

Freedom of Information Act Request

Under the Freedom of Information Act 2000, please provide me with the following information about the trust's compliance with the NHS sexual safety charter.

The trust is a signatory to the charter.

<https://www.england.nhs.uk/long-read/sexual-safety-in-healthcare-organisational-charter/>

All signatories to the charter, including your trust, “commit to a zero-tolerance approach to any unwanted, inappropriate and/or harmful sexual behaviours towards our workforce.”

Where there are gaps in your records that limit the information you can provide please explain these in response to the relevant question.

If you cannot reasonably provide a full response within the time limits in the FOIA, please advise me asap as to how I might refine my request.

In order to assist you, the trust's domestic abuse and sexual violence (DASV) lead should know the answers to these questions.

Questions:

1. Has the trust received written advice or guidance from NHS England setting out how to comply with the NHS sexual safety charter? Please answer yes or no.

Yes

- 1.1 If yes, please set out what advice or guidance NHS England provided, or provide a copy of it.

Briefing letters from NHS England as published: [NHS England » Sexual safety in healthcare – organisational charter](#). These outline the national call to sign up to the charter and provide an outline of resources that NHS England were committed to develop.

2. Point 10 of the NHS sexual safety charter states: “We will capture and share data on prevalence and staff experience transparently.” If you answered yes to question 1, has NHS England provided written advice or guidance as to how the trust should record the prevalence of unwanted, inappropriate and/or harmful sexual behaviour in order to comply with point 10 of the charter? Please answer yes or no. **Yes**

2.1 If yes, please set out what advice or guidance NHS England has provided, or provide a copy of it. Specifically, please clarify whether this guidance prescribes what sexual harm data the trust should record, and how to record it? For example, does it stipulate that the trusts should record specific categories of sexual harm, such as patient-on-staff or staff-on-patient incidents? If so, please provide details.

NHS England have provided some guidance on how they have approached the reporting (as published in their resources – see answer to 1.1). The discussions at the DASV NHS England webinars is that this is for local adaptation by organisations on how to implement locally.

3. If the trust has received no guidance from NHS England as to how to record the prevalence of unwanted, inappropriate and/or harmful sexual behaviour, how does the trust currently record these incidents? **DBTH currently records any sexual safety incidents via the internal Datix reporting system. This then triggers an individualised investigation by an appropriately delegated person.**

3.1 Does the trust record and centrally collate all types of sexual safety incidents? Please answer yes or no.

Yes

3.2. Which of the following categories of incidents does the trust record and centrally collate. Please answer yes or no:

- Patient-on-staff incidents **Yes**
- Staff-on-staff incidents **Yes**
- Patient-on-patient incidents **Yes**
- Staff-on-staff incidents **Yes**
- Visitor-on-staff incidents **Yes (we term this public not visitor)**
- Visitor-on-patient incidents **Yes (we term this public not visitor)**
- Patient-on-visitor incidents **No (but we have another category of abuse – other)**
- Staff-on-visitor incidents **Yes (we term this public not visitor)**

3.3 Does the trust record any other categories of incidents, such as incidents perpetrated by members of the public? If so, please provide details of these categories. **As detailed above**

4. Is the trust fully compliant with all 10 points of the sexual safety charter? **Yes – but we continue towards embedding the policy / processes and raising awareness.**

5. 4.1. If yes, when did the trust become fully compliant?

Our policy was published at the beginning of Q2 2024

4.2 If no, what points of the charter has the trust yet to comply with; and when does the trust expect to become fully compliant with the charter?

5. Has the trust's compliance with the charter been assessed or audited by NHS England? Please answer yes or no.

No

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5.1 If yes, what were the findings of that assessment or audit? Was the trust deemed to be fully compliant, partially compliant or not compliant? **N/A**

5.2 If yes, when was the assessment or audit carried out and when did the trust receive its findings? **N/A**

6. Has the trust undertaken any internal audits or assessments of its compliance with the sexual safety charter? Please answer yes or no. **No**

6.1 If yes, what were the findings of this assessment or audit? **n/a**

6.2 If no, does the trust have plans to conduct an audit or assessment of compliance? **The Trust needs to embed processes first before audit plans are confirmed.**

6.3 If you answered yes to 6.2, when does the trust plan to conduct this assessment or audit of compliance? **No firm plans have been made.**

7. Does the trust keep centralised records of child abuse committed on the trust premises? Please answer yes or no **Yes**

8. Which incident and risk reporting system does the trust use to record sexual unwanted, inappropriate and/or harmful sexual behaviour? (For example, Datix or Ulysses.) **Datix**

9. Has the trust appointed a domestic abuse and sexual violence (DASV) lead? Please answer yes or no. **No – this is currently mitigated and incorporated in the Head of Safeguarding role with active recruitment plans progressing to apt a DASV lead.**

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