Board of Directors

13 July 2023

Paper title:	Health, Safety and Security Annual Report	**Agenda Item** 19
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Prepared by:	David Gibson, Compliance & Governance Manager	

Committees where content has been discussed previously	Health and Safety Group Finance, Business & Investment Committee
Purpose of the paper Please check **ONE** box only:	☒ For approval ☐ For information ☐ For discussion
Link to Trust Strategic Vision Please check **ALL** that apply	☐ Providing excellent quality services and seamless access ☐ Creating the best place to work ☐ Supporting people to live to their fullest potential ☐ Financial sustainability, growth and innovation ☒ Governance and well-led
Care Quality Commission domains Please check **ALL** that apply	☒ Safe ☐ Caring ☐ Effective ☐ Well-Led ☐ Responsive

Purpose of the report

The Health, Safety and Security Annual Report provides assurance to Board of Directors on achievements within health, safety and security throughout 2022-23 and a summary of trends and themes relating to health and safety and security management incidents reported in the Trust throughout 2022-23.

Executive Summary

Key actions and improvements achieved during 2022-23 include:
- The health, safety & security team received their third-year audit of ISO 45001:2018 certification of health and safety management systems in March 2023. The certification was awarded with an unqualified pass (the top grade available) with no observations or remedial actions.
- The health, safety and security team are recipients of the RoSPA Gold Medal (in Occupational Safety and Health) for achieving nine consecutive Gold Awards.
- Continuous review of MVA risk assessments across all inpatient areas and development of MVA (lone working) risk assessments across all community Ops

teams, aligned to learning from HSE inspection programme of NHS Trusts, 2018 – 2022.

- Continued management of personal safety devices across high-risk community teams, whilst securing funding for further rollout of personal safety devices on risk-prioritised basis across community services throughout 2023-2024.

Incident reporting summary:

- RIDDOR reportable incidents totaled 9 during the year, 4 of which related to violence & aggression incidents on inpatient wards.
- The Trust has seen a slight increase in the number of health and safety incidents in 2022/23. The total number of incidents (641) comprises an increase of 4% from 2021/22 data.
- There has been a 15% reduction in the number of reported physical assault incidents in the past 12 months, 94% of physical assault incidents take place on our ward areas. Incidents in The Najurally Centre (formerly the Assessment & Treatment Unit) account for 28% of all physical assault incidents

The total amount of incident reporting, and the relatively small proportion of incidents which are of moderate impact (or more severe) demonstrates a positive incident reporting culture within BDCFT

Do the recommendations in this paper have any impact upon the requirements of the protected groups identified by the Equality Act?	☐ **Yes** (please set out in your paper what action has been taken to address this) ☒ No

Recommendation(s)

The Board of Directors is asked to: review and **approve** the Health, Safety and Security Annual Report for 2022-23.

Relationship to the Board Assurance Framework (BAF)

The work contained with this report links to the following strategic risks as identified in the BAF:

☐ **SO1**: Engaging with our patients, service users and wider community to ensure they are equal partners in care delivery (QSC)

☒ **SO2**: Prioritising our people, ensuring they have the tools, skills and right environment to be effective leaders with a culture that is open, compassionate, improvement-focused and inclusive culture (WEC)

☐ **SO3**: Maximising the potential of services to delivery outstanding care to our communities (QSC)

☒ **SO4**: Collaborating to drive innovation and transformation, enabling us to deliver against local and national ambitions (Board)

☒ **SO5**: To make effective use of our resources to ensure services are environmentally and financially sustainable and resilient (FBIC)

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☐ **SO6**:　　　To make progress in implementing our digital strategy to support our ambition to become a digital leader in the NHS (FBIC)

Links to the Strategic Organisational Risk register (SORR)	The work contained with this report links to the following corporate risks as identified in the SORR: • No risks on the Corporate Risk Register
Compliance & regulatory implications	The following compliance and regulatory implications have been identified as a result of the work outlined in this report: • Regulatory requirements of the Health and Safety Executive (HSE)

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Health, Safety and Security Annual Report, 2022-2023

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1. Background

This report describes the continued improvement in health, safety and security standards within the Trust. The Trust follows the requirements of:

- ISO 45001:2018 Health and Safety Management Standard.

The health, safety and security team received their third year audit of ISO 45001:2018 certification of health and safety management systems in March 2023. The certification was awarded with an unqualified pass (the top grade available) with no observations or remedial actions.

The ISO 45001 standard itself is split into ten clauses designed to provide a clear and defined structure and set of requirements that must be met when applied to the occupational health and safety management system.

- HSG 65, Successful Health and Safety Management, which identifies key actions in a cycle of:

- **Plan:** determining Health and Safety Policy and planning for its implementation
- **Do:** identifying and assessing risks and implementing control measures
- **Check and Act:** measuring and reviewing performance and learning lessons

- Legacy NHS Protect Security Management standards. Despite NHS Protect relinquishing control over security management standards these standards remain best practice as there continues to be no alternative best practice initiated by either NHS England or the National Association for Healthcare Security.

2. Governance and Processes

Health and Safety General Policy 2023

A review of the Trust's Health and Safety General Policy was completed during the third quarter of 2022-2023. The Policy was:

- approved by the Health and Safety Group on 12 December 2022,
- ratified by Senior Leadership Team on 11 January 2023.

The frequency of review of the Trust Health and Safety Policy has been amended from annual review to review every three years, to bring in line with the standard review frequency for other Trust Policies.

Health, Safety and Security Strategy 2018-2023

The health, safety and security team have been progressing objectives outlined within the 2018-2023 Strategy throughout 2022-23. The Strategy was reviewed in May 2021 to align to the Trust Strategic Framework, goals, purpose, vision and values, and is currently undergoing a refresh to align to Trust strategic priorities for 2023-2026.

The purpose of the Strategy is to:

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- continuously improve the culture of health, safety, security and staff wellbeing across all Trust services;
- describe the team's approach to supporting an improved health and safety culture specifically through regular health, safety and security property assessments to ensure:
  - staff awareness and application of high levels of health, safety and security
  - the premises that we provide Trust services from support and benefit staff and service user health, safety, security and wellbeing.

3. Assurances in Place
Health and Safety Group

The Health and Safety Group (HSG) held its quarterly meetings on 21 June 2022, 20 September 2022, 12 December 2022 and 21 March 2023. All meetings took place remotely via Teams, meetings are chaired by the Director of Finance, Contracting and Estates.

To support continued attendance and quoracy of meetings the team issue pre-meeting reminders to members to help ensure that representatives or their informed deputies attend.

Action/decision minutes are completed and made available within 14 days of the meeting. Issues that cannot be resolved through Health and Safety Group are highlighted for escalation to Compliance and Risk Group.

Health and Safety Working Sub-Group

The Working Sub-Group met eight times during the year to support the Health and Safety Group in addressing specific working topics, trends and concerns delegated to it. The Group implement actions to mitigate any issues raised and reports back to the main Health and Safety Group.

Lone working risks continue to remain a focus of the Working Group. The meetings on 24 May 2022, 20 July 2022, 25 August 2022, 24 November 2022 and 9 February 2023 were focused on lone working issues: lone working personal safety devices across community services, personal safety training for staff and the review of MVA (lone working) risk assessments.

IS0 45001:2018 certification

The health, safety & security team achieved initial ISO45001:2018 certification of its health and safety management systems in March 2020. This certification provides assurance that systems in place within the team are in line with industry-leading best practice. The report from the auditor CQS stated that we '*have established adequate controls that contribute to an effective OH&S Management System, and that, with the implementation of any agreed modifications, will fully meet the requirements of ISO 45001:2018*'.

The auditor CQS carried out a third-year audit of the certification in March 2023 and awarded the Trust with an unqualified pass (the highest grade) with no non-conformances which required zero rectifications.

RoSPA Award for Occupational Safety and Health for 2023

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In April 2023 the Trust was awarded a RoSPA Gold Medal for occupational health and safety performance in recognition for receiving an eighth consecutive Gold Award. The receipt of this medal provides important independent assurance on the Trust's health and safety systems and controls.

4. Improvement, Innovation and Growth in 2022-23

The current staffing establishment in the health, safety and security team is 1.0 WTE Health, Safety and Security Advisor and 3.0 WTE Health, Safety & Security Co-ordinators.

There is a continued commitment to support the team to develop knowledge, skills and experience in order to best support staff, patients and visitors in the management of health, safety and security risks.

Health, safety and security team members have developed knowledge, skills and competence around fire safety throughout 2022-2023 to support the delivery of fire safety training and deliver improved resilience to the planned work of the fire safety team.

Health, Safety and Security Site Inspections

As a result of a fully established team, combined with proactive planning of inspections through a weekly workplan meeting, the team has ensured that all health, safety and security inspections are completed in line with Policy requirements.

Assessment forms are used to record inspections, actions relevant to issues identified at the point of assessment are assigned to relevant team leaders to complete. Within high-risk areas (e.g. inpatient wards) team members ensure regular repeat visits to support clinical colleagues with progression or escalation of any action exceptions.

Health, Safety and Wellbeing Training

This training is a requirement for all Trust staff to complete every 3 years. Trust compliance as of April 2023 was 93.8%, significantly above the mandatory requirement of 80%.

CCTV Installations

A review of the CCTV operational model and incident reporting data has prompted work to standardise CCTV provision across Trust service areas, specifically for the installation of cameras within BDCT community mental health locations covering all entrances, communal and reception areas. Installation is designed to provide consistency across the community locations to sites that currently do not have the provisions in place.

Personal Safety device provision

Personal safety devices are currently provided within specific high-risk teams to provide an escalation to emergency assistance; devices are used within intensive home treatment, first response, out of hours district nursing and there is a stock of pool devices for short term loan for dynamic community risks (108 devices in use currently across all areas). The devices are discrete and are used to check-in through the working day and in the event of a dangerous situation activation of a red alert will escalate concerns to alarm receiving centre, which through professionally trained staff can triage that call and escalate to the relevant

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emergency services control room one level higher than a 999 call, to ensure a guaranteed police response for our staff members when required.

Throughout 2022-2023 consultation with service managers, team leaders and staff side through health and safety group and the lone worker focussed sub-group highlighted that there remains a risk that staff members may get into a dangerous situation in a service users' home or in the wider community. The staff member may try and disengage using conflict resolution techniques but if they are alone, they do not have the means to discretely summon emergency assistance, attempting to call by mobile phone may leave the staff member at too much risk.

The Trust has provided approval and additional funding for an increased provision of these devices across community services on a risk-based approach, targeted deployment to existing high risk teams followed by further deployment through a pull model informed by demand for devices from our community services, deployment is planned for July-August 2023.

Medical Devices

Medical Device Working Group (MDWG) meetings took place on 23 June 2022, 22 September 2022, 1 December 2022 and 14 April 2023. This meeting reports into Compliance and Risk Group.

The Medical Devices Policy remains in date, following ratification by Senior Leadership Team on 21 June 2023; the Medical Devices Training Policy was ratified by Senior Leadership Team on 25 March 2020 and is currently under review by Medical Devices Working Group.

Leeds Teaching Hospitals Trust provide assurance through performance reporting to the Medical Devices Safety Officer of monthly activity. An assurance report and inventory update are provided at each quarterly Medical Device Working Group (MDWG) and compliance exceptions along with remedial actions are reported to Compliance and Risk Group.

Implementation of a local inventory management system through the information asset Hornbill took place in October 2022, the purpose of the system is to ensure improved oversight and management at a local team level of the accuracy of the Trusts medical device management inventory. Further development is currently underway with the provision of management dashboards to ensure oversight through daily lean management of maintenance compliance by service area.

5. Incident Reporting Data

The tables in section 5 provide a year-on-year comparison of incident reporting data; additional incident reporting charts are included in **Appendix C and D** providing an overview of number of incidents by incident type and actual impact.

5.1   Health and Safety Incidents

Category	2022/23	2021/22	2020/21	Change 21/22 to 22/23	
Total number of health & safety incidents	641	612	672	+29	+4%

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RIDDOR Incidents	9	6	12	+3	+50%
Total number of incidents: Impact of incident: Moderate-3 or more severe	44	31	24	+13	+41%
Number of Near-Miss incidents	15	26	23	-11	-42%
Number of Accident/Injury incidents	235	197	186	+37	+19%
Number of Slips, Trips and Falls incidents	239	284	284	-25	-8%

Table 1: Health and Safety Incident Summary,3-year trends

A further breakdown of health and safety incident types, graded by impact of the incident is shown in the table below:

Category	Actual Impact					Total
	0 Near Miss (Action Prevented Harm)	1 None (No Harm)	2 Minor (Minimal Harm Requiring Minor Treatment)	3 Moderate (Significant But Not Permanent Harm)	4 Major (Permanent/ Extensive Harm)	
Accident/ Injury (Not Slips, Trips & Falls)	6	16	199	13	1	235
Environment	1	83	6	0	0	90
Manual Handling	0	0	23	1	0	24
Slips, Trips And Falls	7	104	123	25	0	259
Vehicle Incident/ Road Traffic Accident	1	23	5	4	0	33

Table 2: Health and Safety Incidents in 2022-23, by incident category and impact of incident

NB. The one accident/injury incident categorised with major harm as a result of the incident was IR-e 209048 which although categorised with a health & safety related causation factor was an incident in the community that First Response Team responded to where a service user had sustained significant harm.

The table above summarises all health and safety incident types graded by actual impact of incident.   There has been a slight increase of 4% compared with the previous year.

The number of moderate or more significant incidents has remained relatively consistent year to year.

The number of RIDDOR-reportable incidents has also increased from the previous year. A summary of RIDDOR incidents are reported via dashboard reporting to Compliance and Risk Group as per the report in **Appendix B**.

All incidents with an impact of 3-Moderate or more severe are followed up for a review of actions and any further support to be recommended by the health, safety and security team.

Slips, Trips and Falls

As shown within the bar chart in **Appendix C** slips, trips and falls remains the highest incident category for health and safety related IR-e's. Of the 259 slips, trips and falls incidents, 87% (226 incidents) affected service users and are attributable to clinical rather

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than environmental factors. The below table shows numbers of slips, trips and falls incidents by service area, the top 9 areas, account for 71% of reported slips, trips and falls incidents are:

Daisy Hill Dementia Assessment Unit	59
ACMH: Bracken	39
LMH Ward: Oakburn	20
LMH Ward: Ashbrook	16
LMH Ward: The Najurally Centre	13
LMH Ward: Fern	13
ACMH Ward: Heather	10
LMH Ward: Maplebeck	9
LMH Ward: Clover	7

Table 3: Number of slips, trips and falls incidents by ward area.

Community Settings

It is worth noting that service areas within the community when looked at singularly would not make the above table however, when added together they account for 44 incidents making up 16% of the overall total of this type of incident. Incident examples are;

- Falling in public areas such as in the grounds of a patient home address as a result of icy conditions.
- Tripping due to a missing grate.

Such incidents highlight the importance of lone working risk controls for our community workforce, and the importance of lone working procedures risk assessments.

5.2   Assaults against staff

Assaults against staff are reported separately from Health & Safety IR-e's, i.e. they are not included in the figures in section 5.1 above. The number of assaults against staff has decreased by 15% from 2021/22.

4 of the 9 RIDDOR reportable incidents in 2022-23 were as a result of a physical assault incidents (see **Appendix B**).

Incident Type	2022-23	2021-22	2020-21	Change 21-22 to 22-23	
Assaults against staff – all incidents	859	1013	970	-154	-15%

Assaults against staff categorised by impact to staff member	2022-23	2021-22	2020-21	Change 20-21 to 22-23	
1 None (No Harm)	386 (44.9%)	400 (39.4%)	456 (47.01%)	-16	-4%
2 Minor (Minimal Harm Requiring Minor Treatment)	463 (53.9%)	593 (58.4)	498 (51.3%)	-130	- 21%

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	10	20	16		
3 Moderate (Significant but Not Permanent Harm)	10 (1.1%)	20 (1.9%	16 (1.6%)	-10	-50%
Total	859	1013	970		

Table 4: Assault against staff incidents,3-year trends

Location of Physical Assault incidents

94% of assaults against staff took place in the Trust's inpatient ward environments. A year-on-year comparison of the number of physical assaults by service areas is shown in the table above.

The Najurally Centre continues to show the highest prevalence of reported assaults against staff. Meeting increased and changing service user risk levels on the Assessment & Treatment Unit involves having flexible staffing levels but these continue to be challenging, including the challenge in sourcing temporary staff with the required levels of competence in dealing with the specific needs of service users.

The Trust has invested significant capital funding in the development of a specialised assessment and treatment centre of excellence unit on Lynfield Mount Hospital site. This unit opened to service users in January 2023 includes a dedicated seclusion unit including seclusion garden and place specific-isolation areas which should support in managing violence & aggression risk. The managing violence and aggression (MVA) risk assessment for this ward documents current working arrangements to manage the specific violence and aggression risks on the unit.

To assist in managing the risks to staff from violence and aggression, staffing levels are increased where there are specific acuity challenges within the ward in line with safe staffing ratios. All appropriate controls for managing violence and aggression risks are detailed within comprehensive ward MVA risk assessments, available in all ward areas and on Connect; MVA Risk Assessments (sharepoint.com).

Service area	Beds	2022-23		2021-22	2020-21	Change 20-21 to 22-23	
		IR-e's	IR-e's per commissioned bed				
ACMH Wards (Fern, Heather, Bracken, S136)	56	146	2.6	157	153	+72	+84%
Assessment and Treatment Unit	6	243	40.5	220	230	+8	+3%
Dementia Assessment Unit	12	190	15.8	224	86	-7	-3%

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LMH Wards (Ashbrook, Maplebeck, Oakburn, S136)	67	144	2.1	188	198	+32	+20%
LMH Clover	10	73	7.3	139	163	+18	+14%
MV Low Secure Wards (Baildon, Ilkley, Thornton)	33	19	0.6	45	78	+14	+45%
All other areas across Trust services	n/a	44	n/a	41	62	-3	-6%
Total	**-**	**859**			**1014**	**970**	

Table 5: Assault against staff incidents by area

Lessons learned from incidents will continue to be shared by service leads through daily lean management operational structures.

5.3   Security Incidents

Incident Type	2022-23	2021-22	2020-21	Change 21-22 to 22-23	
Burglary	5	2	3	+3	
Vandalism	102	99	114	+3	
Intruder/trespasser	14	5	13	+9	
Unlocked door/cabinet	47	40	67	+7	
Theft – Trust Property	8	5	4	+3	
Theft – Staff Property	5	12	14	-7	
Theft service user property	27	8	16	+19	
Theft – other persons property (e.g. public)	1	0	1	+1	
In Possession Of Offensive Weapon (In Community)	8	3	5	+5	
In Possession Of Restricted Item(S)	103	124	111	-21	
Inappropriate Use Of IT Equipment/Device	13	11	6	+2	
Other Security Incident	37	44	39	-7	
Total number of security incidents	**370**	**353**	**393**	**+17**	**+4%**

Table 6: Security incidents summary, 3-year trends

A table providing additional descriptions along with impact of incidents can be found in **Appendix E.**

No security incidents in 2022-23 were graded as moderate or more severe.

6. Risk Implications

The following risks relating to health, safety and security management that have been managed in 2022-23 are below:

Risk #	Issue	Actions
2342 MEDIUM RISK	Impact on patient care due to malfunctioning medical device, based on the device not having received planned maintenance at the appropriate frequency.	Improving processes across Ops services to ensure that data cleanse is done as part of day to day working and not once every 12 months – implementation of local asset inventory system within Hornbill implemented from October 2022. Risk

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There is a risk that a number of the devices listed as 'archived' in the inventory are still in use and are not in date for planned maintenance and calibration. If devices are not maintained or calibrated at the appropriate frequency there is an increased risk of failure which can impact on diagnosis or patient care.	closed because mitigating action was completed. However further action is taking place to embed management reporting of compliance with DLM structures.

7. Recommendations

The Trust Board of Directors is asked to **approve** the Health, Safety and Security Annual Report for 2022-23.

Communication of Annual Report to Trust Staff

Following approval of the Annual Report, the summary easy-read poster relating to health, safety and security incidents in 2022-23 and tips for services shown in **Appendix F** will be circulated via Trust Communications channels (e-Update, Health and Safety Connect page, Newsletters, Screensaver, Yammer). This will be shared as a summary easy-read Annual Report, in addition to the full Annual Report which will be available on the Health and Safety Connect page; Health and Safety - Home (sharepoint.com).
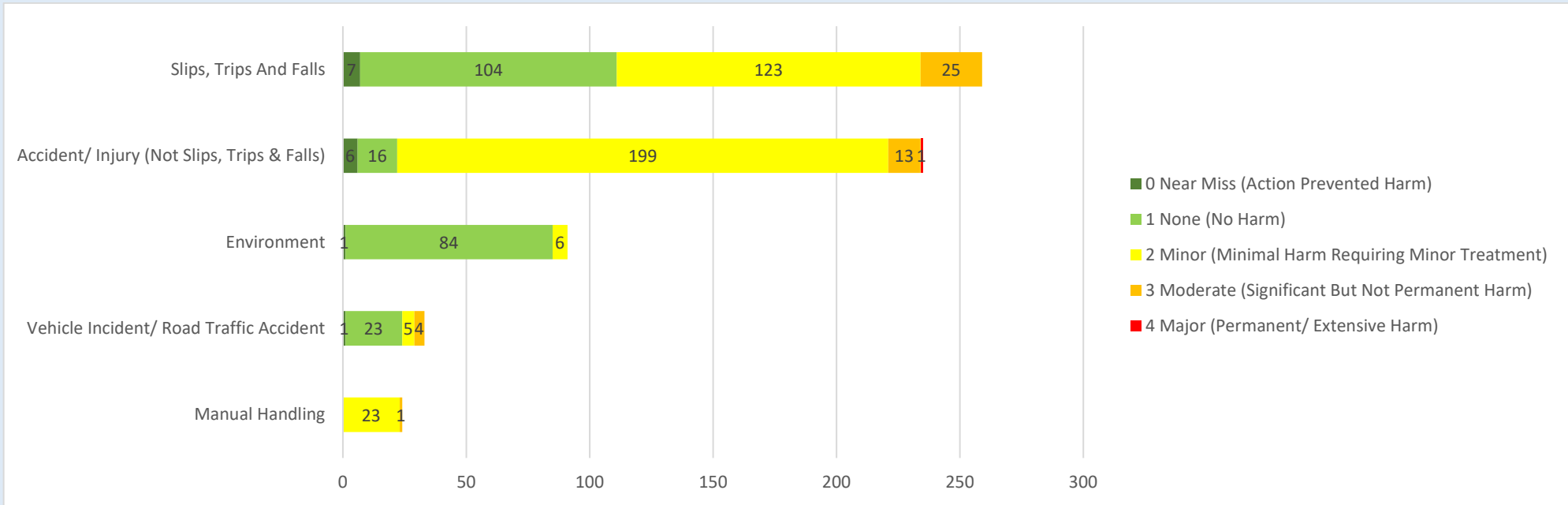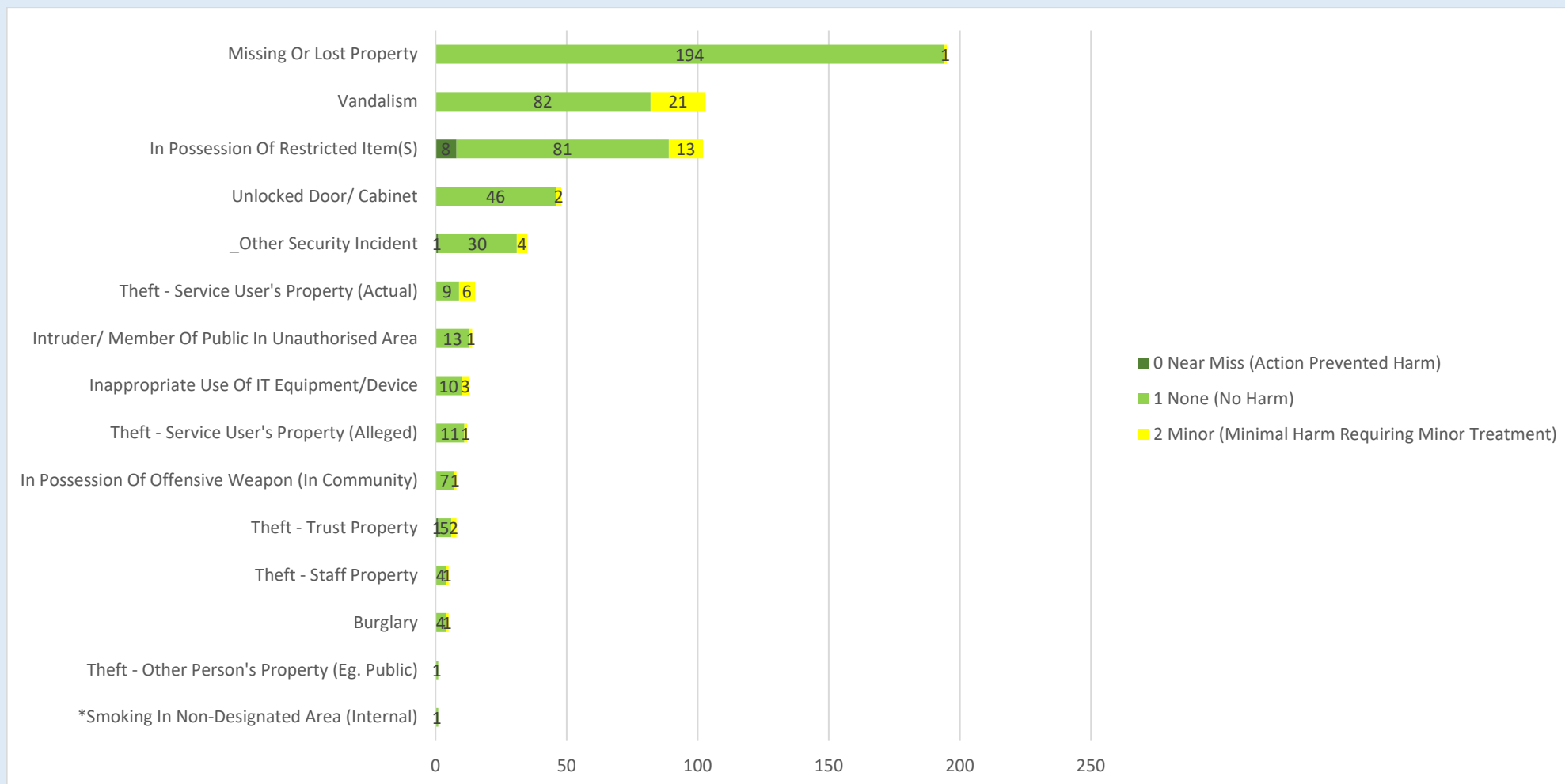
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Appendix A: Health and Safety reporting

RIDDOR reportable incidents 2022-23

Date	IR-e No.	Dept.	Incident details	Action taken
28/8/22	214712	Najurally Centre	An acutely unwell service user presented in an agitated state. Service user kicked staff member with extreme force in the side of her left knee four times.	Verbal reassurance offered. De-escalation techniques tried but unsuccessful. Duty doctor contacted to provide support. Staff withdrew to allow patient time to 'self soothe'. Safety team provided post incident support meeting with ward manager recommended refresher training with support from PTU.
22/9/22	215658	Food services/LMH kitchen	LS was transporting a trolley down the corridor and caught their little finger between the trolley/door of the freezer. The skin below the nail was broken resulting in bleeding with immediate swelling and bruising around the fingernail.	Taken to quite area and injury assessed. First aid provided including wound cleaning and cold compress. *Note: staff member attended work as normal following accident and attended A&E (26/9/22) where a fractured finger was discovered. Although staff member returned to work due to the 'causational link' incident deemed to be RIDDOR reportable.*
31/10/22	217296	Assessment & Treatment Unit	Staff member kicked by distressed patient leading to injury.	Verbal reassurance/de-escalation attempted trust approved holds used by trained staff/pinpoint activated. Observations increased.
24/10/22	216962	Daisy Hill Dementia Unit	Staff member sat on chair which collapsed leading to fall/impact injury to face and shoulder.	First aid provided and ambulance called. All areas checked for similar type of chairs that were removed from service.
1/12/22	218818	DN Idle Team	Patients required support to transfer from chair to commode. Patient appeared unsteady and possibly intoxicated. During transfer patient fell on staff member causing a fractured wrist.	The visit was intentionally covered by two staff to cover the clinical need. First aid given and transported to hospital.
29/1/23	221281	Hotel Services	Staff member moving a 'wheeled cage' that became stuck. Trying to pull cage caused tendon damage to right hand.	First aid support offered. RA reviewed and SOP updated.
12/2/23	221782	Najurally	Patient unsettled kicking staff member causing injury.	RA's/care plans updated.
25/3/23	223731	Najurally	Patient kicked staff member causing injury.	RA's/care plans updated.
1/3/23	222682	DN Shipley Team	Moving one box from the top of another onto the floor which involved some twisting and suffered back ache.	Advised to go home and rest/referred to physiomed.

Appendix B: Health and Safety IR-e profile 1 Apr 22 – 31 Mar 23

NHS Bradford District Care NHS Foundation Trust

Horizontal stacked bar chart showing Health and Safety incident profile by category and harm level.

Slips, Trips And Falls: 7, 104, 123, 25

Accident/ Injury (Not Slips, Trips & Falls): 6, 16, 199, 13, 1

Environment: 1, 84, 6

Vehicle Incident/ Road Traffic Accident: 1, 23, 5, 4

Manual Handling: 23, 1

Legend:
- 0 Near Miss (Action Prevented Harm)
- 1 None (No Harm)
- 2 Minor (Minimal Harm Requiring Minor Treatment)
- 3 Moderate (Significant But Not Permanent Harm)
- 4 Major (Permanent/ Extensive Harm)

Axis: 0, 50, 100, 150, 200, 250, 300

Appendix C: Security incidents summary, 1 April 2022 to 31 March 2023

Legend:
- ■ 0 Near Miss (Action Prevented Harm)
- ■ 1 None (No Harm)
- ■ 2 Minor (Minimal Harm Requiring Minor Treatment)

Category	Values
Missing Or Lost Property	194, 1
Vandalism	82, 21
In Possession Of Restricted Item(S)	8, 81, 13
Unlocked Door/ Cabinet	46, 2
_Other Security Incident	1, 30, 4
Theft - Service User's Property (Actual)	9, 6
Intruder/ Member Of Public In Unauthorised Area	13, 1
Inappropriate Use Of IT Equipment/Device	10, 3
Theft - Service User's Property (Alleged)	11, 1
In Possession Of Offensive Weapon (In Community)	7, 1
Theft - Trust Property	15, 2
Theft - Staff Property	4, 1
Burglary	4, 1
Theft - Other Person's Property (Eg. Public)	1
*Smoking In Non-Designated Area (Internal)	1

HEALTH, SAFETY AND SECURITY AT BDCFT

Vital Statistics 2022-2023

641 Health & safety incidents

6% of incidents had an impact of moderate or more severe

15 Near Misses

It is important to report near misses to learn lessons and help reduce the likelihood of future incidents.

9 RIDDOR reportable incidents

What is RIDDOR?
Requirements under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)

The trigger point for reporting a member of staff work related injury to the Health and Safety Executive is over 7 day incapacitation

235 accidents and injuries

14 incidents with a moderate or more severe impact

Important to ensure risks are adequately assessed, Safe Work Procedures are in place and staff trained in line with safe work procedures

259 slips, trips, and falls

87% of these incidents affected service users and related to clinical factors

859 physical assaults against staff

10 incidents with a moderate or more severe impact

Ensure you have a documented risk assessment to demonstrate how physical assault risks are controlled in your team.

Application of Managing Aggression & Violence training is important to ensure the impact of any physical assault incident is minimised.

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