

Management of Relationships in the Workplace Policy

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Distributed via	Website, Team Brief

**Lincolnshire Community Health Services NHS Trust
Management of Relationships in the Workplace Policy**

Version Control Sheet

Version	Section / Para / Appendix	Version / Description of Amendments	Date	Author / Amended by
1	New Policy		July 2013	Lyndsey Clapham
2	Section 5.3	Amended section to make it clear that an employee must not have managerial authority of another with whom they are in a close personal relationship	September 2015	Lyndsey Clapham
3	All	Full review and update	Jan 2016	Laura Herrick
4	All	Full review	December 2017	Clare Nock
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Lincolnshire Community Health Services NHS Trust

Management of Relationships in the Workplace Policy

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Policy Statement

Background

It is recognised that close personal relationships can and do sometimes form in the workplace and that as a large employer situations will arise within Lincolnshire Community Health Services NHS Trust where related persons or individuals with a close personal relationship are employed within the same team, establishment or work area.

Whilst recognising the right of employees to privacy and family life, the organisation has a legitimate right to protect the interests of the organisation, patients, service users and other employees and to take appropriate action when close personal relationships either have the potential to or do impact upon the Organisation's services.

Purpose

The purpose of this policy is to provide employees and managers with clear guidance on the standards of behaviour expected of all employees in their dealings with staff, volunteers patients and service users and the professional boundaries that must be respected in those relationships.

To ensure that issues or perceptions arising from close relationships are dealt with promptly, sensitively and effectively.

Responsibilities

The responsibilities of individuals are stated within the policy

Training

It is expected that managers and staff will familiarise themselves with the details of this policy and their responsibilities in line with this. There will not be any formal training given however if any further detail or interpretation of the policy is required the Workforce department will be able to provide this.

Dissemination

Website,

Resource implication

The resource implications will be impacted as a result of potential positions being affected as a result of personal relationships at work.

Lincolnshire Community Health Services NHS Trust

Management of Relationships in the Workplace Policy

1. Introduction

- 1.1 This Policy is designed to encompass and protect both individual staff members, including volunteers acting for or on behalf of the Organisation, and patients. Account will be taken of inclusivity and equality issues so as not to discriminate against staff members or volunteers who are/have been patients.
- 1.2 It is acknowledged that there can be a fine line between a personal and therapeutic relationship, taking account of normal human behaviour, which fosters attractions and attachments between individuals. However it is essential that professional relationships remain paramount, using management, practicing supervision, escalation and working in an open and honest culture as a way of supporting this approach.
- 1.3 The policy is based upon guidance that has already been produced by a number of professional regulatory bodies; these are included at the end of this document.
- 1.4 Offences under this policy will be considered under the Trust's Disciplinary Policy. Breach of this policy may also constitute an offence under the Fraud Act or Bribery Act and could lead to a criminal investigation by the Trust's Local Counter Fraud Specialist ("LCFS").

2. Purpose

- 2.1 This policy is designed to protect job applicants, staff members, patients, carers, volunteers and the reputation of the Trust.
- 2.2 It will ensure that staff members are aware of the Organisation's expectations regarding the existence and development of close personal relationships with other staff and/or patients with whom they have contact, protecting the interests of both staff and patients.

3. Responsibilities

- 3.1 Executive/Associate/Deputy/Assistant Directors, General Managers and Heads of Service are responsible for:

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- Ensuring adherence to this policy and procedures in line with the guidelines laid down in this policy.
- Ensure that other management staff understand their role in ensuring this policy is adhered to.

3.2 Managers are responsible for:

- Ensuring this policy and procedure/guidelines are followed and understood as appropriate to each staff member's role and function.

3.3 All Staff are responsible for:

- Adhering to this policy and following procedure/guidelines laid down within the policy.

4. Definitions

4.1 Personal Relationship – a relationship that goes beyond the bounds of a 'professional' relationship and includes being personally involved, i.e. a platonic relationship/personal friend, being sexually involved, a close family member, married or in a co habiting relationship, or in a business relationship.

4.2 Patients – individuals who are accessing services and/or actively engaged in packages of care provided by the organisation.

5. The Policy

5.1 Recruitment

Applicants for positions within the organisation must declare any personal relationships with Organisation employees on their application form. Where an applicant has declared a relationship with an LCHS employee, the LCHS employee may not be involved in the recruitment process for the applicant at any stage.

If a successful applicant is found to have failed to declare a relationship on their application form with an LCHS employee who was involved in the recruitment process or with whom they now have a line management or subordinate working relationship, or if a manager takes part in a recruitment process and does not declare a relationship with an applicant, this will be investigated under the disciplinary procedure and may lead to disciplinary action which could include dismissal. It may also constitute an offence under the Fraud Act or Bribery Act and could lead to a criminal investigation by the LCFS.

Where an applicant, if appointed to a position, including secondments and 'acting up' arrangements would be working in the same team, at any level of the management structure as someone with whom they have a personal relationship, the implications of this should be considered. The interview panel must include an impartial manager from another service area or a representative from Workforce.

5.3 Personal Relationships with Colleagues

5.3.1 In any large organisation it is likely that some employees will be related to one another or develop a personal relationship, and, if they are in a close working relationship in the same workplace, the potential for conflict between personal/family loyalty and work responsibilities may arise.

5.3.3 This policy sets out some standards of conduct to assist and protect staff whilst at work and these are set out below:

- An employee should not be involved in any formal procedures if they have a personal relationship with the individual concerned.
- Any employee who is in a close personal relationship with a colleague working in the same department/section must declare the relationship to his/her manager. If the relationship is between a manager/supervisor and an employee whom he/she supervises, the relationship should be declared to a senior manager. The information declared will be considered as to whether the personal relationship has any impact.
- The organisation does not permit situations in which an employee has managerial authority over another with whom he/she is having a close personal relationship. The organisation reserves the right to elect to transfer one or both of the employees involved in the relationship to a job in another department/service in order to avoid any detrimental effect on either patient care or working relationships within that department/service. In these circumstances, the organisation will consult both of the employees and seek to reach a satisfactory agreement regarding the transfer of one or both of them. Under these circumstances, excess travel or pay protection will not be applicable.
- In such a situation if it is not possible to transfer at least one of the employees (for example if no suitable vacancies exist, or if an employee refuses to transfer), and the relationship is deemed to have a detrimental effect on either patient care or working relationships within that department/serviceward, the organisation reserves the right to dismiss one or both employees (with notice in accordance with the employee's contract, or pay in lieu of notice). Dismissal would, however, be undertaken only as a last resort in circumstances where no other course of action was reasonably open to the organisation.
- If an employee has a personal/intimate relationship with a colleague, he/she should not display any obvious signs of affection in the presence of third parties, whilst undertaking Trust business. This is to prevent any apparent embarrassment to colleagues and also to maintain a professional image to patients and other staff colleagues.
- An employee should not allow their personal relationship with another employee to influence their decision making, or that of other decision-makers.
- If the relationship breaks down, employees should ensure facts that could be interpreted as arguments or disagreements do not occur at work. They may wish to discuss the situation with their line manager, being mindful of domestic abuse issues and take appropriate action in line Domestic Abuse at Work Charter.
- Employees should ensure that their personal/intimate relationship does not bring the reputation of the organisation into disrepute.

5.3.4 Any breach of the standards of conduct outlined will be examined on a case by case basis in determining the appropriate action that may be taken. This may include informal counselling, granting a leave of absence or invoking the disciplinary policy in cases of breach of these standards.

5.4 **Personal Relationships with Patients**

5.4.1 Professional relationships of a therapeutic nature such as social activities, as part of the agreed treatment plan of care are encouraged. However, personal relationships with service users are considered unprofessional. Where personal or business relationships precede the professional relationship, or where dual relationships exist e.g. where within a small community a staff member may already be a personal friend of a patient, it is the responsibility of the staff member to maintain each relationship within its own appropriate boundary. Where such a relationship exists, the staff member **must** inform their line manager and supervision should be used to regularly discuss and explore any potential boundary conflicts.

5.4.2 Developing professional and therapeutic relationships may mean the patient discussing intimate and personal matters. Such discussions may be misinterpreted with perceptions being distorted due to the vulnerability or distress of patients, from which problems may arise from transference and counter-transference, fostering a relationship of personal disempowerment rather than professional support.

5.4.3 Becoming personally or sexually involved with a patient precludes objectivity and breaches the boundaries of the professional relationship. Such involvement is in breach of this policy, and where applicable, will breach professional codes of practice, as well as the Organisation's responsibilities in respect of the Healthcare Standards.

5.4.4 The standards of conduct that must be followed concerning personal relationships with patients are outlined below:-

- Predetermined social contact that is a personal rather than a professional relationship is inappropriate and should not occur.
- Members of staff who are subject to inappropriate comments/behaviours by patients should report to their line manager as soon as safe and practical for appropriate action to be taken.
- If a member of staff is aware that they have feelings for a patient, which are personal and go beyond the boundary of a professional relationship or that they are concerned that a personal relationship is developing with a patient, then they must report it to their line manager immediately.. Possible actions at this stage include transfer of the patients' treatment to another worker, co-working or limiting the therapeutic interventions so that clear boundaries are established to protect both patient user and staff member.
- If a member of staff becomes concerned that a colleague is developing a personal relationship with a patient, they have a responsibility to inform their line manager who will review the concerns and ensure action is taken to maintain the safety of the member of staff and patient.
- If a close friend, partner or family member has cause to use the Organisation's services, this should be handled sensitively and confidentially.

It may be appropriate for them to be treated by another team, or, in the case of admission, for the member of staff to be moved to another area for the duration of the patient's treatment.

- If a personal relationship is envisaged with an ex-user of the service, guidance should be sought from the line manager of action taken to avoid the risk of subsequent allegations of abuse or serious misconduct. This is particularly relevant to those cases where the contact with the services has been minimal or the last contact was some considerable time ago.

5.4.5 These matters will be treated in a sensitive and confidential manner to encourage honesty and to protect both parties. Appropriate steps such as co-working, supervising or re-deployment will be considered in the light of the particular circumstances.

5.4.6 The development of a sexual relationship with a patient is in breach of this policy and will lead to disciplinary action being taken against the member of staff, which may lead to dismissal. Staff should be aware that such a relationship, may be reported under the Safeguarding Adults Procedure or Safeguarding Children and Vulnerable Adults Procedure, as well as to the appropriate professional body.

5.5 Board Member Conduct

Board directors should act impartially and should not be influenced by social or business relationships. No one should use their public position to further their private interests. Board directors should not make decisions to gain financial or other material benefits for themselves, their family, or their friends.

6. References

Human rights Act 1998
Equality Act 2010
Sexual Offences Act 2003
Employment Equality (Sexual Orientation) Regulations 2003 SI2003/1661
Code of Ethics and Conduct
Royal College of Speech and Language Therapists 2000
Code of Ethics and Practice for Counsellors
Code of Professional Conduct Nursing & Midwifery Council 2015
Ethical Standards Policy United Kingdom Council for Psychotherapy 2001
Infamous Conduct The Council for Professions supplementary to Medicine 1998
Practitioner & Client Relationships & the Prevention of Abuse Nursing and Midwifery Council 2002
Professional Practice Guidelines published by Division of Clinical Psychology of the British Psychological Society 1995
Rules of Professional Conduct Chartered Society of Physiotherapists 2002
Vulnerable Patients, Vulnerable Doctors Royal College of Psychiatrists 2002
Healthcare Standards Healthcare Commission 2005
Health Professional Council DATE
Recruitment and Selection Guidelines.

7. Policies

Recruitment and Selection
Temporary Staffing
Disciplinary

NHSLA Monitoring Template

This template should be used to demonstrate compliance with NHSLA requirements for the policy where applicable and/or how compliance with the policy will be monitored.

Minimum requirement to be monitored	Process for monitoring e.g. audit	Responsible individuals/group /committee	Frequency of monitoring /audit	Responsible individuals / group / committee (multidisciplinary) for review of results	Responsible individuals / group / committee for development of action plan	Responsible individuals / group / committee for monitoring of action plan
Application forms	NHS Jobs	Workforce Team	On receipt of applications	Workforce Operational Lead	Workforce Operational Lead	Workforce Operational Lead

Name of Policy: Management of Relationships in the Workplace Policy	
Equality Analysis Carried out by:	Clare Nock
Date:	December 2017
Equality & Human rights Lead:	Rachel Higgins
Director\General Manager:	Maz Fosh

***In this template the term policy\service is used as shorthand for what needs to be analysed. Policy\Service needs to be understood broadly to embrace the full range of policies, practices, activities and decisions: essentially everything we do, whether it is formally written down or whether it is informal custom and practice. This includes existing policies and any new policies under development.**

Section 1 – To be completed for all policies

A.	Briefly give an outline of the key objectives of the policy; what it's intended outcome is and who the intended beneficiaries are expected to be	<p>The purpose of this policy is to provide employees and managers with clear guidance of the standards of behaviour expected of all employees in their dealings with patients and service users and the professional boundaries that must be respected in those relationships.</p> <p>To ensure that issues arising from personal relationships are dealt with promptly, sensitively and effectively.</p>		
B.	Does the policy have an impact on patients, carers or staff, or the wider community that we have links with? Please give details	This Policy is designed to encompass and protect both individual staff members, including volunteers acting for or on behalf of the Organisation, and patients. Account will be taken of inclusivity and equality issues so as not to discriminate against staff members or volunteers who are/have been patients.		
C.	Is there is any evidence that the policy\service relates to an area with known inequalities? Please give details	No		
D.	Will/Does the implementation of the policy\service result in different impacts for protected characteristics?			
		Yes	No	
	Disability		x	
	Sexual Orientation		x	
	Sex		x	
	Gender Reassignment		x	
	Race		x	
	Marriage/Civil Partnership		x	
	Maternity/Pregnancy		x	
	Age		x	
	Religion or Belief		x	
	Carers		x	
<p>If you have answered 'Yes' to any of the questions then you are required to carry out a full Equality Analysis which should be approved by the Equality and Human Rights Lead – please go to section 2</p>				
<p>The above named policy has been considered and does not require a full equality analysis</p>				
Equality Analysis Carried out by:		C Nock		
Date:		December 2017		