Supporting Colleagues

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<tr>
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# TRUST-WIDE NON-CLINICAL POLICY DOCUMENT

## HR37 Supporting Colleagues

### Further information about this document:

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<tr>
<td>Document summary</td>
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SUPPORTING STATEMENTS

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

SAFEGUARDING IS EVERYBODY’S BUSINESS

All Mersey Care NHS Foundation Trust colleagues have a statutory duty to safeguard and promote the welfare of children and adults, including:

- being alert to the possibility of child/adult abuse and neglect through their observation of abuse, or by professional judgement made as a result of information gathered about the child/adult;
- knowing how to deal with a disclosure of child/adult abuse;
- undertaking training as appropriate for their role and keeping themselves updated;
- being aware of and following the local policies and procedures they need to follow if they have a child/adult concern;
- ensuring appropriate advice and support is accessed either from managers, Safeguarding Ambassadors or the trust’s safeguarding team;
- participating in multi-agency working to safeguard the child or adult (if appropriate to your role);
- ensuring contemporaneous records are kept at all times and record keeping is in strict adherence to Mersey Care NHS Foundation Trust policy and procedures and professional guidelines. Roles, responsibilities and accountabilities, will differ depending on the post you hold within the organisation;
- ensuring that all staff and their managers discuss and record any safeguarding issues that arise at each supervision session.

EQUALITY AND HUMAN RIGHTS

Mersey Care NHS Foundation Trust recognises that some sections of society experience prejudice and discrimination. The Equality Act 2010 specifically recognises the protected characteristics of age, disability, gender, race, religion or belief, sexual orientation and transgender. The Equality Act also requires regard to socio-economic factors including pregnancy/maternity and marriage/civil partnership.

The trust is committed to equality of opportunity and anti-discriminatory practice both in the provision of services and in our role as a major 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.

Mersey Care NHS Foundation Trust also is 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.

Mersey Care NHS Foundation Trust is committed to carrying out its functions and service delivery in line with a Human Rights based approach and the FREDAs principles of Fairness, Respect, Equality, Dignity, and Autonomy.
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1. INTRODUCTION

1.1. Mersey Care NHS Foundation Trust values its employees and recognises that sometimes, our colleagues are involved in events or incidents that they may find traumatic and stressful. The Trust understands that incidents or events may affect a colleague because of their previous experience and also that colleagues don’t need to be directly involved in an incident or event to experience a reaction that may require some support.

1.2. This support is for all employees of Mersey Care NHS Foundation Trust as well as those who act as volunteers, those who hold an honorary contract, bank, agency and contracted colleagues.

1.3. The Trust wishes to look after the well-being of all colleagues exposed to or affected by a traumatic or stressful event at work. Accordingly, everyone needs to be aware of the support that is available to them, both internally and externally and in the short and the longer term. The Trust aims to ensure colleagues are able to access the support that best meets their individual needs.

1.4. This policy aims to ensure that compassionate and effective support systems are in place for colleagues that have been involved in, or affected by a traumatic or stressful event. The Trust is also keen to learn how these services may be improved, if required.

1.5. Involvement in a traumatic or stressful event can have profound consequences. Such events may involve colleagues being harmed, assaulted, threatened with harm or witnessing another person being harmed. Colleagues may experience a range of reactions from stress, low mood and depression to shame and guilt. The high personal and professional standards of NHS colleagues may make them particularly vulnerable to these reactions and feelings.

1.6. It is critically important to understand that different individuals will have differing responses to the same event. Such different responses will therefore require differing levels and types of support. In addition to accessing support both internally and being signposted to relevant support externally, it is important to recognise the value of immediate, compassionate support from Line Managers and colleagues.

1.7. An Incident Support Discussion Checklist must be completed when offering a colleague support after an incident. The aim of the checklist is to promote consistent, compassionate post-incident support and sign-posting to further support, if required.

1.8. Any support offered should remain confidential between the colleague and Line Manager. However, there may be occasions when it is appropriate (in the interests of the individual and subject to their agreement) for another manager responsible for a review of the event or incident, to be made aware of an individual's support needs.

1.9. It is also important for colleagues, including individuals who may be absent from work to be kept informed of the progress of any process (such as an event learning review and report) in which they are involved. In particular, colleagues must be informed of expected timescales, when the process is completed, any findings and recommendations, and any actions to be taken.

1.10. From the outset, colleagues must be provided with the opportunity to ask any questions they may have and if absent from work, be provided with the opportunity to have input into any review(s). Ideally those colleagues will be engaged directly in any learning reviews so their expertise and insight is shared to help the team and Trust learn from such events and help mitigate future, similar events.
1.11. The Trust welcomes feedback from colleagues to ensure that this support service is responsive and appropriate so that improvements can be made to the process if required. The policy will be reviewed as part of the Just and Learning Culture committee.

1.12. This is a ‘live’ policy whereby changes may be made following feedback from colleagues and managers therefore Line Managers should check this site for any updates. Any changes to the Incident Support Discussion Checklist/TOOLKIT in this policy will be promoted.

2. PURPOSE AND RATIONALE

2.1. The aim of the policy is to ensure guidance is provided to colleagues who require support as a result of being involved in a traumatic or stressful event. The policy aims to reduce the risk of colleagues failing to be offered or receive appropriate support. It also acts as a means of sign-posting colleagues to both internal and external support mechanisms and ensuring Line Managers provide:

a) All colleagues with the relevant information
b) Health and Wellbeing @ Work (H&W@W) with incident details, the names and contact details of any colleagues affected – so that support can be offered

2.2. The purpose of the policy is to:

a) clarify the availability of support to colleagues, both internally and externally when an colleague is affected by a traumatic or stressful event.
b) provide managers with guidance on compassionately supporting colleagues in these situations, including sign-posting to Staff Support Services.
c) provide colleagues with details to ensure they can access support that best meets their individual needs.
d) help reduce the likelihood of colleagues being absent from work or leaving the Trust as a consequence of poor support experiences following traumatic or stressful events.
e) facilitate the safe return to work of colleagues that have been absent from work as a consequence of a traumatic or stressful event

2.3 The Trust is committed to ensuring the Health and Safety of service users/patients, colleagues and visitors are prioritised. In the case of an event that may impact on that health and safety, the Trust will ensure immediate safety issues are addressed as the first priority. Once safety issues are resolved, the Trust will ensure that colleagues who need support are identified, offered support, and Staff Support Services informed about the event.

3. SCOPE

This policy applies to all employees of Mersey Care NHS Foundation Trust as well as those who act as volunteers, those who hold an honorary contract, bank, agency and contracted colleagues.

4. DEFINITIONS

4.1. A traumatic or stressful event – one that invokes unusually strong emotions, overcoming normal coping abilities. Examples of such incidents may include the following, although the list is not intended to be exhaustive:-

a) incident where someone is harmed
b) involvement in an incident of violence or aggression, whether as a victim or witness
c) verbal or psychological abuse
d) the death of a patient
e) meeting with relatives bereaved by suicide
f) medication errors
g) involvement in cases of bullying and/or harassment
h) involvement in cases of safeguarding children or adults
i) involvement in raising a concern
j) any forms of discrimination (direct, indirect, harassment or victimisation) on the grounds of age, gender, race, colour, culture, ethnic origin or nationality, religion or belief, sexual orientation, disability or other protected characteristics.
k) complaints or claims
l) allegations of negligence
m) formal procedures (eg. disciplinary, competency, grievance, sickness absence)
n) referrals to professional regulatory bodies
o) legal proceedings
p) attendance at court hearings

4.2. The Trust recognises that any stressful or traumatic event may trigger feelings associated with previous or historical matters and therefore colleagues may require support. The Trust will support and advise colleagues before or after any of the events listed in 4.1.

5. DUTIES

5.1. **Chief Executive** - As Accountable Officer, the Chief Executive will ensure that a colleague support and counselling service is available and is delegated to an appropriate Executive Lead, as outlined in the Executive Portfolios.

5.2. **Executive Director of Workforce** - The Executive Director of Workforce will ensure that there is an approved and consistently applied process to adequately support colleagues affected by traumatic or stressful events.

5.3. **Human Resources Team** - The HR Team will promote the policy throughout the organisation and will:

   a) Offer support, advice and guidance to all colleagues regarding the policy.
   b) Work with Line Managers and trade union/professional body representatives to identify training needs and liaise with Learning and Development to help meet them.

5.4. **Health and Wellbeing @ Work (H&W@W)**

   The Health and Wellbeing @ Work service provide a comprehensive Staff Support Service (24/7), Occupational Health and Physiotherapy service to the Trust and our Colleagues. Occupational Health Services include, health and wellbeing services, pre-placement assessments, sickness absence management, health surveillance and management referral. Colleagues can self refer into OH via OH administration or Sharepoint or via telephone on 0151 471 2451.

   The Health and Wellbeing @ Work service includes our Staff Support Services which offers:

   a) 24/7 Telephone Help and Advice line – 0151 330 8103
   b) F2F Counselling – at locations across the Merseyside and Lancashire Area
   c) Psychological Support – for both work and home related matters
   d) Critical Incident Support
   e) Training
   f) Workplace Mediation.
The website offers a range of online and downloadable support including CBT workbooks, The Wellbeing Zone and Silvercloud – which is an online Cognitive Behavioural Therapy Programme [https://merseycare.silvercloudhealth.com/signup/](https://merseycare.silvercloudhealth.com/signup/)

www.merseycare.wellbeingzone.co.uk Password is MCT1

**Physiotherapy**

The Physiotherapy service has clinics at Switch House, Whalley and Rathbone. The daily telephone triage runs from 1 – 2 pm Monday to Friday for immediate advice, information and self referral into the service.

**Daily telephone triage 1 - 2 pm Monday to Friday. Phone: 0151 471 2281**

5.4.3 **Counselling Service**

5.4.4 Counselling and Psychological Support is provided by Staff Support Service and is available 24/7 via a dedicated telephone help and advice line. 0151 330 8103

5.4.5 Their duties include:-

a) Following information received from the Line Manager the Staff Support Service will make contact with all colleagues identified as being affected or involved in any difficult or traumatic incident within 48 hours by email or letter to remind them of the support available and to ensure all colleagues have a point of contact within the Health and Wellbeing @ Work service.

b) To provide colleagues access to the staff support service 24/7 via the telephone helpline **0151 330 8103**. The helpline is staffed via Counsellors and Psychotherapists from within the H&W@W service and thus have a thorough understanding of the Trust, colleagues’ roles, policies and processes. The Staff Support Service provides a confidential service to all colleagues.

c) Counselling is provided from a range of clinical and theoretical counselling and psychotherapy modalities ie. Cognitive Behavioural Therapy (CBT), Eye Movement Desensitisation and Reprocessing (EMDR) and Integrative models. The trust works to a solution focused model and in cases where colleagues are assessed by the Senior Counsellors / Head of Health and Wellbeing to have additional support needs, requiring longer term therapy / support / intervention, or EMDR is a suitable psychological support option this will be discussed with the colleague to ascertain a clinical pathway that best supports the needs of the colleague and the operational requirements of the service.

d) Agreeing counselling contract between the colleague and counsellor with clear information relating to confidentiality and provision.

e) Providing information about confidentiality, record keeping and safety aspects including action that may be taken if the counsellor feels the colleague may be a danger to themselves or others (as per confidentiality agreement)

f) Informing colleagues at the onset of the counselling contract what conditions could lead to confidentiality being broken. This would include:-

I. Where there is risk of serious harm to themselves or others or a child protection issue.

II. Under the prevention of Terrorism Act.
III. If the counsellor is subpoenaed or summoned as a witness in a Court of Law.

  g) Provision of a range of other EAP services including Trauma Support, 24/7 telephone help and advice line, Training, Workplace Mediation, stress assessment and management training.

### 5.4.6 Occupational Health Service (OH)

5.4.6 Provide a comprehensive Occupational Health Service to the Trust and our Colleagues including, health and wellbeing services, pre-placement assessments, sickness absence management, health surveillance, management referral.

5.4.7 Colleagues can self-refer into OH via OH administration or via Sharepoint.

5.4.8 The service is Nurse led, sits within the Health and Wellbeing at Work service but is confidential in line with SEQOSH standards and SEQOSH accreditation.

### 5.5 The Head of Service

5.5.1 The responsibility for facilitating on-going support lies with the Head of Service.

5.5.2 Each individual will deal with involvement in a traumatic or stressful event differently, so the levels of support needed may vary considerably.

5.5.3 It is important to acknowledge that some colleagues may require continued support. This may include:

  a) Being reminded about the availability of the 24/7 telephone help and advice line to access support from our internal Employee Assistance Programme EAP provision and the ability for all colleagues to confidentially self refer into the services.

  b) Opportunity to discuss future work placements.

  c) Time for further discussion about the incident and their feelings with a person(s) of their choice.

  d) Information and support regarding the right to report any alleged crime to the Police.

5.5.4 Referrals to Occupational Health can be made by Managers, Human Resources or a colleague can self refer.

### 5.6 Line Manager / Accountable Lead / Senior Manager (at time of incident)

5.6.1 The responsibility for facilitating support immediately after an event or incident lies with the relevant Line Manager, Accountable Lead or Senior Manager at the time of the incident.

5.6.2 The support will be provided in accordance with the Incident Support Toolkit (Appendix A) which can be found in the Managers’ Hub. The toolkit is a list of questions and prompts for the manager and colleague to work through together to assess and identify any potential support needs. Advice can be sought from Senior Management, HR or Health and Wellbeing @ Work.

5.6.3 The duties for Line Managers or Senior Accountable Lead include:

  a) Assessing the immediate needs of those affected as soon as reasonably practicable, and should include:

    i. The need for first aid or medical attention. If required, it should be facilitated as soon as possible.
ii. Managers must document the outcome of any first aid and/or medical treatment required as soon as possible before completing the incident report and record if the colleague is likely to need any further treatment or follow-up. If the colleague is likely to require any on-going treatment as a direct result of the event then the manager should complete a referral to the Occupational Health Service and notify HR.

iii. Commence and complete the Incident Support Toolkit (Appendix A) with all colleagues affected by the incident or event on an individual or one-to-one basis.

iv. The appropriateness of a colleague remaining on duty. This should be undertaken in partnership with the colleague involved and discussions should be documented. It is completely understandable that some colleagues may want to stay on duty however in some circumstances it may not be appropriate for their well-being or for ward operational demands. If an agreement cannot be reached, the available senior manager, i.e. weekend manager or night co-ordinator will need to contact the appropriate on call lead for advice.

v. Information and support regarding the right to report any alleged crime to the Police and forward the Datix/Ulysses report to the Trust’s Mental Health investigators

vi. Assess the need for time off away from work – alone or with support. Consider if no one is at home what support is required.

vii. Contacting relative(s) or friend(s) on their behalf, if appropriate.

viii. Facilitating meaningful time to discuss the traumatic or stressful event with a person of their choice.

ix. In consultation with the colleague, consideration to moving the colleague from that location in the Trust on either a temporary or permanent basis.

x. Providing time for further discussion with regards to the longer term affects and signposting the colleague to the support services as well as a possible referral to H&W@W should be offered.

xi. In some cases, it may be appropriate for the Line Manager to share all names with H&W@W to ensure support is offered to everyone and not just those directly involved in an incident ie following a patient death.

xii. Advise Datix/Ulysses Team to inform all relevant stakeholders of the incident.

xiii. Advise Health and Wellbeing @ Work (by telephone and e-mail to staffsupportservices@merseycare.nhs.uk ) of the incident and its details, including contact details for all colleagues involved or affected by the incident to enable contact to be made by the relevant service to all colleagues who may benefit from or require support.

xiv. Providing the opportunity to discuss future work placements, if appropriate.

xv. Providing continued support throughout and following any subsequent process.

xvi. Line Managers will have overall responsibility to ensure all aspects of the Incident Support Toolkit are completed, shared as appropriate and stored securely in the individual’s personal file.
xvii. Working with the team to identify and share learning to prevent recurrence of the Incident or event.

5.7 Role of the Colleague

a) Colleagues that require first aid and/or medical treatment at work should seek help immediately.

b) When appropriate, after an incident a Line Manager will use the Incident Support Toolkit to ensure support is offered. This Toolkit can be found on the Staff Hub. [Staff Hub](#)

c) It is also important that colleagues let Human Resources and their union know of any such circumstances too.

d) Colleagues are encouraged to make themselves aware of the Trust support services via the Health and Wellbeing @ Work service - the website is [www.merseycarewellbeingatwork.co.uk](http://www.merseycarewellbeingatwork.co.uk)

e) Requesting referral or self-referring themselves to the Staff Support Service, counselling service, OH or Chaplaincy Service if they are experiencing difficulties

f) Informing their manager if time is required away from the workplace to attend any meetings associated with the situation.

g) Colleagues are encouraged to share their insights and learning from the incident or event to help the Trust prevent recurrence.

5.8 Chaplaincy

5.8.1 The Chaplaincy Service will provide pastoral support. They can be contacted by the following:

- E-mail - spirit@merseycare.nhs.uk
- Telephone: 0151 471 2608 or 0151 472 4564
- Website: [www.merseycare.nhs.uk/about-us/spiritual-and-pastoral-care/](http://www.merseycare.nhs.uk/about-us/spiritual-and-pastoral-care/) (or simply type “Mersey Care Spirit” into a search engine.)

5.9 Patient Safety Team

After an incident the role of the Patient Safety Team to:

a) Identify opportunities for learning and risk management

b) Identity and help manage any potential legal claims

c) Support colleagues through any legal processes against the Trust.

5.10 Trade Union Organisations

5.10.1 Staff Side Representatives have been involved in the development and ratification of this policy. Representatives will be able to advise and support colleagues on what their rights are and what options are available to them as determined by the guidelines within this policy. Those colleagues who are a member of a recognised Trade Union will be able to request a Representative accompany them to any formal meetings that may be are required.

British Medical Association – 0300 123 1233
Community and District Nursing Association - 020 8231 0180
GMB - 0151 727 0077
POA - 020 8803 0255
Unite - 020 7611 2500
Unison - 0800 0857 857
Royal College of Nursing – 020 7409 3333
6 STANDARDS AND PRACTICE

6.1 On rare occasions, after an incident, a colleague may be involved in a formal process and can feel vulnerable. Individuals, regardless of their grade or position, may often feel anxious about their involvement. Critically this policy aims to ensure colleagues are aware of all avenues of support open to them to reduce the risk of colleagues feeling vulnerable, ostracized or isolated during any Trust process.

6.2 The support required by a colleague may differ, depending on the issue and their individual needs, and should be provided or arranged by their manager or another appropriate person.

6.3 The following are examples of support that can be considered and discussed with colleagues in the first instance:

   a) clear, concise information regarding the formal process
   b) an agreed time-table for case review and communication with the individual
   c) advice on professional bodies and colleague associations that may be able to assist
   d) arranging a meeting with a representative from the HR Practitioner Team
   e) referral / self-referral for an appointment with OH and/or the confidential counselling service
   f) mentorship

6.4 Where it is not appropriate for the key point of contact to be the colleague’s Line Manager, an alternative and appropriate manager should identify another point of contact. Further guidance can be obtained from the relevant HR Practitioner Team.

6.5 Attendance at Courts and Tribunals as a Witness

6.5.1 In a few circumstances, colleagues are required to attend a Court or Tribunal as a witness for the Trust.

6.5.2 When preparing to be a witness for the Trust, colleagues will be supported and advised with assistance from the Trust’s Solicitors. Colleagues will also have the choice to be accompanied to the Court by a colleague.

6.5.3 Colleagues will be supported and debriefed following the conclusion of the case by the appropriate Senior Manager.

6.5.4 If appropriate the colleague may be asked to share their insight and learning from this process with other colleagues that may have to be a witness for the Trust in future.

6.5.5 In these instances the Trust will ensure any time off required is without loss of earnings and the payment of reasonable expenses.

7 CONSULTATION

   a) HR Policy Group
   b) Ward Managers
   c) Staff Side
   d) Health and Wellbeing @ Work
   e) Heads of Divisions
   f) Head of Finance
   g) Executive Operational Lead
   h) OED
8 TRAINING AND SUPPORT

Colleagues will receive specific training in relation to this policy where it is identified in their individual training needs analysis as part of their development for their particular role and responsibilities.

9 MONITORING

9.1 The Health and Wellbeing @ Work’s Staff Support Services will provide an anonymised monthly report to the Human Resources Department outlining the number of colleagues who have referred into the staff support services and attend counselling sessions. The report will contain anonymous data relating to presenting demographics within the Trust i.e. age, initial presentation, band and division to enable area where additional support may be useful can be identified and facilitated. No data will at any time identify an individual colleague and confidentiality will always be maintained. The report will be reviewed by the Head of Human Resources and the anonymised information will be presented to the appropriate committee as required.

9.2 Following each counseling appointment a document will be forwarded to Human Resources from Occupational Health Service advising of all colleagues’ attendance and whether ongoing or further support required.

9.3 Details of the support provided by the Patient Safety Department will not be disclosed to anyone outside of the department, unless it is necessary to do so, e.g. for legal reasons or if the safety of any individual may be compromised. Should disclosure be necessary every effort will be made to discuss this with the colleague prior to the disclosure being made.

9.4 The Occupational Health Department is a separate service to Staff Support Services with separate clinical systems and pathways. They will keep detailed clinical notes of discussions and support given to colleagues and any recommendations that are made. They will inform Human Resources of the names of colleagues who have been supported, when the support was provided and the type of event that prompted the support. Any other detail will not be provided without explanation or reason to do so. Occupational Health will liaise with HR in relation to management referrals and sickness absence etc. in line with confidentiality requirements and SEQOSH.

10 CONFIDENTIALITY AND RECORD KEEPING

10.1 The Staff Support Counselling Service (SSS) records are strictly confidential and are not noted in any personal, Occupational Health or Personal Records or files and are managed as confidential records within an anonymised Clinical Management System (Corenet). All records are kept in accordance with the BACP ethical framework and Trust policy within the SSS. Notes are made to aid the memory and are kept within the Corenet system which is housed off site in accordance with Trust IT systems.

10.2 The purpose of the Corenet records is for monitoring service uptake, evaluation of clinical practice and identification of common themes (such as occupational stress, bereavement, and common work and home related issues which colleagues seek support for). This also enables the service to identify peaks and trends and direct additional support services.

10.3 Information about individual colleagues from SSS is NOT available to Managers, Occupational Health, HR or any other individual / body in line with the confidentiality agreements with each colleague contacting the service. Staff Support Services is accredited by the Royal College of Psychiatrists and The British Psychological Society as part of the Services APPTS accreditation. Occupational Health maintains Clinical Records confidential to the individual colleague and those kept within the OH service as per SEQOSH standards by which OH is accredited.
# Equality and Human Rights Analysis

<table>
<thead>
<tr>
<th>Title:</th>
<th>Supporting Colleagues</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Area covered:</strong></td>
<td>Trust Wide</td>
</tr>
</tbody>
</table>

**What are the intended outcomes of this work?**
This policy describes the standards and processes required to support colleagues that are affected by incidents and events at work.

**Who will be affected?**
This policy applies to all employees of Mersey Care NHS Foundation Trust as well as those who act as volunteers, those who hold an honorary contract, bank, agency and contracted colleagues.

## Evidence

**What evidence have you considered?**
Contents of Policy.

- **Disability (including learning disability)**
  See cross cutting

- **Sex**
  See cross cutting

- **Race**
  See cross cutting

- **Age**
  See cross cutting

- **Gender reassignment (including transgender)**
  See cross cutting

- **Sexual orientation**
  See cross cutting

- **Religion or belief**
  See cross cutting

- **Pregnancy and maternity**
  See cross cutting

- **Carers**
  See cross cutting

- **Other identified groups**
  See cross cutting

**Cross Cutting:**
Noted that in section 4 on page 7 the inclusion of any forms of discrimination as potential cause of distress.

**Recommendation:**
The inclusion of the impact of continual discriminatory behaviours as being stressful and traumatic. section 4 on page 7

**Recommendation:**
Section 5 to include a reference to the duties of the Equality and Human Rights Team (remove from Section 12and re-number the document)

**Recommendation:**
The inclusion of monitoring in relation to the protected characteristics and the provision of support to
ensure equality of access of a minimum of annually and that this is reported through Workforce Monitoring as detailed in section 10.5

<table>
<thead>
<tr>
<th>Human Rights</th>
<th>Is there an impact?</th>
<th>How this right could be protected?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Right to life (Article 2)</td>
<td>not engaged</td>
<td></td>
</tr>
<tr>
<td>Right of freedom from inhuman and degrading treatment (Article 3)</td>
<td>Use supportive of a HRBA</td>
<td></td>
</tr>
<tr>
<td>Right to liberty (Article 5)</td>
<td>not engaged</td>
<td></td>
</tr>
<tr>
<td>Right to a fair trial (Article 6)</td>
<td>Use supportive of a HRBA</td>
<td></td>
</tr>
<tr>
<td>Right to private and family life (Article 8)</td>
<td>Use supportive of a HRBA</td>
<td></td>
</tr>
<tr>
<td>Right of freedom of religion or belief (Article 9)</td>
<td>Use supportive of a HRBA</td>
<td></td>
</tr>
<tr>
<td>Right to freedom of expression</td>
<td>Use supportive of a HRBA</td>
<td></td>
</tr>
<tr>
<td>Note: this does not include insulting language such as racism (Article 10)</td>
<td>Use supportive of a HRBA</td>
<td></td>
</tr>
<tr>
<td>Right freedom from discrimination (Article 14)</td>
<td>Use supportive of a HRBA</td>
<td></td>
</tr>
</tbody>
</table>

Engagement and Involvement detail any engagement and involvement that was completed inputting this together.

Summary of Analysis

Eliminate discrimination, harassment and victimisation
This policy seeks to support colleagues within Mersey Care NHS Foundation Trust. It has identified where stress and Trauma may occur in relation to discrimination. The changes to be made as a result of the analysis with supplement this.

Advance equality of opportunity
The changes identified within the analysis will support the Trust meeting its aims to ensure equality of opportunity within the support offered to staff.
### Promote good relations between groups

This policy supports a positive approach to relations within the Trust.

### What is the overall impact?

Supportive of the Trusts Public Sector Equality Duties requirements

### Action planning for improvement

The analysis made the following recommendation to ensure the Trust meets its PSED

**Recommendation:**
The inclusion of the impact of continual discriminatory behaviours as being stressful and traumatic.

**Recommendation:**
Section 5 to include a reference to the duties of the Equality and Human Rights Team (remove from Section 12 and re-number the document)

**Recommendation:**
The inclusion of monitoring in relation to the protected characteristics and the provision of support to ensure equality of access of a minimum of annually and that this is reported through Workforce Monitoring as detailed in section 10.5

### For the record

**Name of persons who carried out this assessment:**
Stuart Eales
Meryl Cuzak – Equality and Human Rights Lead
Kathleen Murphy- HR advisor

**Date assessment completed:**
30th August 2017

**Name of responsible Director:**

**Date assessment was signed:**
# Action plan template

<table>
<thead>
<tr>
<th>Category</th>
<th>Actions</th>
<th>Target date</th>
<th>Person responsible and their area of responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monitoring</td>
<td>To include the requirement to monitor the provision of support by the protected characteristics ensure equality of access at a minimum of annually and report through Workforce Monitoring as detailed in section 10.5</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Accountability         | To include the duties of the Equality and Human Rights Team within Section 5 - Duties  
Remove the items within Section 12 which details the support offered by the Equality team members. |              |                                                     |
| Tackling discrimination| To include the impact continual/on-going experience of discriminatory behaviours as being stressful and traumatic. - Section 4 |              |                                                     |
| Public Sector Equality Duty | Maintain Section 12 as the required Equality and Human Rights Analysis. Remove the statement within section 12 – The corporate statement requirement within policies fulfills this duty. |              |                                                     |
APPENDIX A: Incident Support Toolkit – Discussion Form

The Line Manager’s Discussion Form is designed to help understand support requirements of colleagues after an incident or event. The form should be completed with your colleague who is being offered support and stored securely in their personal file.

<table>
<thead>
<tr>
<th>Discussion with colleague:</th>
<th>Date of Incident:</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONSIDER/ASK: Is your colleague fit to continue their duties?</td>
<td></td>
</tr>
<tr>
<td>ACTION: Has a Trust DATIX/Ulysses report been</td>
<td></td>
</tr>
<tr>
<td>IF appropriate, ASK: Is your colleague happy to continue to work with the Service User / Carer? (If yes are any special requirements necessary?) Document</td>
<td></td>
</tr>
<tr>
<td>DISCUSS: Do arrangements need to be made for your colleague to receive medical assessment / attention?</td>
<td></td>
</tr>
<tr>
<td>ASK: Does your colleague need money for refreshments if they are to attend hospital immediately after the event?</td>
<td></td>
</tr>
<tr>
<td>ASK: Do they need assistance with transport to get home? (check if anybody at home and contact family or friends)</td>
<td></td>
</tr>
<tr>
<td>ASK: Do they need recovery time after the event?</td>
<td></td>
</tr>
<tr>
<td>ASK: If your colleague has been given the Trust’s “Supporting Colleagues Toolkit? Make sure they have the 24/7 Staff Support Service helpline 0151 330 8103</td>
<td></td>
</tr>
<tr>
<td>ASK: Will your colleague require further / specialist support or counselling?</td>
<td></td>
</tr>
<tr>
<td>CONSIDER: If your colleague may need reimbursement for transport to and from appointments e.g. counselling, physio, GP</td>
<td></td>
</tr>
<tr>
<td>ASK: Has your colleague had an opportunity to discuss the event and talk about how it was managed?</td>
<td></td>
</tr>
<tr>
<td>ASK: Are there other colleagues who may be affected by the event require support?</td>
<td></td>
</tr>
<tr>
<td>ACTION: If your colleague is an member of the Bank or an Nursing Agency, inform Additional Staffing of the incident</td>
<td></td>
</tr>
<tr>
<td>ACTION: If your colleague is to be absent from work, complete a “work related absence” referral</td>
<td></td>
</tr>
<tr>
<td>You may visit, or send a colleague to visit with a card, flowers and chocolates to stay in touch</td>
<td></td>
</tr>
</tbody>
</table>