

Policy for Protecting Patients When an Allegation is Made Against an Employee

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Review dates and details of changes made during the review:

December 2020:

Clarification of the process to follow when a concern arises.

Update with references to the Care Act 2014.

Changes to definitions in Appendices 1 and 2.

Police processes do not automatically mean we cannot continue with internal Trust procedures.

Criteria for suspension has been reduced from 25 to 20 based on real case scenarios.

May 2024:

Changes to phrasing and terminology where necessary

Updated links/references to the most recent ones where necessary

Key words:

Allegations, Abuse and Neglect, Adult Safeguarding, Child Safeguarding

1. Introduction and Overview

University Hospitals of Leicester (UHL) is committed to supporting staff whilst safeguarding its patients and employees. All allegations of abuse, regardless of when they occurred, involving an employee must be taken seriously and treated in accordance with this policy. UHL's Safeguarding Adults Policy and Procedure and Safeguarding Children Policy should be used when concerns are raised regarding people who are not employed by UHL.

The aim of this policy is to outline the process that should be followed when an allegation or concern is raised that an employee has caused harm or intended to cause harm to a person and their ability to protect others is questioned.

Immediate Action to be taken when an allegation or concern is reported to the line manager or senior person on duty:

In hours Monday to Friday (generally 08.00 – 16.00):

Managers must discuss the allegation with the Head of Safeguarding and People Services prior to raising this with the employee. Senior Managers within the CMG or Directorate should also be informed (e.g., Head of Nursing, Deputy Head of Nursing, Clinical Director, Director) to provide support to the line manager and complete an employee safeguarding risk assessment.

Out of Hours and Weekends:

Managers must discuss the allegation with the Director on Call to agree any immediate actions to be taken prior to raising this with the employee and complete an employee safeguarding risk assessment.

The policy outlines key safeguarding legislation.

UHL works in partnership with local safeguarding boards/partnerships to ensure that where safeguarding concerns are raised about employees, these are managed in a consistent and timely manner.

It is a statutory requirement for all Local Authorities to appoint a Local Authority Designated Officer for Managing Allegations (LADO) for children only. Their role is to receive information and review and coordinate the process when a concern is raised. It is necessary to consider the appropriateness of the person working with children. They can also provide expert advice, if required, to UHL.

2. Policy Scope

This policy applies to instances where UHL are alerted to information that may affect the suitability of an employee in their role. Examples include:

- Behaved in a way that has harmed or may have harmed an adult or child/young person.
- Possibly committed a criminal offence against or related to an adult or child/young person.
- Behaved towards an adult or child/young person in a way that indicates they may pose a risk of harm to adults or children/young person e.g., discriminatory behaviour.

The allegations or concerns may arise in connection with:

- The employee's own work
- The employee's own children/dependent(s)
- Other children/young people/family/adult in need of safeguarding living within the family
- Other children/young people/adult in need of safeguarding living outside the family
- Current or historical concerns

Any allegations or concerns regarding visitors, patients, or people visiting the Trust to undertake charity (or similar) work should be referred via an adult or child safeguarding referral as per either the Trust's Safeguarding Adults Policy and Procedures (B26/2011) or Safeguarding Children Policy (B1/2012). The Trust's safeguarding team will then manage the investigation accordingly.

We recognise that patients who lack capacity, are elderly, are young, have learning disabilities, or have a protected characteristic under the Equality Act 2010 are disproportionately represented in safeguarding investigations. Therefore, it is important that investigations are undertaken in a consistent manner.

3. Definitions and Abbreviations

Appendices 1 and 2 outline Definitions of Abuse and Neglect in Children, Young People, and Adults. These should be considered when using this policy.

Adult in Need of Safeguarding	Has needs for care support (whether or not the local authority is meeting any of those needs). AND
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	is experiencing, or is at risk of, abuse and/or neglect and as a result of their care and support needs is unable to protect themselves from either the risk of, or experience of abuse or neglect (Care Act 2014)
Child/Young Person	Any person aged under 18 years or up to the age of 22 years if they are a child in the care of the local authority or have a learning/physical disability (The Children's Act Amendment 2004). See Appendix 1 for further information.

4. Roles & Responsibilities

The Chief Executive and Board of Directors have overall responsibility for Trust compliance with policies and procedures to effectively safeguard adults in need of safeguarding.

The Chief Nurse and Chief People Officer (Executive Leads) have responsibility for the strategic oversight of the development of policy, supporting practices and interventions.

The Head of Safeguarding or Nominated Deputy has delegated authority for liaison with external agencies and should act as the first point of contact for the Trust in relation to allegations against employees, along with the relevant CMG lead. This includes:

- Where the Head of Safeguarding or nominated deputy is informed via internal mechanisms and external agencies of an allegation against an employee, they notify the appropriate People Services representative and Line Manager.
- The Head of Safeguarding should act as the liaison between the Trust and the LADO (for children only) and with other agencies, by attending the necessary strategy meetings. It should be noted that any employee who works with young people up to the age of 18 will be covered by the LADO process.
- Act as the point of liaison with other agencies to ensure timely receipt of information to facilitate and progress internal processes.
- Supports Line Managers and People Services to undertake appropriate staff risk assessments (Appendix 3) in relation to individual cases. The risk rating will inform the action that needs to be taken.
- Support People Services teams with the completion of any referrals to the Disclosure and Barring Service.
- Ensure that a member from the relevant safeguarding team supports any necessary safeguarding enquiries as a result of the allegation.

Line Managers are responsible for:

- Liaising with the Head of Safeguarding and People Services to understand the allegation and agree a course of action.
- To complete the staff risk assessment process and lead on any subsequent course of action (if approved as part of the investigation).
- Meeting with the employee to inform and discuss with them the issues raised, explaining the next course of action. This meeting will usually include a People Services representative.
- Identifying appropriate support for the employee throughout the necessary processes such as a manager not involved in other aspects of the case; AMICA and Occupational Health.
- Identifying whether the staff has any protected characteristics, and to ensure appropriate adaption is made to support the individual.
- Leading any investigation and subsequent disciplinary process if appropriate.
- Supporting any necessary safeguarding enquiries as a result of the allegation.

The People Services Team are responsible for:

- Liaising with the Head of Safeguarding and Line Managers to understand the allegations and agree a course of action.
- Meeting with the employee together with the Line Manager (and Staff Side Representative if applicable) to discuss with them the issues raised and inform them of the next course of action.
- Engaging with the Head of Safeguarding and Line Manager to complete the staff risk assessment process and support any subsequent course of action.

The Employee Against Whom the Allegation has Been Made is responsible for cooperating with and engaging in any investigation and subsequent action that UHL deems necessary, including a staff risk assessment.

All Employees should be aware of the reporting mechanisms to follow in order to raise concerns about abuse or neglect of an adult, child or young person within UHL. Any employee who receives an allegation against an employee, or is aware of an employee who has harmed a child/young person or adult needs to ensure the child/young person or adult is safe and arrange any immediate medical attention, if required. They must ensure that nothing is done to destroy any potential evidence. They **must** report their concerns to their Line Manager (**unless** the allegation specifically relates to the Line Manager. In these circumstances concerns should be directed to the Head of Safeguarding or Trust safeguarding team). If an allegation is made against an employee outside of normal working hours, they should contact the UHL's On Call Director immediately.

UHL's On Call Director and Tactical Command (Out of Hours Allegations) must review the situation to decide whether to invoke any immediate interim protection

requirements to safeguard patients until the next working day. In cases of alleged assault, the police must always be notified.

5. Policy Implementation

A Staff Risk Assessment must be undertaken by the line manager. Appendix 3 provides a template to assist in identifying the content for each staff risk assessment, however this list is not exhaustive and the information to be included may change on a case-by-case basis. The risk assessment process is intended to review the situation fairly, without bias, and establish a proportionate way forward.

The staff risk assessment must be reviewed:

- a) Upon receipt of further information following any review meetings.
- b) Upon receipt of additional allegations as investigations develop.
- c) As deemed appropriate either by the employee or Line Manager.
- d) At regular periods as agreed by the investigation team.

Concerns about an employee may arise in many ways, including:

- A direct allegation from a child/young person, parent/carer, or adult.
- A concern expressed by a colleague.
- A criminal investigation.
- Investigation under the Trust's performance and conduct policies and procedures.
- Through the Trust's complaints procedure or via PILS.
- Information from another authority, agency, organisation, or third party.

An allegation may indicate that the employee is unsuitable to work with children/young people or adults in their present position, or in any capacity. This will include allegations where an employee has:

- Behaved in a way that has harmed or may have harmed an adult or child/young person.
- Possibly committed a criminal offence against or related to an adult or child/young person.
- Behaved towards an adult or child/young person in a way that indicates they may pose a risk of harm to adults or children/young person.

UHL will also respond where information has been shared with the Trust that questions the suitability of the employee to work with children or young people.

Concerns may be contemporary in nature, historical, or both. Even when concerns are clearly historical, allegations may have implications for the safety of children/young people or adults and must be dealt with within this policy and associated procedures.

6. Checks When Allegations are Identified Internally

It is expected that employees will be notified that an allegation has been made against them at the earliest opportunity once measures have been put in place to consider the safety of others. Where the allegation relates to a potential criminal matter, the Police should be informed immediately. Advice should be sought from the Head of Safeguarding and from People Services if the employee is unclear about whether the police should be informed. Out of hours, the duty manager or On Call Director can provide advice.

If an incident is reported directly to an employee's Line Manager, they must check that the child, young person, or adult is safe, and any immediate risk to their safety is addressed in line with local safeguarding policies and procedures. If this is out-of-hours, contact UHL's On Call Director. Police advice should always be sought in all allegations of physical or sexual assault. Where the allegation is received by the Complaints/PALS team, they will notify the relevant line manager at the earliest opportunity.

In line with the safeguarding children's partnership procedure, the Head of Safeguarding will discuss the case with the LADO (for allegations where the employee works with children) and agree the most appropriate action. For other allegations, contact will initially be with the relevant People Services representative.

People Services advice should be sought regarding any actions to be taken in relation to the employee under the appropriate Trust Policy.

Any decision to suspend or remove the employee from their current area of work should be made only following a discussion with the Line Manager, Head of Safeguarding or nominated deputy and relevant People Partner and following the completion of a staff risk assessment.

Employees who have an allegation made against them will be asked to meet with their Line Manager and mechanisms will be put in place to support the employee during an investigation. This should usually only take place following a consultation with the Head of Safeguarding or deputy and a People Services representative to determine whether the matter should be referred to the Police, prior to any discussions with the employee. The response must be determined on a case-by-case basis; the immediate priority being to ensure patient safety in the first instance.

Where Social Care are not involved in the investigation, the Trust will decide if it is necessary to establish an internal multiagency panel meeting involving appropriate multi-agency members, such as the Safeguarding Manager, Lead Professional (i.e., Lead Nurse/ Doctor), and People Services, to ensure the effective sharing of information to enable a full staff risk assessment to take place. This meeting will be co-ordinated and facilitated by the Head of Safeguarding.

Employees who have an allegation made against them should be encouraged to seek advice and support from People Services, their Trade Union representative if applicable, their professional body and other staff support mechanisms, including Occupational Health, AMICA and Health and Wellbeing.

Initial Strategy Meeting (within 3 working days)

Representation at the initial strategy meeting is likely to include:

- Line Manager.
- Relevant People Services representative.
- Head of Safeguarding or nominated deputy.
- Social Care representative (if social care are involved).
- Police (where they are involved).

The purpose of the initial strategy meeting is to consider the next steps and whether a formal investigation is required. The following factors are of particular significance where suspicions of abuse involve an employee:

- Identification of all the children, young people and/or adults who may be affected by the enquiries so that their protection can be considered.
- Discussion around the outcome of the initial staff risk assessment.
- Consideration of any relevant medical information.
- Sharing of information between agencies to consider actual or potential risks.
- Consideration of the protection of children, young people and/or adults known to the employee who may pose a safeguarding risk outside the workplace, those within the family, or in other settings where there is a paid or voluntary contact.
- Consideration of any risk assessments undertaken by statutory agencies in relation to the allegation.
- Review of the employee's employment history.
- Check if the employee has any protected characteristics, and ensure reasonable adjustments are made, to enable them to be supported during the investigation process.
- Consideration of appropriate action to be taken in line with the appropriate Trust's Policies and Procedure.
- Agreement on what information will be imparted to the employee and ensure appropriate staff support is available to them.
- Agreement on timescales for any investigation.
- Consideration as to whether an employee should be redeployed. If applicable, reasonable adjustments should be considered at this point to ensure the person subject to investigation is supported.
- Consideration as to whether a referral to a professional body, where relevant, is appropriate. See Appendix 7 for further information.

Internal Procedures

The initial strategy meeting will set out a plan for further investigation. This may involve the following:

- Where a police investigation has commenced relating to an allegation, before any internal investigation commences, a strategy discussion should take place with the Police to ensure any internal processes do not compromise a criminal investigation.
- Where it is necessary to take immediate steps to ensure that there is no risk to patient safety, this must be discussed with the Head of Safeguarding and People Services prior to discussion with the employee. In circumstances where, through a risk assessment, the employee needs to be removed from regulated activity, this should be approved by the Chief Nurse (Nursing and Midwifery staff), Medical Director (Medical staff), and Head of Therapies (Therapist staff).

If there is no police investigation, or if a decision is taken not to proceed, or if a prosecution fails, the Trust should consider whether an internal investigation is required to consider whether any breach of contract or professional misconduct has occurred.

For cases where the allegation involves domestic violence, the Trust's internal policies should also be followed, to ensure all vulnerabilities are considered:

- Guidance for Supporting Staff Subject to Domestic Violence (B43/2011).
- Managing Drug and Alcohol Misuse at Work (B6/2004).
- Sexual Safety in the Workplace UHL Policy (B5/2024).

In some situations, an employee may resign or retire before an allegation can be investigated. It is important not to regard this as a solution to the problem. The internal investigation should continue until it reaches its conclusion. In these circumstances, a referral to the Disclosure and Barring service and the relevant professional body should always be made if the conclusion is that the allegation is substantiated. Consideration should be given to including the employee on the Special Applicants' Register if appropriate.

People Services representatives will ensure that no 'settlement' agreements are entered into involving resignation, avoidance of disciplinary action or provision of references in any case involving safeguarding allegations or concerns about conduct towards children, young people, or adults.

If a settlement process has already commenced when an allegation arises, then legal advice should be sought regarding whether this can continue.

A formal outcome record must be made following the conclusion of any investigation, a copy of which should be provided to the employee.

The outcome of any substantiated allegation must always be included in any subsequent employment reference and a referral to the Disclosure and Barring Service made.

Referral to Disclosure and Barring Scheme (DBS)

A referral to the DBS should be made by the Head of Safeguarding or nominated deputy under the Safeguarding Vulnerable Groups Act 2006, in the following circumstances:

- When an allegation is substantiated, and the employee is moved from regulated activity to unregulated activity following the conclusion of an investigation.
- Where a person has been convicted of a relevant crime.
- Where the employee's contract of employment is terminated due to the allegation which would have led to them being prevented from working in regulated activity.

The Head of Safeguarding, in conjunction with People Services, should provide sufficient evidence from their investigations to support their reasons for withdrawal of employment in regulated or controlled activity. Referral at this point will help to ensure the DBS has sufficient evidence to commence its decision-making process while providing adequate safeguarding to vulnerable groups.

In addition, for employees subject to professional regulation, a copy of the DBS referral will be supplied to the professional regulator by the employee's manager.

For further information about the role of the DBS and guidance on relevant crimes is available via the following link:

<http://www.homeoffice.gov.uk/crime/vetting-barring-scheme>

7. Education and Training Requirements

Safeguarding training is mandatory and must be undertaken at the appropriate level depending on the role and employee is undertaking in accordance with the Core Training (Statutory and Mandatory) UHL Policy (B21/2005).

Equality, Diversity & Inclusion training is also mandatory and relevant to supporting the fair and equitable administration of the processes of this policy.

In terms of specific training to implement this policy, there is none as line managers would be supported by the Head of Safeguarding and relevant People Services representatives.

8. Process for Monitoring Compliance

Element to be monitored	Lead	Tool	Frequency	Reporting arrangements Who or what committee will the completed report go to.
<p>Review outcome of staff risk assessments</p> <p>Review use of other People Services polices in managing the case.</p> <p>Review outcome of case.</p>	People Services Lead for the Policy	See appendix 5a	<p>Spot check audit twice a year.</p> <p>Outcome comments on audit grid to be completed after each audit.</p>	<p>Senior Operational People Services Meeting chaired by the Deputy Chief People Officer.</p> <p>Audit outcome and any actions identified from the audit will be recorded in the minutes of this meeting.</p>

9. Equality Analysis

As part of UHL's on-going improvements, an Equality Analysis will be undertaken to mitigate as far as possible any adverse impact on protected groups of people (patients, service users, carers and staff).

As part of its development, this policy and its impact on equality have been reviewed and no detriment was identified.

10. Supporting References, Evidence Base, and Related Policies

Relevant information related to Children/Young People:

- Leicester, Leicestershire and Rutland (LLR) Local Authority Designated Officer
- [L.A.D.O. \(Local Authority Designated Officer\) - Leicestershire and Rutland Safeguarding Partnerships Business Office \(lrsb.org.uk\)](https://www.lrsb.org.uk)

Relevant information related to Adults:

- Safeguarding Adults: Guidance
- [4.2.3 Managing Allegations against People in Positions of Trust \(PiPoT\) – LLR SAB Multi-Agency Policies & Procedures Resource \(llradultsafeguarding.co.uk\)](#)

Related Internal Policies:

- Disciplinary UHL Policy (A6/2004)
- Improving Performance (Capability) Policy – Non Medical Staff UHL Policy (B12/2014)
- Guidance for Supporting Staff Subject to Domestic Violence policy (B43/2011)
- Alcohol Drug and Other Substance Misuse in Employment UHL Policy (B6/2004)
- Safeguarding Adults Policy and Procedures (B26/2011)
- Safeguarding Children Policy (B1/2012)
- Core Training (Statutory and Mandatory) UHL Policy (B21/2005)

Due to the complexities of legislation and guidance governing safeguarding, the necessary published literature is signposted at the relevant points of this policy.

11. Process for Version Control, Document Archiving, and Review

This document will be uploaded onto SharePoint and available for access by Staff through InSite. It will be stored and archived through this system.

This policy will remain under review by Safeguarding and People Services and will be updated in line with changes in legislation, if changes are deemed necessary from internal sources or every three years, whichever is sooner.

Definitions of Abuse and Neglect – Children or Young People

Definition of a Child or Young Person

- A child/young person is aged under 18 years or up to the age of 22 years if they are looked after or have a learning disability/physical disability (The Children’s Act Amendment 2004).
- A looked after child is defined as a child in the care of the local authority.

Definition of Regulated Activity

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/97875/leaflet-england-wales.pdf

Definitions of Abuse and Neglect - Children or Young People

It is not possible to definitively set out, for the purpose of this procedure, all the situations that define comprehensively what counts as harm. However, the following sets out what is meant by abuse and neglect (HM Government (2006) Working Together to Safeguard Children):

Somebody may abuse or neglect a child by inflicting harm, or failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting; by those known to them or, more rarely, by a stranger.

Physical Abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child.

Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate or valued only insofar as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Sexual Abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, including prostitution, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative (e.g. rape, buggery or oral sex) or non-

penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- Protect a child from physical or emotional harm or danger
- Ensure adequate supervision (including the use of inadequate care givers)
- Ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Grooming

This is when someone builds an emotional connection with a child to gain their trust for the purpose of sexual abuse, sexual exploitation or trafficking. Children and young people can be groomed online or face-to-face, by a stranger or by someone they know, for example a family member, friend or professional.

Trafficking

Child trafficking and modern slavery are child abuse. Children are recruited, moved or transported and then exploited, forced to work or sold. Children can be trafficked for sexual exploitation, benefit fraud, forced marriage, domestic servitude and forced labour or criminal activity.

Definitions of Abuse and Neglect in Adults

The Care Act 2014 sets out a clear legal framework for how local authorities and other parts of the system should protect adults at risk of abuse or neglect. Adult safeguarding means protecting a person's right to live in safety, free from abuse and neglect. It is the process of protecting adults (aged 18 and over) who have care and support needs from abuse or neglect, where they cannot protect themselves. It is an important part of what public services do, although the lead role lies with Local Authorities, in partnership with the Police and the NHS.

For the purpose of this Policy the term abuse is defined as 'a violation of an individual's human and civil rights by any other person or persons which may result in harm'.

Abuse may be a single act, repeated acts or multiple acts. It may be an act of neglect or a failure to act. Abuse is about the misuse of the power and control that one person has over another. Abuse can occur in any relationship and may result in harm to, or exploitation of, the person subjected to it. Abuse may be perpetrated as the result of deliberate intent, negligence or ignorance. Acts of abuse may constitute a criminal act.

Categories of Abuse – the Care Act (2014) refers to the following categories of abuse in adults:

- Physical
- Sexual
- Psychological / emotional
- Financial and material
- Neglect or acts of omission
- Discriminatory

- Organisation (previously known as Institutional abuse)
- Domestic abuse and violence (including honour based violence)
- Modern Slavery (including human trafficking, forced labour and domestic servitude)
- Self-neglect (including behaviour such as hoarding, neglecting one's health and surroundings)

Further details of the categories of abuse, including some of the indicators of abuse can be found at section 5.1 of the Trust's Safeguarding Adults Policy and Procedures and via the Multi-Agency Adult Safeguarding Policy and Procedures which is available at: www.llradultsafeguarding.co.uk.

Following an Allegation against an Employee - Staff Risk Assessment Form

Employee Name:		Employee Number:		CMG:	
Specialty:		Department/Ward:		Site:	
Name of Line Manager:		Date staff risk assessment completed:			
Assurance source: (i.e. how has the allegation / risk been identified?)					
Trust Objective(s) affected by the safeguarding risk:		Patient Safety			
What is the allegation?					

Supporting evidence used in this risk assessment:

Does the employee have any protected characteristics that need to be considered, and what adjustments are in place to support these

Initial/Current Rating (refer to consequence and likelihood tables to obtain risk scores)				
Risk Domains (If not applicable please do not score)		Likelihood	Consequence	Risk Score
1.	The employee is unable to recognise patients who are at risk of abuse / neglect due to their own personal circumstances, therefore they are unlikely to fulfil their job expectation. (Determined through discussion with the employee)			
2.	The allegation is likely to lead to a criminal investigation or likely to lead to suspension from a professional body, and there is a risk to the public if they remain in regulated activity.			
3.	The employee will not work co-operatively or there is evidence of dishonesty in how the employee is responding to concerns			
4.	There is a risk that if the employee remains in their current workplace, this could disrupt an investigation, and tampering of evidence			
5.	The area where the employee works is unable to provide adequate supervision and support to the employee and other team members.			
6.	There is a history of previous incidents of a similar nature, and high risk of re- offending.			
8.	The employee's practice is largely unsupervised, and there is insufficient assurance through discussion with the employee that they could not harm a person whilst in a position of trust			
9.	There is a risk to the organisation's reputation if the employee causes harm or fails to protect patients in their care whilst under investigation			
10.	The employee is unlikely to adhere to clear boundaries of practice or ground rules laid down by the Trust or regulatory body whilst at work			

11.				
12.	There are restrictions currently in place to include performance /conduct investigations, police bail restrictions, professional body restrictions			

Action Summary (this should be a list of the future actions that can be taken to further reduce the risk)	Start Date	Due Date	Date Completed	Assigned To
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
Manager responsible:			Designation:	

Signature:		Date:	
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Target Risk Rating (This should indicate level of risk assuming all the above actions are completed)			
Risk Domain	Likelihood	Consequence	Risk Score

Staff Risk Assessor's Name:	Signature:
Designation:	Date:
Assessment and action plan accepted by line manager:	YES <input type="checkbox"/> NO <input type="checkbox"/>
Line Manager's Name:	Signature:
Designation:	Date:

1st Review due:		Name of Reviewer:		Signed:		Date:	
2nd Review due:		Name of Reviewer:		Signed:		Date:	
3rd Review due:		Name of Reviewer:		Signed:		Date:	

Consequence rationales

Risk Domains	1	2	3	4	5
Descriptor	Full Assurance	Minor Concerns	Moderate Concerns	High Concerns	Major Concerns
Identify level of concern regarding suitability of employee to continue to work	No concerns about suitability to work. Robust strategies in place to manage risk. No risk of harm, abuse or neglect	There are some concerns about suitability, but these have not been substantiated and do not cause significant concern to patient safety.	There is some evidence to indicate that a patient has been, or is at risk of, abuse / neglect by an employee.	There is currently no assurance that this person could not harm another patient in a similar way.	It is beyond all reasonable doubt that this person is likely to repeat the allegation / offence in the work place.

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Likelihood scores

Likelihood score	1	2	3	4	5
Descriptor	Rare	Unlikely	Possible	Likely	Almost certain
Frequency How often might it/does it happen	This will probably never happen/recur. or Not expected to occur	Do not expect it to happen/recur but it is possible it may do so.	Might happen or recur occasionally.	Will probably happen/recur but it is not a persisting issue.	Will undoubtedly happen/recur, possibly frequently.
Probability	<0.1%	0.1-1%	1-10%	10-50%	>50%

Risk scoring

The risk score is calculated by multiplying the consequence score by the likelihood score.

	Consequence				
Likelihood of harm to patients	1 Insignificant	2 Minor	3 Moderate	4 Major	5 Extreme
1 Rare	1	2	3	4	5
2 Unlikely	2	4	6	8	10
3 Possible	3	6	9	12	15
4 Likely	4	8	12	16	20
5 Almost certain	5	10	15	20	25

RISK RATING	ACTION REQUIRED
Low (1 – 6)	Acceptable risk requiring no immediate action. Instigate appropriate staff support.
Moderate (7 – 12)	Continue to work in regulated activity, with supervision arrangements in place. An alternative policy may now need to be considered i.e. Disciplinary, Drug, Alcohol and Substance Misuse or Domestic violence.
High (15-20)	Consider moving out of regulated activity pending further investigation.

Major (20 plus)	Consider suspension from duty. Details shared with Director/Medical Director/ Chief Nurse /CMG Director/ CMG Manager
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Contact Details

Designation	Telephone Contact Details
Chief Nurse	0116 258 8726
Deputy Chief People Officer	0116 258 7692
Head of Safeguarding	0116 258 5446
People Services Helpline	0116 258 5495
ESM/RRCV/ITAPS and Elective Care	0116 258 5368/5740/6888
MSK/CSI	0116 258 5614
W&C/CHUGGS/Corporate	0016 258 7640/5540
AMICA Reception	0116 254 4388
Adult Safeguarding Team	0116 258 7703
Child Safeguarding Team	0116 258 5770
OCCUPATIONAL HEALTH	
LRI	0116 258 5307
LGH	0116 258 4930
GH	0116 250 2393

MONITORING COMPLIANCE/AUDIT GRID

Date of Audit:		Name of People Services Lead completing Audit:		Signature:	
Case 1		Details of feedback to be given to the People Services Lead for case	Case 2		Details of feedback to be given to the People Services Lead for case
Name of Employee:			Name of employee		
Name of Line Manager:			Name of Line Manager:		
Name of People Services Lead:			Name of People Services Lead:		
Date of Allegation:			Date of Allegation:		

Date Investigation commenced:			Date Investigation commenced:		
Date of Safeguarding Assessment:			Date of Safeguarding Assessment:		
Summary of Outcome of Safeguarding Assessment:			Summary of Outcome of Safeguarding Assessment:		
Detail other People Services polices used:			Detail other People Services polices used:		
Summary of Outcome of case:			Summary of Outcome of case:		
Audit Outcome:					

Strategy Meeting Checklist: Protecting Patients When an Allegation is Made Against an Employee

Attendees

Checklist	Comments	Actions
Identify the specific allegation		
Are there any children, young people, adults or employees who are affected by the allegation, and have their safety needs been considered?		
Clarify others agencies who are involved in the incident		
Information sharing between agencies		
Review employment history and knowledge of any previous incidents		
Outcome of the staff risk assessment		
Agree what information will be imparted to the employee and ensure appropriate staff support is available		
Agree what information is shared with the employee		

Notification to professional body where applicable		
Agree timescales for any investigation		

Outcome:

Case closed: yes/no

Further meeting:



