

Annex B: Sexual Safety Charter – self-assurance checklist for primary care providers

In 2023, NHS England published the [Sexual Safety Charter](#). The charter was developed by NHS England, in collaboration with lived experience organisations, professional bodies, employers and [partners](#) across healthcare. The charter is about ensuring that the workplace is a safe place to work for all NHS staff and that patients are adequately protected. Where sexual misconduct does occur, organisations should:

- know how to support people who report it
- have policies in place to help staff and patients report it
- make sure investigations take place

This document provides a self-assurance checklist to help translate the charter principles into practice for primary care organisations. Completing the checklist **helps primary care providers assure themselves** against the [new legal duty for all employers to prevent sexual harassment](#) in their workforce.

At the end of this document is an action plan section that we ask all primary care providers – general practice, dental, optometrist and pharmacy – to complete by 31 March 2026 and to confirm with their integrated care board (ICB) when they have done so. ICBs all have domestic abuse and sexual violence leads in place, and NHS England is providing support to these leads so they can advise and help providers.

Sign up to the charter using the [registration form](#) and access the [latest list of associated resources](#) (sign up required).

Note on employer size definitions: we have provided approximate numbers for different sizes of employer. **All** employers have a legal duty to take reasonable steps to prevent sexual harassment by staff under the Worker Protection Act (2023). However, what may be considered reasonable will be different depending on the size of the employer. To aid this consideration, we have used approximate staff size to indicate where there may be legitimate differences in approach.

Sexual Safety Charter principle	Key questions	Checklist for a small employer (up to 10 staff)	Checklist for a medium employer (10 to 100 staff)	Checklist for a large employer, federation or chain (over 100 staff)	Resources available
1. We will actively work to eradicate sexual harassment and abuse in the workplace.	<ul style="list-style-type: none"> • Have we signed up to the Sexual Safety Charter? • Are we clear on our response to actions in the letter dated 5 December 2025? • Do we have a nominated organisational lead for sexual safety and misconduct issues? • Have we assessed our organisation to identify risk situations, documented our findings and taken reasonable steps to prevent 	<p>Sign up to the Sexual Safety Charter.</p> <p>Nominate an organisational lead for sexual safety, who may be the same as the HR lead.</p> <p>Demonstrate public commitment to the charter by displaying a poster in public spaces.</p> <p>Risk rate against this self-assessment; identify gaps and address them.</p> <p>Ensure that your Care Quality</p>	<p>All actions for a small provider apply, as well as the following action.</p> <p>Consider a full risk assessment against the Sexual Safety Charter principles and undertake a policy gap review; assess any risks and identify mitigations.</p>	<p>Complete a full risk assessment against the Sexual Safety Charter principles and undertake a policy gap review; assess any risks and identify mitigations</p> <p>Ensure that any board-level groups are sighted on the Sexual Safety Charter and the output of the self-assurance checklist.</p>	<p>A poster will be produced for primary care providers to display on site to publicly demonstrate commitment to sexual safety.</p> <p>Larger organisations should look at the Sexual Safety Charter assurance framework, designed for boards, for further possible actions.</p> <p>Equality and Human Rights Commission (EHRC) have resources for employers to risk assess against the Worker Protection Act (2023) legal</p>

	impact on staff and patients?	Commission registered manager is sighted on the Sexual Safety Charter and the outputs of your assessment against it.			duty. Note this is not specific to healthcare.
2. We will promote a culture that fosters openness and transparency and does not tolerate unwanted, harmful and/or inappropriate sexual behaviours.	<ul style="list-style-type: none"> • Have we publicly stated our commitment to sexual safety? • Do all staff understand what constitutes inappropriate sexual behaviour? • How do we reinforce this message during team meetings and inductions? 	Raise the charter in team meetings and make it a part of inductions for new staff, reminding people of support inside and outside the organisation should they need it.	<p>Ensure that all staff are informed of the charter, and remind them of support available inside and outside the organisation.</p> <p>Ask staff to be involved in the self-assessment process and identifying gaps in processes.</p>	<p>Advertise the charter on the intranet.</p> <p>Consider advertising actions taken to ensure sexual safety of staff and patients.</p> <p>Encourage line managers to discuss with their staff in regular meetings.</p> <p>Ensure that staff and patient voice is involved in identifying gaps in process or cultural issues within the organisation.</p>	Communications assets are available on FutureNHS (sign up required).

<p>3. We will take an intersectional approach to the sexual safety of our workforce, recognising certain groups will experience sexual harassment and abuse at a disproportionate rate.</p>	<ul style="list-style-type: none"> • Do we consider how gender, race, disability, sexuality and other factors affect experiences of sexual safety? • Are our policies inclusive and accessible to all staff? • Are diverse voices present in our approach to listening to concerns? 	<p>Review any policies on equality, diversity and inclusion (EDI) to ensure the charter principles are incorporated.</p> <p>Give appropriate regard to the public sector equality duty (PSED – see EHRC guidance for full description).</p>	<p>All actions for a small provider.</p>	<p>All actions for a small provider, as well as the following action.</p> <p>Incorporate the views of a diverse range of staff in fora about responding to the charter.</p> <p>Conduct an equality impact assessment on your sexual misconduct policy.</p>	<p>National sexual safety misconduct policy framework, with streamlined primary care version to follow.</p> <p>EHRC guidance on GP practices complying with the Public Sector Equality Duty (much of the guidance is applicable to wider primary care).</p>
<p>4. We will provide appropriate support for those in our workforce who experience unwanted, inappropriate and/or harmful sexual behaviours.</p>	<ul style="list-style-type: none"> • Do we offer emotional support or signposting to support for affected staff? • Do staff feel that they can make reports without fear of reprisal? 	<p>Ensure that staff are aware of the routes for accessing support outside the organisation (for example, reciprocal support arrangements and local representative</p>	<p>All actions for a small provider.</p>	<p>Make sure Employee Assistance Programme (EAP) schemes are appropriate for individuals who have reported or experienced sexual misconduct.</p> <p>Ensure that appropriate processes are in place for offering alternative clinical care where an</p>	<p>Online resource for support for staff affected by sexual misconduct.</p> <p>Other forms of support can be found in the sexual misconduct policy framework (primary care version to follow).</p>

	<ul style="list-style-type: none"> • Is there a member of staff trained to offer peer support or act as a wellbeing contact? 	<p>committee services).</p> <p>Ensure that all staff who have raised a concern receive appropriate support outside of the organisation.</p>		<p>individual has raised concerns about a member of staff.</p> <p>Consider a domestic abuse and sexual violence ally programme to provide visible faces for support.</p> <p>Make sure that intranet pages are updated with support that staff can access confidentially.</p>	
<p>5. We will clearly communicate standards of behaviour. This includes expected action for those who witness inappropriate, unwanted and/or harmful sexual behaviour.</p>	<ul style="list-style-type: none"> • Are all staff aware of what is expected of them and what inappropriate sexual behaviour looks like? • Does the leadership model this behaviour to staff and call out inappropriate behaviour 	<p>Make clear where standards of behaviour from members of staff fall below what you expect of them.</p> <p>Clarify expectations of staff in team meetings.</p>	<p>Remind staff of the standards of behaviour expected of them in team meetings and through intranet pages.</p> <p>Consider additional training for key members of staff, such as active bystander training.</p>	<p>All actions for small and medium providers, as well as the following action.</p> <p>Appoint a senior lead for sexual safety who is responsible for providing relevant updates and raising issues at senior meetings.</p>	<p>Standards of behaviour on sexual issues are available from General Medical Council (GMC) website, and other regulators are considering introducing similar standards. General standards from most professional regulators also make reference to unacceptable sexual behaviours.</p>

	where it occurs?				National e-learning on sexual safety.
6. We will ensure appropriate, specific, and clear policies are in place. They will include appropriate and timely action against alleged perpetrators.	<ul style="list-style-type: none"> Do we have a sexual misconduct policy or know where to find one? Are decisions documented and communicated appropriately? Do we understand our legal and regulatory responsibilities when misconduct is confirmed? 	<p>Ensure that you have or know where to access a sexual misconduct policy.</p> <p>Log any outcomes from cases that use this policy.</p> <p>Ensure there is a clear process for reporting any incidents to regulators and NHS England where you are required to do so.</p>	<p>Consider having a specific sexual misconduct policy for the organisation, or otherwise know where to access one.</p> <p>Log outcomes of cases and report them to senior members of staff regularly.</p> <p>Ensure there is a clear process for reporting any incidents to regulators and NHS England where you are required to do so.</p>	<p>Ensure you have a sexual misconduct policy for the organisation that aligns to the streamlined national sexual misconduct policy framework for primary care (once published).</p> <p>Log outcomes of all cases and report these up through safeguarding and HR governance, with analysis of lessons learned.</p> <p>Ensure there is a clear process for reporting any incidents to regulators or NHS England where you are required to do so.</p>	<p>National sexual misconduct policy framework is publicly available, and a streamlined framework for primary care to follow.</p>
7. We will ensure appropriate, specific, and clear	<ul style="list-style-type: none"> Have all staff received basic training on sexual safety 	Ask staff to complete the e-learning for health module	All actions for small providers, as well as the following action.	All actions for small and medium providers.	Additional resources available on NHS Futures (sign up required).

<p>training is in place.</p>	<p>and professional boundaries?</p> <ul style="list-style-type: none"> • Do we include this topic in induction for new joiners? • Are there opportunities for informal learning (for example, case discussions, reflective practice)? 	<p>on sexual safety awareness.</p>	<p>Advertise resources on sexual safety on internal websites (including for learners on placement).</p>		<p>National e-learning on sexual safety.</p>
<p>8. We will ensure appropriate reporting mechanisms are in place for those experiencing these behaviours.</p>	<ul style="list-style-type: none"> • Do staff feel psychologically safe to raise concerns without fear? • Are there regular opportunities for open discussion (for example, team huddles, anonymous feedback)? • Have we acted on past 	<p>Ensure that staff are aware of and have access to speaking up routes – staff should know to reach a Freedom To Speak Up (FTSU) guardian.</p> <p>Make sure all staff are aware of the processes</p>	<p>All actions for small providers, as well as the following action.</p> <p>Advertise complaints mechanisms on the external website, and ensure all staff know what the complaints process is.</p>	<p>All actions for small and medium providers, as well as the following actions.</p> <p>Make sure that reporting routes for staff are publicised on internal channels.</p> <p>Consider an anonymous reporting option within your sexual misconduct policy.</p>	<p>Access to FTSU guardian in primary care.</p> <p>Research into potential models for FTSU in primary care.</p>

	concerns in a way that built trust?	for patients to make complaints.		Ensure that complaints mechanisms for patients are well publicised.	
9. We will take all reports seriously and appropriate and timely action will be taken in all cases.	<ul style="list-style-type: none"> Do we have a clear process for responding to reports, even if informal? Are responses timely, fair and sensitive to the needs of the person affected? Do we know when and how to escalate concerns to external bodies (for example, ICB, GMC, General Dental Council, The Nursing and Midwifery Council, NHS England)? 	<p>Ensure staff know where to access a sexual misconduct policy if they needed one.</p> <p>Keep a log of where your existing policies may be relevant in a future sexual misconduct case.</p>	<p>All actions for small providers, as well as the following action.</p> <p>Make sure that practice managers and business managers know how to respond if a concern is logged.</p>	<p>Regularly review concerns that have been reported and ensure feedback loops with affected individuals.</p> <p>Consider stating on internal channels where responses have been made to significant complaints and reports.</p> <p>Consider developing or adapting a specific policy for handling sexual misconduct concerns about staff.</p> <p>Board-like bodies have oversight over cases and receive regular reports about sexual misconduct.</p>	<p>Sexual misconduct policy framework contains reporting processes.</p>
10. We will capture and share data on	<ul style="list-style-type: none"> How are staff views about 	Ensure that staff are asked regularly about	Incorporate questions and considerations on	Ensure that staff surveys ask a question about sexual safety.	The NHS Staff Survey, while not applicable to

<p>prevalence and staff experience transparently.</p>	<p>their experience monitored?</p> <ul style="list-style-type: none"> • Are staff regularly asked about their experience of working in the organisation? • Are we keeping records of reports? 	<p>their experience of being able to speak up and receive support.</p> <p>Make sure that staff are aware of who they can speak to in the organisation about concerns.</p> <p>Keep a log of incidents and actions taken and use this to understand lessons learned, future risk and actions for change.</p>	<p>sexual safety in any staff surveys and staff voice groups.</p> <p>Test any new policies with a diverse range of staff.</p> <p>Follow up – where appropriate – with individuals who have been through any adopted sexual misconduct policy.</p> <p>Keep a log of incidents and actions taken and use this to understand lessons learned, future risk and actions for change.</p>	<p>Ensure that staff voice groups ask staff about their experiences of the culture and processes of the organisation.</p> <p>Consider surveying individuals who have been through the sexual misconduct policy to understand how it is being implemented.</p> <p>Keep a log of incidents and actions taken and conduct lessons learned with staff.</p>	<p>primary care, has 2 questions on sexual safety that can be used.</p> <p>The General Practice Staff Survey (GPSS) has been in place on a voluntary basis since 2023 and includes questions on the sexual safety of staff. The 2025 survey is currently open, and 60,000 staff from 33 different ICBs have been invited to participate.</p> <p>Practices that are not taking part in 2025 should reach out to ICBs to show interest in being part of GPSS 2026 to receive anonymised responses for their area.</p>
---	---	--	--	--	---

Action plan template – please confirm completion with your ICB lead by 31 March 2026

Sexual Safety Charter principle	Actions to take (for business manager to complete and get sign off from senior clinical partner or member of staff)	Completed
<p>1. We will actively work to eradicate sexual harassment and abuse in the workplace.</p>	<p>We will actively work to eradicate sexual harassment and abuse in the workplace</p> <ul style="list-style-type: none"> • Sign the Sexual Safety Charter on behalf of the practice and keep confirmation on file • Nominate a sexual safety lead for the practice this can be you as Business Manager or the Practice Manager and document this role. • Ensure the senior clinical partner and CQC registered manager are briefed on the Charter and checklist requirements. • Complete a practice level risk assessment against the Sexual Safety Charter identifying any risk areas such as lone working 	<p>MS Teams form submitted</p> <p>February 2026 - Charter signed by Practice Manager</p> <p>Sexual Safety Lead is the Practice manager, this is on our responsible persons list and documented.</p> <p>Partners (inc CQC Registered Manager) are aware</p> <p>Awaiting the poster which we will display once received in Pt spaces (toilets and public areas) as well as the website and TV screen.</p>

	<p>chaperoning clinical rooms and patient interactions.</p> <ul style="list-style-type: none"> • Document actions to mitigate risks and review annually. • Display the Sexual Safety Charter poster in staff and patient facing areas once available. 	<p>We have a clear chaperone policy in place and promote this to all Pts. This is done via the website, TV screens, notice boards in staff rooms and clinical rooms and by staff members themselves promoting and prompting Pts to ask if they would like a chaperone.</p>
<p>2. We will promote a culture that fosters openness and transparency, and does not tolerate unwanted, harmful and/or inappropriate sexual behaviours.</p>	<ul style="list-style-type: none"> • Introduce the Charter at a whole practice meeting and record discussion in minutes. • Add sexual safety expectations to staff induction packs and induction checklist. • Ensure all staff know what constitutes inappropriate sexual behaviour and how to raise concerns. • Include sexual safety as a standing item at least annually in team meetings. 	<p>Charter to be shared via staff news letter. Whole practice meeting due this year will organise it to be discussed.</p> <p>Copy of the charter will be provided to all new employees and will be included into the induction pack.</p> <p>Will be included onto Managers Mtgs and will be highlighted via regular staff meetings</p> <p>Charter will be a regular monthly newsletter item</p>

	<ul style="list-style-type: none"> • Encourage staff to contribute to identifying gaps or risks anonymously or openly. 	<p>We have a clear chaperone policy in place and promote this to all Pts. This is done via the website, TV screens, notice boards in staff rooms and clinical rooms and by staff members themselves promoting and prompting Pts to ask if they would like a chaperone.</p>
<p>3. We will take an intersectional approach to the sexual safety of our workforce, recognising certain groups will experience sexual harassment and abuse at a disproportionate rate.</p>	<ul style="list-style-type: none"> • Review equality diversity and inclusion policies to ensure sexual safety and harassment are explicitly referenced. • Check policies are accessible and inclusive including language accessibility and reasonable adjustments. • Ensure staff voices from different roles and backgrounds are considered when reviewing policies or risks. 	<p>Protocol and policy are reviewed on a regular basis and includes reference to sexual safety and harassment.</p> <p>Policies are accessible to all via TeamNet system and on our website.</p> <p>All policy is inclusive and are reviewed and updated as needed by the practice manager. This takes account of staff voices and background. All policies are managed and include different staff of sex, ethnicity and sexual orientation.</p>
<p>4. We will provide appropriate support for those in our workforce who experience</p>	<ul style="list-style-type: none"> • Clearly signpost internal and external support routes for staff 	<p>staff are signposted to existing third party providers that can</p>

<p>unwanted, inappropriate and/or harmful sexual behaviours.</p>	<p>including EAP local support services and representative bodies.</p> <ul style="list-style-type: none"> • Ensure staff know they can access support outside the practice if needed. • Identify a wellbeing or peer support contact if appropriate. • Ensure processes exist to provide alternative working arrangements or clinical care if a concern is raised about a colleague. • Keep intranet up to date with support information. 	<p>support staff and or patients. This includes whistleblowing. These are displayed in the staff areas.</p> <p>Staff have posters up providing information on where they can seek support outside of the practice. Whistleblowing lead is also advertised (external)</p> <p>We will liaise with authorities as is needed and defer to them where criminal activity is suspected and support staff fully as a responsible employer.</p> <p>Intranet is routinely monitored and updated as and when required.</p>
<p>5. We will clearly communicate standards of behaviour. This includes expected action for those who witness inappropriate, unwanted and/or harmful sexual behaviour.</p>	<ul style="list-style-type: none"> • Reinforce expected standards of behaviour at team meetings including bystander responsibility. • Ensure leadership models appropriate behaviour and challenges inappropriate behaviour. 	<p>Clear expectations of standards and behaviours from all staff and what is expected of them is communicated prior to appointment, during probation periods and through various policy and staff handbooks. Evisiting systems such as whistleblowing, open culture and</p>

	<ul style="list-style-type: none"> • Link standards to existing professional codes such as GMC and NMC guidance. • Consider whether key staff would benefit from additional training such as bystander awareness. 	<p>grievance process are in place that ensure compliance and where issues are raised, these are dealt with accordingly to ensure that the surgery is a safe space for all staff.</p> <p>This includes staff with a professional registration and that they are aware of their responsibilities as is highlighted in their appraisals to maintain their professional registration.</p> <p>This include a zero tolerance approach to abuse directed at staff. All instances are recorded and treated as significant events and discussed in our management meeting where a decision on next steps is undertaken once Pt mitigating factors are accounted for. The surgery has a long history of supporting staff fully and actively removes Pts who are abusive, including any suggested sexual element. Where appropriate the police will be informed.</p>
--	---	---

		Bystander awareness will be reviewed when suitable e-courses for this are released.
6. We will ensure appropriate, specific, and clear policies are in place. They will include appropriate and timely action against alleged perpetrators.	<ul style="list-style-type: none"> • Confirm the practice has a sexual misconduct policy or knows where to access the national primary care policy framework. • Ensure the policy is aligned with national guidance when the streamlined primary care version is published. • Ensure clear processes exist for documenting decisions and outcomes. • Confirm reporting routes to regulators NHS England and ICB are documented. • Maintain a confidential log of cases outcomes and lessons learned 	<p>clear policy is in place following national guidance as supplied nationally.</p> <p>This include escalation and reporting, recording and lessons identified. This will link with significant event reporting as well.</p> <p>We will await further primary care specific guidance on this. For now any instances will be treated under grievance process as well as Sig Event, with restricted access, to ensure that any lessons learnt can be acted on.</p> <p>Logs will be created (if) an incident happens.</p>
7. We will ensure appropriate, specific, and clear training is in place.	<ul style="list-style-type: none"> • Ensure all staff complete sexual safety awareness e learning. 	learning has been shared and allocated to staff to complete.

	<ul style="list-style-type: none"> • Include sexual safety and professional boundaries in induction for all new starters. • Promote informal learning through discussion reflective practice or case learning where appropriate. • Maintain a training log to evidence completion. 	<p>This is now included into induction paperwork to new staff for clarity and the avoidance of doubt.</p> <p>As a surgery we have a learning culture through various informal and formal methods. Staff are encouraged at all levels to learn from issues and to allow the surgery to improve. Formally this is captured through individual appraisal process or significant event analysis.</p> <p>A training log is kept on teamnet system when staff have completed its updated.</p>
<p>8. We will ensure appropriate reporting mechanisms are in place for those experiencing these behaviours.</p>	<ul style="list-style-type: none"> • Ensure all staff know how to raise concerns including access to Freedom to Speak Up routes. • Publicise staff reporting routes internally. Ensure patient complaints processes are clearly displayed on the practice website and in reception. 	<p>We have clear posters and documentation for staff to know how to raise any concerns. All managers are open and visible to allow staff to speak to any of them.</p> <p>Complaints processes are clearly displayed on surgery website.</p>

	<ul style="list-style-type: none"> • Consider whether anonymous reporting options are appropriate for the practice. 	The surgery supports this and if a person wishes to be anonymous they can report anonymously.
9. We will take all reports seriously and appropriate and timely action will be taken in all cases.	<ul style="list-style-type: none"> • Ensure Business understand how to respond to concerns sensitively and promptly. • Maintain clear records of reports actions taken and feedback provided. • Review cases periodically to ensure learning and improvements are identified. • Ensure escalation routes to external bodies are understood and documented. 	<p>Staff training is underway and national documents supplied to the surgery will be used in the event of an incident.</p> <p>All instances will be logged as a significant event and where required external support will be sought and learning form any case will be shared at the monthly SEA meeting.</p> <p>Cases will be reviewed periodically</p> <p>External escalation routes to authorities are within our protocol.</p>
10. We will capture and share data on prevalence and staff experience transparently.	<ul style="list-style-type: none"> • Encourage participation in the GP Staff Survey where available. 	Each year we take part in the NHS staff survey and share the results with staff.

	<ul style="list-style-type: none"> Review feedback and use it to inform risk assessments and policy updates. 	<p>From this we also create a surgery action plan to look at areas where we may need to improve. This is shared with the staff to help hold Management to account.</p> <p>The surgery has a transparent approach with staff across all areas of the business.</p> <p>Where something cannot be actioned, then this is communicated to staff with reasons why. As a surgery we run off the basis of 'Never Just Say No'. Staff have a right to understand rationale behind decisions made impacting them. If we are not able to do something, then clear reasons as to why are set out.</p>
--	---	--