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(Agenda item: 08)

**Annual Report - October 2022**

Health, Safety & Security @

Oxford Health NHS Foundation Trust

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1. **Introduction**

The Annual Health, Safety and Security report is submitted every October, enabling an appraisal and overview of the Health, Safety, and Security function to the Oxford Health NHS Foundation Trust Board (hereinafter referred to as the Trust), and covers the period from 1st October 2021 to 30th September 2022.

The purpose of this report is to provide assurance on compliance with legislative and regulatory requirements, and Trust policies to the Trust Board and Health & Safety Committee. Included within the report is statistical analysis and key information regarding Health & Safety activity and initiatives, training compliance, reported incidents, RIDDOR reports across the Trust, and an outline of initiatives ongoing to improve the Safety Management System (SMS) of the Trust, addressing risk areas requiring of robust and priority input and address.

This is the second annual Health and Safety annual report. The report is in accordance with the Trust’s Health and Safety Policy, Safety Representatives and Safety Committees Regulations 1977 and the Health and Safety (Consultation with Employees) Regulations 1996.

Health, Safety and Security covers several elements for staff, patients and visitors including:

* Slips and trips
* Manual handling
* Violence and aggression / challenging behaviour / conflict
* Lone working
* Work-related stress
* Driving at work
* Hazardous substances (COSHH)
* Management of sharps
* Provision and use of work equipment including display screen equipment
* First aid
* General working conditions
* Office safety
* Physical and structural security

Elements of bullying and harassment; safety of medical devices; food safety and hygiene; infection prevention control; patient handling; premises compliance and fire safety tend to overlap within the remits of health, safety, and security, however these areas are directly managed by separate services in the Trust, and therefore will not be referenced within this report.

1. **Executive Summary**

Health, safety and security considerations are legal, regulatory and moral obligations that apply across every conceivable Trust work-related activity, premises, and staff member’s undertakings at the Trust, in order to ensure and reflect, as far as practicably possible best practice and safe working.

The past annual reporting period has heralded significant changes and substantial work progressed in developing and working towards the implementation of a best-in-class Safety Management System (SMS), allied to the development of a fully engaged, positive and proactive safety culture throughout the Trust, to ensure that:

* Every staff member understands and is empowered in their legal and moral responsibilities to ensure their safety and that of their colleagues, contractors, patients, and visitors when at work;
* All work-related activities at the Trust are undertaken in as safe a manner as practicably possible.

The benefits of a positive safety culture are many, the most salient being the prevention and reduction of incidents, accidents and injuries, their associated direct and indirect costs to the Trust, and reducing the likelihood of civil claims and criminal prosecutions. It is to this end that work has been progressed.

The Health, Safety and Security function is managed by the Associate Head of Health, Safety and Security - ably assisted, and supported by senior management within the Estates and Facilities Management team. In order to support the delivery of the ambitions set out above it was identified that additional resources were required (2 posts) and we are pleased to report that we have now successfully appointed to these posts.

During the past year substantial progress towards the development of 100 + health, safety, and security champions across all Directorates. This set-up, once fully resourced and active, will enable a far more proactive as well as reactive work remit in the health & safety function, thereby enabling best practice, as well as legal and regulatory assurance and compliance.

Despite the above, our level of reported accidents / incidents, including RIDDOR reports, have been relatively low, not having varied greatly from last year’s reports. We should not, however, negate the very real possibility of there being a degree of under or misreporting in this regard, which perhaps serves to distort the reality at operational level.

To summarise, significant progress has been made in the development and implementation of an all-embracing SMS. Afforded the right level of resourcing, allied to proper planning, application and an enabling mindset and will, we can now work towards achieving significant progress, and a best in-class SMS.

1. **Governance and Oversight**

The responsibility for the Associate Head of Health, Safety and Security Manager and associated functions remains with the Director for Estates and Facilities, with Executive responsibility now held by the Executive Director - Digital & Transformation (appointed in July 2022).

There is in place a Health, Safety and Security Committee that has now progressed to quarterly meetings, which enables oversight of (previous) monthly and (now) quarterly reports and updates on current and proposed health, safety, and security issues-arising and developments. Staff-side representatives are active members of the Health, Safety and Security Committee.

1. **Health, Safety and Security Regulation and Policy**

An array of legislation applies to healthcare services, the key ones being;

* Health and Safety at Work Act 1974;
* Management of Health and Safety at Work Regulations 1999
* Workplace Health and Safety standards devised by NHS Staff Council’s Health, Safety and Wellbeing Partnership Group,
* Health and Safety Guidance (HSG 65) ‘Managing for Health and Safety’ published by the Health and Safety Executive (HSE) in 2013.

The HSE is the enforcing authority for staff, non-clinical systems of work, and premises, and the Care Quality Commission (CQC) has responsibility for ensuring patient safety standards. The Health Safety and Security workplan is set against the NHS Staff Councils Workplace Health and Safety standards.

The Trust’s overarching Health and Safety Policy has been reviewed and remains fit-for-purpose, together with several related policies, documents and guidance notes including;

* Control of substances hazardous to health,
* Display screen equipment,
* First aid,
* Manual handling,
* New and expectant mothers,
* Workplace stress prevention and response,
* Personal safety and Lone working,
* Reporting and learning from incidents and death,
* Security,
* Slips, trips and falls, and
* Zero tolerance of violence and aggression to staff.

These documents underpin any effective safety management system.

Within this document, further Policies, Procedures and Guidance Notes are listed and required to properly address the full remit and scope of undertakings at the Trust. Work is in progress in the drafting and compilation of a further:

* 13 High Priority documents, and
* 7 Medium Priority documents

It is envisaged that first and / or approved drafts on all these documents will be complete by end of Q3 2023. The ratification process will need to include all relevant and interested parties, and where appropriate, be subject to fast-tracking for the sake of expedience.

1. **Risk Assessment**

Through site inspections, and engagement / feedback from Directorates, Departments, Service streams and our people in general, underpinned and reflected by the Ulysses reporting system, work is ongoing and near completion in the compilation of a suite of 120 reference risk assessment templates, addressing structural, activity, and person / role-specific risks as we have identified them.

Progress thus far is:

* First tranche of the 120 reference risk assessments to be fully reviewed by end of November 2022.
* Alphabetically referenced for easy access.

Our overarching aim is to establish a standard set of risk assessments for each type and level of service provision at the Trust. Please refer to the Risk Assessment schedule below



Consideration is being given to offering weekly 1-hour seminars on the undertaking of risk assessments, coupled with a Technical Guide and Toolbox Talk aides to ensure consistency across the Trust.

1. **Structure and Resource**

**6.1. The Ulysses Report Team**

Inform the Associate Head of Health, Safety and Security of any potential RIDDOR reports on an if, and when basis, to ensure that the central safety team are fully informed and appraised of any report prior to submission to the Health & Safety Executive.

The Annual Health, Safety and Security report is submitted every September, enabling an overview of the health, safety, and security function to the Board.

**6.2 Existing and Proposed Health, Safety and Security Team**

As mentioned above, the existing operational team structure is charted below:

The proposed new structure will be as follows:

Progress to date is that two very well qualified and experienced candidates have been successful in their interviews for appointment to the Health, Safety and Security Consultants roles. Both have direct and relevant experience and we anticipate that they will commence with us by early December 2022.

The appointment of two health and safety advisors has also been progressed to one full-time appointment and the other in-principle stage. Again, these posts will be critical in providing the necessary administrative and operational support in all facets of our operational service provision, and assisting in the enabling, design and delivery of key strategic areas such as safety training, the progression of our SMS, and maintaining reactive as well as enabling proactive engagement.

The central health, safety and security service function will provide direct intervention and output where and when high level involvement is required, allied to the provision of an advisory service.

We also aim to enable and make good on a “hearts and minds” overarching safety remit, whereby safety and security considerations are at the core of everything we do, and a key consideration in any forward planning and initiatives at the Trust. To achieve this particular aim, we are looking to enable, train and facilitate the introduction of health and safety champions across the Trust.

**6.3 The Appointment, Training, and Implementation of Health & Safety Champions**

The proposed central team outlined in the chart above, although significantly enlarged, will nevertheless still be unable to ensure that health and safety is fully engaged at operational level across the organisation at all times. The objective of day-to-day assurance can be better enabled with the Trust-wide introduction of a network of health & safety champions, learning from the success of the introduction of Health and Well- Being Champions. This proposal has been significantly discussed and assessed at different levels and forums, to which the general feedback has been overwhelmingly positive, with significant interest for this volunteer role across all services, functions, and locations.

The network would in effect be comprised of site, departmental and / or ward staff members, of any level, who would be the “safety eyes and ears” at operational “coal face” level.

A formal role descriptor has been drafted for the Health & Safety Champions role.

Their main functions would be:

* Demonstrating on a personal level, through their day-to-day actions and attitudes that they are committed to the health and safety of their colleagues and advocating a positive approach to workplace health and safety.
* Understanding and identifying the basic workplace hazards that exist, and how to address and / or mitigate these potential risks immediately.
* Assisting the safety and operational management team in effecting and monitoring local health and safety procedures.
* Actively promoting, guiding, and supporting a safe working environment and culture within their assigned work areas.
* Escalating any significant health, safety, and security issues to the central safety team for priority attention and action.
* To feel empowered to contribute insightful safety ideas / initiatives to help their respective areas, and where applicable to the Trust itself.
* Liaising and engaging regularly and robustly with staff-side representatives in safety related matters.

To ensure necessary levels of competence, the champions role will benefit from enhanced Level 3 certified safety training, this to empower them to confidently deal with local, ongoing, basic health & safety issues on a day-to-day basis, thereby embodying and effecting the legal and moral principle that health and safety is the responsibility of all.

It is important to highlight that the role of health & safety champion would not be onerous, nor overly time or energy consuming on the individual, and likely formalise what they should and are perhaps doing already anyway in their role as an operational staff member and would be an important cost and time-saving measure in terms of reducing / eliminating the likelihood of an adverse event / condition and the consequent reactive output that would be required.

This role and its undertakings would in no way usurp nor undermine the existing Trust line management structure, nor overly interfere with the designated champions’ principal assigned roles and duties (their “day jobs”) and would enable local management to always have a timely and clear overview of health & safety issues and developments within their respective areas.

In the undertaking of health & safety duties, the appointed champions would operationally liaise with, and report to the central Health, Safety and Security team as required on high level matters or concerns and inform local management of any pressing issues on an if and when basis. They would report all necessary information as required (accident statistics, risk assessments, etc.), and escalate major incidents requiring of a senior level input, investigation and / or analysis.

Terms and conditions for engagement are still ongoing in their determination.

1. **Training in Health, Safety and Security**

**v7.1 General / Mandatory Health & Safety Training**

There is currently mandatory training available for staff on slips / trips / falls and first aid and all new starters have a mandatory Health, Safety and Wellbeing eLearning module to complete.

However, the requirement of a more robust, detailed, structured, all-embracing, and fit-for purpose health, safety and security training programme has been a notable deficiency at the Trust for at least a decade.

The aim is to formally train every member of staff at the Trust, to further embrace and adhere the principle that health and safety is everybody’s responsibility. To this end, the Trust has opted to deliver accredited and certified health, safety and certified training, as it was felt that a formal, transferable qualification would serve as a far greater incentive to staff than internally designed course material and would also stand the Trust in good stead if subject to external scrutiny and review.

The option of delivering NEBOSH training was discarded because of high cost, and overly onerous course delivery methodology, requirements, and examination processes.

It was therefore decided that a more fluid and flexible alternative was required to meet the needs of the Trust. After exploring various options, the most appropriate alternative was deemed to be the Chartered Institute of Environmental Health (CIEH) solution, considered to be the most suited to the purposes of the general health and safety training requirements at the Trust for the following reasons:

* **Flexibility of course content** - There is a core syllabus content to be delivered with each level of qualification, but there is the added flexibility of incorporating Trust / Directorate / Departmental specific content to suit our defined audiences, and address their own specific safety-related issues, thus ensuring direct relevance and high level of buy-in and engagement. “Safety steps” outcomes and considerations can be incorporated into the course content. “Safety steps” is a process whereby the Health, Safety & Security team engage with the different Directorates, Departments and Service streams at the Trust, to discuss in an open and “no holds barred” manner all the specific risks, and safety / security related issues, enabling the content to be adjusted and bespoke to their requirements.
* **Flexibility of delivery** - We organise our own courses on dates and locations of our choice, and in whatever mode (i.e., face-to-face, Teams, online).
* **Flexibility of trainers -** The CIEH no longer register trainers but advise that course trainers hold at least a Level 4 qualification in the subject matter they are delivering. This would enable any member of the current / proposed Health, Safety and Security Team to deliver these courses, ensuring a very engaged and positive level of course delivery, whereby a two-way Flearning process is facilitated by allowing the Health, Safety and Security Department to better understand the operational safety requirements of the different Directorates / Departments / Service provisions.
* **Certified courses** - The CIEH courses are formally accredited and certified. Receipt of an externally accredited and certified qualification, which is transferable, adds kudos and weight to the courses themselves, and will likely assure high levels of positive assistance.
* **Flexibility of Issue of Certificates** - Each delegate will receive a PDF copy certificate at no added cost, which, should we choose to do so, could then internally print a hard copy equivalent.

Significant and notable progress was then made in working towards the roll-out of the CIEH courses.

There was engagement with the Learning and Development Department at the Trust on 27th July and 31st October 2022, to formally embed this course as part of our staff mandatory training and L & D pathway, and also publish its roll-out and set training dates on our intranet.

The Trust purchased:

* Licence Access for Levels 1,2 & 3 CIEH Health and Safety in the Workplace courses, together with e-learning licences.
* 200 Level 2 (Foundation) occupational health & safety courses aimed at all staff members;
* 100 Level 3 (Intermediate) occupational health & safety courses aimed at management / supervisory grade staff, health & safety champions, and members of staff with enhanced / related health and safety responsibilities as part of their job functions.
* Further courses can be purchased as and when required.

Our first Level 2 pilot course was delivered on 30th August 2022, with 12 attending members of staff, from different departments and of different levels of seniority. The pass rate was 100%. The feedback was overall very positive, and invaluable in terms of enabling insight into the adjustment of some of the course content to better ensure its relevance to our requirements as a Trust.

The aim is to have a high percentage of our staff safety trained progressively, consistently, and to the highest possible standard. Ours is a big Trust, with circa 7000 members of staff. If we can achieve 20% successful attendance up to year end 2023, it is the author’s professional opinion that this would be a notable milestone. The aim is 100% uptake within the next 4 years as the health, safety and security function gathers profile and momentum. Whilst not wholly unrealistic, this won’t be easy as every course must be to a high level, with no compromise on quality. The one overwhelming factor that leads the author of this report to make these projections is the positive engagement and willing, at every level within the Trust, for this training.

A calendar of training dates is now being progressed. The methodology will be to engage with all the Directorates, Departments and Service functions directly at the Trust to facilitate attendance on the programmed courses, set for up to 20 delegates per course.

**7.2 Management Health & Safety Training**

Managers (particularly front-line managers) and supervisory posts play a key role in health and safety. They need to have the right competencies to manage operational health and safety effectively including:

* Completing workplace risk assessments
* Implementing and monitoring policies and procedures
* Investigating incidents
* Providing appropriate support to staff as required

It has been determined that the CIEH Level 3 occupational health & safety courses would be suited to this requirement.

**7.3 Executive / Senior Management Health & Safety Training**

An Executive / Senior Management training presentation, of approximately 2 hours duration, has been designed and is currently ready for roll-out and delivery.

**7.4 On Demand Bespoke Health & Safety Training**

Two bite-size training courses have been designed on request:

* Difficult Telephone Conversations; and
* Conflict Resolution

Both subject matters were delivered to the Dental Services Team Away Day at the Kassam Stadium on 20.06.22.

There is a high level of interest for both courses, particularly for the Difficult Telephone Conversations training, and various training dates have already been scheduled for different Departments.

There can be flexibility for the design and delivery of similar bespoke subject matter on request.

1. **Health, Safety and Security Inspection / Site Visit Activity**

Please find below an outline of the site inspection schedule. To date 12 safety inspections have been undertaken during the reporting period, and this document will be updated to reflect this output.



Moving forward into 2023, the Health, Safety and Security team aims to be highly active in the undertaking of site inspections. The regime to be applied will be based on addressing one of each of the 3 hubs per quarter, and of course prioritising an inspection where a high-risk issue / requirement has been notified to the health & safety team.

Dates to be agreed to undertake the inspections in a structured and efficient manner.

The outcome of every inspection with recommendations is shared with the team manager and senior manager. The themes from the inspections are used to direct the workplan for the Health, Safety and Security Team.

1. **Technical Guides and Toolbox Talks**

**9.1 Technical Guides**

Will be comprehensive, easy-read reference documents addressing medium to high-risk operations / activities / issues within the Trust, outlining the legal references; operational considerations; best practice; and providing advice, guidance, and tips to ensure optimum levels of safety standards.

Their purpose is to offer a comprehensive overview of the subject matter in question, and better inform our staff of key considerations as affects them and work activities within the Trust.

**9.2 Toolbox Talks**

Technical Guides will be accompanied by standard Toolbox Talks for dissemination / delivery by local management / health & safety champions at operational level on an “if and when” required basis.

The introduction and purpose of Toolbox Talks and accompanying Ppt presentations is to enable our managers and supervisors to deliver key safety related subject information to their staff as affects them and work activities within the Trust, also offering a medium for staff to ask questions about the work they will be undertaking. Each Toolbox Talk will be accompanied by a Ppt presentation to enable the option of delivery via Teams as well as face-to-face at localised level.

The above outlined portfolio of documentation will aim to be easy-read, reference, and application, with the aim of ensuring a consistent approach to every facet of operational health, safety, and security risk at the Trust.

To date, 21 Technical Guides and accompanying Toolbox Talks and Ppt presentations have been designed. A further 77 such documents are scheduled to be progressed and completed by April 2023.

Please refer to Appendix 1 - Oxford NHS Health and Safety Action Plan 2022 / 23- Pages 3 (Technical Guides) and 4 (Toolbox Talks), for a comprehensive overview of existing and proposed documents.

1. **Other Initiatives**
   1. **The Creation of a Dedicated Intranet Page**

Which will include useful information such as:

* The afore-mentioned Technical Guides, Tool-Box Talks, and bespoke Risk Assessments on High / Medium risk areas such as violence in the workplace; driving at work; and lone working.
* Legal & Regulatory updates
* Health and Care sector safety related information and best safety practices
* Updates on current safety and security related issues as occur at the Trust – e.g., conflict resolution, dealing with difficult telephone conversations, management of stress in the workplace, etc.

**10.2 Managers Handbook**

* Managers have the same health and safety duties as staff members, but with an increased level of responsibility and accountability.
* It is proposed that a handbook be drafted summarising these responsibilities and articulating what actions need to be taken to ensure they meet them.
* The draft and compilation of an easy reference managers handbook is intended to commence January 2023. The purpose of this handbook is to enable ownership, engagement and competence in managers meeting their health, safety, and security responsibilities.

**10.3 The Attainment of ISO 45001 Certification**

The Trust will be working towards implementing the absolute best in class SMS possible. In due course, our SMS will more than meet ISO 45001 requirements, so by certifying the Trust to this standard we will simply be formalising and endorsing our achievements and will serve as the benchmark of our ambitions.

The costs of seeking the certification pale into insignificance when measured against the benefits to be derived, and by doing so, the Trust could become a reference for all NHS Trusts across the United Kingdom in the field of Occupational health and safety.

Oxford NHS Trust would be the first Trust in the United Kingdom to achieve this certification. The kudos and prestige that such an achievement will generate is not to be understated nor underestimated.

From a professional as well as financial perspective, it is the author’s professional opinion that this proposal not only makes sense, but it could also ultimately be the beacon and reference that steers health, safety, and environmental standards across the entire NHS framework.

Please find attached paper outlining and titled The Case for ISO 45001 Certification of Oxford NHS Trust.



1. **Reporting Mechanisms**

The Ulysses report team submit a weekly excel spreadsheet with health, safety, and security reports related to the following main categories to the Associate Head of Health, Safety and Security:

* Violence and aggression against staff
* Property related
* Falls
* Collisions
* Manual handling
* RIDDOR reports

This enables the central health and safety teamto gain an overview and operational pulse-beat of trends and patterns, and to consequently contact service managers to gain an overview and discuss / investigate any staff incidents classified moderate and above as appropriate; support staff members in matters arising; identify and advise upon learning outcomes; and review practices and procedures as necessary.

The Ulysses report team always inform the Associate Head of Health, Safety and Security of any potential RIDDOR reports on an if and when basis, to ensure that the central safety team are fully informed and appraised of any report prior to submission to the Health & Safety Executive.

The Quality and Governance team also forward any incidents of note to the Associate Head of Health, Safety and Security, and review the gradings of incidents for quality purposes.

The previously held monthly Health, Safety & Security Committee Meetings meant that a monthly report would also be compiled.

Given that Health, Safety & Security Committee meetings are now held quarterly, the reporting mechanism will be aligned to that frequency of reporting, with any significant issues identified on an ongoing basis to be escalated and addressed accordingly on an “if and when” basis. This more streamlined reporting mechanism will also enable the decluttering of current reporting requirements, and free up invaluable strategic and operational time.

The Annual Health, Safety and Security report is submitted every September, enabling an overview of the health, safety, and security function to the Board.

1. **Health and Safety Incident Analysis**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Directorate** | **Violence: Physical, Non-Physical & Property Damage** | **Fall Related** | **Sharps/ Needlestick** | **Property Related (I.E Buildings & Car Parks)** | **Collisions** | **Manual Handling** | **Grand Total** |
| **Bucks Mental Health** | **48** | **1** | **4** | **15** | **6** | **1** | **75** |
| **Community Health** | **27** | **39** | **67** | **49** | **42** | **48** | **272** |
| **Corporate Directorate** | **3** | **12** | **6** | **14** | **6 5** | **5** | **45** |
| **Oxon And West Mental Health** | **174** | **12** | **13** | **48** | **9** | **9** | **265** |
| **Specialised Services** | **168** | **5** | **2** | **21** | **6** | **3** | **205** |
| **Grand Total** | **420** | **69** | **92** | **147** | **68** | **66** | **862** |

Health & Safety incidents remain broadly in line with previous years.

Violence with injury do not include verbal abuse, violence no injury and threat of violence.

Fall related incidents are only staff related incidents.

In this annual reporting period, most of the health and safety incidents were related to **Violence: Physical, Non-Physical & Property Damage** (420 incidents in the year involving 240 separate patients), with 49% of these reports being violence towards staff. Most incidents were graded by the clinical team as causing minor harm (65%) or no harm (23%).

The statistics for harm were as follows:

* No Harm (76 - 18%),
* Minor (305 - 72%),
* Moderate (30 - 7%),
* Severe (8 - 2%)
* Death (1)

Teams with most incidents were:

* Evenlode (39 – 27 for one patient),
* Ashurst (31 – 15 for one patient),
* Kennet (26), and
* Kestrel (26)

8 incidents rated as severe included 2 involving violence on staff (1 reported as a RIDDOR), 4 incidents of violence on public and 2 of damage to property.

1 murder / manslaughter involved 5 perpetrators (whom had previously been open to Trust services).

The second most common health and safety related incidents were related to property (damage to or safety of buildings - 147 incidents - of which 137 were minor / no harm; followed by Needlestick / Sharps injuries (92 incidents; of which 55 no harm, 36 minor harm, 1 moderate harm).

Property related damage remained the second most common (137 / 147 incidents were no or minor harm), (55 no harm, 36 minor harm, 1 moderate harm).

Manual handling incidents were mostly related to patient handling.

Please find below a chart detailing the past 3 years of health and safety incident reports by category

Chart, line chart

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*N.B Figure 1. Incidents in health & safety related categories, October 2020 – September 2022*

Apart from the odd spike the report numbers remain pretty much consistent over the past 3 years

1. **RIDDOR Reports**

In relation to Reporting of Injuries, Diseases and Dangerous Occurrences Regulation (RIDDOR) to the HSE, the Trust has reported **21 RIDDORs** for incidents that occurred from October 2021- September 2022. Most RIDDORS related to injuries to staff from violence and aggression (11), then falls related (5), manual handling (4), and collisions (1).

RIDDOR data should be clear from the below chart– spread across Directorates with just over half as a consequence of patient violence. It may be worth noting that 6 further RIDDORs (3 related to manual handling) have been reported in October (along with 3 in the last week of September) which represents a spike - although the figures reported for the year to September are aligned with previous years (when COVID related RIDDORs were not taken into account).

Chart

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*Figure 2. RIDDOR information available on TOBI, based on incident date from October 2021 – September 2022*

The Health, Safety and Security Committee reviews the detail of all RIDDOR incidents, and where there are concerns e.g., about working practices, training, or equipment, these are tabled. the Associate Head of Health, Safety and Security will contact staff who have had a work-related injury to offer support and identify actions and control measures required.

There have been incidents when RIDDOR reports have been submitted to the HSE outside of the required timeframe. RIDDOR is covered within the Manager’s Handbook and will also be covered within the future manager’s training. In the meantime, the Health, Safety and Security Manager has reemphasized the legal requirements of submitting RIDDOR reports to the HSE.

N.B. It is important to highlight that w.e.f September 2023, there will be a change in the Reporting mechanisms, with a likely substantial overhaul of the existing system, with the aim of achieving more rapid processing of data and improved reporting / overview. The new system is titled LFPSE (Learning from Patient Safety Events).

1. **Regulatory / Enforcement Agency Interventions**

None for this reported year.

1. **Security**

**15.1 Governance and Oversight**

In October 2020, the Trust’s security group was incorporated within the Health, Safety and Security function and Committee.

NHS Protect (which ceased in November 2017) was the national body which set out the standards for the Local Security Management Specialist (LSMS) and security management in NHS Trusts. The National Security Standards, which remain an element in the NHS standard contract, were to be reviewed however they have now been superseded by the Violence Prevention and Reduction Standard published in December 2020.

The National Association for Healthcare Security (NAHS) take a lead role on security in healthcare governed by NHS England and NHS Improvement. The Health, Safety and Security Manager attends the Southwest National Association for Healthcare Security meetings.

Please find below Figure 3, graphically highlighting reported security incidents.

**15.2 Security Incidents**

Chart, line chart

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*Figure 3. Security incidents in services with most incidents, October 2018 – September 2021*

670 Security related incidents were reported in the past 12 months – 615 of which were no harm, & 50 minor harm. One severe incident related to a member of the public held hostage by a patient in the community – the patient was shot by police and the incident is currently being investigated as a PSI.

Most common types which continue to be of concern were: being found with banned item / drugs / alcohol (246 incidents) followed by lost / missing items (102), staff safety (97) and unsafe access / egress (89)

**15.3 Multi-Agency Collaboration**

The Health, Safety and Security Manager is currently developing closer working relations with Thames Valley Police and other NHS Trusts with a view to sharing information and developing policies and practices.

**15.4 Future Developments**

Lone Working Solutions and Staff Security

Lone working is a high priority topic of focus and the Health, Safety and Security Manager is working with teams (including partnership teams) to develop suitable and sufficient risk assessments and enhance staff security. This involves risk assessment and focus on the three C’s communication, coordination and cooperation within shared working environments.

The potential use of lone working devices is being considered and preliminary discussions have been held with providers.

1. **Key Achievements in the Last Year**

During the past 12 months we have:

* Established an appropriately resources Health, Safety & Security Department, thus enabling a fully proactive as well as reactive service provision into the new year.
* Started the journey to the develop of a network of health and safety champions across all areas of the Trust will serve to promote, permeate, apply and embed an all-embracing positive safety culture.
* All health, safety and security policies have been reviewed and are in date (except for the CCTV policy). Further polices / procedures and guidance notes will be added to ensure every facet of operational remit at the Trust is addressed and catered for.
* Formal, certified, health and safety training to address all levels of staff is now in place, has been initiated, and to be robustly delivered across the Trust.
* Further bespoke training has been delivered in the form of bite-sized modules on specific subject matter.
* There is in place a library of 120 reference risk assessments for reference by staff.
* A new CoSHH risk assessment template has been developed to simplify the drafting of CoSHH assessments for new products going forward. A library of CoSHH risk assessments is in place.
* The design and delivery of Technical Guides and Toolbox Talks to address medium to high-risk areas is work in progress. To date 21 Technical Guides and accompanying Toolbox Talks and Ppt presentations have been designed. This will further enhance reference knowledge and application of best-in-class safety standards.
* “Safety Steps” meetings are now active and can serve to bring to the fore staff safety and security related concerns and issues and explore practical and pragmatic solutions.
* We aim to raise the health, safety and security profile with a dedicated and active intranet page.
* A managers safety handbook will be progressed ASAP.

With the implementation of the above, there is no reason as to why the Trust cannot seek ISO 45001 certification, in order to formalize recognition of a best-in-class safety management system

1. **Conclusions**

It should be clear from the above that whilst the development of our internal safety management system is still work in progress and will likely remain so for a good calendar year or so, the undertaking of improving the health, safety and security function at both strategic and operational level has been significant to date, with very real and notable progress delivered upon, and significant milestones achieved.

***We have achieved a great deal in a short period of time. With the addition of four new team members in December 2023, all of which on the face of it at least, seem to be highly competent and enthusiastic, together with the training and development of health & safety champions, it is the author’s opinion that the profile and effectivity of the health, safety and security function will be elevated to the levels it strives to attain, and our staff members require.***

1. **Acknowledgements**

The author of this report would like to avail himself of the opportunity to single out five of the major “players” for praise in facilitating and enabling the progress achieved to date.

**Claire Dalley and Christina Foster** - Who without their combined senior management input, guidance, and support, we would not be where we are. Both have steered the health, safety and security function in a very clever, streamlined fashion, enabling us to avoid “political” and operational pitfalls. Both have made themselves available most hours of the day, whether within and out of defined office hours. Their combined energy, positivism (even in the face of extreme stresses), and highly engaged and hands-on leadership, has served as an inspiration to the overall safety function.

**Mike McEnany** - As the former “directing” mind behind this journey thus far, is clearly blessed with the uncanny knack of having exercised the right degrees of pragmatism, calm and assurance when required, and has steered us from a holistic platform ably and correctly, by empowering, encouraging and supporting the operational team to progress with the minimum of hindrances.

**Martyn Ward** - Who although his tenure in post with responsibility for the health, safety and security function has been short, it is clear that his engagement and input at Executive Management level will likely be extremely positive, proactive and wholly supportive of progress.

**The Ulysses Report Team** – For their patience, diligence, and can do attitude to dealing with any queries, and offering sometimes last-minute solutions.

**Last, but not least – Emma Smith** - Whose administrative and logistical support to date, a function not within her assigned remit, has been critical in terms of time-savings and efficiencies in ensuring smoother and more streamlined pathways. Tasks she undertakes always with a smile.

**Roger Perez**

**Associate Head of Health, Safety and Security**

**3rd November 2022**