



Acting on concerns: lessons from the NHS Savile investigations

Kate Lampard



The Savile NHS investigations: The role of Kate Lampard, Ed Marsden and Verita

Assurance

- Over sight of 3 main investigations Leeds General Infirmary, Broadmoor and Stoke Mandeville
- Oversight of 28 other hospital investigations

Lessons learnt

- From the NHS investigations and from our own researches/investigations



The findings of the NHS investigations

- Savile had a special “untouchable” status- celebrity, prolific volunteer , endorsement of senior management, senior civil servants, politicians
- Reticence of victims- most did not tell anyone what had happened
- Staff to whom complaints were made were disbelieving and/or reluctant to act
- Hospital management fragmented and hierarchical- senior managers not made aware of the abuses



Our own findings

Much of the Savile story rests upon the circumstances and social attitudes of his time

BUT there are many elements of the Savile story that could be repeated

- People in hospitals particularly vulnerable to abuse
- Society and individuals continue to have a weakness for celebrities



Necessary systems and processes

- Security measures and restrictions on access
- Proper management of relations with celebrities and VIPs, including visits
- Robust recruitment, management and supervision of volunteers
- Safeguarding resources
- Clear policies and processes aimed at encouraging the reporting of concerns; many and varied means for doing so



The right culture and behaviours

- Leadership that promotes safeguarding - the example of BA and Shell UK
- Training and retraining for all staff and volunteers in their safeguarding obligations
- Engagement of all staff groups in devising safeguarding arrangements
- Organisational responsiveness



Some particular issues

- NHS engagement with wider safeguarding systems
- DBS checking of volunteers
- Access to the internet and social media
- Management of human resources

The lessons for us all



- Acknowledgment of the possibility of abuse-listening when people including children raise matters of concern
- We all have a duty to act on concerns



Volunteers in acute hospitals

Ed Marsden



What we found

1. The significant scale of volunteering

- 78,000 plus volunteers
- 13 million hours pa
- £58,000 average spend on management and training
- Acute trusts have ambitious plans to expand schemes
- Some very large individual schemes e.g. King's 1,500 plus

2. The changing demographics of volunteers

- Younger and more diverse
- Motivation - part of education/enhancement of CV



What we found

3. Changing roles of volunteers

- Closer to patients

4. Widely differing management arrangements and support

- Leadership commitment
- Resources
- Support for voluntary services managers



The management of volunteers

- Effective management:
 - requires strategic, board level commitment and leadership
 - demands resources and has a cost
- Volunteers need to be properly recruited, selected, trained and supervised



The management of volunteers

- Volunteers should be:
 - subject to DBS checks including barring list
 - subject to a trust's own induction and safeguarding training
- Voluntary service managers need training and support



VERITA

IMPROVEMENT THROUGH INVESTIGATION