Members of the National/Regional Group, Workforce Issues Group and management representatives from the regional SPFs met on the 7 May to discuss tackling violence against NHS staff and improving their wellbeing.

The meeting was co-chaired by Sara Gorton, UNISON and Rebecca Smith, NHS Employers.

**Tackling violence in the NHS**
Harprit Hockley, NHS England and NHS Improvement; Alan Lofthouse, UNISON and Simon Arden-Davis, DHSC led an agenda item on tackling violence in the NHS. See the presentation

Reflections and activity identified from this session:

- Share the data pack and encourage each regional SPF to identify a lead or ideally leads (employer and trade union representative) who will take responsibility for progressing the regions work on tackling violence.
- Consider linking to research taking place that relates to tackling violence – Northumbria University’s Getting in tune with Fatigue and Manchester University’s research looking at addressing violence in the mental health sector.
- Promoting the World Health Organisation recommendations on tackling violence; the Design Council’s guide on reducing violence and aggression in A&E departments and the benefits health and safety reps can bring to staff and the organisation.
- Can we learn from other industries and what they do to reduce violence against their staff?
- Where is the focus of this work in relation to the sustainability transformation partnerships (STPs)/ integrated care systems (ICSs) in preventing and addressing violence against staff e.g. if drug and alcohol support services are withdrawn.
- Linked to this, we need to create ways to monitor and understand the impact of commissioning decisions including those within the wider public sector, such as local authorities, as a reduction in their services could have a negative impact on violence in the NHS.
- Should there be one approach or direct efforts to trusts whose figures indicate more of a problem, generally perception is mental health trusts are better and more proactive at addressing violence against their staff than acute trusts.
- Important to develop a prevention approach.
- Should consider a team-based approach to training.
- Collect and use data, including whether specific staff groups are more likely to be victims of violence or abuse, to identify areas of concern and develop actions.
- Use of an accreditation model to encourage specific standards of care for staff.
- Need to develop and share more good practice.

In terms of good practice, this could include examples of successfully:

- learning from staff on what would help prevent and address violence and abuse
• delivering comprehensive training on preventing and responding to violence and abuse, evaluating and demonstrating the effectiveness of the training.
• developing an environment for delivering health and care which is more likely to reduce violence and aggression.
• using mechanisms to enable staff to easily log incidents of violence and aggression – for example a telephone number to call, an app to record details or a ‘navigator’ to guide a staff member through the reporting process.
• developing a culture where staff no longer endure violence and abuse and see it as part of the job.
• learning from incidents of violence and abuse so similar situations do not happen again
• providing staff who are abused or attacked with the physical and mental support they need.

Good practice identified will be promoted to share the learning.

Actions:
• Harprit and Alan will analyse the comments and suggestions from partners and use this to further develop planned activity.
• NHS Employers’ area heads of engagement to take forward discussions with RSPFs co-chairs.
• An action already agreed, is for the SPF to be involved in the evaluation of phase one of the staff bodycam pilot.
• Explore if the staff stories can be shared on the SPF website – as they are very powerful.

Good practice from the regions
North East SPF presentation on regional social partnership working and the integrated health system, led by Lisa Crichton-Jones, North East and North Cumbria ICS and Adele Heeley, BMA.

London SPF presentation on their health and wellbeing subgroup, led by Andrew Barton, BMA and Mia Hull, Imperial College Healthcare NHS Trust.

East Midlands SPF presentation ‘How do we want to joust?’ led by Gayna Deakin, NHS Employers and Marie Hannah, RCN.

Best place to work
Caroline Corrigan, NHS England and Improvement and Claire Sullivan, CSP led this agenda item. View their presentation

Their message to partners is that it is possible to begin local and regional discussions in advance of the publication of the interim People Plan. Trade union and management representatives in organisations are encouraged to identify the core commitments which will help make their organisation a better place to work for their staff in 2019/20 and work
in partnership to put these in place as we know this often leads to better solutions and outcomes.

Reflections from the group:

- Acknowledged in some areas e.g. HWB there might be too much good practice available to find what works in a situation and, in other areas, there may be gaps.
- What is important is the recognition this won’t be a national prescription, as what is required will differ due to location, organisation etc.
- Partners would be supportive of setting out expected standards, but concerns were expressed about increasing expectations, but not delivering on these, which could make matters worse.
- How does this link to the NHS Constitution?

Next steps

Further guidance/information is expected. This will be shared to support local discussions, it will be helpful if RSPFs can support this work and provide feedback.