if they had not left, resigned, retired or been made redundant; and
- They believe the person has:

Engaged in 'relevant conduct', satisfied the 'harm test' (i.e. no action or inaction occurred but the present risk that it could occur was significant); or received a caution or conviction for a 'relevant offence' (see DBS website [www.gov.uk/disclosure-and-barring-service-criminal-record-checks-referrals-and-complaints](http://www.gov.uk/disclosure-and-barring-service-criminal-record-checks-referrals-and-complaints) ).

- A referral to the DBS should be made following initial information gathering to establish whether there is cause for concern. A referral should be made even if the person in question has left the CCG before an investigation and/or disciplinary process has been completed. However, it is important to note that the DBS has no investigatory powers and therefore relies upon evidence supplied to it. Managers therefore have a responsibility to complete investigations as far as possible, even where the individual leaves before investigations can be completed, so that the DBS has enough substantiated evidence on which it can base its decision. If additional information becomes available after making a referral this should also be provided to the DBS. The referral should be made using the DBS referral form and posted to the DBS enclosing all relevant information held. Please see further guidance and information at <https://www.gov.uk/government/publications/dbs-referrals-form-and-guidance>
- If the employee is in a registered profession, then consideration should also be given as to whether they may have breached their professional code of practice, and whether the matter is purely a professional issue, or a All records should be saved in a shared area and not in individual's personal drives as they may need to be accessed. Pending the establishment of an Electronic Records Management system which will house, store all on the shared drive in accordance with Information Governance Policy, however, the folder should be restricted to appropriate personnel; Nominated Senior Officers and HR. The legal duty to refer to the DBS remains irrespective of any referral being made to a regulatory body.

## **6.0 Record Keeping**

6.1 The Nominated Safeguarding Senior Officer will have the responsibility for ensuring the following records are kept:

- The nature of the allegation/concern.
- Who was spoken to as part of the process and what statements/notes were taken and when.
- What records were seen and reviewed.
- Why specific decisions/actions were taken, including suspension and any actions taken under the CCG Disciplinary Procedure.
- What alternatives to actions were explored?
- Minutes and actions of all meetings that take place.
- The above information will be held until the employee reaches the age of 79 or 6 years after death, whichever is the longer period (as per the CCG record keeping policy)

6.2 For these particular records;

- Name the files appropriately
- Apply a retention period
- Save in an agreed area and apply security measures to the records as they contain personal information therefore access should be limited
- Remember that emails can form part of records or can be seen as individual records, so if they are also a critical part of the investigation, they should also be securely stored in the file accordingly.

## **7.0 Post Investigation Review**

7.1 Following the completion of the initial investigation, the Nominated Senior Officer will lead a review of the case and its actions. This will be passed to the Director of Nursing of the CCG for review. Further actions may still be pending, including consideration of disciplinary matters or an ongoing criminal investigation.

7.2 Any recommendations from the review will be implemented and information disseminated to the appropriate people within the organisation.

7.3 As well as supporting the member of staff throughout the investigation, consideration must be paid to supporting the member of staff through integration back into the workplace should this be appropriate post-investigation. Ongoing support for the member of staff may be offered through Occupational Health.

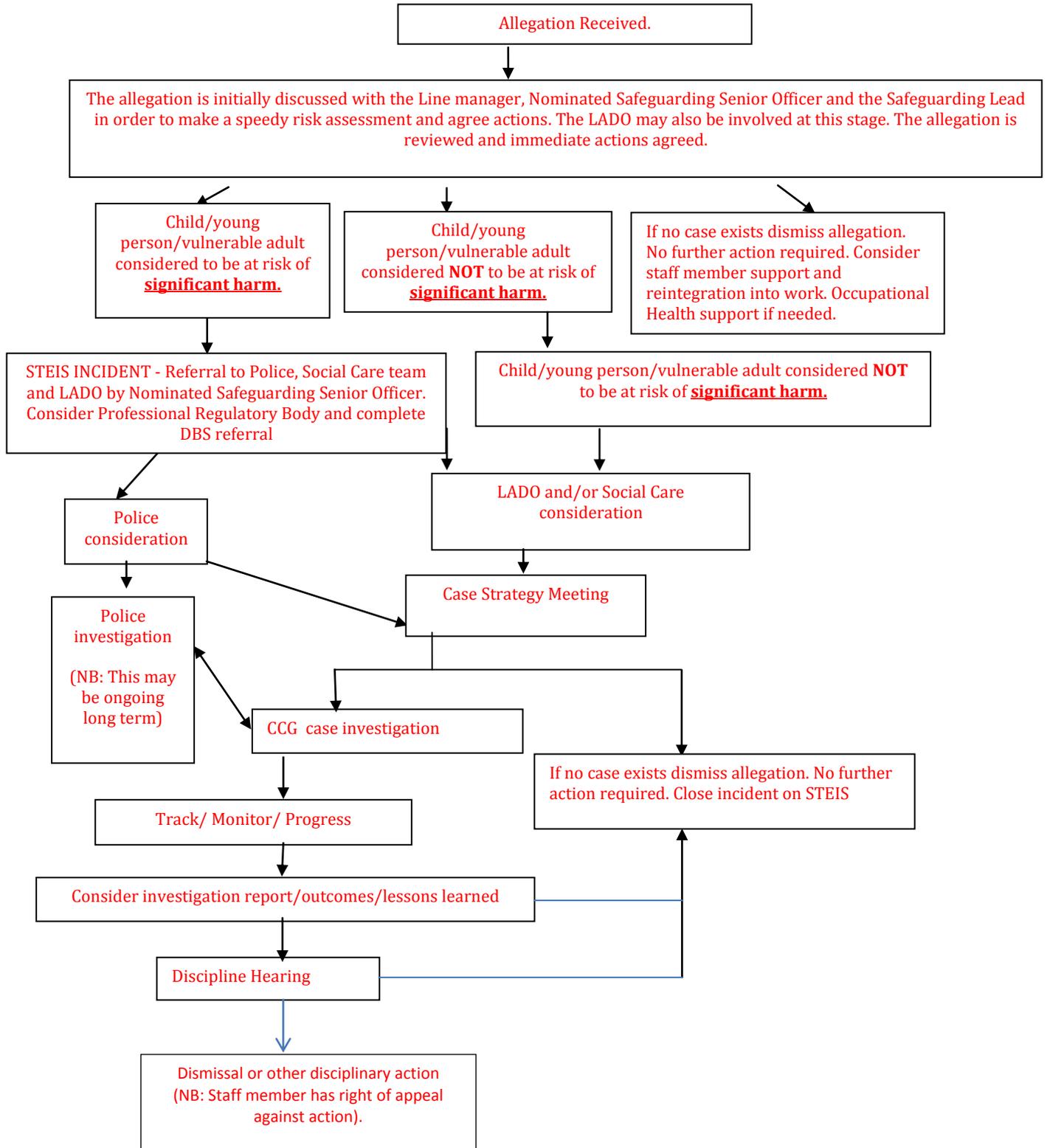
## **8 Monitoring**

- 8.1 The CCG will monitor compliance of this policy.
- 8.2 The Designated Nurse and Lead Adult Safeguarding Nurse are responsible for the monitoring, revision and updating of this policy. They will act on behalf of the Governing Board Nurse in this respect, and will update the Governing Board on its implementation.
- 8.3 This policy will be monitored with regard to the implications of equality and diversity on a regular basis.

## **9.0 Equality impact assessment**

- 9.1 *Equality and diversity are at the heart of the CCG's values. Throughout the development of the policies and processes cited in this document, we have given due regard to the need to eliminate discrimination, harassment and victimisation, to advance equality of opportunity, and to foster good relations between people who share a relevant protected characteristic (as cited in under the Equality Act 2010) and those who do not share it.*

**Appendix 1. Process Flow Chart**



## Appendix 2. Record keeping checklist

The Nominated Senior Officer will have the responsibility for ensuring that records are kept throughout the investigation of the allegation/concern. This checklist reflects the information needed, but this is not exhaustive:-

- The nature of the allegation/concern.
- Who was spoken to and when as part of the process and what statements/notes were taken.
- What records were seen and reviewed.
- Why specific decisions/actions were taken, including suspension and any actions taken under the CCG Disciplinary Procedure.
- What alternatives to actions were explored.
- Minutes and actions of all meetings that take place.
- The above information will be held until the employee reaches the age of 79 or 6 years after death, whichever is the longer period

Investigation	Key contact	Evidence collected
Clarify and articulate the nature of the allegation	STEIS completed LADO contacted Police contacted Social Care contacted Human Resources Lead Director	Date;.....  Name of contact.....
Statements and notes		Date.....  Identify where documents are stored
Actions taken  <i>Record alternatives considered and why</i>		Date.....  Identify where documents are stored
Minutes and records of all relevant meetings		Date.....  Identify where documents are stored
Date of employees 79 birthday	Information governance lead advice taken	Date.....

**Appendix 3. List of abbreviations used.**

CCG	Clinical Commissioning Group
DoN	Director of Nursing
HR	Human resources
CONTEST	The United Kingdom's Counter terrorism strategy
CQC	Care Quality Commission
DBS	Disclosure and Barring service
DfE	Department for Education
DH	Department of Health
GMC	General Medical Council
HEE	Health Education England
HO	Home Office
LADO	Local Designated Officer
LETB	Local Education and Training Board
LSCB	Local Safeguarding Children's Board
NLA	National Learning Academy
NMC	Nursing and Midwifery Council
NSSO	Nominated Safeguarding Senior Officer
PREVENT	<i>Prevent</i> involves the identification and referral of those susceptible to violent extremism into appropriate interventions. These interventions aim to divert the susceptible from embarking down the path to radicalisation.
SAB	Safeguarding Adult Board
STEIS	Strategic Executive Information System