

Social Partnership Forum - Workforce Issues Group (WIG) Violence Reduction Subgroup (VRS)

Terms of reference - June 2021

1. PROJECT TITLE	Violence prevention and reduction - creating a culture of safety subgroup of the WIG
2. MEMBERSHIP	JOINT CHAIRS Anthony Jackson, NHSEI and Alan Lofthouse, UNISON. CORE GROUP Lucy Judge & Steven Weeks, NHS Employers; Justine Sharpe & Alan Gallagher, NHS Resolution; Felix Pivcevic, DHSC; Kim Sunley, UNISON; Sophie-Odile Sauerteig, BMA; Rachel Harrison, GMB; Martin Nicholas, London Ambulance Service; Caroline Drew, Sheffield Teaching Hospitals NHS Trust; Sarah Fereday, Occupational Health; Ragini Patel, Royal Free NHS FT; Nigel Redmond, Central and North West London FT; Craig Jones, Carla Burns, Stephen Mangan, Michael McGee, Michael Morgan, Terence Harris, Liverpool University Hospitals NHS FT.
3. SUBGROUP SECRETARIAT	James Shepherd, SPF Programme Manager Peter Watson, SPF Communications & Administrative Support Officer
4. AIMS	To prevent and reduce violence to our NHS people, creating a culture of safety to ensure our people are supported, safe and secure at work. Alongside the NHS Long Term Plan (LTP), NHS People Plan 2020 and the NHSEI violence reduction strategy, the SPF is ideally placed to bring together employers, system leaders and trade unions to work in partnership to prevent and reduce the harm caused by violence and abuse against NHS staff.
5. OBJECTIVES	 Support and inform the NHSEI violence prevention and reduction strategy. Help to embed a public health, evidence driven approach to preventative work across the NHS. Be an expert reference group and inform the WIG on the best way to support the partnership implementation of the violence prevention and reduction strategy. Support the SPF's commitment to preventing and reducing violence and aggression and improve the NHS as a place to work. To produce practical and effective joint products, where possible and appropriate for employers and staff, about workforce implications and staff engagement.



	• • •	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. 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.
6. DELIVERABLES	NE •	B. This is not an exhaustive list. Promote the NHS violence reduction and prevention standard, launched January 2021, and encourage and support NHS organisations to use the standard to help address violence and aggression directed at their staff. Maintain a violence prevention and reduction section on the SPF website to share good practice and signpost for further information. Publish cultural messages on safety from senior leaders and voices of staff, including the NHSEI stories to include on the web page. Support NHSEI collect and collate existing documents on tackling violence on to a central knowledge hub to help inform the work and provide an evidence base to the programme. Support NHSEI develop new materials, tools and resources including: 'Why take action – how to build a business case to encourage action with your board' resource best practice examples on violence related training support for staff involved in incidents innovations around reporting incidents regional SPF partnership toolkit ICS partnership engagement toolkit calculator for savings related to reducing violence. Aspirational actions may include, an accreditation framework based on QI improvement measurements. Involvement in the national data collection task and finish group. Involvement in the evaluation of the body worn cameras pilot to inform national policy and governance materials. Webinars and events to support violence strategy.
7. BUSINESS BENEFITS	•	System-wide focus on violence prevention and the need to take a public health approach.
	•	Commitment to staff that action is being taken.
	•	Prevention and reduction in harm to staff.
	•	Improve staff retention, reduced absence and improved
		support to staff.
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	 Consistency of approach. Improved industrial relations and engagement to enhance staff health and wellbeing and stronger partnership working. Better integration between the national SPF and regional SPFs on violence prevention and reduction.
8. LINKS AND DEPENDENCIES	 The subgroup reports to the SPF WIG. Other links and dependencies include: SPF wider group and strategic group will want updates on progress. NHSEI violence prevention and reduction strategy – in order to enhance activity and avoid confusion, it is recommended that the WIG actions are co-ordinated with the NHSEI strategy wherever possible. Policy leads across DHSC. NHSEI and HEE – NHS Long term Plan and 2020 NHS People Plan. Health, Safety and Wellbeing Partnership Group of the NHS Staff Council (HSWPG). Regional SPFs.
9. POTENTIAL RISKS	 COVID-19 recovery plans failing to embed health and wellbeing of our people at local, regional, and national levels. Funding of the violence prevention work and strategy implementation. Complexity of issues – needs clear co-ordination and agreed expectations from all partners. Different perspectives and needs of parties involved. Adverse staff or trade union reaction if staff issues are not fully engaged and consulted. Time and commitment from all partner organisations. Lack of impact, difficulty measuring/monitoring the impact of what the subgroup does. Difficulty in delivering products within a timeframe likely to optimise impact.
10. MEETINGS	 Frequency of meetings – quarterly (more if required dependent on agendas) supported by detailed work off-line as required. These will be via Teams. The ToR will be reviewed annually, or more frequently if required.