

The Newcastle upon Tyne Hospitals NHS Foundation Trust

Supporting Staff Involved in Traumatic/Stressful Incidents, Complaints or Claims Policy

Effective: November 2009

Review: November 2012

1. Introduction

The Trust recognises that during the course of working practice, members of staff may occasionally become involved in incidents and/or processes that they may find traumatic and stressful.

2. Scope of this Policy

This policy outlines the guidance for all healthcare staff who are involved in traumatic/stressful incidents, to ensure that they are supported throughout the process. Some of the investigative and procedural scenarios whereby staff may require support include:

- Serious Untoward Incident investigation
- Allegations of Negligence
- Complaint investigation
- Preparing statement of litigation cases
- Giving evidence of inquests
- Police Investigation
- Professional Conduct Hearing (E.g. General Medical Council/Nursing Midwifery Council)
- Court Proceedings (E.g. Child Protection Care Order).

3. Key Components

The Trust recognises that it is important that staff are supported appropriately. Support should be given to individuals' and a non-judgemental approach should be used.

The Key Components are:

- to value and support staff
- to provide individuals with appropriate and relevant information necessary for them to provide input into any investigative or procedural case
- to minimise negative effects on staff caused by involvement in investigations and proceedings
- to reduce instance of staff leaving or being absent from work due to poor experiences of investigations and/or proceedings
- to protect patients and improve service provision.

4. Links to other Policies

This policy should be read in conjunction with the following relevant policies:

- [Incident Investigation Procedure](#)
- [Reporting and Management of Serious Untoward Incidents](#)
- [Claims Management Policy](#)
- [Complaints Policy](#)

- [Being Open Policy](#)
- [Management and Reporting of Accidents and Incidents](#)
- [Disciplinary Policy and Procedure.](#)

These policies are available on the Trust's intranet.

5. Responsibilities

Clinical Director/Directorate Manager

The responsibility for ensuring the application of this policy lies with the Clinical Director of each Directorate supported by the Directorate Manager. They are responsible for:

- 5.1 reviewing incidents/allegations of negligence to ascertain whether there is a need to offer support to individual members of staff.
- 5.2 ensuring that support is offered to staff who are involved in the Traumatic/Stressful incident or complaint.
- 5.3 ensuring that appropriate action is taken if the staff member is experiencing difficulties following the event
- 5.4 ascertaining whether there are any learning points to prevent reoccurrence of the incident in the future.

Line Managers/Named Contact

- 5.5 Line Managers will in most cases be the first point of contact for an individual seeking support. If this is not appropriate a Named Contact should be assigned. In certain circumstances (such as where there may be a conflict of interest) assistance will be provided by the Human Resources Department. The staff member should be made aware of this channel for support at the earliest opportunity. If appropriate, a 'one-to-one' meeting should be arranged with the staff member in question.
- 5.6 The Line Manager/Named Contact should ensure that the Clinical Director/Directorate Manager is made aware of the supporting staff issue bearing in mind the need for confidentiality.

6. Investigations and Proceedings

- 6.1 Investigations and procedural issues can be time-consuming for staff involved. The progress can also be quite lengthy and some cases will take years rather than months to conclude. This is particularly relevant for claims, police investigations and professional conduct investigations.
- 6.2 All individuals involved in the incident must have their safety assured and any injuries dealt with. Where the injured person is a patient the next of kin should be notified as soon as possible in accordance with the Trust 'Being Open' policy.
- 6.3 Staff must be aware that any incident can progress into a claim of negligence and should therefore consider this when completing related documentation.
- 6.4 During the course of the investigations and/or procedures, it is likely that there may be a variety of issues that require consideration, further clarification and action. These include:

- initial investigation
- contact with patients and relatives as recommended in the Being Open policy
- contact with colleagues
- incident review
- corrective actions
- internal and external reporting requirements (E.g. SHA)
- provision of statements
- protection of evidence
- training
- supervision
- competency
- revision of procedures/protocols/guidelines
- possible disciplinary action.

6.5 The process of supporting staff involved may be linked to some of these issues and Line Managers/Named Contacts should ensure that support to staff is maintained as a key focus throughout the investigation.

7. The Process

7.1 The Trust recognises that staff can often feel vulnerable when involved in investigations and/or procedures. Individuals, regardless of grade or position, will often feel anxious about their involvement and their role in the process.

7.2 The support provision may differ depending on what the issue is and the specific needs of the individual. The following sets out support provision available to staff:

- a named contact at the Trust who will be responsible for ensuring support
- clear, concise information regarding the investigation/proceedings
- advice on professional groups (i.e. RCN, GMC) that may assist
- agreed timetable for case review and communication with the individual
- assistance with incident/statement writing
- meeting with a representative from Human Resources
- counselling Service
- access to a Mentor
- update on case outcome and recommendations
- opportunity to evaluate the effectiveness of the support offered.

7.3 Advice on the completion of statements can be obtained from the Trust documents 'Complaints Policy' and 'Policy for Management and Reporting of Accidents and Incidents'. If the investigation goes to court appendix 1 provides guidance on attending court and the Trust's Legal Department will also offer advice and support.

8. Immediate Support

The immediate support offered to staff involved in a traumatic/stressful incident, complaint or claim will in the majority of cases be through their Line Manager as the first point of contact. The Line Manager should arrange a "one-to-one" meeting with the individual member of staff concerned to discuss the issues concerned, offer support and determine the level and type of further support required by the member of staff which may be through internal or external sources i.e. Human Resources or the Counselling Service.

9. Ongoing Support

Managers must treat each case individually and acknowledge that different staff in different circumstances will require different levels of support.

Following the immediate one-to-one support meeting outlined above the manager should ensure that the level and type of support agreed at that meeting has occurred and has been sufficient to adequately support the member of staff involved in the incident, complaint or claim if they are experiencing difficulties associated with the event.

Further support mechanisms in this instance may include:

Human Resources, the Occupational Health Service, Health and Safety Advisors, Directorate Management or Legal and Committee Services.

Support offered should be documented on the Datix Risk Management system and further meetings arranged as required to ensure the support offered is effective.

10. Monitoring

Compliance with this policy will be monitored by the Nurse Specialist Patient Safety, who from analysis of incidents, complaints and inquests from the Datix reporting system related to staff support will produce a quarterly report which will identify any areas for improvement. The report will be presented to the Clinical Risk Group will agree the actions and these will be monitored by the group until all actions are completed.

Author: Nurse Specialist Patient Safety

Guide to appearing in Court (Provided by Ward Hadaway Solicitors)

1. How will I know that I need to attend?

You will normally be told either by the Legal Department of the Trust, your Line Manager or directly by the Trust's Solicitors if you have had previous communication with them that a Trial or Inquest has been listed for hearing and that your attendance is required. We would normally do this initially by letter or a telephone call, but in the case of a Trial you will then be provided with a formal Witness Summons specifying the time, date and place for your attendance. A Coroner may also summons you to attend an inquest.

2. What is a Witness Summons?

A Witness Summons is a legal document requiring you to attend Court for the purposes of giving evidence or producing documents. Failure to attend at Court will result in the Court ordering you to be formally brought before them where sanctions can be imposed, including, exceptionally, a prison sentence, for contempt. It is important therefore that if you are not able to attend once a formal Witness Summons has been served, you notify your Line Manager / legal team as quickly as possible. An acceptable reason for non-attendance would be serious ill health. An unacceptable reason would include arranging a holiday after you had been served with the Witness Summons.

3. Where do I go?

The Witness Summons will specify where the matter has been listed for Trial. For Inquests, you will normally be told where the Inquest is being heard in correspondence or by telephone. You will also normally be given a time to attend (which will usually be earlier than the start time on the witness summons). This is to enable you to familiarise yourself with the Court surroundings and also to meet the Trust's legal representatives and others involved in the case.

4. What do I wear?

When attending Court either for an Inquest or for Court proceedings, you will normally be attending in your professional capacity. Whilst it is not appropriate to wear your uniform, we would recommend that you dress appropriately in a smart and sober outfit which reflects your professional status.

5. Do I have to sit outside and wait to be called?

Normally, no. Inquests and civil trials are not dealt with in the same way as criminal trials which you may have seen on television. You will normally be allowed to sit in the Court and listen to the proceedings. We normally encourage people to attend from the start of the trial so that they can hear what is being said. It also gives you a chance to become more comfortable with the Court surroundings.

6. What do I call the Judge?

What you call the Judge depends on what Court you are in. At Inquests, you will normally address the Coroner as 'Sir or Madam'. In the Civil Court, District Judges are addressed as 'Sir or Ma'am', Circuit Judges are addressed as 'Your Honour' and High Court Judges are addressed as 'My Lord or My Lady'. You will be told the appropriate form of address by the Trust's legal representatives.

7. What will happen when I am called to give evidence?

You will be told when you are likely to be called and when you are called you should make your way to the witness box. The Clerk of the Court will then approach you so that you can take your oath or affirmation.

The Witness Statement that you will have prepared, signed and submitted prior to the trial, will stand as your 'evidence in chief'. This will often be contained in the "trial bundle" which will be in the witness box for your use. You will be asked to turn to your statement. Sometimes you are asked to read your statement but in the main, we will seek the Court's agreement that the statement will stand as your "evidence in chief". Sometimes the Trust's legal representative will ask for permission to clarify further points in respect of your statement and if the Judge agrees he will then ask you specific questions. Once your "evidence in chief" has been given, the legal representative of the other party will then ask you further questions. This is known as "cross-examination". The Judge may also ask you questions directly at any time during your evidence. The Trust's legal representative may interrupt during cross-examination, for example, if he believes you are being asked an unfair or leading question. If he does, the Judge will indicate whether you should respond or not.

Once you have been cross-examined, the Trust's legal representative may seek to clarify any issues that may have been raised during your cross-examination. After this you will be "recused" which means your witness summons is discharged and you are free to leave the Court.

If the Court breaks whilst you are giving your evidence, you must not discuss the case with anyone and you will remain under oath – this may be over the lunch period but can also be overnight, if the Court breaks for the day during your evidence.

8. What is an oath or affirmation?

Before starting to give your evidence you will be asked to swear on the bible, or other appropriate holy book, or affirm that your evidence will be the truth. You need to inform your Solicitors whether you wish to swear or affirm and which holy book you require.

9. Are there any practical tips for giving evidence?

- Most importantly, you must tell the truth
- Listen carefully to the question being asked, if you are not sure of the answer do not be tempted to make an answer up, but simply say that you do not know
- You can ask Counsel or the Judge to repeat the question and you can think about the question before you provide an answer
- Keep your answers short and to the point
- When giving your evidence, look at whoever is asking you the question. But your answers should be addressed to the Judge regardless of who asks it
- If you wish to look at a document in the trial bundle before answering, you are free to do so. Just ask the Judge if you can look at a particular document before answering
- Ensure you read your witness statement before giving evidence and re-familiarise yourself with any documents you may need to refer to when giving evidence
- If you are at all uncertain about what will happen when you give evidence please ask in advance.

**THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST
IMPACT ASSESSMENT – SCREENING FORM A**

This form must be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

Policy Title:	Supporting Staff Involved in Traumatic/Stressful Incidents, Complaints or Claims Policy	Policy Author:	Nurse Specialist Patient Safety
		Yes/No?	You must provide evidence to support your response:
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		This policy does not discriminate against any individual on the basis of race, ethnicity, nationality, gender, culture, religion, sexuality, age or disability.
	• Race	No	
	• Ethnic origins (including gypsies and travellers)	No	
	• Nationality	No	
	• Gender	No	
	• Culture	No	
	• Religion or belief	No	
	• Sexual orientation including lesbian, gay and bisexual people	No	
	• Age	No	
	• Disability – learning difficulties, physical disability, sensory impairment and mental health problems.	No	
2.	Is there any evidence that some groups are affected differently?		
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	No	
4(a).	Is the impact of the policy/guidance likely to be negative? <i>(If "yes", please answer sections 4(b) to 4(d)).</i>	NA	
4(b).	If so can the impact be avoided?		
4(c).	What alternatives are there to achieving the policy/guidance without the impact?		
4(d)	Can we reduce the impact by taking different action?		

Comments:	Action Plan due (or Not Applicable): NA
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Name and Designation of Person responsible for completion of this form: Jo Coward Nurse Specialist Patient Safety Date: 12/10/2009

Names & Designations of those involved in the impact assessment screening process: Clinical Risk Group.....

(If any reader of this procedural document identifies a potential discriminatory impact that has not been identified on this form, please refer to the Policy Author identified above, together with any suggestions for the actions required to avoid/reduce this impact.)