

## FOI\_0655\_21/22 – FOI Request Concerning – Sexual Assault Allegations in Care Settings

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1. Please provide the number of allegations reported within your trust, clinical commissioning group or other care setting as defined, of
  - a) Rape
  - b) Sexual assault
  - c) Sexual harassment
  - d) Sexual misconduct
 Please see table on Page 2
  
2. Please advise the location of these offences and or alleged offences broken down by location Mental Health Unit, Hospital, Other Hospital Setting to be clearly defined.
 

Please see table on Page 2
  
3. Please provide this data for the last three years, 2019, 2020, 2021 and 2022 to date.
 

Please see table on Page 2
  
4. Please provide a month by month and location
 

Please see table on Page 2
  
5. Please identify if these allegations are
  - a) A On Staff carried out by a staff Member
  - b) B On Staff carried out by a patient or visitor
  - c) C By Staff on a Patient
  - d) D by Staff on a visitor
  - e) E On Staff carried out by a visitor
 Please see table on Page 2
  
6. For each of these allegations please advise if a suspect was identified and or arrested.
 

This information is not routinely captured by the organisation and therefore not held.
  
7. If a suspect was identified and the suspect was identified as a member or staff or a contractor to the trust, CCG or group. What was the outcome? Was the suspect subsequently arrested, charged or convicted? Was the suspect subsequently investigated, suspended or dismissed from the Trust

|                          | 2019 | 2020 | 2021   |
|--------------------------|------|------|--|
| <b>Sexual Misconduct</b> | 0    | 0    | 0  |
| <b>Sexual Harassment</b> | 0    | 0    | 1 – Insufficient evidence<br>1 – Disciplinary action, Final Written Warning and Redeployment |
| <b>Sexual Assault</b>    | 0    | 0    | 0  |
| <b>Rape Allegation</b>   | 0    | 0    | 0  |



|   | 2019     |          |          |          |          |          |          |          |          |          |          |          | 2020     |          |          |          |          |          |          |          |          |          |          |          | 2021     |          |          |          |          |          |          |          |          |          |          |          | 2022     |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |   |   |
|---|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|---|---|---|
| Sexual Assault Incidents                    | Jan      | Feb      | Mar      | Apr      | May      | Jun      | Jul      | Aug      | Sep      | Oct      | Nov      | Dec      | Jan      | Feb      | Mar      | Apr      | May      | Jun      | Jul      | Aug      | Sep      | Oct      | Nov      | Dec      | Jan      | Feb      | Mar      | Apr      | May      | Jun      | Jul      | Aug      | Sep      | Oct      | Nov      | Dec      | Jan      | Feb      | Mar      |          |          |          |          |          |          |          |          |          |          |          |          |          |   |   |   |
| <b>Obscene Behaviour - To Patient</b>       |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |   |   |
| Inpatient Ward(s)                           | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 1        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 2        | 0        | 1        | 0        | 0        | 0        | 0        | 0 |   |   |
| <b>Obscene Behaviour - To Staff</b>         |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |   |   |
| Community Service(s)                        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 1        | 1        | 0        | 0        | 0        | 0        | 0 | 0 | 0 |
| Inpatient Ward(s)                           | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 1        | 0        | 1        | 1        | 0        | 0        | 0        | 0        | 1        | 0        | 0        | 0        | 0        | 0        | 0 | 0 |   |
| <b>Obscene Language - To Staff</b>          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |   |   |
| Inpatient Ward(s)                           | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0 | 0 |   |
| <b>Sexual Assault - To Patient</b>          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |   |   |
| Community Service(s)                        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 1        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 1        | 0        | 0        | 0        | 0        | 0        | 0        | 0 |   |   |
| Inpatient Ward(s)                           | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 1        | 1        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0 |   |   |
| <b>Sexual Assault - To Relative/Visitor</b> |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |   |   |
| Community Service(s)                        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0 | 0 | 0 |
| <b>Sexual Assault - To Staff</b>            |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |   |   |
| Inpatient Ward(s)                           | 0        | 0        | 0        | 0        | 1        | 0        | 0        | 0        | 0        | 0        | 1        | 0        | 0        | 0        | 1        | 3        | 0        | 0        | 1        | 2        | 0        | 8        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0 |   |   |
| <b>Sexual Harassment - To Staff</b>         |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |   |   |
| Community Service(s)                        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0 | 0 |   |
| <b>Violence - Patient To Staff</b>          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |   |   |
| Inpatient Ward(s)                           | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0 | 0 |   |
| <b>TOTAL</b>                                | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>1</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>1</b> | <b>1</b> | <b>0</b> | <b>1</b> | <b>4</b> | <b>1</b> | <b>0</b> | <b>1</b> | <b>2</b> | <b>0</b> | <b>8</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>1</b> | <b>1</b> | <b>1</b> | <b>0</b> | <b>0</b> | <b>1</b> | <b>3</b> | <b>6</b> | <b>3</b> | <b>1</b> | <b>1</b> | <b>0</b> | <b>3</b> | <b>0</b> | <b>0</b> | <b>1</b> |   |   |   |