



Managing Allegations of Abuse by Staff Procedure

Introduction and Aim

This procedure sets out the process for dealing with allegations of abuse against children, adults at risk of harm and/or alleged perpetrators of domestic abuse made against an employee in Public Health Wales

Linked Policies, Procedures and Written Control Documents

This procedure should be read in conjunction with the following policies

- Safeguarding Policy [Safeguarding Vulnerable Children and Adults Policies - Public Health Wales \(nhs.wales\)](#)
- Capability Policy <https://phw.nhs.wales/about-us/policies-and-procedures/policies-and-procedures-documents/human-resources-policies/capability-policy/>
- Disciplinary Policy [AIMS AND OBJECTIVES \(nhs.wales\)](#)
- Email Policy <https://phw.nhs.wales/about-us/policies-and-procedures/policies-and-procedures-documents/information-governance-information-management-and-technology-policies/email-use-policy/>
- Information Governance Policy [All Wales Information Governance Policy.docx \(nhs.wales\)](#)
- Internet Policy [Microsoft Word - For Approval - All Wales Internet Use Policy.docx \(nhs.wales\)](#)
- Incident Management Policy <https://phw.nhs.wales/about-us/policies-and-procedures/policies-and-procedures-documents/risk-management-health-and-safety-and-estates-policies/incident-management->

Scope

All staff members, including agency workers, those on honorary contracts, secondments, or volunteer arrangements - for the purposes of this procedure herein will be referred to as 'staff members'.

Equality and Health Impact Assessment	This has been completed and no impact has been identified. Please refer to the completed EHIA for the Safeguarding Policy.
Approved by	Quality, Safety and Improvement Committee
Approval Date	TBC
Review Date	TBC
Date of Publication:	TBC – 2 weeks from approval.

Accountable Executive Director/Director	Executive Director Quality, Nursing and Allied Health Professionals
Author	Named Lead for Safeguarding

Disclaimer

If the review date of this document has passed please ensure that the version you are using is the most up to date by contacting the document author

Summary of reviews/amendments				
Version number	Date of Review	Date of Approval	Date published	Summary of Amendments
1	10/04/14	29/04/18	05/18	Ref: PHW 41.
2	04/06/18	04/10/18	17/10/18	Adapted from a policy to procedure as falls under the Safeguarding policy.
2	15/8/21			Procedure amended in line with the publication of the Wales Safeguarding Procedures 2019

1. Introduction

Public Health Wales procedure for Managing Allegations of Abuse against Staff provides a framework to ensure that any allegation or suspicion that a staff member may have abused a child, young person, an adult at risk of harm and/or an alleged perpetrator of domestic abuse is managed correctly.

Most adults who work with children and/or adults at risk of harm act professionally and provide a safe and supportive environment. However, Public Health Wales recognises that the behaviour of staff can give rise to allegations of abuse being made against them. Allegations may be malicious or misplaced or they may arise from differing perceptions of the same event. It must however be recognised that some allegations will be genuine and there are adults who will deliberately seek out, create, or exploit opportunities to abuse children, young people, or adults at risk of harm. It is therefore essential that Public Health Wales ensures that all possible steps are taken to safeguard children, young people, adults at risk of harm and/or alleged victims of domestic abuse to ensure that the adults working with them or with access to their information are safe to do so.

The Wales Safeguarding Procedures set out arrangements for responding to Safeguarding concerns about those whose work, either in a paid or voluntary capacity, which brings them into contact with children or adult at risk, it also includes individuals who have caring responsibilities for children or adults in need of care and support and their employment or voluntary work brings them into contact with children or adults at risk.

It is intended that these procedures support internal disciplinary procedures and provides guidance to appropriately deal with any concerns or allegations of professional abuse, neglect, or harm and to ensure that all allegations of abuse made against staff or volunteers working with children, young people and adults at risk are dealt with in a fair, consistent and timely manner.

2. Roles and responsibilities

The Line Manager will be responsible for providing line management support to their member of staff, ensuring the process is managed, sensitively, fairly, and that appropriate support mechanisms are in place for the individual(s) affected/involved.

The Public Health Wales Named Lead for Safeguarding has the responsibility for supporting the implementation of this procedure.

The People & Organizational and Development division will be responsible for providing advice, guidance and support on the employment aspects of cases.

3. Procedure

The following procedure has been devised to enable staff to respond to a concern of harm or abuse against children, young people, or adults at risk of harm and/or alleged victims of domestic abuse.

3.1 Raising and managing allegations of concerns of harm or abuse against children, young people, adults at risk of harm and/or alleged victims of domestic abuse

The safety of a child, young person or adult at risk is of paramount importance. Immediate action may be required to safeguard investigations and any other children, young people, or adults at risk. All staff must be familiar with referral procedures to protect a child, young person, or adult at risk.

A concern can be raised with Public Health Wales in several ways:

1. Staff members raising concerns of harm or abuse against children, young people, adults at risk of harm and/or alleged victims of domestic abuse
2. Safeguarding colleagues in other Health Boards or Trusts notifying Public Health Wales of allegations received
3. Local Authority or the Police notifying Public Health Wales of allegations received

If a staff member witnesses or suspects harm or abuse by another staff member, whether within work, outside of work, or at home (for example, allegations by their own or other children or adults at risk of harm), they have a statutory duty to report these concerns to the Social Services of their Local Authority.

Any concern that children, young people, or adults may be at risk of harm or abuse **must be reported immediately** to the staff member's line manager (unless this is the alleged perpetrator in which case the concern should be escalated to a higher level immediately), who should take advice from Public Health Wales' Named Lead for Safeguarding.

Likewise, if a staff member receives a notification from Safeguarding colleagues in another Health Board, NHS Trust, Social Services, or the Police, they should notify their line manager, who will make the necessary contact with the Named Lead of Safeguarding and People and Organisational Development representative.

If a safeguarding allegation is made against an individual working for Public Health Wales through an agency, via an honorary contract, secondment agreement, or as a volunteer or contractor engaged under a contract for services, i.e. someone who is not directly employed by Public Health Wales, the allegation must also be shared with their employer or

the body that engaged them at the earliest opportunity. The Senior People and Organisational Development Advisor will provide the necessary guidance on this.

3.2 Professional Concerns Strategy Meeting

A report will be made to the relevant local authority under Section 5 of the All Wales Safeguarding Procedures. The local authority will decide on whether to progress to a Professional Concerns Meeting. The line manager, Named Lead for Safeguarding or nominee, and a Senior People and Organisational Development Advisor or senior nominee, will discuss the case to:

- Review the allegation
- Undertake a risk assessment
- Agree immediate actions, including whether redeployment or suspension, without prejudice, should be considered
- Agree a support package for the staff member
- Consider reputational issues that must be managed appropriately by discussion with the relevant communications team.
- Consider referral to relevant professional body

The professional strategy meeting will be convened by the Designated Officer for Safeguarding when safeguarding allegations/concerns have been raised about a practitioner/person in positions of trust. This can either be in a personal or professional capacity, where the individual has wider contact with children or with adults at risk.

It is essential that meeting notes are made to demonstrate that the discussions and agreed outcomes were comprehensively considered and thought through. As such, the risk assessment template (appendix 1) must be used for this.

The main functions of the strategy meeting are to:

- Ensure the proper co-ordination of child, adult protection, criminal and employment procedures
- Share all relevant information about the allegation/concern in question
- Consider what action may be required to protect the child or adult at risk in question
- Consider the likelihood of harm to other children or adults at risk with whom the person has contact at work or other activities, and agree any actions that are required

- Consider and evaluate the risk of harm to the subject's own children, and agree any actions that are required
- Discuss any previous allegations or other concerns.
- Plan any enquiries needed and allocate tasks and set timescales
- Decide who is to be interviewed and lead agency
- Identify a lead contact manager within each agency
- Decide what information can be shared with whom, when and who will do this
- Agree timescales for actions and/or dates for further meetings
- Consider whether the adult's suitability to continue working with children or adults at risk in his or her current position has been called into question
- Consider whether there are disciplinary issues to be followed up
- Agree at what stage in the process the disciplinary issues should be followed up
- Consider any other factors that may affect the management of the case e.g. consideration of the need for a media strategy where there is likely to be press interest.
- Confirm arrangements regarding who will communicate with the person about whom there are concerns and ensure appropriate support is provided
- Ensure that the appropriate referrals are made to the Disclosure and Barring Service and registering bodies of the professional involved (this can be completed at any point throughout the process)
- The employer/voluntary organisation or registering body may need to consider suspending the employee without prejudice.

3.3 Risk assessment

If the professional concerns meeting identifies that children, young people, or adults are at risk of significant harm, or that further investigation is required, the meeting attendees will undertake a risk assessment to determine:

- The risk to the safety of children and adults at risk
- The risk to other members of the public
- The risk to the employee themselves
- The risk to the organisation and its integrity

Any identified risks should be explored, and any appropriate mitigations identified. This may include but is not exhausted to:

- Placing safety measures into the existing working environment
- Redeployment of the member of staff or
- Suspension from work as a necessary step for the protection of those at risk and the staff member.

Any redeployment or suspension is without prejudice and must be dealt with sensitively, in line with sections 11 and 12, respectively, of the All Wales Disciplinary Policy and Procedure.

Any action taken at this point will be subject to change, and as a maximum will be in place until either the outcome of any Multi-Disciplinary Strategy meeting (see below), or any substantial changes are advised.

If suspension of a staff member is required at this stage, it is best practice to inform them of the reason for the suspension unless to do so would jeopardise any subsequent investigation. If that is the case then careful consideration will be given to the reason for suspension at the internal meeting.

Support for the implicated member of staff will be agreed by the group to ensure they receive the necessary organisational support during this period. This will include, but is not limited to named contacts from Safeguarding and People and Organisational Development, and a named person of the staff member's choosing, Trade Union engagement and support, and counselling through Public Health Wales' Employee Assistant Programme.

Any decisions made at the professional concerns meeting that affects the working arrangements of the staff member will be shared with the individual in writing.

Attendees at the meeting will decide on the balance of probabilities whether the concerns are substantiated. Four possible outcomes will come from this assessment

:

- **Substantiated** – a substantiated allegation is one which is established by evidence or proof.
- **Unsubstantiated** – an unsubstantiated allegation is not the same as an allegation that is later proved to be false. It simply means that there is insufficient identifiable evidence to prove or disprove the allegation. The term, therefore, does not imply guilt or innocence.

- **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 means there is clear evidence to prove there has been a deliberate act to deceive and the allegation is entirely false.

Communications to colleagues will also need to be considered with the staff member.

3.4 Internal disciplinary investigation

The individual who is the subject of the allegation will be given a full and fair opportunity to answer the allegation and make representations about it, as per section 10 of the All Wales Disciplinary Policy and Procedure.

The process of investigation will continue to a conclusion even if the individual refuses to cooperate or make any representations. In these circumstances, decisions will be taken on the merits of the information available, and a written record should be made of the formal conclusion and the reasons for it.

Should a staff member resign or cease to provide their services this must not prevent an allegation being followed up in accordance with the safeguarding procedures; it is important that a formal conclusion be reached in all cases. Under no circumstances should a compromise agreement be used in situations to which this policy applies.

At the conclusion of the investigation consideration must be given to whether a referral to the Disclosure and Barring Service (DBS) and the Registered Professional Body of the staff member should be made (see sections 13 and 14 of the All Wales Disciplinary Policy and Procedure).

4. Record Keeping

It is essential that all records are written clearly, accurately, legibly, and contemporaneously with all details recorded to provide a detailed account of the case.

All records should be signed, name printed and dated. If not written contemporaneously then the date when they were written should be made clear, as well as the date of the contact.

Copies of any correspondence made to other agencies must be retained in line with the Trust's Information Governance Policy.

5. Media Interest

In the event of any media interest this will be responded to by the Head of Communications based on any Multi-Disciplinary Strategy meeting recommendations.

Appendix 1



Public Health Wales Professional Concern RISK ASSESSMENT

Employee: *****
Allegation: *****
Date and time of notification: *****
Notified by: *****

MEETING DETAILS

Meeting date and time: *****
Present at meeting:

- ***** Local Authority (Chair)
- ***** Police Representative
- ***** Named Lead for Safeguarding
- ***** Line Manager – job title
- ***** Senior HR Advisor

BACKGROUND

What do we know?

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Who has been notified?
Executives Names and job titles
Service Names and job titles

What action has been taken so far (as at **:**, date)?
<ul style="list-style-type: none">•

Context of Previous Behaviour
<ul style="list-style-type: none">•

RISK ASSESSMENT

The purpose of this risk assessment is to examine:

1. The risk to the safety of children and adults at risk
2. The risk to other members of the public/other staff members
3. The risk to the employee themselves
4. The risk to the organisation and its integrity

Standard to which considerations will be made: *Highest risk i.e. that *** will be convicted*

Note: The decision made as a result of this assessment is a point in time consideration. This is not a final decision and may change based on information and decision from other parties that becomes available, as the process continues.

DRAFT

Risk Factor	Considerations	Mitigations to consider	Risk Value	Risk posed?	Agreed?
The risk to the safety of children and vulnerable adults			Likelihood *** Impact **** Risk: *** (score)		
The risk to other members of the public			Likelihood *** Impact **** Risk: *** (score)		
The risk to the employee themselves			Likelihood *** Impact **** Risk: *** (score)		
The risk to the organisation and its integrity			Likelihood *** Impact **** Risk: *** (score)		

Decision:

PROCESS

Section 5 Wales Safeguarding Procedures

- This will be led by the Local Authority
- The Local Authority will convene a professional (strategy meeting within the next 7 to 21 days, to include: ***Senior Manager; PHW HR; PHW Named Lead for Safeguarding; The Police, Local Authority (Chair)
- They will undertake a further risk assessment of *****

Four possible outcomes will come from this assessment:

- **Substantiated** – a substantiated allegation is one which is established by evidence or proof.
- **Unsubstantiated** – an unsubstantiated allegation is not the same as an allegation that is later proved to be false. It simply means that there is insufficient identifiable evidence to prove or disprove the allegation. The term, therefore, does not imply guilt or innocence.
- **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 means there is clear evidence to prove there has been a deliberate act to deceive and the allegation is entirely false.

NEXT STEPS

It was agreed that we would *****

Action (for example)	Lead	By when
Risk assessment to be written up		
Executives to be briefed		
Invite ** in for meeting		
Feedback to *****		
Suspension letter to be drafted		

Risk Matrix 5x5

Enter subtitle information text

CONSEQUENCE
How severe could the outcomes be if the risk event occurred?

→

		CONSEQUENCE				
		INSIGNIFICANT 1	MINOR 2	SIGNIFICANT 3	MAJOR 4	SEVERE 5
LIKELIHOOD What's the chance the of the risk occurring? ↑	ALMOST CERTAIN 5	MEDIUM 5	HIGH 10	VERY HIGH 15	EXTREME 20	EXTREME 25
	LIKELY 4	MEDIUM 4	MEDIUM 8	HIGH 12	VERY HIGH 16	EXTREME 20
	MODERATE 3	LOW 3	MEDIUM 6	MEDIUM 9	HIGH 12	VERY HIGH 15
	UNLIKELY 2	VERY LOW 2	LOW 4	MEDIUM 6	MEDIUM 8	HIGH 10
	RARE 1	VERY LOW 1	VERY LOW 2	LOW 3	MEDIUM 4	MEDIUM 5