Ashford and St. Peter's Hospitals NHS
NHS Trust

TRUST BOARD
29th April 2010

TITLE	**Health and Safety Report**
EXECUTIVE SUMMARY	This quarterly report has been prepared to provide assurance to the Trust Board that it is managing its Health and Safety risks and thereby complying with its statutory duties. The number of reported incidents remains relatively low however there are work streams to reduce these even further. In particular the Safer Needles Action Group is looking at reducing injuries caused by needle-sticks, the manual handling team are managing the risks associated with bariatric patients and the Workplace Pressure group are investigating initiatives to reduce stress and physical assaults.
ASSURANCE (Risk) / IMPLICATIONS	The relatively low number of incidents provides assurance that effective measures are in place to protect staff, visitors and patients.
STAKEHOLDER / PATIENT IMPACT AND VIEWS	A good health and safety record provides assurance to outside stakeholders that the Trust takes its responsibilities seriously and safeguards its reputation.
EQUALITY AND DIVERSITY ISSUES	None
LEGAL ISSUES	Potential for litigation if the Trust fails in its duty of care to staff, patients and visitors.
The Trust Board is asked to:	Note the report, give feedback on content
Submitted by:	Colin Matthew, Health, Safety and Security Advisor. On behalf of Caroline Becher Chief Nurse.
Date:	12th April 2010
Decision:	For Noting

Ashford and St. Peter's Hospitals NHS
NHS Trust

TRUST BOARD
29th April 2010

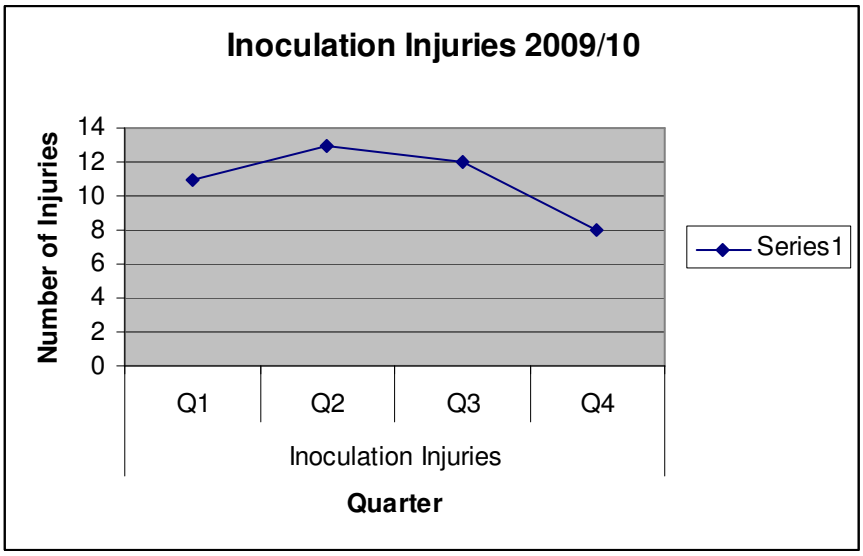
Health and Safety Report

Health and Safety Committee:

Delivery of the Health and Safety agendas is co-ordinated through the Health and Safety Committee, chaired by the Chief Nurse. The Cmmittee receives various reports from sub-groups on incidents involving staff, patients and the environment. The committee reviews these reports and makes recommendations on appropriate action. Significant issues will be escalated as appropriate through the Non Clinical Risk Group and by exception reporting to IGAC.

Incident Reports:

Inoculation Injuries.

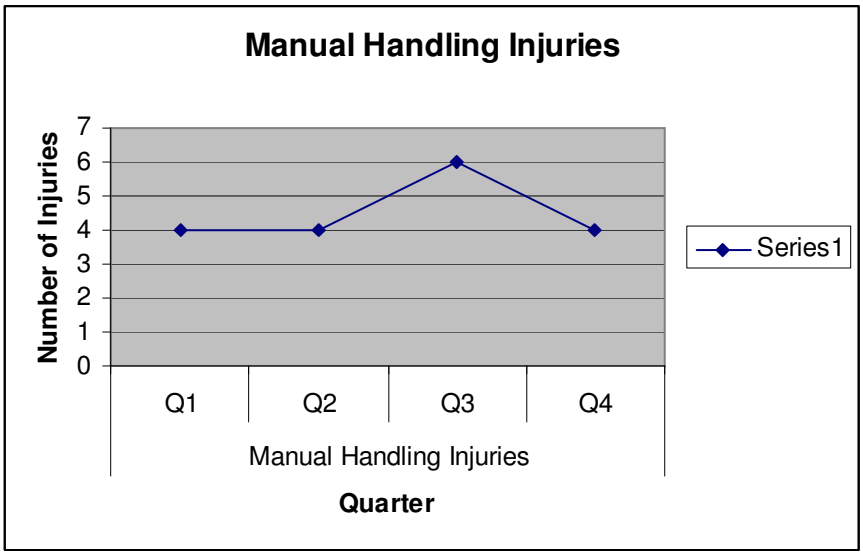


A safety cannula has been introduced into the Trust following a robust assessment of suitable devices. An article by Dwayne Gillane, Occupational Health Specialist Advisor, describing this process was published in the "Occupational Health" Journal in January 2010.

Other "safety needles" are being investigated by the Safer Needle Action Group" to continue to reduce the risk of needle-stick injuries. This is in line with EEC guidance.

Needle-stick injuries present a particular problem to all frontline staff and are second only to moving and handling injuries reported in the NHS. The cost of needle-stick injuries to the NHS is estimated at £500,000 per Trust per year (Committee of Public Accounts, House of Commons).

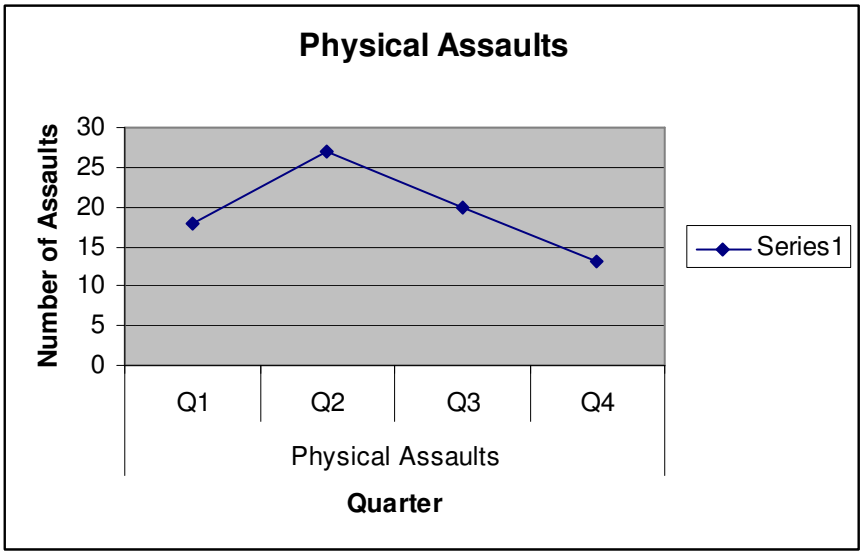
Manual Handling.



Equipment for the safe mobilisation of bariatric patients has been purchased recently including gantries, slings, chairs, commodes and a bariatric bed. More is required as our patients generally are becoming heavier and more difficult to manoeuvre particularly at Ashford Hospital where a gastric banding service is provided for obese patients.

The Trust has invested in a revolutionary piece of equipment called a hoverjack which enables staff to raise people safely from the floor, for example patients who may have collapsed or fallen. There is one of these hoverjacks at each hospital and at St Peter's the hoverjack has already been used twice; once while resuscitation was being performed possibly saving a life.

Violence and Aggression.

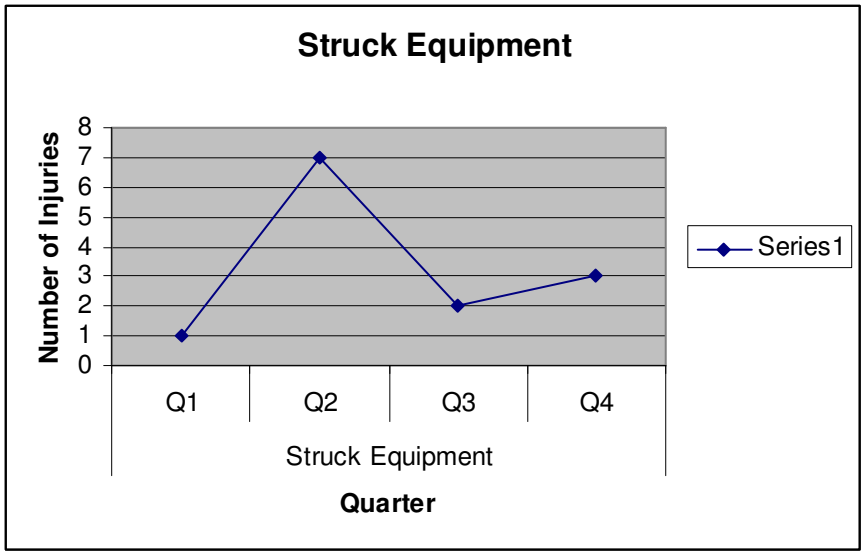


Physical assaults on staff are almost 100% inflicted by frightened and confused patients with dementia or by those reacting to medication. Staff attend mandatory Conflict Resolution training on induction to assist them with dealing with aggressive patients and visitors and refresher training is now part of the mandatory training curriculum for clinical staff.

The 2009 staff survey revealed that the Trust was in the best performing 20% of acute trusts

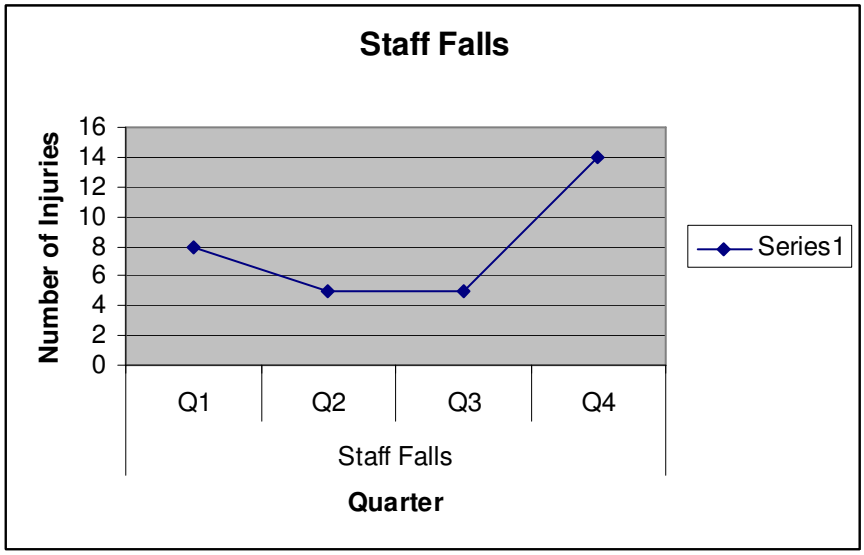
for the percentage of staff experiencing bullying and abuse from patients.
The NHS Security Management Service has launched a national Security Incident Reporting Service (SIRS) to capture information relating to security incidents nationwide. In particular it will identify the range of sanctions applied and the support provided by the police. This service will require all security incidents to be investigated and followed through putting considerable additional time pressures on the Local Security Management Specialist.

Struck Equipment.



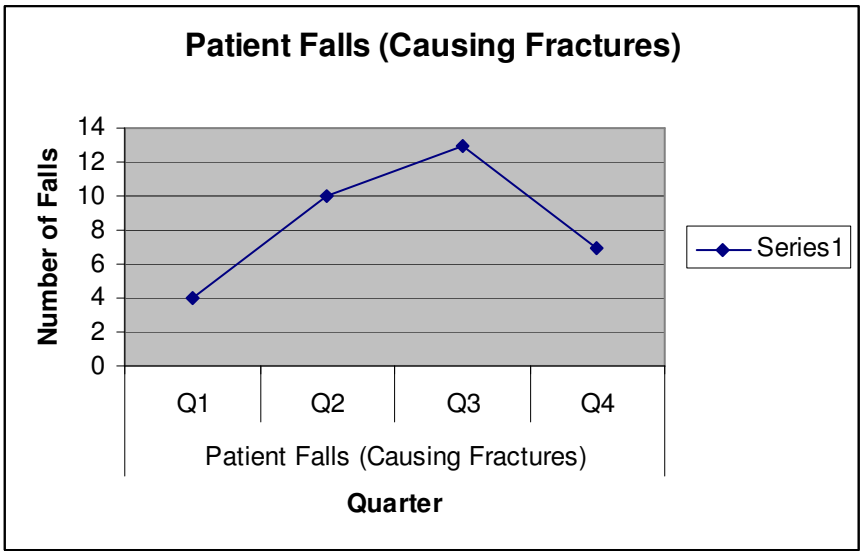
These incidents are about minor injuries resulting from bumping into furniture/equipment etc.

Staff Falls.



Six of these incidents occurred in the wintry weather with slips on the ice and snow. This figure would undoubtedly have been greater were it not for the good work of the estates staff and their contractors ensuring that walkways were gritted during the ice and snow.

Patient Falls (Causing Fracture).



All of these injuries were caused by patients mobilising and falling. There is no evidence of accidents occurring due to patients tripping over cables/equipment or slipping on wet floors.

Injuries.

Summary of Staff Injuries

Staff Incidents	2009/10 1st Q	2009/10 2nd Q	2009/10 3rd Q	2009/10 4th Q
Inoculation injuries	11	13	12	8
Manual Handling	4	4	6 (3)	4
Violence and Aggression	18	27	20	13 (1)
Struck Equipment	1	7	2	3
Staff Fall	8	5	5	14 (2)
Total (staff)	42	56	45	42

Summary of Patient Fractures Following a Fall

Patient Fall *(Resulting in a Fracture)	4	10	13 (4)	7(7)

NOTE: The number of incidents in each category reported to the Health and Safety Executive under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) is shown in brackets.
* Prior to September 2009 these injuries were not reported through RIDDOR

The RIDDOR incident reported under Violence and Aggression was for a Health Care Assistant who was assaulted by a patient and was off sick for more than three days.

The two RIDDOR incidents reported under Staff Falls were fractures following slips on ice.

Legislation:

No new Health and Safety Legislation is due to be enacted this year.

The Criminal Justice and Immigration Act 2008 Sections 119-120 came into force creating an offence of causing nuisance behaviour on NHS premise. It is not yet clear how this will be implemented. However, when further guidance is available our staff will be trained in how it is to be implemented.

Key Points for Trust Board to note:

- The format of this quarterly report has been altered to provide a clearer presentation of data.
- There is a downward trend in the total number of injuries being reported.
- The Health Safety and Security Advisor will be highlighting trend information to relevant teams for further analysis and action.