

Code A - Secretary

From: Fiona Cameron - Operational Director
Sent: 27 September 2002 13:39
To: **Code A** Secretary
Subject: FW: Violence working group minutes

Code A can you print off for mr.

Many thanks,

FIONA

-----Original Message-----

From: Nicky Heyworth - Clinical Governance Manager
Sent: 24 September 2002 14:05
To: Rachael Boyns - Service Development Manager; **Code A**
Cc: Parvin Jane (RN4) Portsmouth Healthcare; Caroline Harrington - Risk & Litigation Manager; Fiona Cameron - Operational Director
Subject: Violence working group minutes

Dear all,
Please find attached the notes from the first meeting of the violence in primary care working group.
Best wishes
Nicky



Working Group minutes Sept.02....



Margaret Smith letter Sept. 02...

File CG-Committee.
 PRE 17/10/02.

Fareham and Gosport **NHS**

Primary Care Trust

Notes of the meeting of the Violence in Primary Care Working Group held on Tuesday 24th September 2002 in the Conference Room, Fareham Reach

PRESENT:

Nicky Heyworth
 Rachael Boyns
 Chris Kelly
 Betty Woodland

APOLOGIES:

IN ATTENDANCE:

This was the first meeting of the Violence in Primary Care Working Group. NH had composed a preliminary action plan, addressing areas set out by the DOH in their 'Zero Tolerance' Campaign. This has been sent to Margaret Smith, Primary Care Lead, at the Strategic Health Authority. A copy is attached to these notes. It was agreed to use the headings in the letter as agenda points;

1. Risk Assessment.

A risk assessment of all primary care facilities needs to have been carried out by the end of November 2002. This will form the basis of an action plan for each Practice. All the Practice Managers in Fareham and Gosport have undergone some risk assessment training, so it was agreed to send out a proforma to each practice so they can organise their own risk assessment. Betty Woodland, as Risk Advisor, will provide support and facilitation for this process.

This risk assessments will aim to identify the following;

- Security arrangements in Practices, both structural and protocols
- Training needs
- Support for victims

Action; NH to locate a suitable proforma and write a letter to all Practice Managers. Members of the Working Group will review the proforma and letter before it is sent. Aim is to send this out by mid-October.

2. Recording and Reporting of Violent Incidents

Critical incident reporting was felt to be patchy in Primary Care. All three PCTs are currently working on developing standardised forms across the district, and this would encompass reporting of violent incidents, both verbal and physical.

Action; NH to ask Caroline Harrington (Risk Manager) what plans are being developed for using standardised forms in primary care.

3. Secure Facilities

Arrangements for providing secure facilities for the assessment and treatment of violent patients need to be formalised. The group felt that Police Stations would be inappropriate and may make violent situations worse. A facility is needed in both Fareham and Gosport with the preferred option being Gosport War Memorial Hospital and St. Christophers Hospital.

Action: NH to ask Fiona Cameron (Operational Director) what action has been taken on this issue.

4. Security for Primary Care Staff

At present, the Police are called if there is a violent episode in a Practice. This seems to be working well, and there is no question of a Security firm being used to provide this cover.

Arrangements for GPs and Practice Nurses visiting patients' homes need to be formalised and this will form part of the practice risk assessment.

It was agreed that, as part of the risk assessment, Practices would be asked to provide their security policies and protocols.

As a future consideration for this group, Community staff attached to Practices will have their security arrangements reviewed. This would include professional groups such as Health Visitors and District Nurses.

5. Any Other Business

It was agreed that the 'Zero Tolerance' Campaign needs to be actively promoted throughout General Practice and, as part of the risk assessment, practices should be asked if they are displaying material relating to this.

6. Date and Time of Next Meeting

Tuesday 19th November, 9.30-10.30am. Boardroom, Fareham Reach

Distribution;
Nicky Heyworth
Rachael Boyns
Chris Kelly
Betty Woodland

For Info;
Caroline Harrington
Fiona Cameron
Jane Parvin

19th September 2002

Margaret Smith,
Primary Care Lead,
c/o Fareham Reach,
Fareham Road,
Gosport,
PO13 OFH

Dear Margaret,

Re. Tackling Violence towards GPs and Their Staff

Please find the preliminary action plan for “Tackling Violence towards GPs and their Staff”.

A working group has identified a range of action;

◆ **Risk Assessment.**

A risk assessment of all primary care facilities will be carried out by the end of November 2002. This will form the basis of an action plan for each Practice. The security improvements identified by this process will feed into the Primary Care Development Plan for consideration of funding.

◆ **Recording and reporting of violent incidents**

Primary care staff are to be linked into the PCT’s Critical Incident reporting process. Any violent incident will therefore be recorded and the information sent to the Risk Manager at the PCT where it will be logged and the information disseminated as appropriate.

◆ **Training**

As part of the risk assessment, training needs in primary care will be identified. Appropriate training will be commissioned by the PCT. Funding for this has yet to be identified, but it is hoped that the “Improving Working Lives” initiative may yield some of this funding.

◆ **Support for Victims**

The Trust’s Community Care counselling service will be contacted with regard to providing support for victims of violence.

◆ **Secure Facilities**

Options for providing secure facilities for Practices to be able to assess and treat violent patients are being explored. Currently, Fareham and Gosport are looking for

separate venues, as this will minimise the amount of time spent travelling by patients. Local hospitals are currently the preferred option, and moves are afoot to formalise these arrangements.

◆ **Security for primary care staff**

Arrangements for GPs and other members of the primary care team undertaking home visits where there is a risk of violence are already established. Likewise, when there is a risk of violence at the practice, arrangements with the local police/ security are already in place. However, these arrangements need to be formalised and the service provided needs to be mapped and gaps identified.

The Working Group is due to meet on 24th September 2002.

The above points will continue to be addressed, and it is anticipated a full, detailed action plan will be available in January 2003.

I hope this meets with your approval.

With best wishes.

Nicky Heyworth
Clinical Governance Manager

cc.

Rachael Boyns (Service Development Manager/ F&G PCT)

Fiona Cameron (Operational Director/ F&G PCT)

Caroline Harrington (Risk Manager/ F&G PCT)

Jane Parvin (Head of Personnel / F&G PCT)