Report

Investigation into an allegation against
Jimmy Savile at Shenley Hospital, London

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16 December 2014

Published on 26 February 2015
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1. Introduction

This report was undertaken following a request by the Department of Health (DH) to investigate allegations relating to Jimmy Savile and sexual abuse at a mental health hospital in Hertfordshire (Shenley Hospital) that came under the North West Thames Regional Health Authority and the Brent and Harrow Area Health Authority. Shenley Hospital has since closed; mental health services at the successor unit are currently provided by Central and North West London NHS Foundation Trust (CNWL).

Operation Yewtree is a Metropolitan Police Service (MPS) led investigation into allegations of sexual abuse. It is centred on the British media personality Jimmy Savile (who died in 2011) as well as others. The investigation was launched on 5 October 2012 by the MPS following an investigative television programme broadcast on 3 October 2012 reporting Savile’s alleged abusive behaviour.

Ms A reported an incident involving Jimmy Savile at Shenley Hospital to the MPS. The MPS passed the information to the DH who asked CNWL to investigate. Contact was then made by the NHS Savile Legacy Unit (SLU) with the Chief Executive for CNWL, being the NHS organisation that has inherited the provision of mental health services at the successor unit. CNWL was asked to undertake an investigation into the involvement of Jimmy Savile with a member of the public at Shenley Hospital in relation to an alleged incident in March or April 1981.

The incident is alleged to have taken place in the social club at Shenley Hospital during March or April 1981. Ms A was a talented teenage athlete and a member of a Friern Barnet running club when she and her friend were chosen to run a charity race that was to be attended by Savile, at Shenley Hospital. The individual, Ms A, provided three photographs; one of herself and her friend with Jimmy Savile; one with her running club and one in the social club showing a background of people sitting around a hall. Ms A said the photographs were taken during the late afternoon in March or April 1981. She stated that Jimmy Savile had attended that afternoon for the prize giving ceremony.

Ms A stated that Jimmy Savile put his hands on her and her friend’s breasts during the presentation of trophies which was photographed by various photographers. Ms A had won the largest number of trophies and therefore had another photograph taken with Savile. He sat on a snooker table and turned her to face a number of photographers and pulled her towards him, wrapping his legs around her. As she stood in front of him, Ms A could clearly feel that he had an erection and he also put a hand on one of her breasts. It was her
perception that the photographers present were laughing at her situation, aware of where Savile had placed his hand. Unfortunately Ms A cannot find the photograph she had to illustrate this situation. The incident made her feel physically sick. She believes her friend had a similar experience. They are no longer in contact and her friend is unaware that Ms A has reported this matter to the police and the NHS. There is no evidence that her friend has made a separate report to the police and the NHS.

Ms A did not report the incident at the time but informed her parents. Her father addressed the issue with the running club organiser and she was withdrawn from the club. Her promising career as an athlete came to an end and this is a matter of significant regret for her.

2. Terms of Reference

Central and North West London NHS Foundation Trust has been requested to undertake an investigation in relation to the involvement of Jimmy Savile with a member of the public at Shenley Hospital, Hertfordshire in March or April 1981 following an allegation of sexual abuse.

The report aims to:

- Investigate the allegation made by Ms A.
- Determine the association of Jimmy Savile with Shenley Hospital.
- Determine if there are any records relating to a visit to the hospital by Jimmy Savile, and whether this was a planned visit.
- Establish whether there was an ongoing association with Jimmy Savile and the hospital or any other hospitals under the management of Central and North West London NHS Foundation Trust or its predecessor bodies.
- Determine whether any policies and procedures were in place in 1981 in relation to safeguarding to take into account patients, visitors and volunteers within the mental health services.
- Establish any governance arrangements that were in place in 1981 in relation to fundraising by celebrities and others on behalf of the mental health services, and any privileges, including access afforded to them by the organisation at that time.
• Ensure policies currently exist and are regularly reviewed and updated, in relation to safeguarding and access to people who use services by volunteers and other members of the public including celebrities.

• Ensure that current policies, practices and organisational culture encourages and facilitates people who use services, their family, carers and friends and staff to report concerns and that complaints, concerns and incidents are fully investigated and reported.

• Consider why the alleged incident was not reported at the time of the occurrence, including organisational culture and practices at the time.

• Identify lessons learned and make recommendations for further action.

3. Methodology

Locating the documents

The reported incident occurred in 1981 and involved a member of the public. At that time all records and other documents relating to the activity of the organisation were in paper form. The Trust has gone through a number of reorganisations in the intervening years and mental health services have been reconfigured on several occasions.

A review of archived non-clinical material on Shenley Hospital held by the Trust’s Information Governance (IG) Department relating to the period of 1981 up until the hospital’s closure in 1997 was undertaken. Records were scrutinised with regard to the visits of celebrities to the hospital with particular reference to Jimmy Savile. A search was also made for policies and procedures that may have been in place at that time.

All archived clinical records can be easily tracked and recovered by the Trust’s Information Governance (IG) Department. However, Ms A was not a patient, so no access to patient records has been sought as part of the investigation. No evidence identified during the course of the investigation undertaken has indicated this to be necessary.

A review of local press archive newspapers for the period Jan-May 1980 and 1981 was undertaken on 27 November 2014 at Hertfordshire Archives and Local Studies, Register Office Block, County Hall, Pegs Lane, Hertford. SG13 8EJ.
An internet search using Google and the terms “Savile” and “Shenley Hospital” provided no useful information.

Attempts were made to establish whether celebrities visited the hospital by contacting staff members currently employed by the Trust who were in the service at that time.

No policies that addressed the issues of safeguarding vulnerable patients and children that related to the time of the incident could be located. Current Trust policies were scrutinised to ensure they are fit for purpose and are regularly reviewed and updated.

The documents reviewed

The following documents were reviewed:

- The statement provided to the SLU by Ms A.
- Photographs supplied by Ms A.
- Non clinical information on Shenley Hospital.

Contact with SLU

The Trust was initially contacted by the SLU which asked CNWL to investigate the allegations. The investigators met a member of the SLU Team for an initial briefing on 24 October 2014. One of the investigators attended a meeting of Trusts conducting similar investigations on 11 November and 11 December, which provided an opportunity to learn from experiences elsewhere and receive support and guidance in conducting the investigation.

Interviewees

The following individuals were interviewed:

- Ms A – a transcript of the interview was made.
- Two staff members identified informally as having worked at Shenley Hospital through a review of staff records by the Trust Human Resource (HR) Team. These staff members held administration or managerial roles from the period 1980 up until the hospital’s closure in 1997. The Trust HR does not have a record of current staff who worked at Shenley Hospital because the then Trust did not inherit any staff when the hospital closed in 1997.
- Information Governance Manager - to locate details of archived non-clinical information on Shenley Hospital.

- Safeguarding Adult and Children Leads – informal discussions regarding current policies and procedures.

The Trust Director of Nursing and Quality made initial contact with Ms A by telephone to discuss the processes involved. The Director of Nursing and Quality and the Trust Head of Social Work & Social Care met Ms A on the 3 November 2014 to discuss the allegations in detail. Ms A was asked whether she would consent to the conversation being recorded; consent was given.

Ms A has been informed and updated about the change in date of the publication of the wider NHS report into Savile and recent media announcements of new allegations. Ms A has had an opportunity to review the transcript of her interview for accuracy.

Two individuals who worked at Shenley Hospital were spoken with informally. The individuals were not able to recall any visits by Jimmy Savile to the hospital or any other relevant information.

A review of all non-clinical records on Shenley Hospital held by the CNWL Information Governance (IG) Department did not mention Savile’s visit. However, the information obtained was sparse and involved some local hospital newsletter articles and pictures of the hospital. A discussion with the Trust IG officer confirmed that this is all the information held by the Trust.

A review of local press archive newspapers for the period Jan-May 1981 and 1982 was undertaken but no reference was found to the visit by Jimmy Savile to the hospital.

4. Background information and context

Shenley Hospital was one of two new hospitals built by Middlesex County Council in the 1930’s. It was built on the site of Porters Park and provided accommodation of 2000 beds and employed 500 staff. Shenley Hospital was built at a time of a fundamental change in attitude to the treatment of the mentally ill. It was designed on a villa system. Patients were housed in what were intended to be more homely units of between 20 and 45 people in a parkland environment. Although Shenley strived to be modern, it still retained some traditional ideas.
However, in the 1950’s nursing attitudes changed and nurses were encouraged to hold conversations with the patients, together with teaching them simple tasks. Patients became engaged in agricultural and horticultural duties as part of their therapy. Some patients were involved in the construction of additional units that were used to provide occupational therapy for other patients to learn carpentry, cookery and arts and crafts. At one time over 60 patients were employed in the hospital laundry before the introduction of modern machinery in the 1960's.

There was an industrial unit where patients were employed on outwork for local industries. Another unit trained patients in clerical work, together with maintaining skills of those already trained, ready for when they re-joined the community. Shenley was one of the first hospitals in the country to introduce mixed dances for staff and patients and coach trips to places of interest.

In 1992, the hospital came under the responsibility of the North West London Mental Health NHS Trust until its closure in 1997. Shenley Hospital closed in 1997 and the only remaining part is the Tower. The land has been redeveloped as a housing estate.

Cultural context of the time

There was little public discussion or consideration of sexual abuse in the 1980’s. It did not have the high profile media attention that is does currently. However during the 1980’s a number of developments and government policies concerning the protection of children following high profile child deaths and sexual abuse scandals began to alter public opinion. These led to greater support and strengthened the co-ordination of public services to ensure that children were safeguarded from harm (Proctor et al, 2014).

Safeguarding processes have evolved since this time especially around safeguarding children. This has been supported by the Children Act 1989 which enshrines the principle that the needs of the child should always come first in decisions about their welfare.

5. Investigating the allegation

Ms A was a teenage athlete, aged 14 years and a member of a local running club. She lived with her parents and describes herself as a talented athlete. She was asked to participate in the charity race at Shenley Hospital because she was considered a very good runner and she went on to win a large number of trophies at the event.
Description of the incident

Ms A reported that the incident took place during March or April 1981. At the time, she was a member of the Friern Barnet running club and was asked to take part in the Shenley charity race. Ms A said Jimmy Savile arrived at the social club after the race accompanied by a number of photographers for the prize giving ceremony. A photograph in Ms A’s possession, she says, shows the venue for the prize giving ceremony as the social club with people sitting in chairs all around the room. It is not possible to identify the venue in the photograph as being at Shenley Hospital nor is it possible to identify the people sitting in the background but Ms A was clear that they were not patients from the hospital. She believes they may have been staff because staff participated in the race.

She stated that she and her friend were the youngest people in the race. Ms A has another photograph, which she said was taken at the event, of herself with her friend (whom she lost contact with) with Jimmy Savile sitting between them when they received their trophies. Ms A believes the venue was the Shenley social club. Jimmy Savile has his arms around both girls and although his hands are not clearly visible in the picture, Ms A stated he touched both girls’ breasts. She says he was later photographed with Ms A as he sat on a snooker table. She says she was pulled against him to face a number of photographers. She recalls him wrapping his legs around her. As she stood in front of him, Ms A says she could clearly feel that he had an erection and he also put a hand on one of her breasts. Unfortunately, Ms A cannot find the photograph she had to illustrate this situation. She said the photographers present were laughing. Her perceptions were they were aware of where Savile had placed his hand and were laughing at her situation. The incident made her feel physically sick.

Ms A reported to her father what had happened; he is said to have addressed the issue with the running club organiser. Her parents were so concerned about her experience that they insisted she leave the club. Ms A’s perception was that the event organiser was not involved in Jimmy Savile being invited to the prize giving ceremony. Ms A was unsure of the organiser’s name but believes he is now deceased. She believed her father would have the details but her parents are now separated and she is not in contact with her father.

At the meeting on the 3 November 2014 to discuss this investigation, Ms A was offered support and counselling. Ms A confirmed that she did not consider it necessary as she had dealt with the psychological harm she had suffered as a consequence of the alleged abuse. It was suggested that this current discussion might trigger concerns for her, but she again confirmed that she can and would access support through her current employer, if she needed it.
6. **Jimmy Savile’s association with Shenley Hospital**

Jimmy Savile was not referred to in any of the documentation scrutinised in the preparation of this report. This includes non-clinical records and hospital news reports. An internet search was made using the Google search engine and using the search terms “Savile and Shenley Hospital.” This produced no results when it was carried out prior to CNWL Communications Department confirming the investigation was to take place. Subsequent searches produced results relating to the CNWL Communications Department’s announcement of the investigation, but nothing directly related to the alleged incident or Jimmy Savile visiting the hospital at the time of the incident.

The two members of staff spoken with did not recall any visits made by Jimmy Savile to the hospital.

Ms A was able to provide the name of the female friend with her in the photograph alongside Jimmy Savile. They are no longer in contact and her friend is unaware that Ms A has reported this matter to the police and the NHS. There is no evidence that her friend has made a separate report to the police and the NHS.

7. **Policy, practice and procedures at the time of the reported incident**

The review of archived material on Shenley Hospital held by the Trust’s Information Governance (IG) Department found no policies or procedures that related to safeguarding children visiting hospitals. A Visitors Policy included complaints procedures for members of the public visiting the hospital, but made no reference to children or young people visiting the hospital or any other arrangements to safeguard visitors.

8. **How complaints were dealt with at the time of the incident**

Ms A did not make a complaint to the hospital about the incident. There is little available information concerning the handling of complaints at the time of the incident. However Ms A reported to her father what happened at the event. He addressed the issue with the running club organiser but did not report the complaint to the hospital. Her parents then withdrew her from the running club.

Members of staff who were working in the NHS at the time said that complaints then followed the line management structure up to the senior nursing officer in charge of the hospital, who would address any issues.
9. **Current policies practice and procedures**

Central and North West London NHS Foundation Trust has the following policies and guidance documents in place:

- **Safeguarding Children** - provides guidance to all staff about the responsibility they have to ensure the health, safety and protection of children, regardless of whether or not they work directly with children.

- **Safeguarding Adults** - provides guidance for all staff and volunteers working with the Trust, all of whom have a responsibility to recognise and report actual or suspected incidents of abuse.

- **Concerns and Complaints** - outlines the process for addressing concerns and complaints.

- **Visitor’s Policy** – arrangements to ensure there is no risk to the safety and security of patients and staff arising from visits to the Trust by approved or invited visitors such as VIPs and celebrities.

- **Victims Liaison** - provides information about procedures for information sharing, joint working, and the forwarding of victims’ representations about discharge conditions to Mental Health Tribunals relating to the Domestic Violence, Crime and Victims Act 2004.

- **Code of Conduct** – CNWL demands that its managers and staff demonstrate the highest standards of behaviour in carrying out their duties and responsibilities. To achieve this standard it is essential that employees work in a supportive environment, which does not tolerate unacceptable behaviour, bullying or harassment of any kind.

- **Dignity and Respect Policy** – helps staff maintain high standards of dignity and privacy across the organisation.

- **Information Governance, Policy and Strategy** - defines the strategy for the information governance framework, including people, resources, culture and the processes necessary to ensure efficient management of information needed to support the purpose of the Trust in caring for individuals and improving public health.

- **Recruitment, Selection and Retention** - provides guidance and support to Recruiting Managers on the recruitment, retention and selection of staff.

- **Duty of Candour** - describes the ethical responsibility for health and social care to maintain and open communication with people in receipt of services and/or their family or supporters, especially when things go wrong.

- **Whistleblowing** - creates a positive framework to encourage staff to exercise their right and duty to raise matters of genuine concern about healthcare issues and patient care.
Criminal Records Disclosure - developed in response to The Protection of Children Act 1999, the Criminal Justice and Court Services Act 2000 relating to the protection of young people under the age of 18 and the Protection of Freedoms Act 2012. It also covers the disclosure of any criminal background of those working or volunteering in activities of a specified nature with children or adults. This policy has been updated to reflect the replacement of the Criminal Records Bureau (CRB) with the Disclosure and Barring Service (DBS).

Volunteers and Work Experience – provides guidance and advice on the recruitment and ongoing supervision of volunteers and work experience students.

Risk Incident Reporting - describes the requirements in relation to the reporting, management and review of all incidents.

Risk Management - describes the Trust's Risk Management Strategy and the framework for the establishment and implementation of a Trust level risk management process.

Multi-Agency Public Protection Arrangements (MAPPA)&The Multi-Agency Risk Assessment Conference (MARAC)Information Exchange Protocols—these support multi-agency working practices that already exist between the Trust, local authority partners, housing providers, Police and other key stakeholders.

Clinical Risk Assessment – sets out standards and procedures for assessing and managing clinical risks

All the above policies apply to volunteers, students, contractors and bank staff who work for the Trust.

CNWL provides information and guidance to authors of policies to support the creation of a properly formatted and informative document that meets the Trust's guiding principles in the provision of safe, personalised, recovery focused care. This includes policy initiation, development, feedback, ratification and publication. All policies are written using a standard template and have a review date. The Trust now co-produces policies, involving people with lived experience of mental and physical health needs.

Staff refer to policies using the intranet or internet sites to easily access the current documents. Staff training is provided to support policies when necessary; staff take personal responsibility to keep up to date with policies and procedures. New and revised policies are posted on the Trust's home page on the intranet. Managers are informed of policy development and change using a range of communications, appropriate to each policy.
Patients are encouraged to raise complaints and issues in relation to the service. There are a number of both internal and external audit mechanisms to gather patient and carer experiences of services, and feedback is acted upon in an open and transparent manner.

Visitors to clinical areas are asked to sign in and to report to the ward office on arrival; visitors to people using services are routinely reflected in the clinical record. The whereabouts of patients is closely monitored in accordance with policy.

Practice in the current organisation is supported by Safeguarding Children and Safeguarding Adults arrangements. These are embedded in practice by training and supervision, and there is far greater awareness of appropriate boundaries. Staff and members of the public in similar situations are more likely to be vigilant and raise any concerns. It is less likely that a similar incident would occur today.

10. Overall analysis and conclusions

At the time of the reported incident, policies did not exist in their current form. Any complaints from staff, patients or visitors to the site (in the case of Ms A) would usually be directed up the line management structure to the senior nursing officer in charge of the hospital. There were guidelines which referred to such topics as fire safety but there was no written complaints policy. There is no evidence to suggest a complaint was made to the hospital directly either by Ms A, her father, or the running club manager.

Ms A has shown the Director of Nursing and Quality and the Trust Head of Social Work a photograph of herself and her friend with Jimmy Savile receiving trophies. It is evident from the photograph that Ms A has met Jimmy Savile. It is not possible however to confirm from the photograph itself when it was taken or where.

There are no official records which indicate Jimmy Savile visited the hospital. As above, it is not possible from the photographs to confirm whether or not they were taken at Shenley Hospital.

It has not been possible to confirm that the actual event took place at Shenley Hospital. There is however no reason to doubt Ms A’s account; and notwithstanding the lack of independent evidence, it is still possible that the event took place at Shenley Hospital and that the photographs were taken there and that the incident described took place.
The Trust investigates all complaints of sexual or physical assault to patients, carers, members of the public or staff using services. These are thoroughly and sensitively investigated using a multi-agency safeguarding process. Trust policies are in place to enable staff to understand and implement these processes effectively.

Learning points are identified, recommendations made and action plans developed and monitored through a multi-agency safeguarding process to mitigate the risk of future occurrences. This would also be governed by NHS serious incident procedures which would lead to internal investigations and identification of any actions which needed to be taken. Where appropriate the two procedures are coordinated. Should such an incident occur at the current time it is anticipated the individual would feel able to report the incident to the relevant body that would offer support to the individual and keep them safe, and that staff would involve the police and make a safeguarding referral to local authority children services.

11. Recommendations

There are no specific recommendations from this investigation, however, in our commitment to ensuring our services are as safe as they can be, we recommend:

- The Trust’s Safeguarding Leads for children and adults to identify any learning points and recommendations from all the Jimmy Savile NHS investigations when published and identify recommendations relevant to the Trust within eight weeks of publication of the report.

- Learning points and recommendations and actions planned in response (identified above) to be shared with all Trust staff within 10 weeks of publication of the reports.

- The Trust’s Safeguarding Leads in conjunction with policy leads to review existing policies to identify that they are fit for purpose and current in respect of learning points identified from the investigations relating to Jimmy Savile within 12 weeks of publication of the report.
Appendix A: References


NHS Commissioning Board (2013): Serious Incident Framework March 2013

## Appendix B: Investigation Timeline

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<thead>
<tr>
<th>Date/time</th>
<th>Event</th>
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<tr>
<td>July 2014</td>
<td>SLU contacts Central and North West London NHS Foundation Trust</td>
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<td>October 2014</td>
<td>The trust investigators met a member of the SLU Team for an initial briefing.</td>
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<tr>
<td>November 2014</td>
<td>Interview with Ms. A</td>
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<td>November 2014</td>
<td>Trust investigator attended a meeting in Leeds of Trusts conducting similar investigations.</td>
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<tr>
<td>November 2014</td>
<td>Update given to Ms A on progress of investigation and outline of process as stated from meeting with LSU Leads</td>
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<tr>
<td>November 2014</td>
<td>Two individuals who worked at Shenley Hospital were spoken with informally.</td>
</tr>
<tr>
<td>November 2014</td>
<td>A review of all non-clinical records on Shenley Hospital held by the CNWL Information Governance (IG) Department</td>
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<tr>
<td>November 2014</td>
<td>A review of local press archive newspapers for the period Jan-May 1980 and 1981 was undertaken</td>
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<tr>
<td>December 2014</td>
<td>Internet searches – British Library and London Metropolitan Archives.</td>
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<tr>
<td>December 2014</td>
<td>Draft report presented to the Trust Safeguarding Group</td>
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<tr>
<td>December 2014</td>
<td>Draft sent to SLU for review and comments</td>
</tr>
<tr>
<td>December 2014</td>
<td>Draft sent to trust legal colleague for comments</td>
</tr>
<tr>
<td>December 2014</td>
<td>Comments from SLU and trust legal colleague actioned</td>
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<tr>
<td>December 2014</td>
<td>Trust investigator attended a meeting in Leeds with SLU Leads to review progress</td>
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<tr>
<td>December 2014</td>
<td>Report presented to Trust Board for sign off</td>
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Appendix C: Investigator’s Biographies

Name: Andy Mattin
Job title: Executive Director of Nursing & Quality
Work address: Central and North West London NHS Foundation Trust

Qualifications: Registered Nurse - Mental Health
Registered Nurse – Adult
BA (Hons) Healthcare Management
Visiting Professor of Nursing at Buckinghamshire New University
Council member of the London Clinical Senate

Summary of experience:

Andy has worked in the NHS since 1983, holding various nursing and management posts in London and the East of England. He has a wide range of experience in health and social care organisations. Andy has held roles in the commissioning, providing and performance management of services. He has a particular interest in service user and carer experience.

Name: Ann Sheridan
Job title: Head of Social Work & Social Care
Work address: Central and North West London NHS Foundation Trust

Qualifications: Registered General Nurse (RGN)
Registered Mental Nurse (RMN)
Diploma in Social Work
MSC In Social Work
Approved Social Worker (ASW)
MSC in Multi-Agency Practices
Certificate in Management
Diploma in Management

Summary of experience:

Ann has worked as a frontline nurse in both acute care and mental health settings from 1988 to 1997. Since then she has worked in integrated mental health and social care settings as a social care professional in a range of clinical areas.

More recently, she has undertaken a range of broader work, including leading on safeguarding adults and partnership working with the Police across the Trust.
Appendix D

NHS SAVILE LEGACY UNIT ASSURANCE PROFORMA

Independent oversight of NHS investigations into matters relating to Jimmy Savile

Final report proforma

Please could the investigation lead and Trust Chief Executive complete this proforma and return to the SLU so that the report can be signed off for publication.

Please attach this form to the absolute final version of your report before sending it to the SLU.

If the answer to any of these questions is 'no', please provide an explanation.

<table>
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<tr>
<th>Question</th>
<th>Yes</th>
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<tr>
<td>Please confirm that a hard copy of your final report has been shared, in controlled circumstances, with the local police and they have signed it off for publication.</td>
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<td>N/A</td>
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<tr>
<td>Please confirm that any allegations relating to other hospitals and/or trusts have been referred on to the appropriate investigation team. Please write N/A if you have not found any.</td>
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<td>N/A</td>
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<tr>
<td>Please confirm that the final report has been reviewed and signed off by the trust’s legal advisors.</td>
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Please confirm that legal advice was sought about whether Scott\(^1\) letters needed to be issued.

If Scott letters were needed:

- Were letters issued?
- Were responses received?
- Was the report amended in light of the responses?

Please confirm that you have offered, or plan to offer, to share the report with:

- The victim
- The informant (if not the victim)
- Any other relevant party.

Please confirm that you have the appropriate consent to quote from statements and interviews (this includes if you have used direct quotes from MPS information).

Please confirm that appropriate support was offered to victims and witnesses and will continue to be offered at time of publication and afterwards.

Please confirm your report has been signed off by the trust board.

If so, on what date did this happen?

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\(^1\) Warning letters setting out potential criticisms of individuals