

## TRUST POLICY SEXUAL BEHAVIOUR

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In this document you may find links to external websites. Although we make every effort to ensure these links are accurate, up to date and relevant, Gloucestershire Hospitals NHS Foundation Trust cannot take responsibility for pages maintained by external providers.

**FOR USE BY:** This Policy is to be followed by all staff of Gloucestershire Hospitals NHS Trust and Gloucestershire Managed Services (GMS)

**FAST FIND:**

- [B0207](#) - Violence and Aggression Procedure
- [B0751](#) - Mutual Respect Policy
- [B0291](#) - Disciplinary Policy

**This document should be read in conjunction with the following statements:**

## **Safeguarding Is Everybody's Business**

All Gloucestershire Hospitals NHS Foundation Trust employees have a statutory duty to safeguard and promote the welfare of children and adults and must:

- be alert to the possibility of unborn child, child or adult abuse, neglect and exploitation in any setting
- be conscious that our patients are still children until their eighteenth birthday no matter the reason for attendance
- know how to deal with a disclosure or allegation of unborn child, child or adult abuse
- undertake Safeguarding training appropriate to their role and ensure they undertake regular updated training and awareness at the mandated intervals
- understand and follow local policy and procedure relating to reporting unborn child, child and adult concerns
- ensure early advice and support is obtain if required through the Trust Safeguarding Hub on 0300 422 6279 or by using the Trust vulnerability guidance on the intranet at [Vulnerability \(gloshospitals.nhs.uk\)](https://gloshospitals.nhs.uk)
- if necessary and role appropriate, participate in the multi-agency working arrangements to safeguard a child or adult
- ensure relevant contemporaneous records are kept and maintained in accordance with Trust policy, procedure and professional guidelines.
- ensure that all employees and their managers discuss and record any safeguarding issues that arise at each supervision session

## **Equality And Human Rights**

Gloucestershire Hospitals NHS Foundation Trust recognises that some sections of society may experience prejudice and discrimination. The Equality Act 2010 specifically recognises the protected characteristics of age, disability, sex, race, religion and belief, sexual orientation, gender reassignment, pregnancy and maternity and marital and civil partnership status.

The Trust is committed to promoting and advancing equality; removing and reducing discrimination and harassment and fostering good relations between people that hold a protected characteristic and those that do not both in the provision of services and in our role as a major county employer. The Trust believes that all people have the right to be treated with dignity and respect and is committed to the elimination of unfair and unlawful discriminatory practices. The Trust is also aware of its legal duties under the Human Rights Act 1998. Section 6 of the Human Rights Act requires all public authorities to uphold and promote Human Rights in everything they do. It is unlawful for a public authority to perform any act which contravenes the Human Rights Act.

The Trust is committed to carrying out its functions, decision making and service delivery in line with that Human Rights commitment and the associated person centric FREDA principles of Fairness, Respect, Equality, Dignity and Autonomy.

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## 1. INTRODUCTION / RATIONALE

The Worker Protection Act, which came into effect in October 2024 as an amendment to the Equality Act 2010, places a specific duty on employers to prevent sexual harassment of employees in the course of their employment. The employer should take reasonable steps to challenge and address inappropriate sexualised behaviour in the workplace.

This Policy outlines what action the Trust and GMS will take in cases of inappropriate sexual behaviour, what we will do to prevent employees being subjected to sexual harassment and how we will support colleagues who challenge and report such behaviour. Our people will be confident in recognising sexually inappropriate, unwanted or inappropriate behaviour from patients, colleagues, service users or members of the public and be able to take the right action including, where appropriate, signposting to relevant policy.

The Trust and GMS is signed up to the “Sexual Safety in Healthcare – Organisational Charter”, published by NHS England and designed to keep both patients and staff safe. We commit to the following principles and actions to achieve this:

- We will actively work to eradicate sexual harassment and abuse in the workplace.
- We will promote a culture that fosters openness and transparency, and does not tolerate unwanted, harmful and/or inappropriate sexual behaviours.
- We will take an intersectional approach to the sexual safety of our workforce, recognising certain groups will experience sexual harassment and abuse at a disproportionate rate.
- We will provide appropriate support for those in our workforce who experience unwanted, inappropriate and/or harmful sexual behaviours.
- We will clearly communicate standards of behaviour. This includes expected action for those who witness inappropriate, unwanted and/or harmful sexual behaviour.
- We will ensure appropriate, specific, and clear policies are in place. They will include appropriate and timely action against alleged perpetrators.
- We will ensure appropriate, specific, and clear training is in place.
- We will ensure appropriate reporting mechanisms are in place for those experiencing these behaviours.
- We will take all reports seriously and appropriate and timely action will be taken in all cases.
- We will capture and share data on prevalence and staff experience transparently.

As signatories to this national charter, we commit to a zero-tolerance approach to any unwanted, inappropriate and/or harmful sexual behaviours towards our workforce and service users. A zero-tolerance approach means that we will support challenge, encourage accountability and promote learning in accordance with our values; an approach that is entirely consistent with an organisation that has a Restorative, Just and Learning culture.

The standards and expectations relating to the behaviour of our staff is detailed in the Mutual Respect Policy and the Disciplinary Policy. Those policies are the framework when responding to concerns of sexually inappropriate behaviour where our colleagues are the alleged perpetrators.

The organisational response to protecting colleagues from inappropriate sexual behaviour from patients and service users is detailed in the Abuse, Aggression and Violence Policy.

This Policy applies to all Trust and GMS employees, officers, consultants, self-employed contractors, casual workers including bank workers, agency workers, volunteers and interns.

This Policy does not form part of any contract of employment or other contract to provide services, and the Trust and GMS may amend it at any time.

## 2. DEFINITIONS

Term	Descriptor
Harassment	<p>Harassment is any unwanted physical, verbal or non-verbal conduct that has the purpose or effect of violating a person's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for them. A single incident can amount to harassment.</p> <p>Conduct that has one of these effects can be harassment even if the effect was not intended.</p> <p>Unlawful harassment may involve conduct of a sexual nature (sexual harassment – see below), or it may be related to a range of other Protected Characteristics: age, disability, gender reassignment, marital or civil partner status, pregnancy or maternity, race, colour, nationality, ethnic or national origin, religion or belief, sex or sexual orientation. Sexual harassment and harassment in relation to any Protected Characteristic will not be tolerated and are unlawful. Harassment is unacceptable even if it does not fall within any of these categories.</p> <p>Harassment may include, for example:</p> <ul style="list-style-type: none"><li>• racist, sexist, homophobic or ageist jokes, or derogatory or stereotypical remarks about a particular ethnic or religious group, religion or belief, or gender;</li><li>• disclosing or threatening to disclose someone's sexual orientation or gender identity against their wishes;</li><li>• offensive emails, text messages or social media content;</li><li>• mocking, mimicking or belittling a person's disability;</li><li>• unwanted physical conduct or "horseplay", including touching, pinching, pushing and grabbing;</li><li>• continued suggestions for social activity after it has been made clear that such suggestions are unwelcome;</li><li>• sending or displaying material that is pornographic or that some people may find offensive (including emails, text messages, video clips and images sent by mobile phone or posted on the internet); or</li><li>• unwelcome sexual advances or suggestive behaviour (which the harasser may perceive as harmless)</li></ul> <p>A person may be harassed even if they were not the intended target. For example, a person may be harassed by racist jokes about a</p>

Term	Descriptor
	<p data-bbox="469 147 1410 181">different ethnic group if the jokes create an offensive environment.</p> <p data-bbox="469 232 1449 338">Harassment is unlawful and will not be tolerated. For Trust and GMS employees it may lead to disciplinary action up to and including dismissal if it is committed:</p> <ul data-bbox="469 389 1436 667" style="list-style-type: none"> <li>• in a work situation</li> <li>• during any situation related to work, such as at a social event with colleagues</li> <li>• against a colleague or other person connected to us outside of a work situation, including on social media</li> <li>• against anyone outside of a work situation where the incident is relevant to your suitability to carry out your role.</li> </ul> <p data-bbox="469 719 1410 824">The Trust and GMS will take into account any aggravating factors, such as abuse of power over a more junior colleague, when deciding the appropriate disciplinary action to take.</p>
Sexual Harassment	<p data-bbox="469 837 1442 981">Sexual harassment occurs when someone is subjected to unwanted conduct (see definition of Harassment above) which is of a sexual nature. The conduct need not be sexually motivated, only sexual in nature.</p> <p data-bbox="469 1032 1385 1099">Conduct 'of a sexual nature' includes a wide range of behaviour, such as:</p> <ul data-bbox="469 1151 1378 1715" style="list-style-type: none"> <li>• sexual comments or jokes.</li> <li>• displaying sexually graphic pictures, posters or photographs.</li> <li>• suggestive looks, staring or leering.</li> <li>• propositions and sexual advances</li> <li>• making promises in return for sexual favours</li> <li>• sexual gestures</li> <li>• intrusive questions about a person's private or sex life or a person discussing their own sex life</li> <li>• sexual posts or contact on social media</li> <li>• spreading sexual rumours about a person</li> <li>• sending sexually explicit emails or text messages</li> <li>• unwelcome touching, hugging, massaging or kissing</li> <li>• stalking, exposure or voyeurism</li> </ul> <p data-bbox="469 1767 1404 1834">An individual can experience unwanted conduct from someone of the same or a different sex.</p> <p data-bbox="469 1886 1436 1991">Sexual interaction that is invited, mutual or consensual is not sexual harassment because it is not unwanted. However, sexual conduct that has been welcomed in the past can become unwanted.</p> <p data-bbox="469 2042 1430 2076">Sexual harassment will not be tolerated and is unlawful. It may lead</p>

Term	Descriptor
	<p>to disciplinary action up to and including dismissal if it is committed:</p> <ul style="list-style-type: none"> <li>• in a work situation</li> <li>• during any situation related to work, such as at a social event with colleagues</li> <li>• against a colleague or other person connected to us outside of a work situation, including on social media</li> <li>• against anyone outside of a work situation where the incident is relevant to your suitability to carry out your role</li> </ul> <p>The Trust and GMS will take into account any aggravating factors, such as abuse of power over a more junior colleague, when deciding the appropriate disciplinary action to take.</p>
Less Favourable Treatment for Rejecting or Submitting to Sexual Harassment	<p>It is also harassment where a worker is subjected to unwanted conduct of a sexual nature; related to sex or related to gender reassignment and the unwanted conduct has the purpose or effect of violating the worker's dignity; or creating an intimidating, hostile degrading, humiliating or offensive environment for the worker, and the worker is treated less favourably because they submitted to or rejected the unwanted conduct.</p> <p>Less favourable treatment for rejecting or submitting to sexual harassment will not be tolerated and is unlawful. It may lead to disciplinary action up to and including dismissal if it is committed:</p> <ul style="list-style-type: none"> <li>• in a work situation</li> <li>• during any situation related to work, such as at a social event with colleagues</li> <li>• against a colleague or other person connected to us outside of a work situation, including on social media</li> <li>• against anyone outside of a work situation where the incident is relevant to your suitability to carry out your role.</li> </ul> <p>The Trust and GMS will take into account any aggravating factors, such as abuse of power over a more junior colleague, when deciding the appropriate disciplinary action to take.</p>
Third-party harassment	<p>Third-party harassment occurs where a person is harassed or sexually harassed by someone who does not work for, and who is not an agent of, the Trust or GMS, but with whom they have come into contact during the course of their employment.</p> <p>Third-party harassment could include, for example, derogatory comments about a person's age, disability, pregnancy, colour, religion or belief, sex or sexual orientation from a patient, client, customer or supplier visiting the employer's premises, or where a person is visiting a client, customer or supplier's premises or other location in the course of their employment.</p>

Term	Descriptor
	<p>Third party harassment will not be tolerated and is unlawful. An individual cannot bring a claim for third party harassment alone, but if it occurs then third-party harassment can still result in legal liability when raised in other types of claims. The law requires employers to take reasonable steps to prevent sexual harassment of workers in the course of their employment by third parties.</p> <p>All staff are encouraged to report any third-party harassment they are a victim of, or witness, in accordance with this Policy. Any harassment by an employee of the Trust or GMS against a third-party may lead to disciplinary action up to and including dismissal</p> <p>The Trust and GMS will take active steps to try to prevent third-party harassment of workers. If any third-party harassment of staff occurs, the Trust and GMS will take steps to remedy any complaints and to prevent it happening again.</p>
Sexual Misconduct	<p>Sexual misconduct is uninvited, unwelcome or non-consensual behaviour of a sexual nature. It is behaviour that can reasonably be interpreted and/or perceived by an individual as sexual and which offends, embarrasses, harms, humiliates, or intimidates an individual or a group. Sexual misconduct can involve elements of harassment, violence and abuse and can be physical, verbal, or visual and via different mediums, such as through an email or a phone message.</p> <p>Some forms of sexual misconduct may also constitute criminal offences under a range of legislation including but not limited to the Sexual Offences Act 2003 and the Protection from Harassment Act 1997. Potential criminal offences include sexual assault, rape, stalking or disclosing private sexual images to cause distress (revenge pornography). This list is not exhaustive.</p>
Stalking	<p>Stalking is a form of harassment, but the stalker will have an obsession with the person they are targeting and their repeated, unwanted behaviour can make the victim feel distressed or scared.</p> <p>Stalking may include:</p> <ul style="list-style-type: none"> <li>• following someone</li> <li>• going uninvited to their home</li> <li>• hanging around somewhere they know the person often visits such as work</li> <li>• watching or spying on someone</li> <li>• identity theft (signing-up to services, buying things in someone's name)</li> <li>• writing or posting online about someone if it's unwanted or the person doesn't know</li> </ul>
Sexual Violence/Assault	<p>Encompasses acts ranging from verbal harassment to forced penetration and an array of types of coercion from social pressure and intimidation to physical force or other sexual offences, such as groping and/or forced kissing, which may be criminal offences</p>



Term	Descriptor
Sexually Inappropriate Behaviour	For the purpose of this Policy sexually inappropriate behaviour will be all cases of harassment, less favourable treatment, sexual misconduct, third party harassment or stalking in which the motivation is or appears to be sexual, or the language or circumstances indicate a sexual nature
Restorative, Just and Learning Culture	An environment where equal emphasis is placed upon both accountability and learning
Case Assessment Framework	<p>The Trust and GMS framework providing structure and consistency to fact-finding, assessment and recording following an incident or event. The gathering of information within this framework does not constitute a formal investigation.</p> <p>It should be undertaken by the receiving manager, or suitable nominee, using the Trust Case Assessment Framework (<a href="#">B0291 AC5</a>), Supporting Guidance (<a href="#">B0291 AC8</a>) and Reflective Guidance (<a href="#">B0291 AC9</a>) in order to determine the next steps.</p>
Case Review Meeting	A review in which the details of an allegation are considered by a panel comprising of a member of the People Team, EDI and Management to consider if sufficient informal action has been undertaken to resolve matters, any necessary support and/or if the matter should be subject to formal action under the Disciplinary policy.
Complainant	A person who has raised a concern of sexually inappropriate behaviour. This could be an individual who has alleged they have experienced sexually inappropriate behaviour, or a line manager/colleague who is reporting on their behalf.
Alleged perpetrator	An individual about whom a sexually inappropriate behavioural report has been raised
Witness	A person who has witnessed an alleged instance of sexual misconduct/sexually inappropriate behaviour and/or can give relevant evidence that may form part of an investigation, where indicated.
Investigator	Suitably trained person who is appointed to investigate, where appropriate
Subject matter expert	An individual with specialist or expert knowledge/experience

### 3. ROLES AND RESPONSIBILITIES

Post/Group	Details
Chief Executive and Executive Directors	<ul style="list-style-type: none"> <li>The Chief Executive has overall responsibility for ensuring the safety of patients, visitors and staff as far as is reasonably practicable. This includes ensuring staff are aware of sexually inappropriate behaviour, how it will not be tolerated and staff will be supported in challenge</li> <li>The Chief Nurse and Medical Director have overall responsibility</li> </ul>

Post/Group	Details
	<p>for the safety of patients</p> <ul style="list-style-type: none"> <li>• The Director of Integrated Governance has overall responsibility for the Health and Safety of staff</li> <li>• All will show commitment to a culture that fosters openness and transparency and does not tolerate unwanted, harmful and/or inappropriate sexual behaviours.</li> <li>• All will abide by and recognise the principles of a Restorative, Just and Learning culture</li> </ul> <p>The Director for People and OD has</p> <ul style="list-style-type: none"> <li>• Strategic responsibility for effective operation of this Policy</li> <li>• Strategic responsibility for fair and consistent compliance</li> <li>• Ensuring dissemination and awareness at Executive and Board level</li> <li>• Ensuring appropriate consultation on this Policy</li> </ul>
Trust Board	<ul style="list-style-type: none"> <li>• Creation of open culture where reporting is enabled and staff have a right for their concerns to be addressed and responded to in an appropriate, structured and consistent fashion</li> <li>• Abide by and recognise the principles of a Restorative, Just and Learning culture</li> </ul>
Employees	<ul style="list-style-type: none"> <li>• To take personal responsibility for their own good conduct and behaviour at all times</li> <li>• To abide by and recognise the principles of a Restorative, Just and Learning culture</li> <li>• To learn and understand the organisational response sexually inappropriate behaviour in the workplace and support colleagues through any disclosure or reporting process</li> <li>• To cooperate in any case assessment or investigation when required to do so</li> <li>• To attend Occupational Health referrals if relevant in support of this policy</li> </ul>
Line Managers	<ul style="list-style-type: none"> <li>• To assess the risks relating to sexually inappropriate behaviours within their areas / teams and create a culture where employees feel safe to work and raise concerns and feel listened to</li> <li>• Be proactive in putting into place any reasonable adjustments including a Workplace Safety Plan if necessary</li> <li>• Maintain confidentiality as far as possible unless there is a safeguarding concern that needs to be reported</li> <li>• Be responsible for implementing and embedding the Policy within their area of responsibility including the Respectful Resolutions Tool kit and the links to the Mutual Respect Policy</li> <li>• Ensure effective management systems are in place to minimise need/use for this policy</li> <li>• Support staff to disclose, report and manage workplace concerns within their area of responsibility</li> <li>• To ensure their staff are appropriately trained and are aware of the expected standards of behaviour and conduct</li> </ul>

Post/Group	Details
	<ul style="list-style-type: none"> <li>• To handle disciplinary matters confidentially and sensitively and take timely action as appropriate including any case assessment</li> <li>• Abide by and recognise the principles of a Restorative, Just and Learning culture</li> <li>• To assess matters objectively using the Case Assessment Framework and establish sufficient information in order to make reasonable, appropriate, defensible and fair decisions</li> <li>• To seek necessary People Team support if required</li> <li>• To keep written records and ensure appropriate confidentiality</li> <li>• To consider any learning within the context of team, departmental or organisational improvement whilst seeking to raise and address issues appropriately</li> <li>• To consider the need for any staff referral to Occupational Health</li> </ul>
Safeguarding Team	<ul style="list-style-type: none"> <li>• To provide advice and guidance in relation to sexually inappropriate behaviour concerns and signposting to, or liaising with, partners and specialist support services where appropriate</li> </ul>
Domestic abuse and sexual violence ally	<ul style="list-style-type: none"> <li>• Provide trauma informed support to employees in relation to complaints of sexually inappropriate behaviour in accordance with relevant Policy</li> <li>• Explain the options for support both internally and externally during and after the process</li> <li>• Maintain confidentiality as far as possible unless there is a safeguarding concern that would need to be reported</li> </ul>
The People Team	<ul style="list-style-type: none"> <li>• The provision of advice and support to line managers, employees and panels</li> <li>• To promote, abide by and recognise the principles of a Restorative, Just and Learning culture</li> <li>• To undertake Case Review Meetings</li> <li>• To ensure matters are dealt with in a timely, consistent and fair way</li> <li>• To maintain and update HR records in a timely fashion</li> <li>• To monitor and review HR data relating to sexually inappropriate behaviour in order to recognise risk, stop offending and support victims</li> </ul>
Staff Advice and Support Hub	<ul style="list-style-type: none"> <li>• Signpost colleagues to the appropriate support</li> </ul>
Freedom to Speak Up Guardians	<ul style="list-style-type: none"> <li>• Signpost colleagues to the appropriate support</li> <li>• Assist with the reporting process where appropriate</li> <li>• Support a culture where employees feel safe to work and raise concerns and feel listened to</li> <li>• To promote, abide by and recognise the principles of a Restorative, Just and Learning culture</li> </ul>
Violence and Aggression Group / Trust H&S Committee	<ul style="list-style-type: none"> <li>• Monitor abuse and aggression incidents reported on DATIX, including sexual behavioural incidents, and support improvements to reduce the risk.</li> <li>• Ensure Employee Relations cases reported on Datix are raised with the People Advisory Team</li> </ul>

Post/Group	Details
Behaviour Standards Panel	<ul style="list-style-type: none"> <li>Review non-employee relation abuse and aggression incidents reported on DATIX where the perpetrator has capacity, including sexual behavioural incidents, and takes action according to the Behaviour Standard process.</li> </ul>
Trade Union Representatives or Workplace Colleagues	<ul style="list-style-type: none"> <li>To support employees involved in all matters of sexualised inappropriate behaviour</li> <li>To abide by and recognise the principles of a Restorative, Just and Learning culture</li> <li>To support employees to understand and recognise how their behaviour and action should be in accordance with the Trust Values and Behaviours</li> </ul>

#### 4. INITIAL RESPONSE TO A DISCLOSURE OF SEXUALLY INAPPROPRIATE BEHAVIOUR

A person who has experienced or witnessed sexually inappropriate behaviour may choose to tell anyone in the workplace about their experience – a line manager, colleague, a Freedom to Speak Up Guardian, People Team member, a union representative etc. This is referred to as a 'disclosure'. It is important that the initial response to a disclosure is conducted appropriately and sensitively. All colleagues need to be aware of these requirements. Please see the information below on how to handle a disclosure sensitively. Colleagues may choose to formally report an instance of sexually inappropriate behaviour without having previously disclosed it and the same steps should be followed in these cases.

In the event of a disclosure of sexually inappropriate behaviour the following steps should be followed:

The colleague who receives the disclosure should ensure:

##### **A - the colleague is safe:**

- if they are unsafe or you cannot satisfy yourself that they are safe and you believe their life may be in danger, take steps to immediately call the police (if not already informed) and seek prompt advice from the Safeguarding Team or People Team
- consider any action that you or another appropriate person could take to help ensure the immediate safety of the complainant. For example, if the instance occurred in a Trust or GMS office, consider and discuss with the employee if an alternative work location would be appropriate – such as an alternative office base or agree a temporary measure of full-time remote working. If the alleged perpetrator is a visitor and remains in the office, you may need to contact security and seek advice to co-ordinate escorting the alleged perpetrator from the building

##### **B - signpost colleagues to this policy and:**

- refer them to the support described in [AC2](#) - Sexual Behaviour Policy - Help and Support
- encourage them to consider reporting their concern as set out in Section 5 below, if it has not already been reported

- make a note as soon as you are able to of any details of the disclosure, ensuring confidentiality is maintained. The complainant should be notified that you will make a note of the disclosure including the date and time the disclosure was made, who it was made to, what was disclosed (as much information as possible) and what immediate actions were taken
- if the complainant does not want to take the disclosure any further, you must respect their wishes unless;
  - a) you believe there is risk of significant harm to that person or others OR
  - b) you have a managerial or representative role organisationally (i.e. a member of the People Team) with a duty to challenge and address such behaviour

Either way talk to the complainant, understand their views and reassure them but be open about how such matters might be addressed. If you need further advice following the disclosure you could speak to someone in confidence, such as the People Team, Safeguarding Team or your own line manager.

The colleague who receives a disclosure should also follow the guidance in [AC1](#) – Sexual Behaviour Policy - How to Support a Disclosure (this includes instances where the first disclosure is also a formal report).

## 5. REPORTING SEXUALLY INAPPROPRIATE BEHAVIOUR

### 5.1 How to Report Sexually Inappropriate Behaviour

The Trust and GMS strongly encourages all colleagues to report any instances of sexually inappropriate behaviour. Early reporting is encouraged. However, there may be times when a complainant does not want to or feel able to make a report soon after an alleged incident(s). The barriers to early reporting are understood and acknowledged and a delayed decision to make a report will be respected and not treated with suspicion. There is no time limit for reports of sexually inappropriate behaviour to be received.

There are 4 routes through which sexually inappropriate behaviour may be reported to commence process under this policy (please see Section 3 for further details of specific roles and their responsibilities):

- The People Team – a complainant or witness may contact the People Team directly, or they may ask the person to whom they have disclosed to do this for them
  - Their line manager or other appropriate manager
  - Datix – a complainant or witness may complete this form themselves, or they may ask the person they have disclosed to, or a supporter, such as a Trade Union supporter, line manager or domestic abuse and sexual violence ally to assist them in completing it.
- However, be aware of the auto-notifications of the Datix system.** There is a risk that the auto-notification system in Datix will automatically notify the alleged perpetrator (e.g., if they are a line manager) or their close colleagues. This could place the complainant, colleagues or other witnesses at risk. Equally, if the alleged perpetrator is a staff member in a position of power, the reporter may feel unsafe reporting this on Datix. When reporting on Datix, please assign the incident investigation to a trusted and appropriate manager.

- Freedom To Speak Up (FTSU) Guardian – a complainant or witness may seek the assistance of a FTSU Guardian in reporting an incident

All reports should follow the reporting guidance in [AC1](#) – Sexual Behaviour Policy - How to Support a Disclosure

All reports will be taken seriously (including those that are made anonymously), regardless of the route taken.

## **5.2 Raising A Report of Sexually Inappropriate Behaviour Anonymously**

Individuals are able and encouraged to report an incident anonymously through Datix if they do not feel comfortable providing a full report. However, it is preferable for individuals making a report to identify themselves, as this makes it more likely that reports can be fully and fairly investigated and/or resolved and contributes to creating an open and trusting culture. It also means the colleague reporting the sexually inappropriate behaviour can be kept informed, where appropriate, as to the progress of their report. However, it is recognised this is not always possible. If a report is made anonymously, the steps in this policy must be followed as closely as possible based on the information provided in the disclosure.

Employees who are subject to sexually inappropriate behaviour from service users, members of the public or third parties

Employees may experience sexually inappropriate behaviour from service users, members of the public or third parties. Any such instance of work-related sexually inappropriate behaviour should be reported in line with this policy using Datix reporting it as an abuse and violence incident.

## **5.3 Reporting Sexually Inappropriate Behaviour as A Witness**

If you witness what you think may be sexually inappropriate behaviour in the workplace, you should consider the following action:

- offer support to the colleague affected by the behaviour you have witnessed, and/or let them know you feel the behaviour you witnessed is unacceptable, if it is safe to do so
- wherever possible, report the behaviour using the mechanisms outlined above

Reporting sexually inappropriate behaviour is vital to ensure that the Trust and GMS can protect its employees and meet its duty to prevent sexual harassment in the workplace. Before you report the behaviour, you may wish to approach the individual who has been subjected to the sexually inappropriate behaviour, so they are aware of your intention to report it. Whether they consent or not, you should name the person who has subjected the individual to the behaviour. Witnesses of sexually inappropriate behaviour can report it anonymously, however reporting using identifiable routes is always encouraged. Where the victim is a patient, service user or member of the public and the alleged perpetrator an employee.

You should seek to understand what is being disclosed and report this to your line manager. Decisions will have to be made based on the circumstances as to whether the

police and/or the Safeguarding Team should be informed. Consideration will also have to be made on the necessity to preserve any evidence of the alleged incident, such as the physical environment (e.g., objects, linen or furniture to remain untouched, CCTV, documentation), forensic evidence (e.g., bodily fluids) and digital evidence (e.g., photos and videos, messages etc).

The line manager should consider the circumstances from a Restorative, Just and Learning lens and if necessary complete the Case Assessment Framework, (**Trust Case Assessment Framework [B0291 AC5](#)**), seeking advice from the People Team to help support and coordinate the organisational response.

Following assessment, based on the circumstances and risks presented to either patients, the public, employees or the organisation those coordinating the response will have to recognise the potential need to follow the Disciplinary Policy.

An individual patient may make a complaint about sexualised inappropriate behaviour via our complaints process after their visit or inpatient stay. The complaints team should record this as a formal complaint on Datix, unless there is a risk that the auto-notifications on the system would alert the alleged perpetrator (e.g., an accused member of staff)

#### **5.4 Where Neither the Complainant or Alleged Perpetrator Are Employees of The Trust or GMS**

You should seek to understand what is being disclosed and report this to your line manager. Decisions will have to be made based on the circumstances as to whether the police and/or the Safeguarding Team should be informed. You must be alert to all aspects of vulnerability in relation to children, adults and abuse in all forms, including domestic abuse, when making decisions on how to proceed and who to inform.

The incident should be recorded in the patient's notes by either the victim or appropriate clinician and the matter recorded on Datix.

Ensure early advice and support is obtain if required through the Trust Safeguarding Hub on 0300 422 6279 or by using the Trust vulnerability guidance on the intranet at [Vulnerability \(gloshospitals.nhs.uk\)](https://gloshospitals.nhs.uk)

## **6. MANAGING SEXUALLY INAPPROPRIATE BEHAVIORAL REPORTS**

The Trust and GMS will ensure that any allegations of potential sexually inappropriate behaviour are managed swiftly and in line with the appropriate organisational policies and procedures.

Experiencing sexually inappropriate behaviour is extremely distressing and can be life changing. It is also distressing and a serious matter for an employee to be accused of sexually inappropriate behaviour. Based on the impact upon all concerned the Trust and GMS commits to treat all complaints seriously and proportionately in accordance with a Restorative, Just and Learning approach and both the Trust and GMS are committed to treating all complaints seriously, fairly and proportionately.



Sexually inappropriate behaviour will sometimes only be evidenced by the complainant's word against that of the alleged perpetrator. This should not prevent the complainant from speaking up.

Investigators of allegations of sexually inappropriate behaviour will take particular care about the relevance and intrusiveness of questions required to investigate these matters. This includes taking care when asking questions of a personal nature. Greater flexibility may be applied to the complainant's right to be accompanied to meetings relating to investigating the complaint, particularly by a friend or family member, in a supportive capacity.

## 6.1 Managing Reports about Staff Members

All types of inappropriate behaviour at work, sexualised or not, by Trust and GMS employees is addressed by our Mutual Respect Policy. The Mutual Respect Policy provides clarity on what steps might be taken informally, the Case Assessment Framework, Case Reviews, suspension considerations and the necessity of any subsequent formal investigation using the Disciplinary Policy.

Reports of sexually inappropriate behaviour by our employees will be assessed using the **Trust Case Assessment Framework [B0291 AC5](#)**. That assessment will be undertaken by the line manager with People Team support and if it is thought that formal investigation is required, the matter will be discussed at a Case Review meeting under the Mutual Respect Policy. In cases of sexually inappropriate behaviour consideration should be given to additional attendees at the Case Review meeting including safeguarding colleagues and those with appropriate subject matter expertise. Where circumstances dictate nothing prevents the creation of a bespoke Case Review meeting in the case of urgent matters.

Following the Case Review meeting the following actions, which are not mutually exclusive, may be considered as next steps:

- Further gathering of relevant information
- Informal resolution under the Mutual Respect Policy
- Formal investigation under the Disciplinary Policy
- notifying the police and/or other relevant agencies, including the alleged perpetrator's employers if their employer is not the Trust or GMS

Where the alleged perpetrator is a doctor or dentist any conduct investigation will also be under the Disciplinary Policy with reference to MHPS where appropriate.

There are additional considerations and adjustments when the investigation relates to sexually inappropriate behaviour. The considerations and adjustments listed below may apply to action under the relevant policy:

- The appointment of an externally sourced investigator, with the relevant skills and experience, independent of the Trust or GMS
- The appointment of a subject matter expert to support the investigating officer and/or case manager
- The application of greater flexibility to the complainant's right to be accompanied, particularly by a friend or family member in a supportive capacity
- The discussion, where complainants and alleged perpetrators work together, of temporary changes to working arrangements. It is not normal practice to move a



complainant as a first step, unless they have requested this and the Trust and GMS will consider moving alleged perpetrators if appropriate

- Provision of separate and independent updates to both the complainant who has reported sexually inappropriate behaviour and the alleged perpetrator from the case manager or link person throughout any formal process
- Temporary adjustments of the attendance and/or capability process where there are concerns regarding attendance and/or capability of the complainant or an alleged perpetrator, may be considered by the case/ commissioning manager and/or line manager.

## **6.2 Managing Allegations Not About Employees - The Behaviour Standards Panel**

This Panel enforces our Behaviour Standards Charter and our local Sexual Safety Charter where the allegations are about patients and members of the public. The Panel operates under the [Abuse, aggression and Violence Policy](#) and has a range of responses available which include a formal warning letter, a Behaviour Order and/or seeking an injunction. The Panel can restrict a perpetrators physical access to our buildings and sites and include strict conditions for contact with our services.

The Panel has representation from Risk, Health and Safety, Safeguarding Adults, Children and Infants, Security, Equality, Diversity and Inclusion, the Homeless team and Substance Abuse staff. The Panel members will work with partner agencies and our Legal Team where necessary and may issue a warning or order to protect staff or patient safety, even if the incident is under investigation via the Safeguarding Team or police, and so long as this does not prejudice those proceedings.

The Panel will also consider any support that may be required if the victim is a staff member.

## **7. PRESERVING EVIDENCE**

If you are a victim, we would encourage you to make a note or record of what happened to you, including the date and time, names and any known witnesses. This can be helpful in recording details and especially if you find it distressing to talk through what happened.

Evidence is vital to an investigation and, in more serious cases of sexual assault this will be collated by the Police. Witness statements may be collated from the complainant, witnesses and the accused in an internal or external investigation. The vulnerability pages on the intranet describe the process by which evidence may be collected and used. Managers should refer to these if relevant to ensure that evidence is preserved.

## **8. SUPPORT**

Managing and supporting disclosures and reports of sexually inappropriate behaviour is challenging for all parties involved. The Trust and GMS will offer trauma informed support to the complainant, alleged perpetrator and any witnesses as well as line managers and anyone else affected by the disclosure. A range of internal and external support services are available ([AC2](#) - Sexual Behaviour Policy - Help and Support).

Incidents of sexually inappropriate behaviour can have long-term impacts on those who directly experience them as well as their friends and family. A complainant may need adjustments to support them to fulfil their role and workload, especially while any investigation is ongoing. The complainant should have a conversation with their line manager (or nominated person, which may include an occupational health professional) to review matters such as their current working arrangements and consider whether any additional support is needed, for example, by using the flexible working or special leave policies.

Where concerns regarding attendance and/or capability of the complainant may be connected to a sexually inappropriate behaviour incident, adjustments to the attendance and/or capability process will be considered by the individual's line manager and with the People Team. Any adjustments should be recorded and reviewed at least monthly, documented and shared with the relevant parties such as the individual and/or their line manager and their trade union representative.

If sickness absence is caused by sexually inappropriate behaviour at work, and where occupational sick pay reduces to half or nil pay, colleagues may be entitled to receive Injury Allowance. This tops up your income (including certain welfare benefits) to 85% of your usual pay during the absence for up to 12 months. Section 22 of the [NHS Terms and Conditions Handbook](#) provides more information about Injury Allowance.

It is recognised that when receiving a disclosure or complaint of sexually inappropriate behaviour, it may be distressing or triggering for the individual who receives it. If this is the case you are able to seek support internally via the [Staff Psychology Service](#), Staff Advice and Support Hub (ext. 2020), and the [Employee Assistance Programme](#) (03303 800658) as well via self-referral.

If the individual subjected to or reporting the alleged sexually inappropriate behaviour does not want further action to be taken, sensitive consideration will be given. However, the Trust and GMS will determine what action it ought to take, in line with this policy, independently of a report of sexually inappropriate behaviour. This may involve wider agencies such as the local authority or police if appropriate.

If the complainant is a patient they may need support during their stay in hospital, particularly if there is an increased risk of self-harm. A risk assessment must be completed and added to the patient's clinical records. The Safeguarding Team can assist managers in identifying support services for the patient during their stay and beyond. Information is also available on the Safeguarding pages for [caring for victims of sexual assault](#). Clinical teams should use trauma-informed care practices to support any patient who is traumatised by past experiences or a current event. The patient may request to be cared for by all male or all female staff following an alleged sexual incident, and, as far as possible, this should be respected. If this means moving the patient to another ward the patient should be consulted. When being discharged from hospital, staff may wish to introduce the patient to the Trust Family Liaison Manager who will be their point of contact for any ongoing internal investigation/complaint.

A staff member complainant may choose to stay in work, and so consideration will need to be given to how their safety is ensured. If the alleged perpetrator is a patient, this may mean moving the patient to another ward where possible, to allow the victim to remain in a familiar environment with their workplace peers and familiar support network. Where a patient can't be moved, it may mean redeploying the victim to another ward / department or

to home working. This should always be discussed with the victim as it's important that they are not made to feel victimised by the redeployment.

It can be extremely distressing to be accused of improper conduct and the alleged perpetrator should also be offered support. If the accused is a staff member, a personal risk assessment will be required. A referral to Occupational health, their GP or a self-referral to the Crisis Team may also be required. Staff can also be signposted to their union, the employee assistance programme and the Staff Advice and Support Hub. It is important that the person accused is not pre-judged before the outcome of the investigation. If the accused is a patient, an enhanced care risk assessment should be completed.

## **9. ACTION AFTER AN INVESTIGATION**

The outcomes will follow the relevant Trust and GMS policy.

The Trust and GMS recognises that in some cases it may be appropriate to signpost perpetrators to specialist services if they genuinely want to change their behaviour – to be agreed on a case-by-case basis.

If an agency worker is found to be in breach of this policy and other relevant policies such as the Mutual Respect and/or Disciplinary policies after an investigation, their contract may be terminated immediately. The Control of Contracts Policy will be relevant ([B0621](#))

To provide assurance the matter has been addressed appropriately, the Trust or GMS may share some aspects of an investigation and/or their outcomes with the complainant. This will be considered on a case-by-case basis. Any sharing of information must be compliant with relevant data protection laws and align to the Trust Information Governance Policy.

Trust and GMS employees who raise a report of sexually inappropriate behaviour in good faith (whether founded or not) will always be supported. An employee who is found to have deliberately made false allegations of a vexatious nature may be subject to disciplinary action.

The outcome may vary depending of the route(s) of the investigation.

## **10. REPORTING TO STATUTORY REGULATORS**

The Trust and GMS reserve the right and may be obliged to report an employee holding a professional registration of any description to their relevant statutory regulator (for example, Nursing and Midwifery Council, General Medical Council, The Health and Care Professions Council, the Law Society) in accordance with their relevant professional codes of conduct.

## **11. POLICE INVOLVEMENT**

A disclosure of sexually inappropriate behaviour may indicate a criminal act. In such a case, the Trust People team will be responsible for ensuring that any allegations received that may be criminal in nature are considered for police referral. Where possible a conversation

with the complainant on their wish for police involvement should precede any referral. If you believe there is a threat to life, you should call the police.

The People Team routinely coordinate with the Safeguarding team to review cases and consider the need of escalation to relevant authorities. Referrals may be made where there is concern that the allegations may constitute a criminal act. The Trust and GMS will ensure that matters are referred to the wider authorities such as the relevant Local Authority Designated Officer and/or the relevant local authority Safeguarding team where appropriate.

Where an internal investigation is taking place, the People Team will consult with the police at agreed intervals about concurrent investigation processes to ensure the criminal investigation/process is not prejudiced.

Complainants can report sexually inappropriate behaviour to the police directly. They may express a wish that they do not want to prosecute, or they wish to report and think about prosecution later. These are matters that must be discussed with the police directly by the complainant.

## **12. CONFIDENTIALITY**

Confidentiality covered by this policy will be maintained wherever possible, subject to legal and statutory safeguarding obligations and duties to protect people. Details of investigations and complaints must only be disclosed on a 'need to know' basis. Unauthorised disclosure of confidential information may result in disciplinary action, as may any concerns about attempts to influence or intimidate a witness.

The Trust and GMS does not use confidentiality or non-disclosure agreements to prevent reporting of sexually inappropriate behaviour or whistleblowing.

Data will be collated centrally by the People Team and only shared on a need-to-know basis to inform the investigations and preventative actions. Some anonymised data will be shared in Trust governance meetings to facilitate oversight of this policy such as the number of cases, outcomes and overall summary data. This will not include personally identifiable data but will provide assurance that allegations relating to sexually inappropriate behaviour are being managed accordingly.

Confidentiality obligations apply to anyone who is involved including the alleged perpetrator, the complainant, witnesses and line managers. The matter should not be discussed with anyone else other than the investigating officer, People Team colleagues directly involved, and where applicable, trade union representatives. This does not mean that support should not or could not be sought, acknowledging that talking about the event may help some people. However, this must be done adhering to confidentiality obligations.

## **13. TRAINING**

All staff are encouraged to complete the e-learning on understanding sexually inappropriate behaviour in the workplace which is accessible via ESR as *Understanding sexual misconduct in the workplace*.

## 14. EQUALITY IMPACT ASSESSMENT (EIA)

See [Equality Impact Assessment \(EIA\)](#) document.

## 15. MONITORING OF COMPLIANCE

Sexually inappropriate behaviour reported on DATIX will be monitored by the Violence and Aggression Group, and the Trust Health and Safety Committee. Human Resources will collate and monitor reports received via HR and Freedom to Speak Up.

Do the systems or processes in this document have to be monitored in line with national, regional or Trust requirements?
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YES
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Monitoring requirements and methodology	Frequency	Further actions
Sexually inappropriate behaviour reported to the People Team and Freedom to Speak Up will be collated and monitored by the People Team	Continuous	Learning to be used to improve the response and policy
Sexually inappropriate behaviour reported on DATIX will be monitored by the Violence and Aggression Group, and the Trust Health and Safety Committee	Quarterly	Learning to be used to improve the response and policy

## 16. REFERENCES

GHNHSFT Internet; [Pathology](#) or Great Britain. Command Papers. (1991). Health of the nation (Cm 1523). London: HMSO

NICE Guidelines

Other relevant regulations

## Document Profile

Trust Policy Assurance Group (TPAG) require this information for approval and governance purpose. All fields must be fully completed prior to submission. Incomplete submissions will be rejected by the Policy Team. Please follow the guidance below.

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## EQUALITY IMPACT ASSESSMENT (EIA)

Date Completed	January 2025
Completed by	Simon Atkinson HR Investigation and Support Officer

<u>Age</u>		
X		
Adverse	Neutral	Positive
Consider people of different age groups. Think about the built environment, routines and practice.		

<u>Disability</u>		
X		
Adverse	Neutral	Positive
Consider both able and disabled people, and different types of disability. Think about accessibility of the built environment, routines, practice and communication.		

Protected characteristic: <u>Gender Reassignment</u>		
X		
Adverse	Neutral	Positive
Consider people who are transgender, or are transitioning. Think about routines, practice, communication and use of language.		

Protected characteristic: <u>Marriage and Civil Partnership</u>		
X		
Adverse	Neutral	Positive
Particularly relevant for issues concerning employment. Think about rules, practice, routines and use of language.		

<u>Pregnancy and Maternity</u>		
X		
Adverse	Neutral	Positive
Particularly relevant in the workplace is to consider people who are pregnant or on Maternity or Adoption Leave. Think about routines, practice and opportunities.		

<u>Race</u>		
X		
Adverse	Neutral	Positive
Race can mean colour, nationality, ethnic and national origins, as well as people belonging to ethnic and racial groups. A racial group can be made up of two or more distinct racial groups e.g., British Jews; Romany Gypsies; Irish Travellers. Think about routines, practice and communication.		

<u>Religion or belief/no belief</u>		
X		
Adverse	Neutral	Positive
Consider people who follow religious practices or traditions. This also applies to philosophical beliefs which are cogent, serious and apply to an important aspect of human life or behaviour. Think about routines, practice, dietary issues and use of language.		

<u>Sex</u>		
X		
Adverse	Neutral	Positive
Consider people who are men, women, boys and girls. Discrimination could be a one-off act or as a result of a document/rule. Think about procedures, rules, routines, language and behaviour, built environment.		



<u>Sexual Orientation</u>		
X		
Adverse	Neutral	Positive
Consider people who are lesbian, gay and bisexual. This also covers how people choose to express their sexual orientation, such as through their appearance or places they visit. Think about practice, the environment and use of language.		

Other factors to be considered, not included as a 'Protected Characteristic'		
X		
Adverse	Neutral	Positive
Consider people with other differences which make them susceptible to discrimination e.g., socio-economic factors; gender and non-binary; marital status (such as divorced, single). Think about routines, practice, protocol, language.		

If Green/positive or Amber/neutral scores have been identified across all sections, **the EIA is complete.**

If **one or more Red/adverse scores have been identified**, go to Section 3 and complete it in collaboration with the Local Quality Assurance Group.

### Identified potential adverse impact – full evaluation

Please select all protected characteristics that are at risk of being adversely impacted.

Protected Characteristic	Adverse
Age	✓
Disability	✓
Gender Reassignment	✓
Marriage & Civil Partnership	✓
Pregnancy & Maternity	✓
Race	✓
Religion & Belief/No Belief	✓
Sex	✓
Sexual Orientation	✓
Other factors not covered by the Equality Act 2010	<input type="checkbox"/>
Provide details of how the policy/procedural document may adversely impact on patients, carers, visitors or staff in relation to the characteristics you have identified:	
<p>As of March 2024, the workforce comprises 22.1% staff from minority ethnic groups, 3.57% of staff who have declared a disability or long-term health condition, 78% who are female, and 21.8% who are male. Considering this work-force diversity, the policy has been carefully reviewed to ensure it does not adversely impact any group based on protected characteristics.</p> <p>The policy is designed to be inclusive and equitable whilst supporting the needs of staff across all demographics, including those from minority groups, individuals with disabilities, and all gender identities, to prevent any disproportionate or unintended disadvantages.</p> <p>The content of the 2024 NHS Resolution report on the experience of ethnic minority practitioners and concerns. The report highlights the higher rates of concerns raised against</p>	

those from an ethnic minority background with participants describing a lack of fairness, poor understanding of the actual working environment by managers/HR contributing to an inability to empathise or make decisions holistically. Further examples relating to racial discrimination and extenuating circumstances not being considered

NHS England research indicates that you are proportionately more likely to be subject to a disciplinary process if you are from an ethnic minority background and that following formal investigation often further action is not necessary

In terms of patients and visitors this policy does nothing more than be explicit as to the organisational expectations when on Trust premises, support legislation and provide options and clarity of response.

**How will you engage/how have you engaged with others to explore whether potential adverse impact can be removed or mitigated?**

For example: discussion with colleagues; meeting with people who have the protected characteristic/s; consulting with local groups/experts; seeking advice from the Diversity Network or PALS.

Significant consultation on the proposed updates to this policy has already taken place. That consultation has included numerous service users as well as the Health and Safety Committee and crucially the Trust Inclusion Network Group. There have been no concerns raised about differential or disproportionate impacts on individuals with protected characteristics. The policy will also be shared with the Equality Delivery Steering Group (EDISG), and the People and Organisation Delivery Group (PODG) for approval.

**What changes have you made to the policy/procedural document, or what steps you will take, to ensure that group/s potentially adversely affected will be supported following the launch and implementation of this policy/procedural document:**

The EIA identified no significant adverse impacts on any specific group. However, mechanisms have been put in place to monitor and address any issues that may arise during implementation. As part of the RJL approach the People Directorate will be collating any learning relating to the use, impact and effectiveness of this policy. Changes will be considered and consulted on with the relevant groups highlighted in this EIA.

Crucial to a response of disproportionality is a quality assessment of any given circumstances. The links to Mutual Respect Policy are clear and new to that policy is a Case Assessment framework supported by a reflective piece from those involved in any trigger event. This will help address the concerns of disconnection, understanding and proportionality of response. Whilst not part of wider policy at this time the People Team will run a weekly Case Review Meeting to discuss and agree the appropriateness and necessity for all HR cases to progress to formal investigation. This will include assessments using this policy. This group will have representation from the operational side, the People Team and the EDI network and is an important step in the cultural sea change of moving to a RJLC organisationally

Date Completed	29 January 2025
Completed by	Simon Atkinson

## Action Card 1 - Sexual Behaviour – How to support a disclosure

For Use By: All staff and managers

Liaises With: Wellbeing Hub, The People Team, Safeguarding, Risk, Health and Safety

### Rationale:

This action card provides information on how to support staff during a disclosure of a sexually inappropriate behaviour incident

### Create a safe space

Talk in a place that is confidential, the individual disclosing an experience needs to feel safe during any disclosure. They may be concerned about who can hear the conversation or may be aware one is taking place. Choose a place where others will not interrupt or overhear the conversation.

They may feel overwhelmed during the conversation and need to take a break. Or may feel traumatised by the room / location (if for example it is connected to the experience) or by a locked door. Ask them where they would feel safe. Some may prefer to walk or sit somewhere quiet outside.

### Listening and taking a trauma-informed approach

Remove distractions such as your phone so that you are paying full attention. Your body language will convey a lot, have an open posture and give non-verbal cues such as nodding. Your role is to actively listen to the disclosure, be sensitive and respectful. Your role isn't to providing psychological support or counselling, nor to find an immediate solution or to be the investigator.

Being trauma-informed helps to reduce the trauma, guilt and self-blame a person may feeling. You should validate their feelings by:

- acknowledging the courage, it can take to disclose sensitive or personal information
- showing appreciation for the person putting their trust in you
- trusting and believing the account
- affirming the situation is not their fault
- not placing blame or wrongdoing on a person or system
- expressing your support and willingness to listen
- acknowledging emotions and experiences; use phrases like "I hear you"
- understanding the impact the person may be experiencing as a result of sexual misconduct

Avoid making assumptions, interrupting, being judgemental and pushing for details which they may not feel ready to share. It's important that the person doesn't feel their experience is being minimised, their choices criticised or the events disbelieved. Do not question why they are only disclosing an incident sometime after the fact, nor why they did not defend themselves.

Be aware and respectful of cultural sensitivities and differences which may influence communication styles or perspectives, both yours and the person who is seeking your support.

## Action Card 1 - Sexual Behaviour – How to support a disclosure

For Use By: All staff and managers

Liaises With: Wellbeing Hub, The People Team, Safeguarding, Risk, Health and Safety

If you wish to take notes, ask the person if they are ok with this. If they agree, be careful to ensure you remain actively listening while note taking and ensure you have somewhere secure to keep the information.

### Checking their Safety

You must ask whether the person feels safe. Ask if they are still experiencing, or worried about experiencing further behaviours from the alleged perpetrator or others e.g.,

- How safe do you feel at work?
- Do you feel, or worry this could happen again to you or someone else?
- Has or can this person come into your personal workspace?
- Can this person approach you outside of work?

Consider together any immediate actions that you or another appropriate person could take to help them feel safe (e.g., remote working).

**If they are unsafe and/or you cannot be assured they are safe and you believe their life may be in danger, take steps to immediately call the police (if not already informed) and seek immediate advice from the People Team.**

Where there are safeguarding concerns (for example if there is a concern that someone is being co-coerced or controlled or where there are mental capacity concerns), contact the Safeguarding Team or the People Team to seek further advice.

### Sharing information with others

As this is a disclosure not a formal report, you should not ordinarily share any information with others without the victim's consent. However, if you believe that the victim or another continue to be at risk of harm you might have to consider sharing information without consent. That might be relevant if there are safeguarding concerns or a threat to life. In some circumstances the reasonable duty of care the Trust has to all employees might be compromised if action is not taken to ensure others are safe and protected from sexual misconduct. Engage with the victim and explain your concerns if you believe this to be the case and of your intention to share the information, as well as who with.

### Agree next steps

Reflect back with the individual what you have heard to make sure that you have understood the issue. This will help you to support the person by taking any next steps they wish to take to address the misconduct or abuse and/or access any support they may need.

The person needs to feel empowered and in control of the next steps. You can do this by:

- asking them if they want anyone else to be part of the conversation
- allowing the colleague to share at their own pace
- following their lead and letting them steer the conversation
- seeking permission before you raise potentially sensitive topics

## Action Card 1 - Sexual Behaviour – How to support a disclosure

For Use By: All staff and managers

Liaises With: Wellbeing Hub, The People Team, Safeguarding, Risk, Health and Safety

- respecting their decisions, including if they choose to share certain aspects and not others
- agreeing together the next steps and any follow-up actions including contact methods and touch points

Consider together any action that you or another appropriate person could take to help.

- If this first disclosure is not also a formal report, encourage them to consider formally reporting matters
- refer to the [national NHS support webpage](#)

**If they do not want to take the disclosure any further, unless there are safeguarding or duty of care concerns, you must respect their wishes.** However, if you need support or advice following the disclosure you could speak to someone in confidence, such as the People Team or your own line manager.

### Support

You should offer options and signpost them to support that they can access (Refer to [AC2](#) – Sexual Behaviour Help and Support).

### Support for you following receipt of a disclosure

Having a secondary experience to someone else's trauma is called vicarious trauma. You could also be at risk of being retraumatised when managing or hearing a disclosure of sexual misconduct due to your own personal experiences.

Signs that you might be experiencing vicarious trauma include:

- experiencing shame, guilt and worthlessness
- experiencing flashbacks or negative thoughts from your own traumatic experience
- dissociating or feeling disconnected from reality
- difficulty sleeping, eating or concentrating
- anxiety, panic, low mood and/or depression
- avoidance of activities or using alcohol, drugs or substances

It is important that you look after yourself too.

You can:

- access support services including through your organisation or externally through charities or NHS services
- check in with others (being careful not to share personal details of what you have been told)

If you have been supporting someone's disclosure, it is ok to take some time following the discussion.

## Action Card 2 - Sexual Behaviour - Help and Support

For Use By: All Staff and Managers

Liaises With: Wellbeing Hub, The People Team, Safeguarding, Risk, Health and Safety

### Rationale:

This document provides information on the support available for victims and witnesses who have experienced sexually inappropriate behaviour as well support for the alleged perpetrator.

### Where to get Urgent Help for Mental Health

The mental health charity Mind has information on [ways to help yourself cope during a crisis](#). This includes calming exercises and a tool to get you through the next few hours.

**Immediate action required: Call 999 or go to A&E now if:**

- **Yours or someone's life is at risk – for example from a serious injury to themselves or having taken an overdose**
- **You do not feel you keep yourself safe**

You can also call 111 and many be able to speak to a trained mental health professional on the phone or ask for an urgent GP appointment.

### Internal support and partner organisations

#### Gloucestershire Hospitals NHS Foundation Trust Employee Assistance Programme (EAP)

The Trust operates an EAP through Vivup. This line is available 24/7 and can provide you with some initial support and signposting. Telephone on **03303 800658**

### Staff Advise & Support Hub

The Hub is team of professionals available to listen and signpost to the right support options for you. The Hub is open from 9am to 5pm, Monday to Friday. You can leave a message outside of these hours on voicemail or email and someone will get back to you the next working day.

If your query is outside of operating hours and you think it is urgent and cannot wait until the next working day, you can contact our Employee Assistance Programme provider, Vivup (see above)

Drop in to the Service, 1<sup>st</sup> floor Redwood Education, Gloucester Royal Hospital. Centre Mo-Fri, 9-5.

Telephone: [0300 422 2020](tel:03004222020)

Email: [ghn-tr.2020@nhs.net](mailto:ghn-tr.2020@nhs.net)

## Action Card 2 - Sexual Behaviour - Help and Support

For Use By: All Staff and Managers

Liaises With: Wellbeing Hub, The People Team, Safeguarding, Risk, Health and Safety

### Domestic Abuse and Sexual Violence Allies (DASVAs)

These are employees who have had additional training on DASV to provide peer support to employees who are impacted by workplace sexual misconduct and/or domestic abuse. They can support colleagues to navigate internal and external support services, and advise on how to access organisational HR and OD processes and how to report an incident. The Safeguarding team can connect you with the Trust's DASVA. Contact extension 6279, or 6925.

### Staff Psychology Service

Provides individual or team support and can offer individual support sessions to staff affected by sexual safety incidents. Email [ghn.tr.staffpsychology@nhs.net](mailto:ghn.tr.staffpsychology@nhs.net) or contact via the Staff Advise & Support Hub (see above).

### Freedom to Speak up Guardians (FTSU)

Our FTSU Guardians can offer advice and signpost you to support. Contact details are on the [FTSU pages](#).

### Trade Union representatives

Provide advice and support to their members when they have issues at work.

### External support and partner organisations

- [ACAS](#): for information and advice on all aspects of workplace relations and employment law.
- [Citizens Advice](#): provide information about your legal rights in the workplace if you are experiencing sexual harassment.
- [Equality Advisory and Support Service](#): the EASS helpline advises and assists individuals on issues relating to equality and human rights. EASS can also accept referrals from organisations which, due to capacity or funding issues, are unable to provide face-to-face advice to local users of their services.
- [Equality and Human Rights Commission](#): technical guidance on sexual harassment and other forms of harassment at work.
- [General Medical Council: what to do if you think you have been subject to sexual misconduct by a doctor](#): a resource for patients and colleagues.
- [Getting help for domestic violence and abuse](#): NHS.uk provides practical advice and help to recognise the signs and where to get help.
- [Health & Care Professions Council](#): sexual safety hub provides help and guidance about making a report to that organisation.
- [Help after rape and sexual assault](#): information on the NHS website about where to find support if you have been sexually assaulted, raped or abused.



## Action Card 2 - Sexual Behaviour - Help and Support

For Use By: All Staff and Managers

Liaises With: Wellbeing Hub, The People Team, Safeguarding, Risk, Health and Safety

- Ministry of Justice [Victim and witness services](#): provides a directory of available specialist support organisations.
- [Karma Nirvana](#) Supporting victims of honour-based abuse and forced marriage. Phone: 0800 5999 247. Email: [support@karmanirvana.org.uk](mailto:support@karmanirvana.org.uk). More information including opening hours can be found online at <https://karmanirvana.org.uk>
- [Protect](#): for information and advice on whistleblowing.
- [Men's Advice Line](#) - the helpline for male victims of domestic abuse. Offers non-judgemental emotional support, practical advice and information. Telephone Call 0808 8010327 (free from landlines and mobile phones) Monday-Friday 9am-8pm. Email support only : [info@mensadvice.org.uk](mailto:info@mensadvice.org.uk) Saturdays and Sundays 10am-12pm and 4-6pm Webchat: via <https://mensadvice.org.uk> Wednesdays, Thursdays and Fridays 10am-11am and 3-4pm
- [Rape and Sexual Abuse Support Line](#): 24/7 helpline provided by Rape Crisis England and Wales 365 days a year for immediate support for anyone affected by rape, child sexual abuse, sexual assault, sexual harassment or any other form of sexual violence. This includes people who have experienced sexual violence or abuse themselves, as well as their friends, family or anyone else who is trying to support them. Phone: 0808 802 9999, Open 24 hours, every day of the year. [Live chat service](#)
- [Rights of Women. Sexual harassment at work advice](#): an advice line specifically for women who experience sexual harassment at work.
- [Samaritans](#): support for anyone who's struggling to cope and who needs someone to listen without judgement or pressure.
- [Sexual Assault Referral Centres \(SARCs\)](#): offer medical, practical and emotional support to anyone who has been raped, sexually assaulted or abused. SARCs have specially trained doctors, nurses and support workers.
- [Supporting a survivor of sexual violence](#): advice from Rape Crisis about how to support a survivor of sexual violence.
- [Surviving in Scrubs](#): lived experience group committed to campaigning against sexism, misogyny and abuse in healthcare.
- [SurvivorsUK](#): provide support to male and non-binary survivors of sexual violence, providing counselling, practical help and community on your healing journey. Abuse online helpline can be found at [www.survivorsuk.org](http://www.survivorsuk.org) or Email: [help@survivorsuk.org](mailto:help@survivorsuk.org), SMS: 020 3322 1860, WhatsApp: 07491 816064
- The [National Male Survivor Helpline](#) is a confidential helpline for male victims of sexual violence and abuse. They also provide emotional support via telephone, SMS (text), live chat and email. Phone: 0808 800 5005, Email: [support@safeline.org.uk](mailto:support@safeline.org.uk), Text: 07860 065187. Live chat service via our website at [www.safeline.org.uk/contact-us/](http://www.safeline.org.uk/contact-us/). More information including opening hours can be found on [www.safeline.org.uk](http://www.safeline.org.uk)
- [The Survivors Trust](#): has 120 member organisations based in the UK and Ireland which provide specialist support for women, men and children who have survived rape, sexual violence or childhood sexual abuse. Free, confidential national helpline 0808 801 0818 or text: 07860 022 956.



## Action Card 2 - Sexual Behaviour - Help and Support

For Use By: All Staff and Managers

Liaises With: Wellbeing Hub, The People Team, Safeguarding, Risk, Health and Safety

- [Victim Support](#): provide specialist help to support victims of crime to cope and move on to the point where they feel they are back on track with their lives. Telephone: 0808 16 89 111. Live chat: [victimsupport.org.uk/live-chat](https://victimsupport.org.uk/live-chat). My Support Space: [mysupportspace.org.uk/MoJ](https://mysupportspace.org.uk/MoJ)
- [Women's Aid](#). Information including opening hours can be found online at <https://www.womensaid.org.uk>. Webchat service: [chat.womensaid.org.uk](https://chat.womensaid.org.uk)

### Support if you are worried about hurting someone

If you have concerns that you may commit sexual abuse or sexual violence yourself or are concerned about another person's behaviour, or a child's behaviour, you can contact the Stop It Now helpline. Telephone: 0808 1000 900. More information including opening hours can be found online at [Stop It Now](#).

If you are worried about domestic abuse and hurting the ones you love while staying at home, call the Respect Phoneline for support and help to manage your behaviour. Telephone: 0808 8024040. More information including opening hours can be found online at [Respect Phoneline](#).

### Witness Service Support

Citizens Advice provide free, independent emotional and practical support to victims and witnesses of crime required to attend court to give evidence. [Self-referrals can be made online](#) on the Citizens Advice website.

### Action Card 3 - Sexual Behaviour – Case Review Meeting

For Use By: All Staff and Managers

Liaises With: The People Team

#### Case Review Meeting

A Case Review Meeting should be convened for reported cases of sexual misconduct where formal investigation is thought appropriate. It should consider:

- the issue raised including any potential harm experienced by the individual raising the concern or complaint (if known)
- the requirement for any third-party referrals who may need to provide expertise, advice and support, for example, safeguarding and other subject matter experts (see below)
- the immediate support available for the individual who has been subject to the behaviour, the complainant (and/or individual raising the concern) and the alleged perpetrator
- whether a risk assessment is required to consider any potential further harm from the alleged perpetrator to the individual or others
- which policy and/or procedure(s) apply to help manage the concern or complaint within the immediately defined next steps
- whether there is any other intelligence about the alleged perpetrator that may be relevant
- agreement of any communications that may be necessary to protect individuals or others involved, or to notify other parties who may need to be aware (line managers, the immediate team, other departments)
- whether the police need to be contacted and if the complainant has agreed to this.

Case Review Meeting considerations	Yes (tick)
Has immediate support been offered to the complainant/alleged perpetrator/witness(es)?	
Is the complainant safe, for example, has consideration been given to alternative working arrangements if the complainant and perpetrator are co-located/work in the same team? Even, if the perpetrator has been suspended, or relocated, it may still be traumatic to be working in a team whilst colleagues are directly involved in an investigation.	
Identify the facts known at the point that a report of sexual misconduct has been raised: <ul style="list-style-type: none"> <li>• how was the complaint disclosed and reported</li> <li>• names of all individuals involved, employment details etc</li> <li>• date of incident</li> <li>• location (if applicable)</li> <li>• have statements been received/requested from the complainant/witnesses/alleged perpetrator, where appropriate?</li> </ul>	
Has the complainant identified a preferred outcome?	

### Action Card 3 - Sexual Behaviour – Case Review Meeting

For Use By: All Staff and Managers

Liaises With: The People Team

If an internal employee, are there any similar live, or relevant, cases on file relating to the alleged perpetrator?	
Are there any aggravating factors, such as the abuse of power over a more junior colleague that need to be taken into account?	
Identify those who 'need to know', for example, relevant line managers, the People Team, SMEs, external employer (in the scenario where one of the parties works for a different organisation). If the allegation is against a doctor or dentist a representative of the Medical Directorate should be consulted.	
Have the relevant parties' line managers been notified?	
Is there a requirement to consult an SME, for example, safeguarding, legal etc? If so, record their advice	
Following advice, is there a requirement to refer on to a third-party for their input, for example, police, LADO referral? Identify who will undertake a risk assessment to ensure there is no further harm from alleged perpetrator	
Identify the policy that the case will be managed under, for example, disciplinary etc. if known at this time	
Where it is agreed that formal investigation is required ensure consideration is given to the arrangements for where both parties will work if co-located/same team (including consideration of suspension or temporary alternative working arrangements of the alleged perpetrator if required), line management arrangements etc	
Where it is agreed that a police or local authority LADO referral is required, identify when it is appropriate to commence an internal HR and OD investigation	
Agree who will be the key point of contact for the complainant and alleged perpetrator	

### Subject matter experts

Subject matter experts (SMEs) may be asked to support the assessment and investigation of allegations of sexual misconduct.

NHS England maintains a panel of internal and external SMEs that can be accessed by those with defined roles in the screening and investigation process. Complaints and cases will differ in their detail, so a range of expertise and experience will be required. Knowledge and expertise may include some of the areas covered below, that can be accessed to provide specialist advice in sexual misconduct cases.

### Knowledge

- trauma informed interviewing/investigation techniques
- research led/informed case reporting
- risk management
- understanding of issues impacting particularly vulnerable groups

### Action Card 3 - Sexual Behaviour – Case Review Meeting

For Use By: All Staff and Managers

Liaises With: The People Team

#### Skills

- ability to identify types of sexual misconduct
- ability to understand impacts on vulnerable groups
- ability to undertake extensive personal interviews to elicit better information and to reduce the potential for retraumatising
- ability to overcome barriers to disclosure while supporting employee wellbeing

#### Experience of

- undertaking or advising on trauma informed employment led investigations
- supporting individuals and/or teams on a trauma-informed basis
- equality, diversity and inclusion implications within sexual misconduct investigations/cases and understanding vulnerabilities of particular groups
- using subject matter expertise to aid investigations and improve decision making