

## **Violence reduction - Creating a culture of safety**

### **SPF Wider Group Update 15 July 2019**

#### **Background**

An NHS Violence Reduction Strategy was announced in October 2018. NHS Improvement and NHS England have developed a plan to deliver this strategy, that includes various milestones over the current and future financial years.

The NHS Social Partnership Forum is committed to improving the working lives of NHS staff by tackling violence and aggression to create a culture of safety. Alongside the NHS Long Term Plan, the Interim People Plan and the NHS E/I violence reduction strategy the NHS SPF is ideally placed to bring together employers, system leaders and trade unions to work in partnership to reduce the harm caused by violence.

#### **Workforce Issues Group**

The Workforce Issues Group (WIG) will form a sub group to take forward actions in partnership to support the NHS E/I strategy. The NHS Call to Action – created through the WIG is an excellent example of dealing with a multifaceted problem by creating tools and resources that local and regional partnerships can use to establish the scale and scope of the problem, thereby tailoring a response that suits the issues found.

The WIG offers an ideal place to publicise views of leaders and experts, signpost information, tools and resources and develop case studies of partnership initiatives.

Violence and bullying have many similarities in how they manifest in the workplace and the impact they have. Our people not only face the threat of physical assaults but also face aggression and abuse on a regular basis. Therefore, the WIG has agreed to build on the existing NHS Call to Action as a framework for describing the way in which employers and trade unions work in partnership to improve the experience of staff and make the NHS the Best Place to Work.

#### **Terms of Reference**

The attached draft terms of reference for the “*Violence reduction - Creating a culture of safety*” subgroup gives an overview of some of the key deliverables to be achieved against the recommendations set out by the Secretary of State in announcing the violence reduction strategy. These will be formally ratified at the July WIG meeting.

Theme	Progress Update
<b>Governance</b>	<p>Violence Data Task and Finish Group first meeting planned for 30 July. We have representatives from a wide range of stakeholders including employers, staff side and security leads. The terms of reference and briefing pack have been prepared. The group will focus on assessing the options for national data collection considering: best return on investment, long-term viability, lead in time. There is an opportunity to integrate with Patient Safety Incident Management (PSMS) system which has beta version already developed. The group will also work on designing a streamlined data set for national collection.</p> <p>Central Support Team job descriptions drafted.</p> <p>CQC well led domain guidance for reducing violence against staff complete and with CQC for review.</p> <p>Security Management Standards: draft document produced and working group established.</p>
<b>Staff Support</b>	<p>CPS MOU on track with several draft versions completed, due to be finalised by late 2019, this is due to a consultation regarding mental health by the Crown Prosecution Service.</p> <p>Restrictive Practice Guidance phase one preventative work aligns with our review of de-escalation training (EDITION) working in partnership with the Restrictive Interventions - Strategic Oversight Group.</p> <p>Body worn cameras in Mental Health Trusts: There is some potential to undertake a wider trial of body worn cameras in MH Trusts but this needs further exploration. Some concerns that Calla (small BWV) are offering trials on MH and Acute Ward Areas with no national oversight and assurances around appropriate governance, learning etc. Further investigation underway.</p> <p>Ambulance body worn camera pilot: Funding has not yet been released. The 3 pilot sites for phase 1 have been identified (NEAS, LAS, NWAS). Currently working with phase 1 on business cases, procurement processes, preparation for trial in anticipation of commencing trials later this year. Plan to engage with other trusts and create an online platform to share learning, challenges and best practice. Plan for a BT 'hot house' event focusing on body worn cameras in Autumn. Scoping an independent evaluation of body worn cameras engaging with providers.</p> <p>Best practice case studies are in process of development. Working with WIG to identify further case studies/ examples of best practice.</p>
<b>Public Awareness</b>	<p>Ambulance and Acute sector filming completed. Agreed with SPF to identify and capture further staff stories and experiences and ideas about what can be done differently. This will be shared on NHSEI/SPF online channels as soon as clearance received.</p>
<b>Physical Environments</b>	<p>Plan to review the trusts that were part of the Design Council pilot for improving physical environments and consider if evidence of progress can be shared as a diagnostic toolkit.</p>

## Social Partnership Forum - Workforce Issues Group

### Violence reduction - Creating a culture of safety subgroup

#### Terms of Reference - June 2019

<b>1. PROJECT TITLE</b>	Violence reduction - Creating a culture of safety subgroup of the Workforce Issues Group (WIG)
<b>2. PROJECT LEAD</b>	TBC
<b>3. PROJECT TEAM</b>	<p><b>JOINT CHAIRS</b> TBC – Harprit Hockley and Alan Lofthouse</p> <p><b>CORE GROUP</b> TBC – WIG members</p>
<b>4. DATE</b>	June 2019
<b>5. AIMS</b>	<p>The NHS Social Partnership Forum is committed to improving the working lives of NHS staff by tackling violence and aggression to create a culture of safety.</p> <p>Alongside the NHS Long Term Plan, the Interim People Plan and the NHS E/I violence reduction strategy the NHS SPF is ideally placed to bring together employers, system leaders and trade unions to work in partnership to reduce the harm caused by violence.</p> <p>Bring a focus on violence into year 3 of the “Collective Call to Action”</p>
<b>6. OBJECTIVES</b>	<p>The objectives of this subgroup are to:</p> <ul style="list-style-type: none"> <li>• support and inform the NHS E/I Violence Reduction Strategy</li> <li>• be an expert reference group and inform the SPF WIG on the best way to support the partnership implementation of the violence reduction strategy</li> <li>• support the SPF’s commitment to reducing violence and aggression and improve the NHS as a place to work</li> <li>• to produce practical and effective joint products, where possible and appropriate for employers and staff, about workforce implications and staff engagement</li> <li>• collaborate with parts of the NHS system to test advice, gather ideas, share best practice and consider initiatives that improve workplace cultures and reduce violence in the NHS (health and wellbeing)</li> <li>• promote effective partnership working - nationally, regionally and locally - on the workforce implications of policy clarify and communicate arrangements to support staff, trade unions, commissioners and employers in undertaking change in the NHS funded health care</li> </ul>

<p><b>7. DELIVERABLES</b></p>	<p>NB. This is not an exhaustive list of deliverables; the WIG workplan will be kept updated to reflect current work streams and deliverables.</p> <ul style="list-style-type: none"> <li>• Create a specific webpage for project</li> <li>• Publish cultural messages on safety from senior leaders and voices of staff, including the NHS E/I stories to include on the webpage.</li> <li>• Collect and collate existing documents on violence to help inform the work and provide an evidence base to the WIG project             <ul style="list-style-type: none"> <li>○ NHS E/I documents</li> <li>○ World Health Organisation (WHO) recommendations</li> <li>○ NICE guidelines,</li> <li>○ advice from employers and trade unions</li> <li>○ best practice examples of partnership working</li> <li>○ Design Council advice on environments</li> </ul> </li> <li>• Develop new materials, tools and resources including:             <ul style="list-style-type: none"> <li>○ <i>'Why take action – how to build a business case to encourage action with your board'</i> resource</li> <li>○ Best practice examples on violence related training</li> <li>○ Support for staff involved in incidents</li> <li>○ Innovations around reporting incidents</li> <li>○ Regional SPF partnership toolkit</li> <li>○ ICS/STP partnership engagement tool kit</li> <li>○ calculator for savings related to reducing violence</li> </ul> </li> <li>• Aspirational actions may include:             <ul style="list-style-type: none"> <li>○ an accreditation framework based on QI improvement measurements</li> </ul> </li> <li>• Involvement in the data task and finish group</li> <li>• Involvement in the evaluation of phase one of the body worn cameras pilot. This may lead to best practice national policy and governance materials.</li> <li>• Webinars and events to support violence strategy</li> </ul>
<p><b>8. BUSINESS BENEFITS</b></p>	<ul style="list-style-type: none"> <li>• System wide focus on violence</li> <li>• Reassurance for staff</li> <li>• Reduction in harm to staff</li> <li>• Reduced absence and improved support to staff</li> <li>• Consistency of approach</li> <li>• Better industrial relations and better partnership working</li> <li>• Better integration between the national SPF and regional SPFs</li> </ul>

<b>9. LINKS AND DEPENDENCIES</b>	<ul style="list-style-type: none"> <li>• This subgroup reports to the SPF WIG</li> <li>• SPF Wider Group and the SPF Strategic Group will want updates on progress</li> <li>• NHS E/I Violence Reduction strategy – in order to enhance activity and avoid confusion, it is recommended that the WIG actions are co-ordinated with the NHS E/I strategy wherever possible.</li> <li>• A Collective Call to Action on Bullying in the NHS – year 3</li> <li>• Policy leads across DH</li> <li>• NHS England – Long term plan and Interim People Plan</li> <li>• Health Safety and Wellbeing Partnership Group of the NHS Staff Council (HSWPG)</li> <li>• Regional SPFs</li> </ul>
<b>10. POTENTIAL RISKS</b>	<ul style="list-style-type: none"> <li>• Funding of Violence Strategy</li> <li>• Bringing the bullying and violence work into the Collective Call for Action may dilute the issues and fail to draw significant clarity between the two</li> <li>• Complexity of issues – needs clear co-ordination and agreed expectation from all partners</li> <li>• Different perspectives and needs of parties involved</li> <li>• Adverse staff or union reaction if staff issues not satisfactorily addressed</li> <li>• Time and commitment from all partner organisations</li> <li>• Lack of impact, difficulty measuring / monitoring the impact of what the subgroup does</li> <li>• Difficulty in delivering products within a timeframe likely to optimise impact</li> </ul>
<b>11. TIMING</b>	<ul style="list-style-type: none"> <li>• Frequency of meetings – monthly (more if required dependent on agendas) supported by detailed work off-line as required</li> <li>• Mixture of meeting types, including face to face, teleconference, video conference</li> <li>• Specific deliverables dependent on policy timescales and resources; processes and timescales to be agreed by partners on each work stream.</li> <li>• ToR will be reviewed periodically</li> </ul>