

## Voluntary Health Scotland and the Scottish Health Council

### Briefing paper on the Lampard report and associated risks to the NHS and third sector

#### Introduction

This paper outlines the key elements of the Lampard report<sup>1</sup> and highlights the residual risks that fell outwith the scope of the report.

The Lampard Report sought to:

- ▶ identify the common themes from all the NHS investigation reports into matters relating to Jimmy Savile,
- ▶ look at NHS-wide guidelines and procedures in the light of the findings and recommendations of all the NHS investigation reports,
- ▶ seek relevant expert advice (if appropriate), and
- ▶ advise the Secretary of State for Health on whether and how any relevant guidelines or procedures need to be tightened or changed.

The report contained fourteen recommendations for NHS bodies and the government. Whilst the report has no official status in Scotland, the National Group for Volunteering in NHS Scotland and the Scottish Government recognise its importance in relation to volunteer management and beyond.

The full list of recommendations are detailed in Appendix 1. In summary, the recommendations relate to policy development, governance and procedural compliance, training and support for volunteer managers and, in one case, a change to legislation.

#### Third sector engagement of volunteers

The Lampard Report did not acknowledge the relationship between an NHS body and a third sector organisation which engages volunteers in health settings.

Incidents involving volunteers of third sector organisations in recent years have exposed that the governance of volunteering programmes (and how risks are managed) are inconsistent across NHS Boards and in some cases, even within the same Board. These situations can expose the volunteers and others to unnecessary risk.

<sup>1</sup> <https://www.gov.uk/government/publications/jimmy-savile-nhs-investigations-lessons-learned>

Arrangements with third sector partners can range from historical practice of collaborative working, service-level agreements and commissioned services.

Where arrangements are of a less formal nature, lines of responsibility can become blurred and it increases the probability of breaches of policy and procedure leading to patients, staff and volunteers becoming exposed to unnecessary risk.

### **Aims and format of the meeting**

This meeting has been arranged to seek the views of third sector organisations in order to better understand the local arrangements and to identify any additional issues that need to be taken into account.

The meeting will begin with an introduction of some typical situations that have arisen in recent years, setting the context of the discussion and providing a basis to share experiences.

Following the meeting it is envisaged that a short-life working group will be established to examine the need and, if relevant, guidance for NHS Boards.

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## Recommendations stemming from the Lampard Report

The table below lists the original recommendations from the Lampard Report into the Savile enquiries and their relevance to the NHS.

The Lampard report focussed on NHS England but there is relevance for NHSScotland and NHS Boards in Scotland. This has been acknowledged in the appropriate columns.

Recommendation		NHSScotland/ Scottish Government	NHS Boards	Specific relevance to volunteer managers
1	All NHS hospital trusts should develop a policy for agreeing to and managing visits by celebrities, VIPs and other official visitors. The policy should apply to all such visits without exception.		x	x
2	All NHS trusts should review their voluntary services arrangements and ensure that: <ul style="list-style-type: none"> <li>▶ they are fit for purpose;</li> <li>▶ volunteers are properly recruited, selected and trained and are subject to appropriate management and supervision; and</li> <li>▶ all voluntary services managers have development opportunities and are properly supported.</li> </ul>		x	x
3	The Department of Health and NHS England should facilitate the establishment of a properly resourced forum for voluntary services managers in the NHS through which they can receive peer support and learning opportunities and disseminate best practice.	x	x	x
4	All NHS trusts should ensure that their staff and volunteers undergo formal refresher training in safeguarding at the appropriate level at least every three years.		x	x

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Recommendation		NHSScotland/ Scottish Government	NHS Boards	Specific relevance to volunteer managers
5	All NHS hospital trusts should undertake regular reviews of: <ul style="list-style-type: none"> <li>▶ their safeguarding resources, structures and processes (including their training programmes); and</li> <li>▶ the behaviours and responsiveness of management and staff in relation to safeguarding issues to ensure that their arrangements are robust and operate as effectively as possible.</li> </ul>		x	x
6	The Home Office should amend relevant legislation and regulations so as to ensure that all hospital staff and volunteers undertaking work or volunteering that brings them into contact with patients or their visitors are subject to enhanced DBS and barring list checks.	x		
7	All NHS hospital trusts should undertake DBS checks (including, where applicable, enhanced DBS and barring list checks) on their staff and volunteers every three years. The implementation of this recommendation should be supported by NHS Employers.		x	x
8	The Department of Health and NHS England should devise and put in place an action plan for raising and maintaining NHS employers' awareness of their obligations to make referrals to the local authority designated officer (LADO) and to the Disclosure and Barring Service.	x	x	x
9	All NHS hospital trusts should devise a robust trust-wide policy setting out how access by patients and visitors to the internet, to social networks and other social media activities such as blogs and Twitter is managed and where necessary restricted. Such policy should be widely publicised to staff, patients and visitors and should be regularly reviewed and updated as necessary.		x	x

Recommendation		NHSScotland/ Scottish Government	NHS Boards	Specific relevance to volunteer managers
10	All NHS hospital trusts should ensure that arrangements and processes for the recruitment, checking, general employment and training of contract and agency staff are consistent with their own internal HR processes and standards and are subject to monitoring and oversight by their own HR managers.		x	x
11	NHS hospital trusts should review their recruitment, checking, training and general employment processes to ensure they operate in a consistent and robust manner across all departments and functions and that overall responsibility for these matters rests with a single executive director.		x	x
12	NHS hospital trusts and their associated NHS charities should consider the adequacy of their policies and procedures in relation to the assessment and management of the risks to their brand and reputation, including as a result of their associations with celebrities and major donors, and whether their risk registers adequately reflect such risks.		x	x
13	Monitor, the Trust Development Authority, the Care Quality Commission and NHS England should exercise their powers to ensure that NHS hospital trusts,(and where applicable, independent hospital and care organisations), comply with recommendations 1, 2, 4, 5, 7, 9, 10 and 11.	x	x	
14	Monitor and the Trust Development Authority should exercise their powers to ensure that NHS hospital trusts comply with recommendation 12.	x		