

**Violence Prevention and Reduction**  
**Public Board**  
**27<sup>th</sup> November 2025**

<b>Presented for:</b>	Information and Assurance
<b>Presented by:</b>	Craige Richardson – Executive Director of Estates and
<b>Author:</b>	Dan Jones – Violence Prevention and Reduction Coordinator and Operational Lead
<b>Previous Committees:</b>	Workforce Management Group Workforce Committee

<b>Our Annual Commitments for 2025/26 are:</b>	
Recognise and act upon moments that matter to our patients	✓
Support our patients to get home a day sooner	✓
Be in the top 25% for patient experience and efficiency in outpatients	✓
Support each other to act with kindness and compassion	✓
Reduce our carbon footprint by creating greener patient pathways	
Support our staff to manage every £ wisely	
Make best use of our estate, equipment and digital assets	✓

<b>Risk Appetite Framework</b>				
<b>Level 1 Risk</b>	<b>(✓)</b>	<b>Level 2 Risks</b>	<b>(Risk Appetite Scale)</b>	<b>Impact</b>
Workforce Risk	✓	Workforce Retention Risk - We will deliver safe and effective patient care, through providing a supportive culture, training, development and H&WB to our staff to retain the appropriate level to continue to meet the patient demand for our clinical services	Minimal	Moving Towards
Operational Risk	✓	Health& Safety Risk - We will protect the health and wellbeing of our patients and workforce by delivering services in line with or in excess of minimum health & safety laws and guidelines.	Cautious	Moving Towards
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	Moving Towards
Financial Risk	✓	Financial Management & WRP - We will deliver sound financial management and reporting for the Trust, aiming to at least break even, with no material variances to forecast.	Minimal	Moving Towards
External Risk	✓	Regulatory Risk - We will comply with or exceed all regulations, retain its CQC registration and always operate within the law.	Averse	Moving Towards

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<b>Key points</b>	
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 of the on-going work in relation to violence prevention and reduction in LTHT.

The violence prevention and reduction programme of works at LTH aims to embed a culture where our colleagues feel supported, safe and secure at work.

The NHS Long Term Plan, NHS People Plan and NHS People Promise demonstrate a commitment to support the health and wellbeing of NHS colleagues, recognising the negative impact that poor staff health and wellbeing can have on patient care. This is also central to the [NHS EDI Improvement Plan](#).

This paper details LTHT's current status, in regard to compliance with the NHS England Violence Prevention and Reduction (VPR) standard and is intended to meet the requirement for six monthly Board reporting.

This paper will be presented to the Workforce Committee twice yearly and subsequently to the Board as required in the standard.

## **2. Background**

NHS Employers have a duty to protect the health, safety and welfare of staff under the 1974 Health and Safety at Work Act. This includes assessing the risk of violence and taking steps to reduce it as required under the Management of Health and Safety at Work Regulations 1999.

The Health and Safety Executive (HSE) defines violence at work as *"any incident in which an employee is abused, threatened or assaulted in circumstances relating to their work"*. This covers the serious or persistent use of verbal abuse, which the HSE say, *"can add to stress or anxiety, thereby damaging an employee's health"*. It also covers staff assaulted or abused outside their place of work, for example, while working in the community, as long as the incident relates to their work.

The NHS Violence Prevention and Reduction Standard is in place to address the increase of reported attacks on NHS staff. The standard supports the *"Work without Fear"* and *"Report to Support"* message

## **Governance Framework**

VPR has links to multiple disciplines, and as such the governance incorporates those areas to ensure a holistic approach to VPR across the trust. To ensure this work is fully considered within LTHT a Violence Prevention and Reduction Steering Group has been established, 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:

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- **Staff on staff issues:** Executive Lead - Director of HR and OL – There are established HR processes for dealing with such matters and these incidents are more likely to be reported through HR processes rather 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 (PDCA) 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 strategy, LTHT has an approved strategy and an action plan endorsed by the Trust Board<sup>1</sup>.

Stakeholders from across the Trust undertook a self-assessment against the criteria within the standard. The provisional assessment indicates the Trust is mostly compliant with the criteria in the standard with some areas of partial compliance and no non-compliant elements of the standard. The Trust in its self-assessment, has added two columns a RAG rating column and a mitigations / action column. The standard is subject to on-going review.

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 standard has been adopted and any deficiencies identified will be mitigated and an action plan will be provided and complied with

### **4. Financial Implications**

There are no financial implications with regards this paper.

### **5. Risk**

There is a risk, CRRO3 "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

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<sup>1</sup> A separate, more detailed paper sets out the Trusts approach to reducing violence and aggression against our staff and the assessed GAPS in the compliance with the standards and supporting action plan.

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updated on a regular basis by the Head of Mental Health Legislation in conjunction with the Deputy Chief Nurse. 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 Standard. 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. Improving Health Equity**

The Trust is committed to Improving Health Equity meaning reducing the unfair and avoidable differences in health some groups experience. The work detailed in this paper is not anticipated to have neither a positive or negative effect on our most deprived communities or those experiencing poverty.

VPR work is continually monitored to ensure there is no negative impact and to identify any positive impacts it may have.

## **9. Publication Under Freedom of Information Act**

This paper is in the public domain and as such would be released as requested under FOI.

## **10. Recommendation**

The report was scrutinised by the Workforce Committee and provides 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 Prevention and Reduction Standard.

## **11. Supporting Information**

The following papers make up this report:

- Workforce Committee paper on Violence Prevention and Reduction – the paper was scrutinised and commended for the assurance provided at WFC on 12th Nov 2025

Dan Jones – Violence Prevention and Reduction Coordinator and Operational Lead

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