

Sexual Safety in the Workplace

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Review dates and details of changes made during the review:

New Policy

Key words:

Sexual Safety, Sexual Harassment, Sexual Assault, Consent, Security, Safeguarding, Reporting

1. Introduction and Overview

At University Hospitals of Leicester (UHL) we will not tolerate any form of sexual harassment or assault in the workplace nor any such behaviours of colleagues outside the workplace.

UHL have signed up to NHS England's Sexual Safety Charter. The charter, which was cocreated with those with lived experience, and trade union colleagues, is a 10-point agreement that includes pledges to provide staff with clear reporting mechanisms, training, and support. The aim of the Policy is to prevent, respond to incidents that arise, and take actions to effect long-term change by following the 10-point agreement:

- 1. Actively work to eradicate sexual harassment and abuse in the workplace.
- 2. Promoting a workplace culture that fosters openness and transparency, and does not tolerate unwanted, harmful and/or inappropriate sexual behaviours.
- 3. Taking an intersectional approach to the sexual safety of our workforce, recognising certain groups will experience sexual harassment and abuse at a disproportionate rate.
- 4. Providing appropriate support for those in our workforce who experience unwanted, inappropriate and/or harmful sexual behaviours.
- 5. Clearly communicating standards of behaviour, including expected action for those who witness inappropriate, unwanted and/or harmful sexual behaviour.
- 6. Ensuring appropriate, specific, and clear policies are in place. They will include appropriate and timely action against alleged perpetrators.
- 7. Ensuring appropriate, specific, and clear training is in place to educate all staff about sexual safety and their role in developing a culture free from harassment.
- 8. Where these behaviours do occur, providing a clear process and procedure for reporting to ensure it is properly managed.
- 9. Taking all reports seriously and taking appropriate and timely action in all cases.
- 10. Capturing and sharing data on prevalence and staff experience transparently.

This policy sets out the way in which the Trust seeks to meet these core principles and standard during the delivery of services.

2. Policy Scope

All colleagues have a part to play in ensuring a culture of sexual safety. This policy applies to all colleagues including any person who undertakes work with or for UHL. Although this policy is aimed at preventing and addressing concerns by or against colleagues, these instances may include others, such as patients or visitors, as either alleged perpetrators or victims/survivors.

3. Definitions and Abbreviations

Sexual Safety	The CQC defines sexual safety as "being and feeling psychologically and physically safe, including being free of, and feeling safe from, behaviour of a sexual nature that is unwanted or that makes another person feel uncomfortable, afraid or unsafe."
Sexual Harassment	The Equality and Human Rights commission sets out that "Sexual harassment occurs when a person engages in unwanted conduct of a sexual nature that has the purpose or effect of either violating

	someone's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for them."				
Sexual Assault	The NHS defines sexual assault as "any sexual act that a person did not consent to or is forced into against their will. It is a form of sexual violence and includes rape, or other sexual offences, such as groping, forced kissing, child sexual abuse, or the torture of a person in a sexual manner."				
Consent	The NHS sets out that "Someone consents only if they agree by choice and has the freedom and capacity to make that choice. Consent to sexual activity may be given to one sort of sexual activity but not another consent can be withdrawn at any time during sexual activity and each time activity occurs."				
Colleague	In the context of this policy a colleague is any individual who is carrying out work on behalf of or for the Trust. This could include substantive colleagues, bank, agency, contractors, colleagues on research contracts.				
Visitor	In the context of this policy a colleague is any individual on Trust premises who is not a patient or colleague.				

4. Roles & Responsibilities

All colleagues have a responsibility to work towards eradicating all forms of sexual misconduct, violence, harassment and assault in the workplace, and to ensuring the culture, values and behaviours of those who work or visit UHLs hospitals are maintained to create an environment of sexual safety, an environment where people feel safe to speak up when concerns arise and an environment where all are supported where they have been impacted by inappropriate behaviour.

The Chief People Office and Chief Nurse (Executive Leads) have responsibility for the strategic oversight of the development of policy, supporting practices and interventions to eradicate sexual harassment and assault within UHL.

Corporate and Clinical Directors are responsible for supporting the development of a culture of sexual safety, which enables individuals to speak up and report incidents.

Line Managers are responsible for considering risk factors for their team and implementing interventions which aim to create an environment of sexual safety. This will be through:

- Ensuring that all incidents of sexual harassment/assault are investigated, and that all facts are recorded and reported in accordance with the Trust's Incident Reporting Procedure (Datix).
- Ensuring their teams understanding and expectations of behaviours and values and of the relevant procedures including those around reporting.
- Ensure that staff receive appropriate support and counselling if needed.

The People Services Team are available to provide support advice and guidance to managers and staff in the application of this policy, including signposting to other policies where appropriate.

Occupational Health are responsible for providing independent, impartial health and work advice and guidance (to both individuals and managers) when colleagues are referred or self-refer to the Occupational Health department. This includes the assessment of fitness for work, advice on the provision of reasonable adjustments and strategies to assist colleagues to return to work / stay in work where applicable.

AMICA are responsible for providing free, confidential counselling and psychological support service for UHL colleagues, available 24hrs a day through the phoneline or by using the website to access therapeutic modules on Silver Cloud. Contact 0116 254 4388 / www.amica-counselling.uk/contact-us Text chat support (with a real person) is also available via the AMICA website.

Freedom to Speak Up/Guardian Service – will help colleagues articulate concerns and understand what options exist in resolving it. A Guardian will not make recommendations but encourage colleagues to make the best decision for them. Where its required, and with colleagues' agreement, the Guardian may escalate issues in line with agreed parameters, bringing the issue to the attention of the most appropriate person to offer an outcome to the issue.

Both AMICA and the Freedom to Speak Up Guardian Service can act as a first points of contact for colleagues wishing to disclose in confidence any concerns or incidents and discuss options available.

The **Health and Wellbeing Teams** are responsible for:

- Providing support to colleagues and managers through interventions such as Trauma Risk Management (TRiM), Schwartz Rounds and Compassion Fatigue sessions.
- Provision of training on how to hold supportive, inclusive Wellbeing Conversations, REACT mental health conversations, menopause awareness and support, suicide prevention and postvention.
- Signposting and awareness raising.

The **Trust Security Managers** are responsible for leading and supporting the tackling of sexual harassment and assault and will:

- Support investigations carried out by investigating managers.
- Support managers and colleagues with liaison with the police.
- Monitor and report on Datix reports and highlight any concerns to Trust managers.
- Support managers in putting in devising preventative action to minimise the risk of a sexual harassment/assault occurring.
- Support the Trust in considering sanctions such as warnings/exclusions, private prosecution and/or civil proceedings.

The **Safeguarding Team** are responsible for providing advice and guidance on appropriate policies and procedures relating to Children or Adults Safeguarding concerns and signposting to specialist services where appropriate.

Staff Side Representatives are responsible for assisting individual colleagues with advice and support on the application of this policy. They are also responsible for working in partnership to prevent sexual harassment and assault.

5. Examples of sexual harassment and sexual assault

Examples of Sexual Harassment

Sexual Harassment is unlawful and prohibited under The Equality Act 2010. The term sexual harassment encompasses a wide range of behaviour, which may take place in person, online or over the phone. A single event or a series of events can amount to sexual harassment. Some examples include:

- Sexually suggestive comments or using insulting sexual names in a way that makes others feel uncomfortable. For example, remarking on someone's body or appearance.
- Sexual jokes which make someone feel uncomfortable, offended, or intimidated, whether these be about someone's sexual orientation or gender. What some people might consider as joking, 'banter' or part of their workplace culture is still sexual harassment if the behaviour is of a sexual nature and creates an intimidating, hostile, degrading, humiliating or offensive environment for others.
- Unwanted sexual advances such as 'leering' or unwanted and inappropriate sexual propositions, whether in person, over the phone, by email or online; including implied or overt implications of preferential treatment.
- Unnecessary and unwanted physical contact, i.e., touching, hugging, patting or other body contact, against their will.
- Intrusive questions about an individual's private life or physical appearance. This can take place either in person or virtually e.g., via social media.

Although sexual harassment tends to be aimed at an individual, sometimes there can be a culture of sexual harassment in a workplace that's not specifically aimed at one person – such as sharing or displaying sexual images whether in person or through social media.

Examples of Sexual Assault

Sexual Assault is a crime. Some examples of sexual assault include:

- Fondling, groping or unwanted sexual touching.
- Forcing or manipulating another individual into performing sexual acts, including rape or assault by penetration.
- Touching any part of another person's body for sexual pleasure or in a sexual manner for example, stroking someone's thigh or rubbing their back.
- Pressing up against another person for sexual pleasure or in a sexual manner.
- The perpetrator making someone else touch them in a sexual manner.
- Touching someone's clothing if done for sexual pleasure or in a sexual manner for example, lifting up someone's skirt.
- Sexual assault can involve the touching of skin, clothing, or the use of something else to touch skin or clothing.

Recognising Cultural Differences and context

When implementing prevention interventions, responding to incidents or investigating incidents it is important that all colleagues are mindful of cultural differences and the impact of this on aspects such as: how an individual will respond/react to an incident, an individual's ability/willingness to report concerns, an individual's willingness to seek support and how they

engage with investigations. For example, for some cultures there are additional risks associated with families or communities becoming aware that an individual has been sexually assaulted.

For a range of reasons there may also be a heightened fear of repercussion including negative consequences on an individual's job security and future career. Examples could include colleagues who are new to their role, colleagues who are working on a visa and junior colleagues raising concerns about a more senior colleague.

This emphasises the importance of ensuring a safe environment to raise concerns and maintaining confidentiality throughout any investigation including not making assumptions about who information can be shared with.

6. Prevention

Acts of sexual harassment or assault can have lasting emotional, mental, and physical impacts on an individual's life. Therefore, it is important that as a trust all colleagues work to ensure an environment of sexual safety and we are creating a culture in which everyone feels safe to speak up and raise concerns.

UHL has a duty to put measures in place to ensure sexual safety and prevent sexual assault and harassment. Reports of Sexual Harassment and Assault will trigger a review which will aim to identify any organisational or workplace factors that contributed to the incident. Where disclosures are made, risk assessments will be carried out to ensure appropriate action is taken.

UHL will ensure that patients and visitors are aware of expected behaviours and consequences of any form of harassment or assault of colleagues through communications campaigns.

Where a patient is deemed to pose a particular risk to sexual safety of others, measures should be put in place, for example ensuring colleagues are not alone with the patient, that security is present and/or being allocated a same sex worker (unless the sexual threat is to their own gender). Staff have the right to request not to work with a patient or colleague if they feel unsafe due to sexual threat.

Training is provided and is accessible to all colleagues of UHL.

7. What to do if you experience sexual harassment or assault

It can be difficult to tell someone about a sexual assault or incident, there are a range of options and channels for you if you are able and ready to report an incident. We would encourage you to speak to your line manager as they have a duty of care for the individuals they manage however, it is important you speak to someone you feel comfortable with which is why there are a number of alternative services that you can contact.

The **Guardian Service** (Freedom to Speak Up) is our free, confidential, and independent freedom to speak up service. Available 24 hours a day, 365 days a year, they can listen and provide expert guidance on the options available to you. Call 0333 733 5488 or email contact@thequardianservice.co.uk.

AMICA offers high-quality, confidential counselling and psychological support services to staff. Call 0116 254 4388 or <u>complete a contact form</u> to refer yourself to their friendly and non-judgmental team.

If you're the victim of rape or sexual assault, the police and other organisations are there to help. **Call 999 to report a rape or attempted sexual assault**, as soon as possible. You don't have to report the assault to the police if you don't want to.

You may need time to think about what has happened to you. However, consider getting medical help as soon as possible through the local **SARC** <u>NHS Sexual Assault Referral</u> <u>Centres</u>, which offer medical, practical and emotional support through their specially trained doctors, nurses and support workers.

UHL contracts the services of **Independent Domestic Violence Advisors (IDVAs) via FreeVA**. FreeVA are a registered charity working towards reducing domestic abuse, rape and sexual violence in Leicester, Leicestershire & Rutland.

There is a list of external agencies included in this policy, which can support colleagues who experience sexual harassment or assault both within and outside of work. These can be found in Section 11.

Disclosure of Historical Assault or Harassment:

Often people do not feel able to report an incident until sometime after it has occurred. UHL aim to embed a culture where people feel they can speak up when something happens. However, it is never too late to report an incident, or seek support from external agencies including the police. Reporting historical assault may help with recovery and may help provide important information needed to take a case forward and protect others.

8. What to do if you have witnessed Sexual Harassment or Assault

Witnessing sexual assault or harassment can be traumatic. It is therefore important that any witnesses to incidents are kept safe and supported. Although it is important to gather an accurate account from any witness this should be approached in a sensitive way which ensures that the witness is given time and offered ongoing support when providing their account.

Being an Active Bystander can be a helpful strategy if you witness sexual harassment. If you choose to step in, you may be able to give the person being harassed/assaulted a chance to get to a safe place or leave the situation. Intervention can take place before, during or after an event and it is important to always keep your own safety in mind when intervening. Below are the four Ds of intervention:

- Direct Action Taking action to intervene with the intention of de-escalating the situation.
- Distract Taking action to distract the perpetrator using interruption as a strategy.
- Delegate Taking action to delegate when you feel unsure and you don't feel
 psychologically or physically safe to intervene in the moment, get someone else to
 step in.
- Delay Delay taking action if the situation is too difficult to challenge in the moment (you feel psychologically or physically unsafe)

Further training is available of being an Active Bystander through Helm.

If you witness sexual harassment or assault against another colleague, service user or visitor, you have a duty to raise a concern with a senior member of staff and if the Police are involved it is important that you provide a formal statement as a Trust employee. If you have any concerns about doing this, you can contact UHL's Security Team.

9. What to do if someone reports sexual harassment or assault to you

Anyone approaching staff to say they have experienced sexual harassment or assault in any way should be offered a compassionate response and support. This may include supporting individuals in reporting sexual assault to the police or contacting other support agencies. This is regardless of whether the alleged perpetrator is another colleague, patient, or visitor.

Any reports of sexual harassment or assault, regardless of any preconceptions, should be taken seriously. If a member of staff reports any form of sexual harassment or assault, immediate action must be taken to ensure the person feels safe and is safe, and they should be immediately offered a private place to talk with the most appropriate individual available. Information should not be asked for details in any public place and colleagues should be given time to give their full account of any incident.

UHL is committed to embedding a Just and Restorative Learning Culture. This approach aims to create a compassionate, open, and accommodating work environment in which everyone feels supported and empowered in the workplace. As part of this approach UHL have devised a 4-step process (Appendix 1) which should be used to identify the individuals who are impacted and require support in any event.

Although it is recognised that certain groups will experience sexual harassment and assault at a disproportionate rate, assumptions should not be made relating to the alleged perpetrator or individuals impacted. It is important remain objective whilst also ensuring that all individuals involved (both alleged perpetrators and victims) are supported in a way which is informed by the person receiving the support.

Immediate Safety

Immediate action should be taken to ensure the safety of the individual who had made the disclosure. This is likely to include separating the individuals involved.

Reporting of Sexual Assault

Where a colleague discloses sexual assault there must be a discussion about the disclosure and next steps, this discussion should include senior management and People Services colleagues.

In instances of sexual assault colleagues should be given information about and be supported to contact a Sexual Assault Referral Centre (SARC) which offer medical, practical, and emotional support to anyone who has been sexually assaulted. These can be contacted regardless of whether the individual wishes to contact the police.

Victims of serious sexual assault and rape should be encouraged not to wash or change their clothes immediately after a sexual assault as this may destroy forensic evidence that could be important if they decide to report the assault to the police.

If a colleague wishes to contact the Police, they should be supported to do this in a private place. Sexual assault is reported to the police by calling 101 or 999 depending on the urgency.

The decision on whether to report to the police would usually be for the individual colleague directly impacted the sexual assault, to make. However, UHL may decide, based on the circumstances, that a police report should be made regardless of the wishes of the individual.

Where the disclosure alleges that a colleague has assaulted a patient, the police should be informed, regardless of the patient's wishes. If they do not want to report to the police, a manager will need to do a third-party report, the Safeguarding team are available to provide further guidance on this if required.

Any assault must be reported to the most senior staff responsible for the service as soon as possible and a Datix report must be used to capture all disclosures of sexual harassment and assault. The Trust's Security team can be contacted for advice on this process. It is very important that the person is informed at every stage of what is happening and that, where possible, the same staff member is with them through these initial stages.

If the report is made 'after hours,' the Duty Manager/Manager on Call should be notified and will assist with the management of serious incidents requiring an immediate response. The Manager on Call may use their discretion to send the individual home on Special Leave until a Service Manager is available. Any suspension of colleagues should be conducted in line with guidance set out in the Trust's Disciplinary Policy (A6/2004).

Ongoing Support

Where staff have been impacted by an incident, they should be offered recovery days as per the You Matter: Colleague Support UHL Policy (A1/2023) to be given time to process what has happened and consider what action they wish to take. There should be an agreed person as a contact for them and reminded of relevant external support if they haven't already made contact with them.

Depending on the circumstances, arrangements may need to be put in place to ensure that the individual and the alleged perpetrator do not come into contact, either on a temporary or permanent basis. This may include moving or suspending colleagues in order to support the safety and wellbeing of all, People Services colleagues will be able to provide further guidance on this.

If you're unsure on what immediate steps, actions or support to be put in place, the People Services team are able to provide guidance.

10. Investigation Processes and Procedures

All allegations of sexual harassment and assault are serious and should be investigated. The format of the investigation will vary depending on the circumstances of the incident. All investigations should be conducted in a compassionate and supportive manner and in line with a Just and Restorative Learning Culture approach.

It may not be appropriate to immediately alert the alleged perpetrator that a concern has been raised. However, when they are alerted, it is important that they are provided support through any investigation process. An appropriate colleague should be assigned as a point of contact to keep them updated and to sign post to relevant support.

Where a colleague is subject to a police investigation, the colleague should notify their line manager as soon as possible, who should then contact the Employee Relations Team for further advice.

The below is for guidance on who to contact and process to follow however, dependent on the circumstances may require involvement of other parties or agencies, such as the police. For any incident where allegations are that a patient or visitor has been sexually assaulted on Trust premises or by a Trust colleague, a report to the police should be made.

Patient/Visitor on Staff/Colleague

If a disclosure alleges that a patient/visitor has sexually harassed or assaulted a colleague, this should be investigated and escalated by local management and the security team in line with the process set out in the Trust's Violence, Aggression, and Disruptive Behaviour Management Policy including Restraint Guidance (B11/2005).

Colleague on Patient/Visitor

If a disclosure alleges that a colleague has sexually harassed or assaulted a patient this should be investigated and escalated by local management with the involvement of People Services. People Services will advise on the relevant process to follow based on the circumstances and the employment status of the colleague. In the majority of cases the relevant process will be set out in the Disciplinary Policy (A6/2004).

Where the victim is considered to be a child or vulnerable adult (which covers all patients) it is important that the Safeguarding team are also informed and that the Safeguarding – Protecting Patients when Allegation is Made Against an Employee UHL Policy (B13/2013) is followed.

Colleague on Colleague

If a disclosure alleges that a colleague has sexually harassed or assaulted another colleague, this should be investigated and escalated by local management with the involvement of People Services. All instances of sexual harassment and sexual assault are serious, and in the majority of cases should be considered as a conduct issue and therefore investigated in line with the Disciplinary UHL Policy (A6/2004). People Services will advise on the relevant process to follow based on the circumstances and the employment status of the colleague.

There may be circumstances where concerns of sexual harassment can be addressed through informal resolution taking place between the alleged perpetrator and individual who has disclosed the incident; however, it is important that this only takes place when it is in line with the wishes of the individual who has been the target of the harassment.

An informal process might include a form of mediation and getting assurance from the alleged perpetrator that any such behaviour will not be repeated. This should only happen if the person making the complaint feels comfortable doing this. The manager should contact People Services Team if they require guidance on mediation.

It is important to note that informal resolution or mediation is not appropriate where allegations of sexual assault have been raised.

Incidents which take place outside of UHL

Where allegations are raised relating to incidents taking place outside of work, these may still impact on work and should be considered as per the above.

Where a colleague discloses or is involved in domestic violence outside of work, reference should be made to UHLs Domestic Violence guidelines which sets out the process to follow and support to be provided by the Trust. There is also relevant support as listed below in Section 11.

11. Support

UHL's "<u>Support Information for Colleagues</u>" booklet (2022) is available on INsite and is a useful summary of some of the support available now. The booklet can be used for personal support or to direct others towards help they may potentially need; some of the links are provided below. Please do contact the Health and Wellbeing team or People Services team if you have any guestions.

AMICAs free, confidential counselling and psychological support service is available 24hrs a day through the phoneline or by using the website to access therapeutic modules on Silver Cloud. Contact 0116 254 4388 / www.amica-counselling.uk/contact-us Text chat support (with a real person) is also available via the AMICA website.

Freedom to Speak Up/Guardian Service – free, confidential service can be contacted on 0333 733 5488, if the call goes to voice mail a Guardian will respond within the same working day. You can also email the Guardian service at: contact@theguardianservice.co.uk.

Both **AMICA** and the Freedom to Speak Up Guardian Service can act as a first points of contact for colleagues wishing to disclose in confidence any concerns or incidents and discuss options available.

UHL contracts the services of **Independent Domestic Violence Advisors (IDVAs) via FreeVA**, to work with both patients and colleagues. FreeVA are a registered charity working towards reducing domestic abuse, rape and sexual violence in Leicester, Leicestershire & Rutland. https://www.freeva.org.uk/ 0808 802 0028.

The Chaplaincy Team is available to colleagues and UHL volunteers to provide a confidential listening ear. They provide informal pastoral support rather than formal "counselling". Contact: 01509 564218 | chaplaincy@uhl-tr.nhs.uk

Staff Side are available to provide support and advice to their members.

UHL's Security Team can be contacted on the following extensions: Glenfield Hospital 12999, Leicester Royal Infirmary 16767, Leicester General Hospital 14294.

People Services are available to provide support and guidance to colleagues and line managers on the application of this policy, including signposting to other policies where appropriate.

External Support Contacts

- Find out about other help after rape and sexual assault on the NHS website
- Women's Work Contact the team for free, confidential support on telephone: 01332 242525 or email: info@womens-work.org.uk
- Women's Aid working in partnership with Refuge www.refuge.org.uk.
 Freephone 24 hour National Domestic Violence Helpline 0808 2000 247.
- Karma Nirvana Helpline 0800 5999 247 (Monday to Friday, 9am 5pm)
- Leicestershire Police Report rape, sexual assault and other sexual offences
- <u>Juniper Lodge</u> Sexual Assault Referral Centre (SARC) covering Leicester, Leicestershire and Rutland, a place to get confidential medical, practical and emotional support from specialist doctors, nurses and support workers following a rape of sexual assault.

- <u>Jasmine House</u> a Leicester charity which works with female survivors of sexual abuse, violence and rape
- Rights of women free legal advice
- Survivors UK for men who have been raped or sexually abused. Call 0203 5983 898 (Monday to Friday, 9.30am - 5pm)
- The Survivors Trust Call for support, advice, and information 0808 801 0818
- <u>Disrespect Nobody</u> For young people in abusive relationships
- Rape Crisis For male and female victims of abuse, rape, or sexual violence
- GALOP LGBT Charity providing Help and support relating to hate crime, sexual violence, or domestic abuse. 0800 999 5428
- <u>Childline</u> Freephone 24-hour helpline 0800 1111 and advice online for anyone under 19 years old
- East Midlands Children & Young People Sexual Assault Service Here to help young people under the age of 18 who have experienced rape or sexual assault, including young adults with learning disabilities. Freephone 24-hour helpline 0800 183 0023.
- Men's Advice Line Advice and support for men experiencing domestic violence and abuse 0808 801 0327
- Respect Help and support for the perpetrators of domestic violence. Call freephone 0808 802 4040 (Monday-Friday 9am-5pm)

12. Education and Training Requirements

There will be Trust wide communication to ensure all staff are aware of the new policy, and all CMG managers, Matrons, Departmental/Directorate Managers are responsible for the dissemination of this policy to their staff.

The People Services Team will prove advice on the policy to staff, and advice and support to managers in the application of this policy as appropriate.

Training will be made available to managers and to all employees.

13. Process for Monitoring Compliance

Element to be monitored	Lead	Tool	Frequency	Reporting arrangements Who or what committee will the completed report go to.
Fair and consistent application of this policy	Line Managers/CMG/Dire ctorate Senior Leadership Teams	Feedback from Staff Side and Managers	Annually (or more frequently if required)	Policy Review Group (People Services, Security, Health & Wellbeing, Safeguarding)
Ensuring this policy is updated with new/amended legislation	People Partner Team	Legislation Update	Annually (or more frequently if required)	People Partner Meetings
Monitoring and reviewing of Equality workforce data	Workforce Team / EDI Team	Reports from ER Tracker and Trust Executive Summary	Monthly	Trust Board, CMG Boards, Managers, and People Services
Datix reports	Head of Security	Datix reports log	Quarterly	Trust Risk Management Board, CMG Boards

14. Equality Impact Assessment

The Trust recognises the diversity of the local community it serves. Our aim therefore is to provide a safe environment free from discrimination and treat all individuals fairly with dignity and appropriately according to their needs.

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

15. Supporting References, Evidence Base, and Related Policies

Supporting References:

- Equality Act (2010) Equality Act 2010 (legislation.gov.uk)
- Public Sector Equality Duty (2011) <u>Public sector equality duty GOV.UK</u> (www.gov.uk)
- NHS England Sexual Safety Charter <u>NHS England » Sexual safety in healthcare organisational charter</u>

Related UHL Policies:

- Disciplinary Policy and Procedure A6/2004
- Domestic Violence Staff UHL Policy B43/2011
- Resolution UHL Policy B39/2020

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- Safeguarding Protecting Patients when Allegation is Made Against an Employee UHL Policy B13/2013
- Violence, Aggression, and Disruptive Behaviour Management Policy including Restraint Guidance B11/2005

16. 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.

The Policy will remain under review by 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.

UHL 4 Step J&RL 'FAIR' Approach to Decision Making

Aims to:

- Improve our culture and outcomes for colleagues, and in turn our patients and service users
- support the psychological wellbeing and safety of our people; identifies organisational learning; and embodies both fairness and accountability.
- 1. Fact Find undertake an initial fact find to understand:
 - I. what happened?
 - II. who is involved?
 - III. whether anyone is hurt?
 - IV. put in place measures to support individuals and manage risks

2. **Act**

- I. Stabilise the situation what are the needs of the individuals impacted? Are resources available and appropriate e.g. management, OH, education, Amica support?
- II. Establish from individuals their understanding of what happened (including reflection)
- 3. **Identify** (aligned to the Just Culture Decision Making framework)
 - I. Was there an intention to cause harm / make the error?
 - II. Is there evidence of physical or mental ill health or substance abuse?
 - III. Are there agreed and workable protocols, and were they knowingly departed from?
 - IV. Comparison to others?
 - V. Was training available?
 - VI. Was there sufficient supervision?

4. Response and Reflection

- I. Moral engagement were we able to engage all parties in considering the right thing to do?
- II. Emotional Healing was compassion and empathy applied when helping colleagues to cope with guilt and humiliation?
- III. Reintegrating the Practitioner Were we able to do what was needed to get the staff member / colleagues back in their job with periodic reviews?
- IV. Organisational learning explored and addressed systematic causes leading to the incident?

Developed in consultation with Deputy Medical Director, Deputy Director of Quality Governance, Head of Patient Safety, Freedom to Speak Up Guardians, Staff Side, People Service