

Procedure for Managing Allegations Against Staff in Relation to Safeguarding of Children and Young People and Vulnerable Adults

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EQUALITY IMPACT ASSESSMENT

This document has been assessed for equality impact.

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1.0 INTRODUCTION

1.1 Castle Point and Rochford Commissioning Group (CCG) aspires to the highest standards of behaviour and clinical competence to ensure that safe procedures are applied to all relationships with patients, their carers, public, and staff. The CCG is required to fulfil its legal duties under the Children Act 1989, Section 11 of the Children Act 2004, Statutory Guidance on promoting the health and well-being of Looked After Children statutory responsibilities in *Working Together to Safeguard Children*, (HM Government), and the Care Act 2014 and the Mental Capacity Act 2005. All staff working within the CCG's health economy that commission/ provide children's and adults' services must make safeguarding and promoting the welfare children and adults at risk an integral part of the care they offer.

1.2 This policy outlines how, as a commissioning organisation, the CCG will effectively fulfil its legal duties and statutory responsibilities with regard to managing allegations against staff.

This policy applies to all CCG staff, and anyone working on behalf of, or undertaking work or volunteering for the CCG, including GPs. Each GP Practice is responsible for ensuring that they have a policy for managing any allegations against the staff that they employ.

The policy provides a framework to ensure appropriate actions are taken to manage allegations against staff, regardless of whether they are made in the course of carrying out their duties for the CCG or as a result of potential safeguarding concerns within their private life.

1.3 This policy applies to managing safeguarding allegations against staff which relate to children and vulnerable adults and is underpinned by the **Care Act (2014)**, the **Children Act (1989 and 2004)**, and **Safeguarding Children, Young People and Adults at Risk in the NHS: Safeguarding Accountability and Assurance Framework 2019** which outline the need for CCGs to have clear policies and arrangements in place for dealing with allegations against people who work with children and adults.

Statutory Guidance **Working Together to Safeguard Children** additionally sets out expectations that all statutory organisations will have a procedure for managing allegations against staff and gives guidance on the role of the Local Authority Designated Officer and organisational responsibility to report an allegation.

This Policy is to be used in conjunction with

- Castle Point & Rochford CCG –Safeguarding Children and Adult Policy

- The Southend Essex and Thurrock (SET) Safeguarding and Child protection Procedures
- Statutory Guidance- Working Together to Safeguard Children
<http://www.workingtogetheronline.co.uk/index.html>
- Southend Thurrock Essex (SET)Safeguarding and Child Protection Procedures
www.escb.org.uk
- Southend Essex and Thurrock (SET) Safeguarding Adult Guidance.
- NICE clinical guideline 89 When to suspect child maltreatment
<http://www.nice.org.uk/nicemedia/pdf/CG89NICEGuideline.pdf>
- Royal College of General Practitioners <http://www.rcgp.org.uk/clinical-and-research/clinical-resources/the-rcgp-nspcc-safeguarding-children-toolkit-for-general-practice.aspx>
- Castle Point & Rochford CCG Disciplinary Policy
- Castle Point & Rochford CCG Managing Performance Policy
- Castle Point & Rochford CCG Whistleblowing Policy

2.0 PURPOSE

- 2.1 The purpose of this Policy is to provide a framework for managing cases where allegations are made about CCG staff or members of the Governing Body who are acting on behalf of the CCG which indicate that children/ young people or adults at risk are believed to have suffered, or are likely to suffer significant harm.
- 2.2 Concerns may also be raised if the staff member is behaving in a way which demonstrates unsuitability for working with children, young people or adults at risk in their present position, or in any capacity. The allegation or issue may arise either in the employee's/professional's work or private life.

Examples include:

- Commitment of a criminal offence against an “adult at risk”.
- Commitment of a criminal offence against, or related to, children/young people.
- Behaving towards children, young people or adults at risk in a manner that indicates they are unsuitable to work with children, young people or adults at risk.
- Where an allegation or concern arises about a member of staff from their private life such as perpetration of domestic violence or where inadequate steps have been taken to protect vulnerable individuals from the impact of violence or abuse.

2.3 The procedures also apply where there are concerns relating to inappropriate relationships between those who work with adults at risk or children or young people as outlined in the *Sexual Offences Act 2003*, namely:

- Inappropriate relationship with an adult at risk
- Having a sexual relationship with a child under 18 if in a position of trust in respect of that child, even if consensual (section 16-19 Sexual Offences Act 2003);
- ‘Grooming’, i.e. meeting a child under 16 with intent to commit a relevant offence (section 15 Sexual Offences Act 2003);
- Other ‘grooming’ behaviour giving rise to concerns of a broader child protection nature (e.g. inappropriate text/e-mail messages or images, gifts, socialising, use of social media etc.);
- Possession of indecent images of children or use of the internet to access indecent images of children.

2.4 The aim of this policy is to provide staff in Castle Point & Rochford Clinical Commissioning Group and provider services (referred to as organisations) with information so that they may fulfil their statutory duties to safeguard and protect children and young people by ensuring:

- Allegations about safeguarding children made against staff are reported to the organisation’s Named Senior Officer.
- The Named Senior Officer informs the Local Authority Designated Officer within one working day of allegation being made.
- The Named Senior Officer works collaboratively with other agencies contributing to a strategy meeting and taking appropriate action as agreed.
- Consideration is given in regard to Disciplinary Procedures e.g. suspension, referral to the Protection of Children Act (PoCA) list, even if the allegation is not considered sufficiently harmful under the child protection procedures.

3.0 SCOPE

3.1 This policy applies to all employees and contractors of the CCG, including those seconded into and out of the organisation, volunteers, students, honorary appointees, trainees, and temporary workers, including Gp’s, locum doctors and those working on a bank or agency contract. This list is not exhaustive, but encompasses all that work for, and on behalf of, the CCG. For ease of reference, all employees and professionals who fall under these groups will be uniformly referred to as “staff” in this document.

3.2 The Children Act 1989/2004 states a child is anyone who has not yet reached their 18th birthday. ‘Children’ therefore in most documentation means ‘children and young people’ throughout under the age of 18 years. The fact that a child has reached 16 years of age, is living independently or is in further education,

is a member of the armed forces, is in hospital, in prison or in a Young Offenders Institution, does not change his or her status or entitlement to services or protection under the Children Act 1989.

4.0 DUTIES WITHIN THE ORGANISATION

- 4.1 All staff has a duty to safeguard children and vulnerable adults by recognising abuse and referring onwards as required to the statutory local child or adult safeguarding services (Working Together to safeguard children, SET safeguarding procedures for children, SET safeguarding adults guidance). Key responsibilities are set out in the Castle Point & Rochford CCG Safeguarding Policy. Approaches to safeguarding children must be child centred, upholding the welfare of the child as paramount (Children Act, 1989 and 2004), and approaches for safeguarding adults must consider the wishes of that adult and uphold the legal framework outlined in the Care Act 2014.

5.0 PROCESS/PROCEDURE-Responding to Concerns/allegations against CCG staff

An allegation may require consideration from any of the following inter-related perspectives:

- Child protection enquiries by Children's Social Care
- Criminal Investigation by the Police
- Staff disciplinary procedures
- Complaints procedures

5.1 ROLES AND RESPONSIBILITIES OF THE SENIOR NAMED OFFICER

The appointed Senior Named Officer in relation to an allegation made against staff is:

Castle Point & Rochford CCG: Chief Nurse
Deputy: Deputy Chief Nurse

The appointed Senior Named Officer in relation to an allegation made against a person working in Primary Care is:

- **NHS England Essex Area Team Chief Nurse**

(See Appendix 1 for contact details)

If the allegation is against the Chief Nurse the Accountable Officer must be contacted

The Named Senior Officer is responsible for ensuring:

- The organisation operates procedures in accordance with Working Together to Safeguard Children Guidance
- Representing the organisation to resolve any inter-agency issues
- Effective liaison with the Designated Officers for the Local Safeguarding Children/Adult Boards in Southend, Essex and Thurrock.
- The Local Authority Designated Officer is responsible for:

- Providing advice and guidance to the local NHS organisations
- Liaison with Police and other agencies
- Monitoring the progress of cases

The Named Senior Officer will oversee the management by the organisation of any individual cases of allegation under this procedure in conjunction with HR and Safeguarding lead.

5.2 APPLICATION OF THE PROCEDURE

5.2.1 This policy applies to all staff including temporary or voluntary staff, working for the organisation when it is alleged that they have:

- Behaved in a way that has or may have harmed a child
- Possibly committed a criminal offence against or related to a child or
- Behaved toward a child in a way, which indicates s/he is unsuitable to work with children.

There are a number of sources from which a complaint or an allegation might arise, including those from:

- A child or young person
- A parent or other adult
- An adult at risk
- A member of the public
- A colleague (see whistle blowing procedure)
- A disciplinary investigation
- A child protection/adult safeguarding investigation
- A police investigation
- Via a complaint received by the CCG (or NHS England)

5.2.2 If concerns arise outside of the CCG about a member of staff's behaviour towards any child, Children's Social Care and/or Police must inform the organisation in order to assess whether there may be implications for children or vulnerable adults with whom the person has contact at work.

5.2.3 The Named Senior Officer should work closely with the Local Authority Designated Officer (LADO) – Essex County Council and Child Abuse Investigation Team (CAIT) or other police investigation units where the concern relates to a vulnerable adult, to ensure that any allegation of abuse is dealt with fairly, quickly and consistently to provide effective protection for the child and at the same time supports the member of staff subject to the allegation.

5.3 INITIAL ACTION BY PERSON RECEIVING ALLEGATION /IDENTIFYING CONCERN

The person to whom the allegation is first reported or who first identifies a concern should treat the matter seriously and keep an open mind. The safety of the child, young person or an adult at risk is of paramount importance.

Urgent action may be required to secure the immediate safety of any children, young people or adults at risk, in which case a report to the police should be made via the 999 system.

The person receiving the allegation/identifying a concern should:

- Record the information (where possible using the child's/adult's own words), including the time, date and place of incident, persons present and any actions taken.

5.4 REPORTING ALLEGATIONS

- Any member of staff who becomes aware of a concern about an allegation of concerns in relation to safeguarding children or a vulnerable adult by an employee of the organisation must report it to the line manager of that employee. The Line Manager must take advice from a senior member of the Human Resources Department and must report any allegations to the Senior Named Officer (SNO) for Castle Point & Rochford CCG at the earliest opportunity or the Senior Manager on call if out of normal working hours (the recipient of the allegation must not try to unilaterally determine the validity of the allegation)
- **If the SNO is unavailable or if the SNO themselves or their deputy is the subject of the allegation report to the Chief Accountable Officer.**
- Consider if the child/adult has suffered, or is at risk of suffering, significant harm and if this is the case make an immediate referral under the appropriate Safeguarding Children or Safeguarding Adults Multi Agency procedures.
- If the allegation may be a criminal offence the matter should be reported to the police. In such cases the police have primacy for any investigations and evidence must be preserved. Interviews or de-briefs with staff members should not be instigated, and any potential crime scene or evidence should remain undisturbed until advised by the police.
- Seek advice from the Designated Professionals if unsure regarding which action to take.
- The person who is the subject of the allegation should not be informed until advice has been sought from the SNO. This is important in terms of future investigations (see below).

6.0 INITIAL ACTION BY CCG SENIOR NAMED OFFICER AND LADO

When informed of a concern or allegation the SNO should not investigate the matter or interview the member of staff or any potential witnesses.

They should:

- Ensure (if appropriate) that safeguarding children/adults referral/alert is made (or has been made) in accordance with multi agency procedures – this should be within one working day so that consultation with or referral to the CAIT or Children's Social Care or Local Authority Adult Safeguarding can take place as appropriate.

- Report the allegation to the relevant Local Authority Designated Officer (LADO). **Essex LADO contact number is: 03330139797**
- If the SNO is unsure whether a case meets the criteria for a LADO referral, this case should then be discussed with the Designated Safeguarding Children/Adults Professionals and/or the LADO.

The report to the LADO should include;

- Written details of the concern/allegation;
- Any information relating to times, dates, location of the incident, and names of any potential witnesses;
- All discussions, any decisions made and rationale for these and any actions taken so far
- A record of the report must be made by the line manager and Senior Named Officer which includes time, date and signature and name in capitals (or name stamp)

If the allegation/concern is received outside normal working hours and requires immediate action, the SNO should consult with the Out of Hours Emergency Duty Team or Police, and inform the LADO on the next working day.

The SNO should inform the CCG Chief Accountable Officer and a Serious Incident report of the allegation against a healthcare or non-healthcare professional should be reported on the Strategic Executive Information System (STEIS).

6.1 INFORMING THE REFERRED PERSON

Following advice from the LADO/Designated Professionals and, where relevant, the Police, the Line Manager/SNO should inform the referred person as soon as possible about the nature of the allegation, how enquiries will be conducted and the possible outcome.

The referred person should:

- Be treated fairly and helped to understand the allegations;
- Be reminded of their right to have support from a colleague or representative;
- Be kept informed of the progress and outcome of the investigation and implications for any disciplinary action;
- If suspended, be kept up to date about events in the workplace.

Where the allegation/concerns relates to CCG directly-employed staff, the Senior Named Officer (SNO), in consultation with the Chief Nurse, LADO and Designated Safeguarding Children/Adults Professional should liaise regarding the action to be taken in relation to the employee. In conjunction with HR and the staff member's line manager and the Police, where there is a criminal investigation, the SNO will decide whether suspension is appropriate during the period of investigation.

HR will advise on the authority levels and process requirements for this action.

HR will also advise whether the CCG disciplinary procedure is to be followed and whether referral is needed to the Disclosure and Barring Service.

In conjunction with HR, if the staff member is a registered professional consideration must be given to notifying any relevant regulatory body.

Any action taken by the CCG to manage an allegation must not jeopardise any external investigations, such as a criminal investigation.

The police or the CPS should inform the LADO immediately of any case disposal decisions and court appearances and when the criminal investigation is completed. The police should inform the alleged victim and their parents / carers of the outcomes once the investigation and / or prosecution is concluded. If the police and/or CPS decide not to charge the individual with an offence, or decide to administer a caution, or the person is acquitted by a Court, the police should pass all information they have which may be relevant to a disciplinary case to the Senior Manager without delay.

If Children Services have undertaken an assessment the SNO should seek permission for that information they have to be shared if it is relevant to a disciplinary case. The Senior Manager should agree with the LADO to proceed as in 'No further action' or 'Disciplinary/Internal investigation' as above. The information provided by the police and/or Children Services should inform that decision. Action by the Senior Manager, including dismissal, is not ruled out. The options will depend on the circumstances of the case and will need to take account of the result of the police investigation or the trial, as well as the different standard of proof required in disciplinary and criminal proceedings.

7.0 CONFIDENTIALITY

- 7.1 Enquiries must be conducted on the basis of "need to know" to ensure information is shared freely between agencies and in a way that balances the rights of all concerned.
- 7.2 Information about an allegation must be restricted to those who have a need to know in order to protect children and vulnerable adults and to facilitate enquiries and manage the disciplinary/complaints process.

8.0 MANAGING ALLEGATIONS

- 8.1 There are three strands in consideration of an allegation:
 - Enquiries and assessment by Children's Social Care or Adult's Safeguarding Officers about whether a child/young person/ adult at risk of harm or abuse, is in need of protection or in need of services.
 - A police investigation of a possible criminal offence.
 - Consideration of an investigation under disciplinary procedures (including possible suspension from duties).

- 8.2 The Senior Named Officer will be responsible for sharing relevant information on an on-going basis about the allegation, child and accused member of staff with other relevant agencies involved.
A planning meeting should be arranged within 3 working days of receipt of the allegation by the Local Authority Designated Officer with attendance as necessary by the Police, Social Care Manager and the Senior Named Officer. Additional members may include a Senior Human Resources manager, Designated Nurse for Safeguarding Children as appropriate.
- 8.3 The planning meeting will agree the course of action needed to be taken by each agency to protect and support the child or vulnerable adult and the action to be taken about the member of staff. The planning meeting will agree how to co-ordinate the action of the agencies.
- 8.4 The planning meeting should set a review date within one month of the referral being received with a view to concluding the enquiry as soon as possible.

9.0 ACTION BY THE ORGANISATION AS AN EMPLOYER (Disciplinary Action)

- 9.1 The position of the organisation as the employer when there are allegations of issues concerning safeguarding of children or adults by one or more members of staff is complex and needs to balance:
- the primacy of a police or external local authority led child protection inquiry
 - the rights of the accused employees under employment law
 - the reputation of the organisation in the eyes of the public
- 9.2 The CCG's procedure for dealing with any allegation about the behaviours of employees (including the allegation of child abuse) which could affect their continuing employment is the Disciplinary Policy and/or Managing Performance Policy ("the disciplinary procedure").
- 9.3 A criminal investigation by the police or local authority inquiry has primacy. The organisation will consider the implications for an employee of the outcome of such an inquiry under its Disciplinary Policy and/or Managing Performance Policy. Alternatively, the organisation may consider whether action under its Managing Performance Policy is appropriate in circumstances where the Police or Social Care services decide not to pursue their inquiry.

Any action taken by the organisation as an employer will be on the basis of decisions agreed at the joint planning meetings with the Police and Social Care services.

- 9.4 It may be necessary to consider suspending an employee who is subject to a police or social care inquiry or during the course of an internal enquiry under the organisation's Disciplinary Policy and/or Managing Performance Policy. Any such decision would be taken by the employees' line manager in conjunction with the Human Resource Department.

10.0 NO FURTHER ACTION

Where the LADO agrees that no further action is to be taken regarding the individual facing the allegation, the decision and justification should be recorded by both the SNO and the LADO.

The SNO with the LADO should:

- Agree what information should be put in writing to the individual concerned by the SN;
- Identify any action in respect of those who made the initial allegation where there is evidence that an allegation was made maliciously and;
- Consider what information should be shared with the child and their parents / carers, or the adult and/or carers, and by whom.

10.1 Where the allegation does not require a formal process, appropriate action should be initiated **within three working days**.

10.2 **Disciplinary/internal investigations**

Where an investigation by the police or Children's Social Care is unnecessary, or has been completed, the SNO will need to determine if any further disciplinary / internal investigation is needed.

11.0 SAFEGUARDING CHILDREN CASES

11.1 **Safeguarding Children Strategy Meetings** - if there is cause to suspect that a child is suffering or is likely to suffer significant harm; the LADO will immediately ask Children's Social Care for a strategy meeting to be convened in accordance with agreed multi-agency safeguarding children procedures.

11.2 **Safeguarding Children Evaluation Meetings** – following a safeguarding children strategy meeting or in cases where a formal strategy discussion is not considered appropriate because the threshold of 'significant harm' is not reached, but a police investigation might be needed, the LADO should nevertheless conduct a similar discussion with the police, the employer, and any other relevant agencies to evaluate the allegation and decide how it should be dealt with.

11.3 The formal evaluation meeting will determine whether the allegation is substantiated, false, malicious, unfounded or unsubstantiated, and agree actions accordingly:

- **Substantiated** - there is sufficient identifiable evidence to prove the allegation;
- **False** - there is sufficient evidence to disprove the allegation;
- **Malicious** - there is clear evidence to prove there has been a deliberate act to deceive and the allegation is entirely false;
- **Unfounded** - there is no evidence or proper basis which supports the allegation being made. It might also indicate that the person making the allegation misinterpreted the allegation or was mistaken about what they saw. Alternatively they may not have been aware of the circumstances;

- **Unsubstantiated** - this is not the same as a false allegation. It means that there is insufficient evidence to prove or disprove the allegation. The term, therefore, does not imply guilt or innocence.

11.4 For those cases where it is immediately clear that the allegation is unfounded or malicious then it is expected that they should be resolved **within one week**.

11.5 If an allegation is determined to be unfounded or malicious, the LADO should discuss the matter with children Services to determine whether the child concerned is in need of services, or may have been abused by someone else.

12.0 SAFEGUARDING ADULT CASES

Where the case involves a safeguarding adults concern, the LADO does not have statutory responsibility. Hence, agreed multi-agency safeguarding adults procedures should be followed.

12.1 **Safeguarding Adults Case Conference** - In a case involving the Adult Safeguarding procedure an enquiry will follow the strategy meeting or discussion if the concern meets the criteria. The outcomes of any enquiries will be discussed at strategy review meetings and the case will be concluded at the case conference stage. In serious cases or where there has been a death, a Safeguarding Adults Review may take place.

12.2 Under the Care Act (2014) for Adult Safeguarding, the focus is on the outcomes for the person alleged to have been harmed. Substantiating the abuse is not the primary focus in all but the most serious, criminal or complex cases, in which cases substantiation may be essential for lessons to be learned or for disciplinary or legal remedies to be implemented.

12.3 An adult who has been harmed or put at risk of harm may choose not to be involved with a safeguarding investigation. However, where the concern is raised about the actions of an employee an enquiry will proceed without the adult at risk's consent as the CCG has a duty of care to safeguard children and other adults who may be at risk.

12.4 For all allegations a clear and comprehensive summary of the allegation, details of how the allegation was followed up and resolved, a note of any action taken and the decisions reached should be kept on the confidential personnel file of the individual concerned and a copy of this should be provided to the individual.

13.0 ACTIONS ON CONCLUSION OF AN ALLEGATION CASE

13.1 If the allegation is substantiated and the person is dismissed, the employer ceases to use the person's services, or the person resigns, the LADO should discuss with the employer/SNO whether a referral should be made to the Disclosure and Barring Service and/or to a regulatory body. If a referral is made, it should be submitted within 1 month of the allegation being substantiated.

- 13.2 As well as supporting the member of staff throughout the investigation, consideration must be paid to supporting the member of staff through integration back into the workplace should this be appropriate post investigation. On-going support for the member of staff may be offered through Occupational Health. Support may also be needed for colleagues/other staff members involved.
- 13.3 The employer/SNO and the LADO together with the CCG Safeguarding Leads should review the circumstances of each case to determine whether there are any improvements to be made to the CCG's procedures or practise. Any recommendations from the review will be implemented and information disseminated to the appropriate people within the CCG and local safeguarding forums.

14.0 ALLEGATIONS AGAINST STAFF IN THEIR PERSONAL LIFE

- 14.1 If an allegation or concern arises about a member of staff, outside of their work which may present a risk of harm to child/ren/adults for which the member of staff is professionally responsible, the general principles outlined in these procedures will still apply.

The strategy meeting / discussion should decide whether the concern justifies:

- Approaching the member of staff's employer for further information, in order to assess the level of risk of harm; and / or
- Inviting the employer to a further strategy meeting / discussion about dealing with the possible risk of harm.

If the member of staff lives in a different authority area to that which covers their workplace, liaison should take place between the relevant agencies in both areas and a joint strategy meeting / discussion convened.

- 14.2 In some cases, an allegation of abuse against someone closely associated with a member of staff (e.g. partner, member of the family or other household member) may present a risk of harm to the child/ren/adults for which the member of staff is professionally responsible. In these circumstances, a strategy meeting / discussion should be convened to consider:

- The ability and/or willingness of the member of staff to adequately protect the child/ren/adults for whom they are professionally responsible;
- Whether measures need to be put in place to ensure the child/ren/adults protection;
- Whether the role of the member of staff is compromised.

- 14.3 On occasion, some abuse/neglect cases involve both children's and adults' services. The role of the LADO is an initial point of contact for advice, thereby being the conduit between adult safeguarding and children's safeguarding. The LADO can provide 'expert' advice where a case may involve risks that overlap children's and adults or where a child may still be at risk once they turn 18 years of age.

- 14.4 When an adult implicated in child abuse allegations or investigations may be a risk to adults at risk as well as children, for example, if the alleged perpetrator

works directly with adults at risk in a care setting, as a care worker, volunteer, nurse, social worker etc. The LADO will consider a risk assessment on the basis of the information, in order to decide as to whether there are enough grounds to justify informing the alleged perpetrator's employers. If this is justified then the LADO will need to inform the alleged perpetrator to allow them opportunity to disclose in the first instance and then to check this has occurred approximately a week later. The LADO will also need to be satisfied that the employers have considered all risks and that these have been suitably mitigated.

15.0 REFERRAL TO REGULATORY BODIES

15.1 At the conclusion of an inquiry the organisation, in conjunction with the police and social services will consider whether to refer an employee to a regulatory body, e.g. General Medical Council, Nursing and Midwifery Council, Health Professions Council, or to make a referral under the Protection of Children Act 1978, Safeguarding Vulnerable Groups Act 2006 or their successors.

16.0 UNFOUNDED ALLEGATIONS

16.1 If the allegation is determined to be unfounded the Named Senior Officer together with other agencies should consider:

- Referring the matter to Children's Social Care to determine if the child is otherwise in need or may have been abused by someone else
- Asking Police what action may be required in the rare event that the allegation was deliberately invented or malicious.

16.2 The member of staff subject to the allegation will be informed by their line manager of any final outcome

17.0 RECORD KEEPING

17.1 Records in relation to the allegation must be retained until the individual concerned has reached retirement age or for 10 years from the date of the allegation if longer

18.0. ASSOCIATED DOCUMENTS

Southend Essex & Thurrock (SET) Safeguarding and Child Protection Procedures

Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children (Department of Education)

Safeguarding Children, Young People and Adults at Risk in the NHS: Safeguarding Accountability and Assurance Framework (2019)

19. COMMUNICATIONS

The CCGs website will hold information relating to the CCGs responsibilities for safeguarding children.

This policy will be held on the CCG staff Intranet and NHS Castle Point & Rochford CCG staff and members will be made aware of changes to this

policy via the authorised in house communication pathways and in child protection training.

20.0. ARCHIVING OF DOCUMENTS

Documents must be retained in accordance with the requirements of Records Management: NHS Code of Practice (DH 2006) and the CCG's Records Management Policy.

21.0. EQUAL OPPORTUNITIES

This policy reflects the organisation's determination to ensure that all parts of our community have equality of access to services and that everyone receives a high standard of service as a service user, a carer or employee.

This policy anticipates and encompasses NHS Castle Point & Rochford CCGs commitment to prevent discrimination on any illegal or inappropriate basis and recognise and respond to the needs of individuals based on good communication and best practice. We recognise that some groups of the population are more at risk of discrimination or less able to access to services than others and that services can often unintentionally put barriers in place that can limit or prevent access. The organisation is continually working to prevent this from happening.

21.0 LIST OF STAKEHOLDERS

Name	Title	Comments received Y/N	Comments incorporated Y/N
Tricia D'Orsi	Chief Nurse	Y	N/A
Sharon Connell	Designated Nurse	Y	Y
Imelda Callowhill	Lead Nurse for Safeguarding Adults	Y	Y

22.0 EQUALITY IMPACT ASSESSMENT

NHS Castle Point & Rochford CCG is committed to carrying out a systematic review of all its existing and proposed policies to determine whether there are any equality implications.

This policy has been assessed using the CCGs Equality Impact Assessment framework which identified the following impact/s upon equality and diversity issues:

Age	Marital Status	Disability	Gender & Pregnancy	Race	Sexuality	Religion	Human Rights	Total Points	Impact
2	0	2	1	2	1	2	1	11	Medium

Points

3 – This area has a high relevance to equalities

2 – This area has a medium relevance to equalities

1 – This area has a low relevance to equalities

0 – This area has no relevance to equalities

Scoring

13-18 points – high impact

7-12 points – medium impact

0-6 points – low or no impact

24 VERSION CONTROL

Version	Author name and title	Date policy issued	Date policy due for review
01	Sharon Connell Designated Nurse Safeguarding Children, South East Essex.		
02	Sharon Connell Designated Nurse Safeguarding Children, South East Essex.	December 2016	December 2018
03	Sharon Connell Designated Nurse Safeguarding Children, South East Essex.	November 2017	November 2019
04	Yvonne Shaw Associate Designated Nurse Safeguarding Children, South East Essex	November 2019	November 2021

Appendix 1: Contact Details

Contact Name	Contact Number
CCG Senior Named Officer Chief Nurse Tricia D'Orsi	Castle Road: 01268 464622 Mobile: 07950 520224
CCG Deputy Senior Named Officer: Deputy chief Nurse Lorraine Coyle	Castle Road: 01268 464598 Mobile: 07970213419
NHS England,NHSI Senior Named Officer Deputy Director of Quality & Nursing	Swift House: 0113 824 9112
Designate Nurse Safeguarding Children Sharon Connell	Castle Road: 01268 464567 Mobile: 07980 921291
Local Authority Designated Officer (LADO)	Essex County Council: 03330 139 797 Southend Borough Council: 01702 534539
Child Abuse Investigation Team (CAIT)	Dial 101 ext. 384140