

TOWER HAMLETS GP CARE GROUP (THGPCG)

POLICY AND ASSOCIATED PROCEDURE OF MANAGING ALLEGATIONS OF CHILD ABUSE OR ABUSE AGAINST ADULTS AT RISK MADE AGAINST STAFF

Date Issued	28 January 2015
Title	Managing Allegations of Child Abuse or Abuse Against Adults at Risk Made Against Staff
Supersedes	All previous Policies
This policy will impact on	All staff
Related Policies	THGPCG Adult Safeguarding Policy, THGPCG Children Safeguarding Policy, Incident Reporting Policy, Disciplinary Policy
Policy Area	Safeguarding
Version No	1
Issued By	Governance Team
Author	Ayesha Lulat
Effective Date	28/01/2015
Review Date	02/07/2015

	Committees / Groups / Individual	Date
Approved by	Safe Guarding Leads	28/01/2015
Approved by	THGPCG Board	

No.	CONTENTS	PAGE
1.	Introduction and Aims of Policy	4
2.	Definitions	5
3.	Duties and Responsibilities	7
3.1	All staff working in the Organisation	7
3.2	Managers	8
3.3	Safeguarding Children& Adults Team	8
3.4	Clinical Director	8
3.5	Senior Manager/Investigation Officer	8
3.6	Local Authority Designated Officer (LADO)	9
4.	Process	9
4.1	Concerns about member of Staff	9
4.2	Person to who allegation is reported should..	9
4.3	Initial action by the manager to whom the concern/allegation was reported	10
4.4	Initial Action by Senior Manager	10
4.5	Initial Considerations and Actions by LADO	11
4.6	Strategy Discussions	11
4.7	Strategy Meetings	12
4.8	Reviewing the Strategy Discussion or Meeting	13
4.9	Monitoring Progress	13
4.10	Action on Conclusion of a Case	13
4.11	Referral to the Independent Safeguarding Authority	14
4.12	Learning Lessons	14
4.13	Action in respect of Unfounded or Malicious Allegations	14
5.	General Considerations	15
5.1	Suspension Issues and Support for Staff	15

5.2	Resignation and Compromise Agreements	15
5.3	Disciplinary Considerations	15
5.4	Sharing of information to inform the disciplinary process	16
5.5	Record Keeping	16
5.6	Confidentiality	16
6.	Monitoring and Compliance	17
7.	Breaches of Policy	17
	Appendix 1 – Contact Details	18
	Appendix 2 - A Quick guide for Staff and Volunteers who are faced with an Allegation	19
	Appendix 3 - Flowchart	21

1. INTRODUCTION AND AIMS OF POLICY

This document should be read in conjunction with the THGPCG's Safeguarding Children Policy and Safeguarding Adults at Risk Policy. Implementation of this policy will enable the THGPCG to comply with relevant legislation.

THGPCG is committed to ensuring that children and adults at risk, who receive care from people working within the organization, are protected from abuse.

Mechanisms have been put in place to help prevent abuse, however, it is acknowledged that these mechanisms may fail and that staff may be accused of abusing children and adults who receive care in its services. It also recognises that staff may be accused of abusing children and adults in their private life.

The key purpose of this document is to clarify the relationship between incident reporting, complaints, and safeguarding children and adults, by providing guidance to help staff to identify when safeguarding processes should be followed in conjunction with other NHS reporting mechanisms. It also sets out the link between the investigation processes with the aim of streamlining these processes, improving partnership working and minimising duplication.

The THGPCG Safeguarding Children and Adult Policies set out how the organization will respond to allegations of abuse made against staff working for the organization. This document provides more detailed guidance for staff and managers and should be read in conjunction with THGPCG Safeguarding Children and Adult Policies. The London Child Protection Procedures LCPP provides further guidance with the PAN London Multi-Agency Policy and Procedures.

This policy should be applied when there is an allegation or concern that any member of staff has:

- Behaved in a way that may or has actually harmed a child or an adult at risk.
- Committed a potential criminal offence against or involving a child or adult at risk.
- Inappropriate behavior towards a child or children indication unsuitability to work with children. Behaved in a way towards an adult at risk that indicates they are unsuitable to work with adults at risk.

Abuse and neglect are forms of maltreatment of a child or adult at risk. Somebody may abuse or neglect a child or adult at risk by inflicting harm, or by failing to act to prevent harm.

Child abuse may involve any of the four categories: Physical, sexual and emotional abuse as well as neglect. These include concerns relating to inappropriate relationships between members of staff and children, or young adults.

For adults at risk, the same four categories apply with the addition of financial abuse.

Children or adults at risk may be abused in either a family, institutional or community setting, they are more likely to be abused by a person known to them than a stranger. A child may be abused by an adult or adults, or another child or children. An adult at risk may be abused by a stranger or any person who the person relies on for care or support.

2. Definitions

Child	The Children Act 1989 defines a child as anyone who has not reached their 18 th birthday. The fact that a child has become 16 years of age, is living independently, is in further education, a member of the armed services, is in hospital or in custody in the secure estate for children and young people does not change his or her status or entitlement to services or protection under the Children Act 1989
Adult at Risk	An adult at risk is someone aged 18 years or over who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation, (DH2000). An adult at risk may be a person who: <ul style="list-style-type: none"> • Is elderly and frail due to ill health, physical disability or cognitive impairment • Has a learning disability • Has physical disability and/or sensory impairment • Has mental health needs including dementia or personality disorder • Has a long term illness • Misuses substances or alcohol • Is unable to demonstrate the capacity to make a decision and is in need of care and support. (This list is not exhaustive)
Physical abuse	Physical abuse of a child 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. Examples of physical abuse of an adult at risk include the above as well as the misuse of medication, exposure to heat or cold, withholding adequate food or drink, or other actions that cause physical harm. The unlawful or inappropriate use of restraint or physical interventions and/or deprivation of liberty are all types of physical abuse.
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 include not giving the child opportunities to express their views, deliberately silencing them or making fun of what they say or how they communicate. 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; serious

	<p>bullying (including cyber 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. Psychological and emotional abuse of adults at risk is behaviour that has a harmful effect on a person's emotional health and wellbeing which results in:</p> <ul style="list-style-type: none"> • Mental distress • The denial of basic human and civil rights • Negating the right of the adult at risk to make choices • Isolation and fostering over dependence
<p>Sexual abuse</p>	<p>Rape and other sexual assaults are serious criminal offences. Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve: Physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Adult males, females and children can be the perpetrators of sexual abuse. Some examples of sexual abuse or assault include the direct or indirect involvement of the adult at risk in sexual activity or relationships which:</p> <ul style="list-style-type: none"> • They do not want or have not consented to. • They cannot understand and lack the mental capacity to be able to give consent to. • They have been coerced into because the other person(s) is in a position of THGPCG, power or authority, for example a care worker. • They may have been forced into sexual activity with someone else or may have been required to watch sexual activity.
<p>Neglect or acts of omission</p>	<p>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 and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); ensure access to appropriate medical care or treatment; Neglect of, or unresponsiveness to, a child's basic emotional needs. <i>Working Together to Safeguard Children (2013)</i>. http://media.education.gov.uk/assets/files/pdf/w/working%20together.pdf For adults at risk, neglect is the failure of any person who has responsibility of the charge, care or custody of the person, to provide the amount and type of care that a reasonable person would be expected to provide. The behaviour that can lead to neglect includes:</p> <ul style="list-style-type: none"> • Ignoring medical or physical needs;

	<ul style="list-style-type: none"> • Failing to allow access to appropriate health, social care and educational services; • Omitting to provide the necessities of life or care such as medication, adequate food, drink and warmth.
Financial abuse	<p>Financial abuse is a crime which involves use of a person's property, assets, income, funds or any resources without their informed consent or authorisation. It includes:</p> <ul style="list-style-type: none"> • Undue pressure in connection with wills, property, inheritance of financial transactions • Exploitation • Fraud • Theft

3. DUTIES AND RESPONSIBILITIES

3.1 All staff working in the Organisation

- Be familiar with the safeguarding adults at risk and safeguarding children's policies and ensure they attend safeguarding children/adult training commensurate to their role and responsibilities.
- Be aware of the circumstances and environmental factors that increase the risk of abuse and report them immediately.
- Act in a timely way to respond to any concern or suspicion that an adult at risk or a child is at risk of being abused, neglected or exploited.
- This may include calling the police where appropriate and where a crime is suspected
- Report all incidents or suspected incidents of abuse or neglect whether or not they are witnessed by them or reported to them by another.
- Staff should share concerns with colleagues and seek advice and support from the safeguarding teams, Safety & Quality Committee and human resources.
- However, no staff member should delay making direct referrals if seeking advice would cause delay that would result in harm or increase harm.
- If a staff member's line manager is implicated in the abuse they must escalate their concerns to a more senior manager.
- All staff are responsible for disclosing criminal or allegations of criminal offences to their line manager
- All staff must disclose any official allegation made against the employee whether inside or outside of work, in relation to potential abuse of children or adults.

3.2 Managers – that is any staff member who has managerial responsibility for one or more members of staff such as Supervisors or team leaders, Senior Nurse

- Ensure that any staff member who is implicated in the abuse is removed from contact with patients or others who may be at risk, such as those who reported the abuse.
- Ensure that information gathering commences immediately.
- When reviewing all incidents, complaints and other reports about staff, managers will undertake the review with this procedure in mind.
- Report concerns to the Safeguarding Children’s and Adults’ team, Quality & Safety Committee, Human Resources, and the police where indicated.
- Ensure all staff involved in the investigation are offered support during and after the investigation process.
- Staff must be made aware of the support available to them through their line managers.
- Coordinate any investigations which may be undertaken in conjunction with this document
- Ensure implementation of the recommendations made following investigations undertaken.

3.3 Safeguarding Children’s team (Named Lead Safeguarding Children) and Safeguarding Adults team

- Provide advice and support to line managers and Human Resource Leads. Report concerns to the Local Authority Designated Officer (LADO) and remain the key point of contact with the LADO.
- Report to the appropriate local authority lead for safeguarding adults.
- Track the progress of the investigation and record key milestones, and outcomes

3.4 Clinical Director and Governance

- Ensure that patients and/or others are protected from harm.
- Provide advice and support to managers and other staff.
- Seek assurance that recommendations from investigations are implemented in a timely manner.

3.5 Senior Manager/Investigating Officers

- Concerns that staff are involved in the abuse of children and adults could arise during any investigation.
- Staff undertaking investigations under any Organisation procedure should be aware of the circumstances under which this document needs to be instigated.

3.6 Local Authority Designated Officer (LADO) - James Gilley 0207 364 3506 james.gilley@towerhamlets.gov.uk

- Local Authority Designated Officer and Local Authority Safeguarding Adults lead – employed by Local Authorities to:-
 - Be involved in the management and oversight of individual cases;
 - Provide advice and guidance to employers and voluntary organisations;

- Liaise with the police and other agencies;
- Monitor the progress of cases to ensure that they are dealt with as quickly as possible consistent with a thorough and fair process.

4. Process

4.1 Concerns about a member of staff may arise in many different ways, including:

- A direct allegation from a child or parent/carer
- An allegation by an adult at risk or member of the public
- A concern expressed by a colleague
- A criminal investigation
- Investigations under THGPCG procedures
- Through the Incident Reporting
- Complaints
- Information from another authority or organization

4.2 The person to whom the allegation is initially reported should:

- treat the matter seriously;
- if the allegation has come from a child, reassure the child that they are right to report it;
- avoid asking leading questions and keep an open mind;
- make a written record of the information (where possible use the child/adult's own words, including:-
 - what is being alleged and what is alleged to have happened;
 - when and where did the alleged incident(s) take place (time, date and location);
 - who was present, including any potential witnesses;
 - sign and date the written record;
- report the matter immediately to their line manager, all verbal reports must be followed up in writing using the disclosure record
- Where the line manager is implicated in the allegation, or is unavailable report directly to the Senior Manager

The member of staff should not:

- investigate or ask leading questions if seeking clarification;
- make assumptions or offer alternative explanations;
- promise confidentiality, but give assurance that the information will be shared on a 'need to know' basis only so that the matter can be investigated in order to keep other children safe.

Where there is an immediate risk to a child or young person or vulnerable adult, an urgent referral to Children's Social Care/Adult Social Care should be made in accordance with THGPCG Safeguarding Policy/Procedure. The allegation issue can be followed up once any immediate risk issues have been addressed.

4.3 Initial action by the manager to whom the concern/allegation was reported

- obtain the written details of the concern/allegation, signed and dated by the person receiving the allegation (not the child/adult making the allegation)
- if the child has sustained an injury, consider the need to have her/him medically examined. In this instance parent/carers must be notified and reason given as to why medical required; consult with the designated Senior Manager to determine whether the allegation meets the threshold or as to what further information may be needed. Record discussions, including any decisions made and the reasons for those decisions. At no time during the initial gathering of information should the child(ren), accused person or potential witnesses be interviewed.

4.4 Initial Action by Senior Manager

The Senior Manager should not investigate the matter by interviewing the accused person, any child(ren) or potential witnesses. The Senior Manager should:

- Obtain written details of the allegation, signed and dated, from the original recipient and should receive a copy of the Allegations Notification Form;
- Record any other information at their disposal i.e. what else is known about any of the individuals implicated – length of service, specific role within the organisation, previous/current level of contact with the child(ren) involved, details of any relevant health records pertaining to the child(ren) implicated, whether there have been any previous relevant concerns, allegations or disciplinary issues; whether the subject of the allegation has any children of their own or children who reside at their home address;
- Check to see whether any contemporaneous records exist which might relate to the alleged incident;
- Counter sign and date an updated record of discussions and decisions
- Completing Action Plan Box on Notification Form which makes clear what if any further action is proposed
- Inform the HR Lead to consider whether any action may be required in line with the disciplinary procedure. At this time it may not be necessary to invoke the Organisations' disciplinary procedures but the decision may need to be reconsidered at any stage during the process of investigating the allegation. It should be noted that the decision to suspend rests ultimately with the employer and should be in accordance with the policies and procedures of the Organisation.
- In the unlikely event that a decision about whether to refer to the LADO cannot be made then the Senior Manager should contact the LADO via telephone in order to discuss and verify whether there is evidence or information that establishes that the allegation is false or unfounded or outside the scope of this procedure.
- Where a notification to the LADO is to be made then it is imperative that the subject of the allegation is notified, formally, in writing, of this as soon as possible. However, where a strategy discussion is needed, or it is clear that Police or Children's Social Care may need to be involved, that should not be

done until those agencies have been consulted and have agreed what information can be disclosed to the person.

- The LADO will be able to advise the Senior Manager on when and how to inform the employee of the allegation and any parents/carers as appropriate. If the person is a member of a union or professional association s/he should be advised to seek support from that organisation. The LADO will notify the Senior Manager of any notifications made directly to the Police or Children's Social Care, of which the organisation may not otherwise be aware.

4.5 Initial Considerations and Actions by LADO

- The LADO will discuss the matter with the named Senior Manager and where necessary obtain further details of the allegation and the circumstances in which it was made. The discussion should also consider whether there is evidence/information that establishes that the allegation is false or unfounded.
- If the allegation is not patently false and there is cause to suspect that a child is suffering or is likely to suffer significant harm, the LADO will immediately refer to Children's Social Care and ask for a strategy discussion to be convened straight away. In those circumstances the strategy discussion should include the LADO and a representative of THGPCG (usually the named Senior Officer or their deputy).
- If there is not cause to suspect that 'significant harm' is an issue, but a criminal offence might have been committed, the LADO should immediately inform the police and convene a similar discussion to decide whether a police investigation is needed. That discussion should also involve the employer.
- Where the initial evaluation decides that the allegation does not involve a possible criminal offence it will be dealt with by the employer.

4.6 Strategy Discussions

- Where there is reasonable cause to suspect that a child/vulnerable adult has suffered, is suffering or is likely to suffer significant harm, or where a lack of clarity remains, then a strategy discussion will take place **within 24 hours**. This will involve Children's/Adults Social Care, the Police, LADO and the named Senior Manager. In some cases it may be that the strategy discussion will agree upon the need for immediate investigative or protective action i.e. Section 47 or criminal investigations.
- Alternatively, the strategy discussion may indicate that no further action is required from investigative agencies and that the matter can therefore be dealt with by the employer in accordance with their own procedures. In all cases, decisions about or enquiries by external agencies will preclude a disciplinary or 'internal' process by the employer.

4.7 Strategy Meetings

- If a multi-agency strategy meeting needs to be convened in response to an allegation, this should occur within 5 working days of the referral to Children's Social Care. Attendees should provide a written report.

- In convening a strategy meeting consideration should be given to inviting appropriate representatives from all of the agencies involved with a child/family, alongside representatives from inspectorates where this is in line with notification requirements. While there may be a need to invite certain professionals with particular expertise on a case by case basis, Police, Children’s Social Care/Adults Social Care and the employer (except where to do so may impede an investigation or place a child or young person at increased risk) should always be invited.
- The strategy meeting should:-
 - share all relevant information;
 - consider the current allegation or concern and review any previous allegations or concerns made against the member of staff and/or the establishment;
 - decide whether there should be a s.47 enquiry / criminal investigation (if not already commenced);
 - scope and plan any s.47 enquiry / criminal investigation;
 - consider, if a s.47 enquiry is appropriate, whether a complex abuse investigation is applicable;
 - allocate tasks agreeing any further action with timescales required and who is responsible;
 - identify who may need to be interviewed e.g. witnesses, staff, children – and who will do this;
 - decide who to inform and when (subject of allegations, child, parents);
 - make recommendations regarding immediate suspension without prejudice, disciplinary, competency, regulatory or complaints procedures;
 - agree criteria for a re-referral where new evidence comes to light suggesting that a further strategy meeting need to be convened;
 - agree arrangements for the outcome of any internal process to be reported to the LADO and chair;
 - set a date for a review strategy meeting which should occur, wherever possible, within 28 days of an initial strategy meeting

4.8 Reviewing the Strategy Discussion or Meeting

- The time taken to investigate and resolve individual cases depends on a variety of factors, including the nature, seriousness and complexity of the allegations. However, it is in everyone’s interest to resolve cases as quickly as possible, consistent with a fair and thorough investigation. Every effort should be made to manage cases in order to avoid unnecessary delay. The LADO will monitor and record timescales in respect of all cases and liaise with Senior Manager and appropriate bodies in the event of delay.
- The Review Strategy Meeting will draw together all relevant information following the completion of enquiries by Children’s/Adults Social Care, the Police and any other agency (as appropriate), and make multi-agency decisions about any further action to be taken in the case, including timescales for completion.

- Where difficulties have been encountered by investigative agencies the review will also provide an opportunity to clarify what these are, to identify solutions, make further plans and agree upon timescales.
- Should enquiries take longer than the initial four week period, then the case will be reviewed every four weeks to ensure that there is ongoing review and to avoid unnecessary delay.
- The LADO will monitor the progress of cases either via: review strategy discussions/meetings; or by liaising with the Police, Children’s Social Care, employers and regulatory bodies/inspectorates as appropriate.

4.9 Monitoring Progress

- The LADO will keep comprehensive records in order to ensure that each case is being dealt with expeditiously and that there are no undue delays. The record will assist the LSCB to monitor and evaluate the effectiveness of the procedures and provide statistical information as required.

4.10 Action on Conclusion of a Case

- Where the initial evaluation decides that the allegation does not involve a possible criminal offence it will be dealt with by the employer. In such cases, if the nature of the allegation does not require formal disciplinary action, appropriate action should be instituted within three working days.
- If the person is convicted, the Police should inform the employer and LADO immediately to enable the employer to take any appropriate action.
- It is imperative that the final outcome of all cases is relayed to the LADO in order that appropriate records can be maintained. Where this does not happen the LADO will actively pursue the relevant information which needs to be provided without delay.

4.11 Referral to the Independent Safeguarding Authority

- If the allegation is substantiated and the employer dismisses the person or ceases to use the person’s services, or the person resigns or ceases to provide his/her services, decisions need to be taken about the need for referrals to the Independent safeguarding Authority (ISA) and /or to a professional regulatory body is required.
- The LADO can and should offer this advice although recommendations may already have been made at a strategy meeting. If a referral is required it should be made by the employer within one month of the decision to refer. In cases where any doubt or a lack of clarity remains regarding a referral to the ISA / professional regulatory body, the employer should liaise with the LADO in order to ascertain what if any action still needs to be taken, by whom and within what timescales.

4.12 Learning Lessons

- Where an allegation has been substantiated a review of the circumstances of the case should be undertaken to determine whether there are any improvements to

be made to policies, procedures or practice to help prevent similar events in the future. This should include issues arising from any decision to suspend a member of staff, the duration of the suspension and whether or not suspension was justified.

4.13 Action in respect of Unfounded or Malicious Allegations

- If an allegation is determined to be unfounded or malicious, the employer should refer the matter to Children’s/Adults Social Care to determine whether the child/adult concerned is in need of services, or may have been abused by someone else.
- In the rare event that an allegation is shown to have been invented or malicious, the Police should be asked to consider whether any action might be appropriate against the person responsible.
- **Unfounded** – this indicates that the person making the allegation misinterpreted the incident or was mistaken about what they saw. Alternatively, they may not have been aware of all the circumstances. For an allegation to be classified as unfounded, it will be necessary to have evidence to disprove the allegation.
- **Deliberately Invented or Malicious** – this implies a deliberate intention to deceive. A malicious allegation may be made by a child following an altercation with a member of staff or a parent who is in dispute with the organisation. For an allegation to be classified as malicious, it will be necessary to have evidence which proves this intention.

5. GENERAL CONSIDERATIONS

5.1 Suspension Issues and Support for Staff

- Discussions about suspension may take place at an early stage then and while other professionals may wish to express a view, the decision to suspend rests ultimately with the employer and should be in accordance with each organisation’s own policies. Suspension is not and should never be an inevitable or automatic response to an allegation, neither is it a disciplinary sanction. Recourse to suspension should not occur without good reason and/or without consideration having been given to appropriate alternatives. However, suspension should be considered in any case where there is cause to suspect a child is at risk of significant harm, or the allegation warrants investigation by the police, or is so serious that it might be grounds for dismissal.
- The HR lead is best placed to advice on the procedure for suspending staff and further guidance is available at appendix x.
- In any event, whether a member of staff is suspended or not, in any case where a formal notification to the LADO is made then a worker must:
 - be provided with a copy of this procedure;

- be advised to seek advice and support from their trade union/professional body;
- be provided with the name and contact detail of an individual within the organisation who will act as a point of contact during the course of the investigation and who can provide updated information and act as a conduit.

5.2 Resignation and Compromise Agreements

- The fact that a person tenders his or her resignation or ceases to provide their services must not prevent an allegation from being followed up in accordance with these procedures and a formal conclusion reached.
- Wherever possible, the person should be given a full opportunity to answer the allegation and make representations about it as soon as possible. However, any enquiries and investigations should continue to a conclusion even if the person refuses to co-operate; decisions will be taken on the strength of what is known in the event that an individual chooses not to make representation. A compromise agreement by which a person agrees to resign, the employer agrees not to pursue disciplinary action and both agree a form of words to be used in any future reference must not be used in situations to which this procedure applies.

5.3 Disciplinary Considerations

- If it is necessary to invoke the disciplinary procedure required this will be in accordance with THGPCG disciplinary procedures. When further investigation is needed to inform consideration of disciplinary action, the employer and the LADO should discuss who should undertake this.
- In any case, the investigating officer should aim to provide a report within 10 working days.
- On receipt of the report the employer should decide, within 2 working days, whether a disciplinary hearing is needed. If a hearing is required, this will be in accordance with the disciplinary procedures.
- The aim of an investigation is to obtain, as far as possible, a fair, balanced and accurate record in order to consider whether a prima facie case exists within terms of the local disciplinary procedure; the purpose is not to prove or disprove the allegation.
- The LADO should continue to liaise with the employer to monitor progress of the case and provide advice/support when required/requested. It is the responsibility of the employer to inform the LADO of the outcome of the investigation and of any action taken by the employer.

5.4 Sharing of information to inform the disciplinary process

- If the Police or Crown Prosecution Service decides not to charge or to administer a caution, or if the person is acquitted, the Police should ensure that all relevant information is made available to the employer without delay.
- Where this does not occur the LADO will liaise with the Police Senior Manager.
- Information obtained in the course of enquires by Children's Social Care should be taken into account when considering disciplinary action.

5.5 Record Keeping

- Employers should keep a clear and comprehensive summary of any allegations made, details of how the allegation was followed up and resolved, and details of any action taken and decisions reached, on a person's confidential personnel file and give a copy to the individual.
- The information should be retained on the individuals file, including for people who have left the organisation, at least until the person reaches normal retirement age or for 10 years if that will be longer.
- The purpose of the record is to enable accurate information to be given in response to any future request for a reference. It will provide clarification in cases where a future CRB Disclosure reveals information from the police that an allegation was made but did not result in a prosecution or a conviction. And it will prevent unnecessary re-investigation if, as sometimes happens, allegations re-surface after a period of time.

5.6 Confidentiality

- Every effort will be made to maintain confidentiality while an allegation is being investigated or considered. If the matter is subject to a police investigation the police will not normally provide any information to the press or media that could identify the individual who is under investigation, unless or until the person is charged with a criminal offence.
- In exceptional cases the police may need to disclose information e.g. if an appeal is necessary to trace a suspect. In such cases the reasons should be documented and partner agencies consulted beforehand.
- All allegations and investigations will be dealt with by designated or named managers on behalf of the THGPCG and information will only be shared on a need to know basis, in order to make a full and fair assessment of the case.
- A child or vulnerable adult may confide in a member of staff about the alleged abuse or neglect. The member of staff should make clear to the individual who approached them asking for confidentiality that they will need to pass this information on but give some assurance that the matter will be disclosed only to people who need to know.
- If any member of staff is approached by the press or media regarding an allegation or investigation falling within the scope of this policy they should immediately contact the Communications team being mindful of the requirement not to communicate with the media unless specifically authorized to do so.

6. Monitoring and Compliance

- Compliance will be measured by annual reporting to the Quality and Safety Committee on the number of allegations made, outcome and timeliness of the process (including any internal disciplinary action taken as a result of the allegation).

7. Breaches of Policy

This policy is mandatory. Where it is not possible to comply with the policy or a decision is taken to depart from it, this must be notified to the Quality and Safety Committee and the Clinical Director immediately so that the level of risk can be assessed and an action plan can be formulated.

APPENDIX 1

	Name and contact details
Named Senior Manager	Dr Kamaldeep Tamber Kamaldeep.tamber@nhs.net Globe Town Surgery 82-86 Roman Road, London E2 0PJ 020 8980 3023
Lead HR Officer	Debbie Russell Debbie.russell@nhs.net Stroudley Walk Health Centre 38 Stroudley Walk Bow, London E3 3EW
Children's Safeguarding Lead	Dr Kamaldeep Tamber Kamaldeep.tamber@nhs.net Globe Town Surgery 82-86 Roman Road, London E2 0PJ 020 8980 3023
Adult Safeguarding Lead	Dr Kamaldeep Tamber Kamaldeep.tamber@nhs.net Globe Town Surgery 82-86 Roman Road, London E2 0PJ 020 8980 3023
Local Authority Designated Officer (LADO)	James Gilley Local Authority Designated Officer (LADO) Child Protection & Reviewing Service LB.Tower Hamlets Children's Services 4thFloor Mulberry Place 5 Clove Crescent London E14 2 BG Tel: 0207 364 3506

Appendix 2

A QUICK GUIDE FOR STAFF AND VOLUNTEERS WHO ARE FACED WITH AN ALLEGATION.

Introduction

Any allegation of abuse is obviously likely to cause a great deal of anxiety and concern. This quick guide is appended to the Procedure for Managing Allegations Against People Who Work with Children. It is intended to provide you with a broad overview of some of the key issues and to signpost you to appropriate information, advice and support.

Professional Associations & Trade Unions

You should already have been advised to contact any professional association that you are a member of. If you haven't already done that you should consider contacting them as they are well placed to offer advice and support in these difficult circumstances.

Suspension

Suspension is not a sanction or an automatic response to an allegation; alternatives to it will have been discussed and carefully considered. In taking a decision to suspend, your employer will have taken into account the views of the Local Authority's Designated Officer, HR, the Police and Children's Social Care - if they are involved.

Suspension is considered in all cases where:

- Someone's continued presence on site may pose a risk to someone
- To enable a child protection or criminal enquiry to proceed un-impeded
- It is serious enough to have the potential for there to be grounds for dismissal

If you have been suspended from work as a result of the allegation, you should keep in contact with your line manager who will keep you updated in relation to any investigative processes.

Following a suspension, you should be invited to a meeting with your employer to discuss your return to work.

Investigative Processes

As the procedure states, the allegation may be the subject of an investigation by Children's Social Care or the Police. At the conclusion of any investigation by Children's Social Care or the Police, or if these agencies decide that they do not need to conduct an investigation, the matter will be handed back to the employer to deal with.

If this involves an internal disciplinary investigation, it will be in accordance with the THGPCG disciplinary procedure; a copy of which is available on request. It may also be the case that you will be provided with advice, guidance, training and/or support in respect of any issues that have emerged following this allegation. You should think about what would be of particular use to you and be prepared to make this clear to your employer.

Confidentiality

Clearly, allegations of abuse are extremely sensitive matters and all reasonable steps will be taken in order to ensure that any information pertaining to them will be dealt with in strictest confidence and on a 'need to know' basis. In the unlikely event that the matter becomes subject to speculation outside of the workplace/in the public domain, advice will be sought regarding any action that may be required to address and manage this. Again, this will be done with the utmost sensitivity and in consultation with you and any other individuals who may be affected

Five Frequently Asked Questions:

❖ When will I be given an opportunity to respond to the allegation?

The principles of natural justice dictate that any person accused of something should be afforded an opportunity to know what is being alleged and to respond. How and when that occurs will depend upon the nature of the allegation and any enquiries that are being made in respect of it; but there will be an opportunity for you to respond to the allegation.

❖ If I am to be spoken to or interviewed by Police and/or Children's Social Care (i.e. a social worker) when and where will this happen?

Again, the need for sensitivity and discretion is at the forefront of everyone's mind in dealing with matters of this sort. In the event that you do need to be spoken to or interviewed then this will be arranged and handled with the utmost discretion. You should seek advice from your line manager/ HR/ Union or Professional Association regarding any additional advice or support that you may need in the event that you are to be interviewed formally.

❖ What Information about this process, including any meetings and/or investigative processes, will I have access to?

If you are faced with an allegation you should be provided with a copy of the Procedure for Managing Allegations by your employer. This will inform you of the process(es) that need to be followed by your employer and the relevant authorities/agencies in dealing with the allegation. Minutes of strategy meetings are confidential documents and are not disclosed to third parties (i.e. those not in attendance) as a matter of course. Once any enquiries have been

Appendix 3

What is an allegation?
 Information which indicates that an adult has or may have:

Behaved in a way that has harmed or may have harmed a Child

Behaved in a way that has harmed or may have harmed a Child

Behaved towards a child or children in a way that indicates they are 'unsuitable' to work with

Allegation Against an Adult which meets or may meet the criteria (left)

Recipient does not investigate but passes basic information to Line Manager / Senior Manager as appropriate

Allegation Reported to Organisation's Senior Manager

Senior Manager collates basic information but **does not** investigate

Senior Manager makes recommendation re any further action and notifies LADO using electronic notification form within 1 working day

Initial consideration by LADO

Discussion with / feedback to Senior Manager within 1 working day (including information to be provided to alleged perpetrator)

LADO decides on and takes appropriate next course of action i.e.:
 strategy discussion
formal strategy meeting (within 5 working days)
 - Passes back to referrer / employer for action and logs

Police Investigation

S47 Child Protection enquiries

Employer's Action
 (held in abeyance pending outcome of any 'external' enquiries)

LADO track, monitors progress & outcomes

Contact Information

Tower Hamlets LADO is:
 James Gilly
James.Gilley@towerhamlets.gov.uk
 LB.Tower Hamlets
 Children's Services
 4thFloor
 Mulberry Place
 5 Clove Crescent
 London E14 2 BG
 Tel: 0207 364 3506

Our Organisations Senior Manager is:
 Dr kamaldeep Tamber

In their absence the contact person is:
 Kamaljit Kaur
 07540346870

Our Organisations HR Lead is:
 Debbie Russell –
Debbie.russell@nhs.net
 020 8709 4840

In their absence the contact person is:
 Chris Ley –
chrisley@nhs.net
 020 75172602