



Violence and Aggression against Staff Committee
26th May 2022

Presented for:	Information
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Previous Committees:	Workforce Committee 18th May 2022

Trust Goals	
The best for patient safety, quality and experience	✓
The best place to work	✓
A centre for excellence for research, education and innovation	
Seamless integrated care across organisational boundaries	
Financial sustainability	

Risk Appetite Framework				
Level 1 Risk	(✓)	Level 2 Risks	(Risk Appetite Scale)	Risk
Workforce Risk	✓	Workforce Supply Risk - We will deliver safe and effective patient care through having adequate systems and processes in place to ensure the Trust has access to appropriate levels of workforce supply.	Minimal	↔ (same)
Operational Risk	✓	Health & Safety Risk - We will protect the health & wellbeing of our patients and workforce by delivering services in line with or in excess of minimum health & safety laws and guidelines.	Cautious	↔ (same)
Clinical Risk	✓	Patient Safety & Outcomes Risk - We will provide high quality services to patients and manage risks that could limit the ability to achieve safe and effective care for our patients.	Cautious	↔ (same)
Financial Risk	N/A	Choose an item.	Minimal	↔ (same)
External Risk	✓	Regulatory Risk - We will comply with or exceed all regulations, retain its CQC registration and always operate within the law.	Averse	↔ (same)

Key points	
1. Inform the Board of the strengthened governance structures in place to ensure LTHT meets its responsibilities as set out in the new NHS Violence Prevention and Reduction Standard	Information
2. Provide assurance to the Board of the on-going work in relation to reducing violence and aggression	Information
3. Inform the Board with regards to the Trust's compliance against the NHS Violence Prevention and Reduction Standard	Information

1. Summary

This paper provides assurance to the Board on;

- The on-going work in relation to the management of challenging behaviours
- Reducing the incidence of violence and aggression against staff in LTHT
- Compliance with the Violence Prevention and Reduction Standards

In January 2021 NHS England and Improvement published the new national Violence Prevention and Reduction Standard. The standard delivers a risk-based framework that supports a safe and secure working environment for NHS staff, safeguarding them against abuse, aggression and violence.

This paper provides assurance with regards to LTHT's current compliance to the standards. Additionally to meet one of the requirements of the standards the Trust Board must be updated every six months on compliance with the standards. As such this is now included in the annual work plan.

2. Background

The 2021 NHS Staff survey found that 14% of staff from Acute and Community Trusts experienced at least one incident of physical violence from patients, service users, relatives or other members of the public in the last 12 months. This figure is slightly higher for LTHT at 14.6% of those who responded.

The NHS Violence Prevention and Reduction Standards seek to address the increase of reported attacks on NHS staff. The standard supports the Zero Tolerance message and will be underpinned by:

- A new national reporting system (still to be implemented)
- Greater scrutiny by care inspectors of data, policies and information supporting the reduction of violence and aggression - the Violence Prevention and Reduction Steering Group are leading on this for the Trust.
- A partnership between the NHS, Police and Crown Prosecution Service
- The introduction of the "Protect the Protectors Bill" and subsequent legislation - The Assaults on Emergency Workers (offences) Bill
- Better training for staff in dealing with violence and aggression, especially with regards to Mental Health patients and those with dementia. The Trust has commissioned bespoke training via the Trust's Quality Improvement Collaborative that is addressing clinical drivers that lead to challenging behaviours and violence and aggression.

Strengthened Governance framework

To ensure the standards are fully considered within LTHT a Violence Prevention and Reduction Steering Group has been established with a project board, chaired by the Executive Director of Estates and Facilities. The following areas of responsibility within the overall agenda have been agreed with the Executive Directors as follows:

- **Staff on staff issues:** Executive Lead - Director of HR and OL - the reason for this is because there are established HR processes for dealing with such matters and these incidents are more likely to be reported through HR processes than through security or similar reporting routes.

- **Patient on staff abuse, violence or aggression related to challenging behaviours resulting from clinical condition, medication or other health matters:** Executive Lead - Chief Nurse. As such incidents are generally as a result of underlying clinical conditions, the preventative measures, or risk reduction measures are often clinically/treatment related.
- **Violence and aggression related to anti-social behaviour by visitors or those not in a clinical setting:** Executive Lead - Director of Estates and Facilities. Those involved in this category tend to be regular perpetrators and those not requiring clinical care and processes for dealing with them are in place and managed by Security with assistance from Risk Management.

Position statement against the Violence Prevention and Reduction Standard

There are 32 criteria to meet within the standard. The standard has been developed using the plan, do, check, act (PDSA) approach. PDCA is an iterative four-step management method used to validate, control and achieve continuous improvement of processes. A large proportion of the detailed expectations are already being addressed in the Trust's existing work, but key to the standard is a new requirement for an organisational self-assessment and the development of a violence reduction strategy¹ and action plan endorsed by the Trust Board².

Stakeholders from across the Trust have undertaken a self- assessment against the criteria within the standard. The provisional assessment indicates the Trust is mostly compliant with the standards with some areas of partial compliance and no non-compliant standards. The Trust in its self-assessment, has added two columns' a RAG rating column and a mitigations / action column.

The provisional assessment is now subject to on-going validation by the stakeholders and following this an action plan will be continually developed that evolves from periodic review at the Steering Group and Project Board. On-going updates to the Workforce Committee / Trust Board will provide the outcome of the validated self-assessments. The Violence Reduction Steering Group has responsibility for overseeing compliance with the standard and monitoring implementation of the actions to address any shortfalls.

3. Proposal

It is proposed that the Board accept this paper as assurance that the Violence Prevention and Reduction Steering Group are providing assurance that the standards have been adopted and any deficiencies identified will be mitigated and any action plan will be provided.

4. Financial Implications

There are no financial implications with regards this paper.

5. Risk

There is a risk, CRRS4 "Violence due to organic, mental health or behavioural reasons" on the corporate Risk Register which is currently scored at 16. This risk is reviewed and updated on a regular basis by the Head of Mental Health Legislation in conjunction with

¹ At the time of this paper being prepared a DRAFT Violence Reduction and Prevention Strategy is being consulted upon

² The Blue Box contains the Trusts self-assessment against the standard. The Trust has added an additional column with the mitigation / GAP so the standard submission can be continually improved.

the Deputy Chief Nurse. The risk was last reviewed at the Trust's Risk management Committee in Dec 2021. It is due for review again in June 2022. The Risk Management Committee is provided with information on the controls in place to mitigate the risk as well as details of further actions being undertaken to reduce the level of risk further.

There is no proposed change to the score of 16.

6. Communication and Involvement

A number of stakeholders have been involved in the development of the Violence Prevention and Reduction Standards. All stakeholders have a responsibility with regards to the management and reduction of violence and aggression and challenging behaviours. Stakeholders consist of staff and organisational representatives.

7. Equality Analysis

The Leeds Teaching Hospitals NHS Trust is committed to ensuring that the way that we provide services and the way we recruit and treat staff reflects individual needs, promotes equality and does not discriminate unfairly against any particular individual or group. Those involved in contributing to this paper and the different work streams involved in this subject continue to assess the impact upon equality. Those involved in the different work streams involved in this subject continue to assess the impact upon equality.

8. Publication Under Freedom of Information Act

This paper is exempt from publication under Section 22 of the Freedom of Information Act 2000, as it contains information which is in draft format and may not reflect the organisation's final decision.

9. Recommendation

It is recommended that the Board accept this paper as assurance that the Trust has in place the necessary governance and assurance arrangements to reduce the incidence of violence and aggression and has in place assurance with regards to the Violence Reduction and Prevention Standards.

10. Supporting Information

The following papers make up this report:

Blue box items:

- Workforce Committee - violence against staff report
- LTHT Violence Prevention and Reduction Standards.

Peter Aldridge
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9th May 2022