



Security Strategy 2017 - 2020

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Ajay Kumar	02/08/2017	Health, Safety and Security Team; Safety and Risk Lead
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0.1	08/08/2017	Format discussed and agreed at the Health and Safety Committee
1.0	27/09/2017	Approved by ELB

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Equality Analysis	Completed
Linked procedural documents	
Dissemination requirements	All managers and staff, via email and intranet
Part of Trust's publication scheme	Yes

The East of England Ambulance Service NHS Trust has made every effort to ensure this policy does not have the effect of unlawful discrimination on the grounds of the protected characteristics of: age, disability, gender reassignment, race, religion/belief, gender, sexual orientation, marriage/civil partnership, pregnancy/maternity. The Trust will not tolerate unfair discrimination on the basis of spent criminal convictions, Trade Union membership or non-membership. In addition, the Trust will have due regard to advancing equality of opportunity between people from different groups and foster good relations between people from different groups. This policy applies to all individuals working at all levels and grades for the Trust, including senior managers, officers, directors, non-executive directors, employees (whether permanent, fixed-term or temporary), consultants, governors, contractors, trainees, seconded staff, homeworkers, casual workers and agency staff, volunteers, interns, agents, sponsors, or any other person associated with the Trust.

All Trust policies can be provided in alternative formats.

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1. Introduction

Security management is the process of identifying, analysing and managing the potential risks and incidents pertaining to security of Trust buildings and property, and the safety of our staff, and visitors.

Statement of Intent

The Security Strategy ensures that the East of England Ambulance Trust meets its statutory obligations in complying with the Security Management Standards, within the standard NHS provider contract

The Trust has a zero tolerance of abuse, aggression and violence against its staff, as well as all other criminal activity against the Trust and its resources.

The aim of this document is to set out a clear strategy that provides a realistic and achievable vision for trust and its staff.

The Board acknowledges that robust, continuous risk assessment and the provision of appropriate training are both pivotal factors in the achievement of this aim, and will ensure that focus is maintained on security management.

2. Purpose

The aim of the Security Strategy is to provide a safe and secure environment for staff and patients and ensure staff are trained to the appropriate level in security, personal safety and managing incidents of violence and aggression.

3. Duties

3.1 The Board

The Board is accountable for internal control. The Board is required to produce statements of assurance that it is doing what is reasonable practical to manage affairs related to the Trust's security.

3.2 Executive Leadership and Senior Leadership Board

The Executive and the Senior Leadership Team provides leadership to the Trust and is responsible for managing the everyday business affairs of the Trust. They are therefore responsible for the implementation of the strategies and policies of the Trust as determined by the Board.

3.3 Audit Committee

The Audit Committee is responsible for providing an independent overview on the effectiveness of the Trust's Security management, in order to assist in the assessment of the way in which the Trust is implementing the Security Management Strategy.

3.4 Chief Executive

The Chief Executive has overall responsibility for ensuring that an effective risk management system is in place within the Trust, for meeting all statutory requirements and adhering to guidance issued by NHS Protect and the Health and Safety Executive.

The Chief Executive is also accountable to the Board and has responsibility for maintaining a sound system of internal control and will support the achievement of the organisation’s policies, aims and objectives.

3.5 Security Management Director

In line with Security Standard 1.1, the Trust has a nominated Executive Director, as the Trust’s Security Management Director (SMD). The role of the SMD includes:

- Overseeing and providing strategic management and supporting all security management work.
- Promoting Security at Trust Board level and ensuring compliance with the requirements of any external regulatory bodies.

3.6 Management

Managers are responsible for security at a local level and will ensure:

- Local risk assessments related to security have been completed. Risks are identified and measures put in place to mitigate the risks.
- Any security matters requiring the LSMS involvement are reported to the LSMS.
- Work in conjunction with the LSMS to ensure that appropriate measures are put in place to ensure safety and security for staff, Patients and visitors.

3.7 All Staff

- All Staff have a responsibility to adhere to this Strategy.
- All staff are required to familiarise themselves with all security requirements relating to their place of work or work practices, and follow agreed working methods and security procedures at all times.
- To safeguard themselves, colleagues, visitors, patients so far as is reasonably practicable and ensure that neither themselves, others, or equipment or property are put in jeopardy by their actions.
- To comply with all training requirements concerning security management.

3.8 Trust Specialist – Local Security Management Specialist

An accredited Local Security Management Specialist (LSMS) is the Trust’s Security Lead responsible for overall delivery of this Strategy.

4. Security Strategy – Aims and Objectives

- To reduce the incidence of security related incidents, take all necessary steps to protect the assets of the Trust against criminal damage, vandalism, theft, or other security related breaches and seek sanctions and redress where incidents do occur.
- The Trust is committed to applying all appropriate sanctions against those responsible for criminal or security related incidents. Financial redress or recovery of losses incurred as a result

of criminal activity or security incidents against the Trust will always be pursued wherever possible.

- To promote a culture in which all staff, patients and visitors take responsibility for the safety of people and property.
- To develop and maintain an effective collaborative working relationship with local stakeholders and other local agencies
- To meet its objectives this strategy will adopt the four key areas of work identified in the Security Management Standards (contained in the Standard Contract for Providers) and ensure that it achieves and maintains compliance.

5. Dissemination and Implementation of the Security Strategy

5.1 Dissemination

The Security Strategy will be disseminated to all staff via communications bulletins and placed in the Trust's on line document library.

5.2 Implementation and Application

The LSMS with the support of the Health and Safety Team will oversee and undertake the delivery of the full range of security management work and ensure the Trust meets the Security Management Standards for the key work streams identified below:

Work stream - Inform and Involve

The organisation develops and maintains effective relationships and partnerships with local and regional anti-crime groups and participates in national and local publicity initiatives to raise and improve security awareness.

All staff are aware of how to report a violent incident or security breach and the LSMS is working continually to raise awareness and the profile of security within the Trust.

Quarterly updates are provided to the SMD to ensure that he/she is fully aware of security issues which may affect the Trust, its staff, patients or the level of service for which it offers and any serious concerns are escalated immediately.

All details of physical assaults against staff are recorded in a systematic manner. Any trends and issues related to security are also reported to the working groups and relevant committees and NHS protect on a quarterly basis.

Provide advice, guidance and support to staff and management on security matters within the LSMS remit for the Trust.

Work stream - Prevent and Deter

All job roles are risk assessed and a training need analyses are done for all employees who come into contact with NHS patients and members of the public.

Staff are trained in the prevention and management of clinical related challenging behaviour, in accordance with previously issued guidance. Training is monitored, reviewed and evaluated for effectiveness on a regular basis.

National alerts are distributed to the organisation and the process is controlled, monitored, reviewed and evaluated.

A risk based approach is taken to identify and protect the organisations critical assets. This is included in the organisation's policies and procedures.

The organisation has suitable lockdown arrangements for each of its sites, or for specific buildings or areas.

Work stream - Hold to Account

The organisation is committed to applying all appropriate sanctions against those responsible for security related incidents and these sanctions are publicised across the Trust and where appropriate (and with the victim's permission) in the media

There is a clear effective policy on the recovery of financial losses incurred due to security related incidents.

6. Process for Monitoring Compliance and Effectiveness

The LSMS's annual report and work plan will be presented annually to the Health and Safety Committee and the Senior Leadership Board.

The LSMS will provide to the Health and Safety Committee and the Senior Leadership Board a security report on a quarterly basis.

The LSMS will attend the Medicines Management Group as and when required, to ensure medicines management meets the security management standards.

Significant events or breaches of compliance with the strategy will be investigated by the LSMS. Any findings from the investigation will be reported to the SMD and escalated to the Health and Safety Committee.

7. Review and Governance

- Significant events or breaches of compliance with the strategy will be investigated by the Health, Safety & Security Officer and the LSMS.
- Any findings will be reported to the SMD and where appropriate escalated to the Trust's Board of Directors.
- The Health, Safety & Security Officer and the LSMS will submit an Annual Report to the SMD, Trust's Board of Directors, Health and Safety Committee, Quality Committee and provide evidence as required under the NHS Protect Standards contract.

Area	Frequency	Action
Number of Injuries – Staff - Violence and Aggression		Reduction in the number of staff injuries by 5% year on year
Number of Physical Assaults reports submitted		Comparison of number of reports submitted – year on year
Number of staff injured during a physical assault incident		Comparison of number of reports submitted – year on year
Number of Verbal Abuse reports submitted		Comparison of number of reports submitted – year on year
Number of Warning Markers Issued		Comparison of number of reports submitted – year on year
Total number of Violence and Aggression incidents reported		Comparison of number of reports submitted – year on year
Crime Reduction Surveys		30% of Trust properties in a year

Training

Conflict resolution training for lone workers	Annually	Implementation of training as per training projection
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8. Associated Documents

- NHS Protect Security Management Standards
- Guidance documents issued by NHS Protect
- Security Management Policy
- Lockdown policy
- Risk Management Policy
- Health and Safety Policy
- CAD Marker Policy
- Learning and Development Policy
- Medicines Management Policy

Appendices

Appendix A Equality Analysis

Appendix A – Equality Analysis

<p>1. Name of policy/procedures/guidelines being assessed:</p>	<p>Title: Security Strategy 2017-2020</p>
<p>2. Is this a new or existing document?</p>	<p>New <input checked="" type="checkbox"/> Existing <input type="checkbox"/></p> <p><input type="checkbox"/></p> <p>Version being assessed (if existing):</p> <p>Last review date of document:</p>
<p>3. What is the purpose of the document? (copy the purpose from the relevant document)</p>	<p>(a) What is it trying to achieve and why?</p> <p>- Meet the statutory obligations in complying with the NHS Security Management Standards - To set out a clear strategy that provides a realistic and achievable vision for the Trust on how to provide an environment that is safe (as far reasonably practical) for its staff.</p> <p>(b) Who is intended to benefit and how?</p> <p>All staff</p>



<p>4. Tick the boxes below to assess the potential for differential impact (negative or positive) on any of the protected characteristics?</p> <p>✓ Tick box for positive impact</p> <p><input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Disability <input checked="" type="checkbox"/> Gender reassignment <input checked="" type="checkbox"/> Marriage and civil partnership <input checked="" type="checkbox"/> Pregnancy and maternity <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Religion or belief (including lack of belief) <input checked="" type="checkbox"/> Sex <input checked="" type="checkbox"/> Sexual orientation</p>	<p><input checked="" type="checkbox"/> Cross box for negative impact</p> <p><input type="checkbox"/> Age <input type="checkbox"/> Disability <input type="checkbox"/> Gender reassignment <input type="checkbox"/> Marriage and civil partnership <input type="checkbox"/> Pregnancy and maternity <input type="checkbox"/> Race <input type="checkbox"/> Religion or belief (including lack of belief) <input type="checkbox"/> Sex <input type="checkbox"/> Sexual orientation</p>
<p>5. Is there the possibility of discriminating unlawfully, directly or indirectly, against people from any protected characteristic?</p> <p>Types of Discrimination:</p> <ul style="list-style-type: none"> - Direct - Indirect - Associative - Perceptive - Harassment - Third party harassment - Victimisation - Institutional 	<p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/></p> <p>If yes, please state the reason:</p>
<p>6. Could there be an effect on relations between certain groups?</p>	<p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/></p> <p>If yes, please state the reason:</p>
<p>7. Does the policy explicitly involve, or focus on a particular equalities group, i.e. because they have particular needs?</p>	<p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/></p> <p>If yes, please state reason:</p>

8. PLEASE INDICATE BELOW ANY AMENDMENTS OR CHANGES TO THE POLICY/PROCEDURE:

If the answers are 'no' to questions 5, 6, 7 then there is no need to proceed to a Full Equality Analysis. Summary Form should be completed and submitted to the relevant committee(s).

If 'yes' then a Full Equality Analysis of the document will be required. *(link to be added)*

9. Executive Summary Record Sheet

Initial Screening - Equality Analysis (Stage 1)

Document reference:	Document Title:
Assessment date:	Document type:
Responsible director:	Lead manager:

Conclusion of Equality Analysis:

Name of committee/board this document has been presented to:

Chairperson:

Date of meeting:

APPROVED: YES NO

If the documents have not been approved, then please indicate below the next steps agreed:

Signature of Chairperson:	Date:
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The initial Equality Analysis screening form (stage 1) should be stored with the master document and a final approved electronic copy must be sent to:

Equality, Diversity and Inclusion Manager
Hammond Road
Elms Industrial Estate
Bedford MK41 ORG
 Landline: 01234 243200 mobile: 07957626985
Email: Navrita.Atwal@eastamb.nhs.uk