

Investigations - Role of the Support Manager

Blood and Transplant

Background



- When an incident occurs or an allegation arises, local management of the colleague involved will complete the initial “fact finding” exercise – that is to speak with colleagues immediately involved or impacted.
- The possible outcome of this stage could be a local resolution which is normally discussed with the local HR Consultant or if more serious, moving to a formal investigation.
- The commissioning manager will have identified that a colleague, who is engaged in that process, may benefit from being offered a manager as a named supportive contact.
- You may be asked to support a complainant, or a person undergoing an investigation or a witness. You may not know the person involved or anything about their circumstances.
- In other cases it may be that you are the individual's line manager and are asked to support them because of your existing relationship with them. This will not always be appropriate.

The Role



- You are asked to contact the employee as soon as you can and introduce yourself, offering your work contact details, mobile and email address.
- You are there for the employee in a welfare capacity in what can be a stressful time for them. You will be able to signpost them to EAP support and will be a point of contact for them should there be helpful updates to share.
- If you are asked to share opinions or in some way encouraged to support one view or another, you should avoid engaging in these kinds of conversations. You can express empathy, but you are not able to respond to detailed aspects of the case.
- If you are asked specific questions, please note the query and say you will pass them on to HR for a response, if they wish you to. This may include keeping updated on the timescale of the progression of the case.
- If you are concerned about the welfare of someone you have been asked to contact, then please contact HR. A safeguarding contact may be advisable.

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Contact



- Each case should be assessed individually according to the circumstances. The first action point will be to establish the contact details of the person involved and the best way to reach them.
- In most cases having a conversation, explaining your role as mentioned above, keeping the approach informal and friendly. You don't have an agenda; just being available to support.
- Ask them how they would like your support to continue: agree how you will keep in touch and the frequency of that contact. Will it be weekly, fortnightly, monthly? Will they call you or you call them? What time of day?
- These things are important as often colleagues want to be able to organise their work or personal life to plan a contact call. They should be reminded that they can contact you in between agreed contact times as and when needed. The tone should be professional and open.
- If they say they do not want your support, contact the HR lead and let them know. It may be worth waiting a short time and re-offering the support. It may be the person does want support, but would like someone else to be involved. It may be they feel they would connect more easily with someone else. As a responsible employer NHSBT has a duty towards the health and wellbeing of staff, but if the person is clear they do not want support, then it should be noted and HR informed.

Records



- Ensure you have up to date records of the individual's contact details, the details of the HR lead and also for the EAP (Employee Assistance Programme): 24 hour telephone line 0800 716 017 or www.employeeecare.com (the access code and password are both 72992).
- Keep a copy of correspondence and make a note of how often you contact the employee, whether you made contact successfully or left a message.
- Keep a brief outline of the salient points of meetings. Do write notes you are happy to share later with authorised bodies. Occasionally it might be necessary to request records of contacts and discussions that took place. It is helpful to have these to hand if needed.

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Discussion



- Most contact time will be via telephone calls or video calls using e.g. Microsoft Teams. Sometimes a face to face meeting may be appropriate, but the individual may not be local to you.
- This role is about listening to the employee. Some open questions that may prompt further discussion are below:
- How are you? (They may have reported in sick or are working in a different team/location) • Do you feel you have enough support at work? If yes, ask what that is, if no, ask what would they like? • Are you aware of the EAP and do you know how to access that support? • Are you seeking support outside NHSBT, eg GP? • Anything that you would like to share or is worrying you about the process you are involved in?
- End by agreeing the next time to speak.
- Some conversations will be short, simple catch ups and that is fine. Others may be more complex, so you will need to be flexible in your approach.

Other



- The individual may also have support and representation from their trade union or professional body.
- They could have external support in place, e.g. counselling or GP, or even work colleagues (subject to confidentiality).
- All offer different support and you will not be expected to offer similar advice or guidance. Your role is to be a conduit for welfare support that NHSBT can offer.
- It is possible an individual may feel they have sufficient support from these other sources, but it is still important for the offer of contact and support to remain open to them.
- You are there to support the person through a particular process and it is hard to identify at the start of a process when the need for your support might end.
- However, you will be informed when support for the individual is no longer required. This could be as a case concludes or moves to a different process. You will be informed by HR or the commissioning manager.