

# Guidance for PHE colleagues and Specialty Registrars Responding to a Police visit / Police investigation relating to PHE work In hours or out of hours

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# **Background**

This guidance has been developed in the light of a police investigation in the East of England in November 2015, involving a Public Health Specialty Registrar (SpR), over phone calls they made to a local hospital, as part of their health protection on call work. The SpR received an unannounced home visit from Police Officers, who interviewed the SpR under caution to investigate a potential link between calls made from the SpR's mobile phone and a hoax bomb threat received by the local hospital. The police made a note of the SpR's phone logs informed the SpR that they would investigate the matter and left

The investigation concluded in January 2016 and the SpR received a letter of confirmation from the police that there was no evidence to suggest that the SpR had any involvement in the commission of the offence. A letter was also sent to the duty CCDC for their records.

A report outlining the immediate actions undertaken, lessons identified and recommendations made, is included as appendix 1.

# **Purpose**

Whilst an incident of this nature is rare and highly unlikely to recur, we are mindful of the current heightened global security threat and as such, this guidance aims to provide information and reassurance to staff, should they ever find themselves in a similar situation with the police.

# Scope

This guidance provides colleagues on call with an understanding of how police investigations are conducted, the processes involved, their powers and the rights of the individual. It also provides information on emergency advice and legal support available within PHE and how to access it. The guidance is based on an understanding of police processes, powers and rights of the individual, further to discussions with a representative from the Crime Prevention Service, Hertfordshire Constabulary.

# Response and key information

- 1. Stay calm
- 2. Have legitimate proof of role in the organisation to hand. (Whilst this will not necessarily resolve the investigation immediately, it will provide substantiating evidence).
  - PHE employees should have their Identity Badge to hand
  - Non PHE employees (SpRs) do not have a PHE Identity Badge, but PHE have agreed to provide non PHE employees on honorary contracts, for example SpRs with a letter substantiating their role when working for PHE. A template letter is included as appendix

- Please note that the police, even in the knowledge that the calls were connected to hospital employees or associates, are not in a position to eliminate these individuals from the enquiry at the outset. There have been instances where people in positions of trust have committed serious crimes.

#### 3. Working knowledge of police processes

- The police will always follow up this type of incident, as a serious offence is likely to have been committed. In order to minimise the risk of loss of evidence the police would be unlikely to consult wider than is absolutely necessary before conducting enquiries.
- A police visit to ask questions does not mean that there is an automatic presumption of guilt. The investigative process is as much to eliminate people from the enquiry as it is to gather evidence to prosecute offenders.
- What is an Interview under Caution?

The caution is as mentioned below:

"You do not need to say anything unless you wish to do so, but it may harm your defence if you do not mention when questioned something which you later rely on court. Anything you do say may be given in evidence."

If you are interviewed under caution it does not mean that you will have a criminal record. When someone is questioned about their suspected involvement in an offence, the police will caution them. This is routine procedure and is partly there to safeguard the person being questioned.

#### 4. Know your rights

Legal advice: If someone is interviewed at a police station they are entitled to free legal advice. If you are interviewed away from the police station, for example, in your own home, you are entitled to seek legal advice before the interview takes place, but it is your responsibility to organise it. It is entirely appropriate for you to say to the police that you will only speak to them after you have secured legal advice. PHE has an Employee Assistance Programme that offers 24/7 urgent personal advice and support including legal advice. This is a free confidential service and can be accessed via 0800 1116 387

<u>Interview</u>: The interview will normally be recorded on video, if conducted at a police station or written down, if conducted elsewhere. You must be given the opportunity to review any written record of the interview and sign it to confirm that either it is an accurate record of the interview or indicate the ways in which it is inaccurate. If this does not happen, **do not be afraid** to ask that this be done. Contemporaneous records are an integral part of the evidence.

- 5. After the interview is over, inform your line manager / clinical supervisor or the duty CCDC out-of-hours for support, as well as for escalation via appropriate channels within PHE.
- 6. Participate in any debriefs to facilitate learning of self and others.
- 7. And finally, please remember that such incidents are extremely rare and that PHE is committed to supporting you throughout the process.

#### Thank You

## Appendix 1

# Final Report Police related On-Call Incident in the East of England February 2016

Dr Smita Kapadia, Prof Aliko Ahmed, PHE EoE

#### Introduction

This report describes an unusual and complex incident in the East of England in November 2015, arising from routine out-of-hours on-call work in Health Protection. A Public Health Specialty Registrar (SpR) was investigated by the police over phone calls they had made to a local hospital in connection with two infectious disease notifications out-of-hours. A draft report was circulated for comments to the PHE Corporate Management Team in December 2015, at which time the police investigation was ongoing. In January 2016, the police investigation concluded and the SpR was cleared of any involvement in the incident.

### **Purpose**

The report outlines immediate actions taken to mitigate the effects on the individual and the organisation, identifies key learning and makes recommendations to address these. Although an incident of this nature is rare and highly unlikely to recur, it has brought to the fore some fundamental issues in relation to governance and support arrangements for on-call work. PHE is committed to addressing these at a corporate level.

The police investigation concluded in January 2016 and they were unable to identify an offender. Should any new evidence come to light, the investigation will be re-opened. The SpR received a letter from the police, that there is no evidence to suggest that the SpR had any involvement in the commission of the offence. A letter was also sent to the duty CCDC for their records.

Through this report and the on-call guidance for dealing with police, we felt it was important to communicate to colleagues who work on-call the measures put in place to support staff, should they find themselves in a similar situation in the future. This information is based on an understanding of police processes, their powers and rights of the individual, gleaned from discussions with a representative of the Crime Prevention Service, Hertfordshire Constabulary.

#### The incident

The SpR on-call received an unannounced visit at their home from two police officers in connection with on-call work they had previously undertaken. They informed the SpR that a local hospital had received a hoax bomb threat and that the hospital records indicated that the call was made from the SpR's mobile phone. The police interviewed the SpR under caution, made a note of the on-call logs and informed the SpR that they would make further checks with the hospital and investigate this matter further. They did not indicate that the SpR should seek legal advice, nor was the SpR requested to sign and review a witness statement based on the interview. As such, there was no mutually agreed written record of this interview.

## Immediate steps undertaken following this incident

The SpR contacted the Consultant in Communicable Disease Control (CCDC) on-call, who offered immediate support, reassurance and advice on contemporaneous notes as well as advice to contact the Medical Indemnity Provider.

The CCDC escalated the incident to the regional and national PHE corporate team via the Centre Director. The Training Programme Director (TPD) and Head of School for Health Education East of England (HEEoE) were informed, as were the employers of the training programme. The following day (Monday) an urgent teleconference was convened with colleagues within the regional and national PHE Corporate Management Team, to discuss implications for the individual and the organisation.

The discussions identified the need to liaise with the police to understand the status and direction of the investigation, including time scales, police processes, their powers and our rights. The CCDC contacted the investigating officers to confirm that the SpR was working for PHE when the calls were made, explained the reasons for the calls and provided them with a context to how Public Health on-call is organised. The CCDC had a subsequent meeting with a representative from the Crime Prevention Unit who outlined the processes followed by the police, their powers and the rights of the individual.

#### Lessons identified and recommendations

Inability to provide legitimate proof of role in the organisation
 The police had asked the SpR for an Identity Badge that could confirm their role within PHE. The SpR was unable to do so as PHE has not issued identity cards to SpRs. Whilst this would not have necessarily resolved the investigation, it would have provided substantiating evidence.
 Aside from this incident, SpRs may be required to attend emergencies or hospitals as part of oncall work and Identity Badges would be essential.

**Action:** PHE HR has agreed to provide non PHE staff on honorary contracts with a letter substantiating their role when working for PHE.

2. <u>CCDCs and other colleagues on-call do not have a working knowledge and understanding of how the police investigations are conducted.</u>

**Action:** Colleagues on-call should refer to the information included in the guidance document on dealing with the police. This is based on several conversations the CCDC had with the investigating officers as well as a meeting with a representative from the Crime Prevention Unit.

3. Lack of awareness of the availability and scope of emergency legal support from PHE

**Action:** PHE HR has confirmed that a 24/7 Employee Assistance Programme exists within PHE to provide urgent personal advice to staff. The PHE Employee Assistance Programme is a free confidential service for both PHE staff and non PHE staff on honorary contracts and can be accessed on **0800** 1116 387.

### **Next steps**

- 1. Centre Director to advise on the relevant committees where this paper needs to be discussed and the timing of circulating the information to PHE colleagues on-call.
- 2. The TPD for HEEoE advised that this paper, along with the guidance for registrars on-call be presented and agreed at the next Specialty Training Committee in May 2016 before dissemination to SpRs.
- 3. The CCDC on-call had negotiated with the police that they would provide the SpR and PHE with a written statement of closure after the investigation concluded. The police have confirmed in a letter to the SpR and PHE that there is no evidence to suggest that the SpR had any involvement in the commission of the offence.
- 4. The police, even in the knowledge that the calls were connected to hospital employees or associates, are not in a position to eliminate these individuals from the enquiry at the outset. There have been instances where people in positions of trust have committed serious crimes.
- **5.** The CCDC on-call in conjunction with the Crime Prevention Unit, Hertfordshire Constabulary has written a guidance document for colleagues on dealing with the police, should such an unusual situation arise in the future. The aim is to help mitigate the consequence of such incidents on the individual and the organisation.

## **Appendix 2**

PHE East of England T +44 (0)344 **ADDRESS** F +44 (0)1 Model Letter for non- PHE staff participating in PHE on-call rotas 00 Month 20XX To whom it may concern Name This is to confirm that the above named individual has an honorary contract with Public Health England (PHE) covering the period << dd/mm/yyyy to dd/mm/yyyy>>. They are authorised to carry out duties under supervision, on behalf of PHE, during office hours as well as out of hours on call. Should you require any further information, please provide your contact details to this individual who will request their supervising Consultant to contact you. Yours faithfully, Prof. Aliko Ahmed Centre Director PHE East of England