



**East London**  
NHS Foundation Trust  
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15<sup>th</sup> October 2024

**Our reference: FOI DA5522R**

I am responding to your request for a further internal review under the Freedom of Information Act 2000 which was received on 6<sup>th</sup> September 2024. I am sorry for the delay in responding to your request. This was regarding our response on 6<sup>th</sup> September 2024.

I am now enclosing a response which is attached to the end of this letter. Please do not hesitate to contact me on the contact details above if you have any further queries.

If you are dissatisfied with the Trust's response to your FOIA request then you should contact us and we will arrange for an internal review of this decision.

If you remain dissatisfied with the decision following our response to your complaint, you may write to the Information Commissioner for a decision under Section 50 of the Freedom of Information Act 2000. The Information Commissioner can be contacted at:

Information Commissioner's Office  
Wycliffe House  
Water Lane  
Wilmslow  
Cheshire  
SK9 5AF

Tel: 0303 123 1113  
Web: [www.ico.org.uk](http://www.ico.org.uk)

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We promise to work together creatively to: learn 'what matters' to everyone, achieve a better quality of life and continuously improve our services.  
**We care . We respect . We are inclusive**

**Chief Executive Officer:** Lorraine Sunduza  
**Chair:** Eileen Taylor

**Request:**

**Question 1:** Please could you provide this as an Excel spreadsheet, as requested? Additionally, the information is very hard to read in the format provided.

**Answer:** The Trust has reviewed its previous response and agrees to disclose this information as an excel document as opposed to a PDF document of the spreadsheet.

Please see attached appendix one for the initial response in excel format.

**Question 2:** I am somewhat alarmed by the lack of response to questions regarding specific categories of abuse.

I refer you to the NHS sexual safety charter, which the trust has signed:  
<https://www.england.nhs.uk/long-read/sexual-safety-in-healthcare-organisational-charter/>  
<https://www.england.nhs.uk/long-read/sexual-safety-in-healthcare-organisational-charter/#organisations-that-have-signed-the-charter>

Signatories to the charter have committed to the following:

- 8. We will ensure appropriate reporting mechanisms are in place for those experiencing these behaviours.
- 9. We will take all reports seriously and appropriate and timely action will be taken in all cases
- 10. We will capture and share data on prevalence and staff experience transparently.

These commitments will apply to everyone in our organisation equally.

Where any of the above is not currently in place, we commit to work towards ensuring it is in place by July 2024.

The trust provided answers to questions 2, 3, 4 and 5 in its response to a similar request made in 2022/23: ref FOI DA4376. (See screenshot attached.)

Are you telling me that the trust's reporting and recording mechanisms for sexual safety have got worse since then?

Did you check with HR and the trust safeguarding team?

**Answer:** The Trust has reviewed its previous response and partially upholds its decision not to disclose this information under Section 1 of the Freedom of Information Act 2000.

We are unable to disclose the information in its entirety due to reporting categories within the Trust's old and new incident reporting system which was implemented in October 2023, as some of the reporting categories and descriptions within incidents mean it is not possible to determine whether the individuals involved fall under the individual categories suggested. These are marked as "other" on our reporting system. There are 83 incidents in total which involve an individual logged as "other". These have been removed from the dataset provided (appendix two) as it cannot be confirmed which party the relevant individuals for each incident would fall into (staff, service users etc.).



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Similarly, when incident reporting, the ages of those involved in the reporting is not essential, so an accurate figure for this cannot be provided under question six.

However, we can provide data for all the incidents reported which do not include "Other" as a specific party. Similarly, we can provide the number of Children and Young People incidents which were specifically reported as involving Children at Risk and/or Sexual Abuse. Please see the attached appendix 2 which includes a breakdown as recorded within the system. This is information which was obtained from the Incident Reporting team.

In addition to these are the figures which the People and Culture (P&C) team have identified and refined. In 2022/23, less than five total Sexual Safety Incidents were recorded by the team and in 2023/24 five were recorded. In all these, a member of staff was recorded as a victim. With regards to how many sexual safety incidents were allegedly perpetrated by staff against other staff, P&C recorded less than five incidents within both years respectively.

Please note that some of the data from both areas totals less than five individuals. This could assist and be aggregated to help identify particular individuals. Additionally, providing such information may compromise these individuals' right to confidentiality. Disclosure of such data could breach Data Protection legislation owing to the sensitive nature of the information. This is therefore, on balance, not considered in the public interest to be disclosed under Section 40 of the Freedom of Information act.



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**Terminology:**

**Sexual safety incidents include any behaviour of a sexual nature that is unwanted, or makes another person feel uncomfortable or afraid. This covers:**

- **sexual assault:** when a person is coerced or physically forced to engage in sexual activity against their will, or when a person (of any gender) touches another person sexually without their consent.
- **sexual harassment:** any behaviour that is characterised by inappropriate sexual remarks, gestures or physical advances which are unwanted and make a person feel uncomfortable, intimidated or degrade their dignity.
- **Other sexual incidents:** where an individual may have witnessed or experienced something of a sexual nature that does not fit in to the categories of sexual harassment or assault, and which made the person feel uncomfortable and/or sexually unsafe.

**Question 1: How many sexual safety incidents did the trust record? (This includes incidents by all alleged perpetrators against all alleged victims: staff, patients, visitors, members of the public)**

- 1.1 in 2022/23 financial year
- 1.2 in 2023/24 financial year

**Sexual safety incidents by staff against patients**

**Question 2: How many sexual safety incidents allegedly perpetrated by staff against patients did the trust record?**

- 2.1 in 2022/23 financial year
- 2.2 in 2023/24 financial year

**Sexual violence and misconduct by patients against other patients**

**Question 3: How many sexual safety incidents allegedly perpetrated by patients against other patients did the trust record?**

- 3.1 in 2022/23 financial year
- 3.2 in 2023/24 financial year

**Sexual safety incidents by patients against staff**

**Question 4. How many sexual safety incidents allegedly perpetrated by patients against staff did the trust record?**

- 4.1 in 2022/23 financial year
- 4.2 in 2023/24 financial year

**Sexual safety incidents by staff against other staff**

**Question 5 How many sexual safety incidents allegedly perpetrated by staff against other staff did the trust record?**

- 5.1 in 2022/23 financial year
- 5.2 in 2023/24 financial year



## Age of alleged victims

**Question 6. How many of the sexual safety incidents did the trust record where the victim was a patient:**

**6.1 Under 18 (this includes under 16 and under 13)**

**6.2 Under 16 (this includes under 13)**

**6.3 Under 13**

**Please provide figures for the 2022/23 and 2023/24 financial years.**

**7. How many incidents of physical violence perpetrated by patients against staff did the trust record?**

**7.1 in 2022/23 financial year**

**7.2 in 2023/24 financial year**

Answer: Please see Appendix 1 attached.



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