

2.4 Management of Violence & Aggression / Lone working update

Presenter: Tim Harrison

Item 2.4 Management of Violence & Aggression / Lone working update

Appendix 1 V&A Analysis March 2020

HEALTH & SAFETY ASSURANCE COMMITTEE PWYLLGOR ANSAWDD IECHYD A DIOGELWCH

DYDDIAD Y CYFARFOD: DATE OF MEETING:	14 May 2020
TEITL YR ADRODDIAD: TITLE OF REPORT:	Violence and Aggression and Lone Working Update
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mandy Rayani, Executive Director of Nursing, Quality and Patient Experience
SWYDDOG ADRODD: REPORTING OFFICER:	Tim Harrison, Head of Health, Safety and Security

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA SBAR REPORT

Sefyllfa / Situation

This paper has been brought to the Health and Safety Assurance Committee to provide an update on the continuing work towards compliance with the Violence and Aggression and Lone Working notices served against the Health Board by the Health and Safety Executive (HSE) in October 2019.

This paper outlines the work undertaken so far and the key work still to be undertaken.

Cefndir / Background

The Improvement Notices and Material Breaches received included:

- Violence and Aggression, Inc. Lone Working – 2 Improvement Notices and 7 Material Breaches

A Violence and Aggression Control Group, chaired by the Director of Nursing, Quality and Patient Experience, has been established to oversee compliance with the above notice.

The HSE identified a number of examples where they felt improvements in managing the risks for lone working staff is required. These included the following areas: District Nursing, Community Mental Health Teams and Prince Phillip Hospital Mortuary and Estates Maintenance staff.

Asesiad / Assessment

Violence and Aggression (V&A)

The introduction of a dedicated Violence and Aggression Case Manager has enabled many of the required actions to be successfully completed. These improvements are described in the HSE update SBAR report (separate SBAR report) but relate primarily to improvements to support staff who have been victims of violence and aggression incidents. As well as improving the links with Dyfed Powys Police. Appendix 1 provides the Committee with an update report on V&A incidents and analysis.

The HSE highlighted that the Prevention & Management of Violence and Aggression (PAMOVA) team had developed a 2-day course 'Prevention and Management of Behaviours that Challenge in Older Adults', which includes safe holding and would be of benefit to many wards and departments including portering.

However, there is a lack of capacity to deliver this to meet the demand. This particular element of the Improvement Notice compliance is still a challenge and still of concern.

The PAMOVA team have undertaken a training needs analysis to identify the number of staff that would benefit from receiving this course. At present, 1188 staff have been identified as requiring the 2 day course which equates to 99 courses. Whilst there are insufficient trainers within the team to deliver this amount of training over a 12 month period, options for delivery are being discussed.

Lone Working

A trial for a lone working device (Skyguard) has been undertaken amongst the Community Nursing Teams in Ceredigion.

The device trialled is a small personal safety device that incorporates the latest Global Positioning System (GPS) and General Packet Radio Service (GPRS) technologies, featuring mobile phone position, which enables location of the device is at any moment in time, as well as an SOS alarm function; this is therefore a potential solution for lone worker protection.

The cost of the Skyguard based on a 3 year contract period is £5.21 per device per month.

Product	1 year contract	2 year contract	3 year contract	4 year contract	5 year contract
My SOS Device	£10.44 per month per device	£7.63 per month per device	£5.49 per month per device	£5.21 per month per device	£5.03 per month per device

Whilst these devices offer an excellent resource, together with a reassurance for our lone working staff, they are only effective if they are routinely used by those staff issued with them.

Monitoring the device usage could be undertaken by both the respective management teams and also the Health, Safety and Security Team.

For the lone working device project to progress to the next stage will involve determining the numbers of devices required, the departments/Teams that would benefit from them based upon their violence and aggression/lone working risk assessments and an agreed contract length.

It is recognised that, if adopted, the lone working system would require an annual revenue consequence being met potentially through operational team budgets.

If lone working devices are used, they would enable the Health Board to not only improve the safety of staff who routinely work alone but also satisfy the HSE and enable compliance against the material breaches identified.

The next stage of the project will involve determining the numbers of devices required, the Departments/Teams that would benefit from using them and an agreed preference of a three year contract period.

If such lone working devices are used, this would enable the Health Board to not only improve the safety of staff who routinely work alone but also satisfy the HSE and enable compliance against the material breaches identified.

Argymhelliad / Recommendation

The Health & Safety Assurance Committee is asked to note the work being taken towards compliance with the Violence and Aggression and Lone Working notices served against the Health Board by the HSE

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	4.1 Provide assurance around the UHB arrangements for ensuring the health, safety, welfare and security of all employees and of those who may be affected by work-related activities, such as patients, members of the public, volunteers contractors etc.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	1.1 Health Promotion, Protection and Improvement
Nodau Gwella Ansawdd: Quality Improvement Goal(s):	Focus On What Matters To Patients, Service users, Their Families and Carers, and Our Staff
Amcanion Strategol y BIP: UHB Strategic Objectives:	2. Living and working well.
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

**Gwybodaeth Ychwanegol:
Further Information:**

Ar sail tystiolaeth: Evidence Base:	Health & Safety Executive
Rhestr Termiau: Glossary of Terms:	Included within the body of the report

Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd Iechyd a Diogelwch: Parties / Committees consulted prior to Health and Safety Assurance Committee:	N/A
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Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	It is recognised the lone working system would require an annual revenue consequence being met potentially through operational team budgets.
Ansawdd / Gofal Claf: Quality / Patient Care:	N/A
Gweithlu: Workforce:	Adverse effect on workforce if violence and aggression training is not delivered. Potential for adverse effect on staff if lone working procedures are not improved.
Risg: Risk:	Risk of not being able to demonstrate to the HSE improvements to lone working or V&A training could lead to further enforcement action including potential prosecution and fines.
Cyfreithiol: Legal:	As above – Breaches of the Health and Safety at Work Act
Enw Da: Reputational:	Potential for media interest or public for non-compliance of the Improvement Notices.
Gyfrinachedd: Privacy:	N/A
Cydraddoldeb: Equality:	<ul style="list-style-type: none"> • Has EqIA screening been undertaken? No • Has a full EqIA been undertaken? No

Violence and Aggression report March 2020

Hywel Dda University Health Board

Introduction

Hywel Dda University Health Board has a moral and legal obligation to protect and manage violence and aggression within the workplace.

To facilitate and support addressing these issues, incidents are recorded on the Datix reporting system that allow reactive measures, actions and support to be evidenced in accordance with legislative burdens, but also if used correctly can look to introduce measures on a preventative protective basis with target hardening and improved inter agency cooperation and information sharing.

This report will aim to identify the types of incidents that have been recorded together with the measures taken and actions being sought.

March 2020 was complex due to the responses and measures taken by the public as well as the health board as an organisation and it is to be appreciated the patterns and data may change sharply upon social distancing and protective service measures being lifted.

Incidents by location and exact location

Location	Exaction Location	Number of Incidents	TOTAL = 68
Withybush Hospital		Total = 17 incidents	
	A & E	6	
	Ward 12	6	
	Outpatients	2	
	Ward 10	1	
	Ward 11	1	
	Ward 7	1	
Prince Philip Site		Total = 15 incidents	
	Bryngolau EMI	4	
	MIU	3	
	Ward 1	3	
	AMAU	2	
	Bryn Gofal MH	2	
	Ward 6	1	
Glangwili Site		Total = 13 incidents	
	A & E	3	
	Morlais Ward MH	3	
	CDU	2	
	Phlebotomy	1	
	Physiotherapy	1	
	Cilgerran Ward	1	
	Preseli Ward	1	
	Gwenllian stroke unit	1	
Bronglais Hospital		Total = 5 incidents	

Violence and Aggression report March 2020 Hywel Dda University Health Board

	Enlli Ward EMI	3
	Gwenllian	1
	Y Banwy	1
Hafen Derwen	Ty Bryn LD	Total = 7 incidents
Brocerwyn	St Caradogs MH	Total = 3 incidents
Gorwelion	Gorwelion MH	Total = 1 incident
Cwm Seren	LSU	Total = 1 incident
South Pembs CMHT	Hafan Hedd	Total = 1 incident
Penygroes Pharmacy	Penygroes Pharmacy	Total = 1 incident
Patients home address	Patients home	Total = 4 incidents (3MH)(1 Child)

Of the incidents above 16 instances identified repeat perpetrators who can create clusters of incidents at specific locations within a short space of time.

Potentially 6 reporting persons were also identified as repeat victims of incidents.

Support is offered through contact on every single incident with full violence and aggression, advice, support or action afforded to the victim, department and managers.

Profile by incident type

Physical Assault	37
Aggressive/Threatening behaviour	11
Verbal Abuse	16 (3 phone incidents)
Anti-Social behaviour	2
Psychological abuse	1
Hate content	1

Profile of incident severity

No harm	Minimal Harm	Short term	Major	Catastrophic
42	20	6	0	0

Police were called to 14 incidents that are shared across the spectrum of services and localities including patient's homes. 4 arrests/summons were carried out, 2 persons removed from locations with 5 incidents have advice or welfare checks.

ASB links and reporting mechanisms have now been established throughout the Dyfed Powys Police area however communications still need to be improved regards access to incidents under the case management remit and anti-violence collaborative for Wales.

Profile of contributory factors

Unknown	None	Mental health	Medical	Learning Disability	Drugs Alcohol
5	22	22	6	10	3

Violence and Aggression report March 2020

Hywel Dda University Health Board

Summary

Many incidents involve two aspects of behaviour such as violence and aggression associated with self-harm or refusal of medications, at present Datix records Restrictive Physical Intervention (RPI) utilised under incidents of violence and aggression but does not capture the data for refusal of medication and other incidents requiring RPI and intra muscular medication under restraint. RPI was recorded on 6 occasions, but it was evident that some incidents clearly had RPI utilised with an incorrect field of no RPI taking place.

The reporting mechanism of Datix has highlighted a change in data from aggressive behaviour as previously known towards that of physical assault, but this data will be checked, improved and verified over the coming months.

Three Concerns regards reported matters are

1. The quality of information varies greatly with many incidents not recording perpetrators names or details impeding any case management options and requiring extra communication.
2. There are instances of crimes and assaults being submitted up to 8 days post event, including police interaction with charging of offenders, incidents need to be recorded promptly accurately and with sufficient detail.
3. The importance of information being shared and communicated is key between all agencies as one particular incident occurred with a Covid-19 positive patient spitting in the face of an unprotected pharmacy staff member at an acute ward who was unaware of his risks towards women. This patient had arrived from a care home and the risk management process was not clear or owned resulting in the staff member being exposed to harm.

Case management actions for March 2020 include

- 7 follow up enquiries with Dyfed Powys Police for actions case progression and disposal
- 2 Stage 1 warning letters issued.
- 5 incidents under consideration for multi-agency Anti-Social Behaviour Referrals.