

Risk Management Strategy - January 2004

The Trust Board has approved a new Risk Management Strategy. (Full copy on the Intranet under "Risk Management". Hard copies from Directorate/ Departmental managers or Director of Operations).

The Trust carries a number of risks, which if not properly managed/controlled have the potential to cause harm to patients, staff and visitors and loss to its assets and reputation. The Risk Management Strategy sets out the commitment of the Trust to managing all risks and the means of achieving this objective.

The Trust has a Risk Management Committee, which is responsible for overseeing the development and implementation of the Risk Management Strategy. However for risk management to be effective it must actively involve all staff and it must be seen as everyone's responsibility.

It is the responsibility of all staff to practice in a safe and efficient manner and to participate in the reporting, assessment and management of risk within their individual work area. Risk awareness and assessment training will be provided to ensure that staff are conversant with the principles of risk management and the application of those principles to their particular work and area of responsibility.

The Trust's Incident Reporting System, which has been developed with an emphasis on a culture of openness places on staff the requirement to report any incident or potential incident (i.e. near miss).

The Trust currently has two forms for incident reporting; one for clinical incidents (involving patients) and one for non-clinical (members of staff/visitors). The Trust will introduce a single form in March 2004.

The Trust also has a Policy for Dealing with Serious Untoward Incidents. This outlines specific responsibilities of key individuals including, communication with patients and relatives, notification to and involvement of external stakeholders and investigation and follow-up of the incident.

The Trust receives information on risks/hazards to health from a number of external sources (eg Confidential Enquiry Reports, Medical Devices Agency, National Patient Safety Agency, DoH).

On receipt of this information the Trust will respond by ensuring that the necessary controls are in place to minimise and, where possible, eliminate the highlighted risks.

Risk management also requires risk identification. Through risk audits, workplace assessments, and learning from other organisations, many risks will be identified and appropriate action taken before instances have occurred.

Risks are recorded as part of the relevant Directorate risk assessments, which in turn will inform the Trust Risk Register. This will enable risks to be quantified and ranked. It provides a structure for collating information about risks that helps both in the analysis and treatment of risks.

Health & Safety Control Books

New Health and Safety "Control Books" were distributed to all wards and departments in December 2003. A full copy is also available on the Trust's Intranet site under "Health & Safety." The "Control Book" has been produced to give managers and staff a guidance manual to help discharge their Health & Safety responsibilities. Its intention is to set standards, give practical help and to suggest solutions to further Health & Safety needs.

While the managers of the Trust will do all that is within their power to ensure the health and safety of staff, it is recognised that health and safety at work is the responsibility of each and every individual associated with the Trust. It is the duty of each member of staff to take reasonable care of their own and other people's welfare and to report any situation, which may pose a threat to the well being of any other person. The "Control Book" is therefore an important reference document, particularly for staff safety representatives, but also potentially for all staff working within the Trust.

Violence and Aggression Policy

The Trust Board has approved a new Violence and Aggression Policy. Full copies are contained in the new "Control Books". The Trust considers that it is unacceptable for staff, visitors or other patients to have to tolerate any form of violence or aggression, including verbal abuse. All incidents must be reported and formally recorded. The action the Trust will take will vary according to the circumstances, particularly in respect of the individual patient. This may range from immediate removal and arrest by the police to the issuing of informal and formal warnings and in extreme cases, exclusion from treatment other than immediate emergency care. The Trust recognises that training of staff is fundamental to the effective operation of this policy and that employees will need to attend training appropriate to the degree of risk that they face.

Managers will need to follow the guidance that supports this policy, particularly relating to:

- Completion of risk assessments
- Risk assessment for any new services
- Reporting of incidents

- Management of incidents and operation of warning/exclusions
- Staff support
- Training

Staff will need to ensure that they understand and adhere to the Trust's policy and guidance particularly in relation to the reporting of all incidents and attending training.

The Trust will ensure that staff are supported including:

- Advice to seek medical attention.
- Debriefing and "Time Out".
- Support from the critical incident staff support team.
- Referral to Occupational Health or Staff Support service (Health Psychology)
- Support with regard to the completion of any statements required by the police.
- Support with preparation for any court hearings that may be needed.
- Encouraging the prosecution of offenders
- Reimbursement for the cost of any prescription medicines resulting from the incident

All incidents need to be reported to the appropriate manager and the Director of Operations as soon as possible to ensure that action is taken to prevent recurrences and enable reporting to the Counter Fraud and Security Management Service (CFSMS) and the Health & Safety Executive (HSE). The CFSMS will work with individuals and the Trust on the legal management of cases involving violence. Quarterly statistics on violence and aggression will be used by managers and the Health & Safety Committee to assess existing procedures, encourage review and highlight areas of risk.

Graham Lloyd
Director of Operations

Staff Lottery Results:

December 2003		
B Hill	Newent h/c	£1000
L Pritchard	Tewkesbury Hospital	£500
L Taylor	Chiropody, GRH	£250
L Hennessy	Cirencester Community	£250
S Williams	Charlton Lane Acute	£100
E Bramwell	Creditors, Victoria Warehouse	£100
E Delahaie	Weavers Croft	£100
C Campin	Burleigh House	£100
S A West	Radiotherapy, CGH	£100
L Stroud	Pharmacy, GRH	£100
S Paddock	Theatres, Standish	£100
D Burnell	East Block, CGH	£100
A Ponting	Estates Dept, GRH	£50
J Nicholls	Radiography, GRH	£50
M Wilson	Admissions, Standish	£50
J Mallard	Reception, Rikenel	£50
P Phillips	Lydney Hospital	£50
B Browne	Rehab, GRH	£50
S Burrows	Estates, Standish	£50
C Russell	Speech therapy, GRH	£50

Christmas Draw 2003		
L Thornton	Surgical 5th floor, GRH	Trolley dash
P Spackman	Hotel services, GRH	Trolley dash
G Chisholm	X-ray, CGH	Trolley dash
M Gibson	Cirencester Community	£500 Gillmans voucher
Edith Kear	Dilke Hospital	Meal up to £200
Joanne Hewitt	Prescott Ward, CGH	Meal up to £200
P Chamberlain	Clerical radiography, Stroud	Meal up to £200
E Barnes	Victoria Warehouse	Meal up to £200
Joyce Burnham	Holly House	Weekend break for 2
Caroline Pratley	Bourton Hospital	Weekend break for 2
Mary Sturmeay	Radiography, Stroud General	Hamper
Mary Macpherson	Cirencester Hospital	Hamper
G Lewis-Watkins	Rikenel Child Health	Hamper
V Pugh	Clinical psychology	Hamper