

**EXECUTIVE SUMMARY****REPORT TO TRUST BOARD****HELD ON MONDAY 19<sup>TH</sup> DECEMBER 2012**

<b>Subject</b>	Annual Security Report 2011-12
<b>Supporting TEG Member</b>	Professor H. Chapman, Chief Nurse/Chief Operating Officer
<b>Author</b>	Graham Rye/Kevin O'Regan, Director of Hotel Services
<b>Status<sup>1</sup></b>	A*

**PURPOSE OF THE REPORT**

To provide an update on security provision, performance and profile of incidents taking cognisance of CQC framework.

**KEY POINTS**

- Key aims of NHS Protect
- CQC Registration compliance – Standard 10 “Safety and Suitability of Premises”
- Review of Incident data – Royal Hallamshire Hospital, Jessop Wing, Weston Park, Charles Clifford, Northern General Hospital and Primary & Community Services Care Group
- Lone Working

**IMPLICATIONS<sup>2</sup>**

<b>AIM OF THE STHFT CORPORATE STRATEGY 2012-2017</b>		<b>TICK AS APPROPRIATE</b>
1	Deliver the Best Clinical Outcomes	✓
2	Provide Patient Centred Services	✓
3	Employ Caring and Cared for Staff	✓
4	Spend Public Money Wisely	✓
5	Deliver Excellent Research, Education & Innovation	✓
	CQC Outcomes	10 – Safety and suitability of premises

**RECOMMENDATIONS**

Board of Directors to note the contents of the Report.

**APPROVAL PROCESS**

<b>Meeting</b>	<b>Date</b>	<b>Approved Y/N</b>
TEG	13.6.12	✓
Healthcare Governance	26.11.12	✓
Trust Board	19.12.12	

<sup>1</sup> Status:A = Approval

A\* = Approval & Requiring Board Approval

D = Debate

N = Note

<sup>2</sup> Against the five aims of the STHFT Corporate Strategy 2012-2017

# SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST

## ANNUAL REPORT 2011 / 12 FOR STHT SECURITY

### 1. Introduction

The security function at Sheffield Teaching Hospitals NHS Foundation Trust is currently overseen at Director level by Mr Kevin O'Regan. The Secretary of State's Directions 2004 state every Trust should have an executive director with special responsibility for Security and this function is carried out by Professor Hilary Chapman, CBE, Chief Nurse and Chief Operating Officer for the Trust.

On a day to day basis security is managed by the Head of Security, Mr Graham Rye who is Trust nominated officer NHS Security Management Specialist (SMS) and he is supported by a deputy, Mr Philip Turner who is a Local Security Management Specialist (LSMS).

One of the key aims of NHS Protect (formerly NHS Security Management Service) is the establishment of a safe and secure environment which is supported by CQC registration compliance – Standard 10 "Safety and Suitability of Premises".

NHS protect has published "Evidence in the security and management of NHS assets" which is basically practical advice and support to protect and secure NHS assets against theft, loss or damage by providing the necessary tools to enable NHS organisations to risk assess assets and to identify appropriate ways to help protect and secure them.

In the current economic climate and at a time when the Trust is expected to demonstrate value for money and efficiency savings, it is essential that appropriate measures are in place e.g. CCTV, access control, identification badges e.t.c.

The Head of Security also works in partnership with NHS Protect who are notified of all security incidents involving theft or damage to NHS property and assets. Our internal reporting system helps to identify trends, patterns, number and type of incidents on a local basis which can then build a national picture of security management across the NHS.

### 2. Central Campus

#### 2.1 Royal Hallamshire Hospital

The RHH has around 180 CCTV cameras with additional cameras being added on an on-going basis, particularly when refurbishments take place or in response to untoward incidents in a particular area. The cameras are monitored 24 / 7 by a team of professional control room operatives and are recorded to hard drives with captured images being available for 31 days.

There is an extensive network of intruder alarms fitted in departments within the hospital and the surrounding outbuildings to protect them out of hours. These are monitored by the Patriot alarm monitoring system which is installed in the RHH Control Room.

Access control has long been installed in the hospital with some 400 plus doors being monitored and controlled by the Continuum system. This allows the hospital to have certain sensitive areas locked 24 / 7 with access by swipe card only which records the details of the individual and the time and date they accessed the door.

Other departments will have open access during certain times with the doors automatically locking down out of core hours or being remotely locked by the system in the event of an incident. This gives a high degree of security and flexibility within the hospital

On-going work and capital investment continues to increase and upgrade CCTV. Also the present access control system is to be upgraded on a phased basis to introduce smartcard readers.

For such a large hospital the crime rate is relatively low with 3 incidents of theft of Trust property being reported. This consisted of two thefts from vending machines and one theft of a data projector and represents a reduction of 4 incidents compared to last year.

## **2.2 Jessop Wing**

A relatively new purpose built maternity unit at the side of the RHH, connected by a link bridge with considerable investment in CCTV with around 32 cameras now operational and access control installed throughout. As one would expect with a maternity unit, security is a high priority and all babies are tagged at the earliest opportunity. If they are taken near to any ward entrance / exit this will activate an alarm both locally and in the 24 hour control room.

All areas of the Jessop wing, other than public areas, such as the main entrance and deli bar, are locked down 24 / 7 and access is by swipe card or buzzing through to the nurse base station. Public areas are locked down at 9pm and are additionally monitored by Porter staff throughout the night.

The crime rate is low with 3 reported incidents of theft of Trust property during last financial year which consisted of 3 vending machines broken into and loss of cash (offender identified and arrested by Police (Appendix 1 and 3).

## **2.3 Weston Park Hospital**

A self contained unit with on site portering staff who are responsible for the security of the building, equipment and patient, staff and visitor safety. Additional support is available (if required) from RHH.

There is very limited access to the building with all but the main entrance being secured 24 / 7. This access is controlled by reception staff during core hours and they are responsible for locking down the door at 9pm and unlocking at 7am.

There are now 35 CCTV cameras installed and operational at Weston Park which are monitored and recorded.

The crime rate at this facility is relatively low with three thefts of personal property and no Trust property being reported during the year which is the same as last year (Appendix 1 and 3).

## **2.4 Charles Clifford Dental Hospital**

There is very limited access to the building with all but the main entrance being secured 24 / 7. The main entrance is controlled by the access control system and when locked down at 9.00 p.m. is accessed by card (staff) or by video intercom (visitors) to appropriate areas.

12 CCTV cameras have been installed in the hospital and these are monitored and recorded. During 2011/12 no reports of theft have been reported. (Appendix 1 and 3).

## **2.5 The Central Campus**

The Central Campus has a security control room which is staffed 24 hours a day by one controller per shift and they monitor the radio, alarm systems for intruder, panic, medical gases, fridges & freezers for blood and pharmaceuticals, the assisted conception dewers and baby tagging alarms as well as monitoring over 260 CCTV cameras.

The actual Security function is covered by a team of 10 Security Officers. This allows for two Security Officers per 8 hour shift and they are responsible for the locking and unlocking of the hospitals and surrounding standalone units which includes setting and unsetting of intruder alarms as the various units close and open for business in order to protect staff, patients and visitors as well as Trusts assets. Security staff are also part of the fire team and assist with lift releases in the event of a breakdown.

Security staff also attend all activations of intruder alarms, panic alarms, calls via the 2222 and bleep system at the four hospitals within the Central Campus. They detain intruders suspected of stealing or damaging Trust assets or those acting in a violent or aggressive way towards staff, patients or visitors owing to mental health issues, drink or drug intoxication or confusion.

Security staff also carry out more routine tasks such as cash collections from the various canteens, deli bars and shops within the Campus as well as escorting staff around the sites and general patrolling.

There have been 3056 security incidents recorded this last financial year on the Central Campus and these consist of 2167 baby tag alarms, (false) 600 intruder / panic alarms, 26 missing / wandering patients, 42 reports of lost / stolen personal / Trust property and 9 reports of damage to personal / Trust property (Appendix 1 and 3).

### **3. Northern Campus**

Northern General Hospital is currently protected by 290 CCTV cameras and an extensive access control system currently using two sets of software.

A decision was taken by the Trust to integrate the NGH system with the Central Campus Continuum System utilising smart card technology and work is currently underway at the Northern Campus to change all existing access control to the Central Campus system. In the meantime the two systems at the Northern continue to provide a high degree of security by keeping doors locked 24 / 7 where necessary, opening and closing at certain times and being able to be locked down in the event of a major incident, should that prove necessary.

All new schemes and refurbishments are automatically being changed to the new system.

There are a number of lock suites in use at the Northern campus at the moment but a new lock suite has been purchased which it is intended will be used in all new schemes with much tighter control on the issue of keys resulting in even higher levels of security.

Virtually all of the standalone buildings and non 24 / 7 departments are fitted with intruder alarm systems which are monitored by the Patriot alarm system. Also departments which are 24 / 7 but have very low staffing levels have panic alarms fitted as well as access to the tried and tested 2222 emergency telephone system.

Although the Northern Campus is a huge site covering 128 acres with over 7000 staff and situated in the middle of a high crime area of Sheffield, the crime rate is relatively low with most thefts of personal property being theft of or from handbags which have been left under base stations or in insecure unattended offices. Theft of Trust property of which there were 46 recorded during the year consisted in the main of theft of scrap metal, lead flashing and copper cabling. Other incidents consisted of theft of a laptop and attacks on vending machines.

At the Northern Campus security is provided by another team of 10 Security officers who provide coverage with 2 officers per 8 hour shift.

There is also a control room at the Northern Campus which is currently staffed from 6am to 10pm Monday to Friday and 8am to 4pm Saturdays and Sundays following an injection of revenue 2010/11.

This has had a very positive impact on the service provided by Security at the NGH by being the eyes and ears of the Security staff whilst they are out on patrol. Guidance from central control enables security officers to be directed to specific problem areas whilst on foot patrol. They are also able to call for Police assistance if they see that the Security staff are having difficulties thereby enhancing the safety of our staff and patients.

The control room operators also deal with the issue and amendment of access control cards/fobs and any problems that may arise. They also deal with lost/found property and are responsible for reviewing CCTV footage following incidents and providing the Police or STH Management with relevant footage.

There is an outstanding bid from Security in the business plan for £50k which, if approved, would allow us to appoint additional control room staff to operate the control room 24/7. This would enhance the safety of staff, patients, visitors and operate trust assets.

All CCTV images from over 290 cameras are available historically following an incident from a bank of hard drives that record 24 hours per day for 31 days. General security duties are very similar to Central Campus.

### **4. Primary & Community Services Care Group**

Following transfer to the Trust (TCS) the care group have tried to incorporate security data into STH classifications. Unfortunately, however, the P&CS Care Groups datix system has coded incidents differently so they have been re-categorised. It is anticipated that the datix system will be merged during 2012/13.

It should also be noted that to date the care group have retained security responsibilities which included NHS Sheffield undertaking LSMS service. A bid has been submitted to T.E.G. to provide an appropriate security service.

During 2011/12 there has been a decrease in total number of incidents but a particular increase with insecure premises and violence and aggression (Appendix 2 and 3) as compared to 2010/11.

## **5. Types of Security Incidents and associated risks**

Sadly across both sites the biggest problem in terms of numbers continues to be theft of personal property from staff and patients.

The theft of staff property is mainly caused by lax security practices on the part of the individual e.g. leaving handbags and other valuables in unlocked lockers in changing rooms, under nurse base stations or in unattended insecure offices. Sadly confused older people also appear to be victims of theft or loss. Violence and aggression is mainly committed by confused older people, patients suffering from head injury, patients with mental ill health and a smaller but growing number suffering from withdrawal of drugs and alcohol, adverse reactions to medication, treatment or the nature of the illness from which they suffer.

Theft of and from staff/visitors vehicles was historically a major problem, but over the past two or three years this has dramatically reduced owing to Trust investment on CCTV and improved lighting as well as security advice being given on a regular basis to staff.

Theft of Trust property, in particular medical equipment, is a relatively rare occurrence but when it does occur is significant. These acts tend to be carried out by organised gangs of thieves for shipping abroad or sale to private hospitals etc.

In 2011 / 12 the figure for Security related incidents not including Violence & Aggression dropped to 5311 with a reduction in baby tag alarms, down to 2167, missing / confused wandering patients 781, which is a slight increase. Personal property stolen has dropped from 212 in 2009 to 137 in 2011 / 12. Theft of Trust property has increased from 42 to 52 in 2011 / 12. Theft of motor vehicles remained static with just one being stolen from the Trust car parks whilst theft from motor vehicles dropped slightly to 9 from 11.

The most serious problem as previously stated and the one with the biggest potential consequences for the individual and the Trust is caused by violence towards staff. Whilst incidents of violence and aggression across the Trust is lower than at many other Acute Hospital Trusts the number of incidents are increasing often fuelled by drugs and alcohol.

The small number of Security staff on each site, a maximum of two at anyone time and often only one on duty where there is sickness and annual leave mean that staff generally and Security staff in particular are extremely vulnerable to attack and injury. Whilst the Police endeavour to attend these incidents when requested waiting times are dependent on other work pressures.

Incidents of physical assault against NHS / STH staff are recorded and reported to the Security Management Service each year. The figures reported are as follows:

2005 / 06	147
2006 / 07	124
2007 / 08	63
2008 / 09	51
2009 / 10	206
2010 / 11	256
2011 / 12	240 (includes 18 Primary & Community Services Care Group)

A huge amount of work has taken place within the Trust to encourage staff to record all assaults against staff as it was felt they were only reporting the more serious assaults and where the assailant knew what they were doing. As a result of this work we now have a better picture regarding assaults against staff within the Trust and it is apparent that the vast majority of assaults against staff are by patients such as confused older people and those with mental health issues. Injuries consist of slap marks, nips, scratches and having liquids thrown at them.

## **6. Lone Working**

Finally, lone working is very much on the HSE's agenda and here it falls into two distinct categories. The first is where members of staff are working in departments within the hospital grounds on their own, which occurs mainly at night and at weekends where they provide an emergency out of hour's service for the hospital. Secondly, those members of staff who go out into the community to provide specialist services such as the community midwives. Risk assessments for both groups have been carried out by the respective directorates and appropriate action taken.

The first group are provided with panic alarms, intruder alarms around the perimeter of the building and safe rooms in certain areas which are fitted out with telephones so contact can be made via the 2222 system.

The second group are encouraged to carry out a risk assessment every time they go out on a visit by checking the patient notes to see if there have been any previous incidents, speaking with colleagues and checking with GPs in relation to new referrals.

In relation to the Community Midwives, the Trust has now provided, where necessary, a lone worker device based on mobile phone technology which has a panic alarm built in which is monitored by a call centre. There are currently 130 of these devices in use having been leased for an initial 5 year period with automatic upgrades throughout the lease. The first 2 years of the lease were wholly funded by the Department for Health with the final 3 years funded by the Directorate.

## **7. Conclusion**

We continue to develop a pro-security culture amongst our staff, patients and visitors by reaffirming that a breach of security will not be tolerated. This has been achieved through staff induction training, on-going awareness campaigns and security updates. We have a high number of staff who can assist us greatly in creating and maintaining a secure environment. In particular all trust staff should ensure that their work area and buildings are secure.

Across the Trust there has been a huge improvement in physical security with over £1 million having been spent on CCTV, alarm systems, access control and other security measures in the last 6 years with a further £350k earmarked for further improvements over the next 2 to 3 years.

As mentioned earlier in the report we are progressing on the works to the access control system which will eventually convert the various access control systems to one system, the Continuum access control system, which will allow staff to access doors across the Trust with just one card, thus greatly improving physical security.

The current security staff at STH have played a huge part in improving not only the safety and security of staff, patients and visitors but the perception of Security as a "can do, will do" team. Staff are now much more likely to contact security over a whole range of issues than ever before because they are more visible and approachable than perhaps previously.

There have been a number of complimentary reports from Officers of the South Yorkshire Police regarding the quality of CCTV footage provided as evidence of theft etc and also for the assistance given to them by security in relation to a number of violent incidents in A&E, MAU wards at the NGH  
Over the last 12 months the laboratory rationalisation scheme (new build) at Northern General Hospital has incorporated latest technology/equipment in crime reduction techniques, that is "Secure by design and defence in depth" which have been supported by South Yorkshire Police Counter Terrorism Advisor and the Environment Agency.

There are still many challenges facing STH Security including the increasing number of calls from wards and departments for assistance with restraining violent patients and preventing patients lacking capacity from leaving the hospital. Also the increasing number of occasions when South Yorkshire Police are either unable to attend incidents or there are long delays in them attending owing to staffing pressures within SYP. Unfortunately, there can be a reluctance of SYP Officers to prosecute offences because of what they perceive to be the minor nature of the injuries sustained by staff or because of mental health issues on the part of the assailant.

It is also recognised that the on-going capital investment continues to contribute significantly to positive security improvements notwithstanding this investment also incurs on-going revenue consequences.

In cases involving suspected fraudulent behaviour or alleged fraud, these are reported direct to the Local Counter Fraud Specialist in accordance with Standing Financial Instructions (SFIs).

Graham Rye  
Security Management Specialist

Kevin O'Regan  
Hotel Services Director

Appendix 1,2,3 attached

GR/KOR/JT/11.12.12

**Security Comparator Updated to 31/3/2012**

TYPE OF INCIDENT	NGH					
	1/4/06 31/3/07	1/4/07 31/3/08	1/4/08 31/3/09	1/4/09 31/3/10	1/4/10 31/3/11	1/4/11 31/3/12
Alarm Activation	198	142	117	134	264	349
Baby Tagging	0	0	0	0	0	0
Drugs	12	7	13	5	11	6
Insecure Premises	115	77	78	65	51	72
Missing Patients AWOL	284	346	463	383	616	669
Missing Con/wandering	99	125	95	33	77	86
Offensive Weapon	7	2	7	0	6	6
Opass assault by another	7	14	28	24	21	15
Pass assault by patient	145	147	59	135	165	158
Trust property damage	46	45	21	20	33	32
Personal property damaged	44	41	55	57	46	39
Trust property lost/misplaced	14	42	19	7	17	13
Personal property lost/misplaced	48	42	57	61	82	69
Trust property stolen	21	30	27	44	33	46
Personal property stolen	114	108	98	95	112	125
Suicide	11	7	4	2	2	4
Stalker	0	0	0	0	0	0
Suspicious package	6	2	1	0	2	1
Suspicious person	171	101	103	48	44	61
Suspicious vehicle	7	8	10	11	8	8
Theft from car	10	12	5	7	11	9
Theft of car	2	3	4	1	1	1
Trespasser	168	173	218	207	199	261
Violence/aggression	397	391	516	392	470	571
Violence self harm	29	22	19	11	13	19
Verbal abuse	173	189	164	159	167	159
Other (detailed list at bottom of lists)	34	70	48	36	38	74
Total	2162	2115	1937	1934	2489	2853

**Key:**

Other include;-

Bomb Threats. Suspicious noises. Fly Tipping, Intoxicated persons, Personal items tampered with. Non aggressive Patients trying to leave

Patients locking themselves in premises. SYP incidents. .

Dogs/children left in car

N.B. Opass – an assault on any person (not NHS staff) e.g. patient on patient, visitor on patient.

Pass – an assault on NHS staff by a patient/visitor.

APPENDIX 1

TYPE OF INCIDENT	RHH					
	1/4/06 31/3/07	1/4/07 31/3/08	1/4/08 31/3/09	1/4/09 31/3/10	1/4/10 31/3/11	1/4/11 31/3/12
Alarm Activation	226	20	317	266	82	456
Baby Tagging	0	0	0	0	0	0
Drugs	0	2	8	16	0	2
Insecure Premises	30	2	9	2	2	1
Missing Patients AWOL	51	42	65	55	37	13
Missing Con/wandering	26	20	36	58	23	8
Offensive Weapon	1	1	0	1	1	0
Opass assault by another	6	1	13	7	7	5
Pass assault by patient	82	81	32	70	95	48
Trust property damage	11	7	2	6	7	6
Personal property damaged	5	4	7	7	3	2
Trust property lost/misplaced	5	13	9	6	12	2
Personal property lost/misplaced	52	46	62	65	39	16
Trust property stolen	8	8	11	13	7	3
Personal property stolen	59	35	138	120	47	9
Suicide	0	0	0	0	1	0
Stalker	0	0	1	2	1	0
Suspicious package	0	0	0	20	0	1
Suspicious person	34	11	44	40	14	1
Suspicious vehicle	0	0	1	0	0	0
Theft from car	1	1	11	0	0	0
Theft of car	0	0	0	0	0	0
Trespasser	4	0	8	2	0	0
Violence/aggression	59	54	114	45	41	24
Violence self harm	8	13	12	13	4	3
Verbal abuse	99	108	134	99	77	60
Other (detailed list at bottom of lists)	30	20	36	66	28	3
Total	797	489	1071	961	523	663

**Key**

Other include;-

Bomb Threats. Suspicious noises. Fly Tipping, Intoxicated persons, Personal items tampered with. Non aggressive Patients trying to leave

Patients locking themselves in premises. SYP incidents. .

Dogs/children left in car



APPENDIX 1

TYPE OF INCIDENT	WPH					
	1/4/06 31/3/07	1/4/07 31/3/08	1/4/08 31/3/09	1/4/09 31/3/10	1/4/10 31/3/11	1/4/11 31/3/12
Alarm Activation	4	1	8	13	3	48
Baby Tagging	0	0	0	0	0	0
Drugs	1	1	0	8	2	4
Insecure Premises	0	0	0	3	1	1
Missing Patients AWOL	1	0	2	1	0	0
Missing Con/wandering	0	1	1	0	0	1
Offensive Weapon	0	0	2	1	0	0
Opass assault by another	0	0	0	1	0	0
Pass assault by patient	3	3	0	3	0	3
Trust property damage	3	5	2	1	1	0
Personal property damaged	2	1	0	0	2	0
Trust property lost/misplaced	0	0	0	0	2	2
Personal property lost/misplaced	0	1	2	3	6	3
Trust property stolen	4	2	14	4	0	0
Personal property stolen	5	1	5	6	3	3
Suicide	0	0	0	0	0	0
Stalker	0	0	0	0	0	0
Suspicious package	0	0	0	1	0	0
Suspicious person	2	0	8	1	2	3
Suspicious vehicle	0	0	0	0	0	0
Theft from car	1	0	0	0	0	0
Theft of car	0	0	0	0	0	0
Trespasser	0	0	0	1	0	0
Violence/aggression	0	0	5	5	7	0
Violence self harm	0	0	0	0	0	0
Verbal abuse	5	4	3	1	4	2
Other (detailed list at bottom of lists)	7	6	8	0	2	2
Total	38	26	60	53	35	72

**Key:**

Other include;-

Bomb Threats. Suspicious noises. Fly Tipping, Intoxicated persons, Personal items tampered with. Non aggressive Patients trying to leave

Patients locking themselves in premises. SYP incidents. .

Dogs/children left in car

APPENDIX 1

TYPE OF INCIDENT	JW					
	1/4/06 31/3/07	1/4/07 31/3/08	1/4/08 31/3/09	1/4/09 31/3/10	1/4/10 31/3/11	1/4/11 31/3/12
Alarm Activation	7	3	7	9	0	0
Baby Tagging	5839	5480	4346	4192	2662	2167
Drugs	0	0	0	0	0	0
Insecure Premises	0	0	1	0	0	0
Missing Patients AWOL	2	3	0	3	3	4
Missing Con/wandering	1	0	0	0	0	0
Offensive Weapon	0	0	0	0	0	0
Opass assault by another	1	0	1	0	1	0
Pass assault by patient	0	0	0	0	1	0
Trust property damage	0	0	1	2	1	1
Personal property damaged	0	1	0	0	0	0
Trust property lost/misplaced	0	0	0	0	2	0
Personal property lost/misplaced	2	0	1	0	1	0
Trust property stolen	2	0	0	3	2	3
Personal property stolen	0	0	0	5	1	0
Suicide	0	0	0	0	0	0
Stalker	0	0	0	0	0	0
Suspicious package	0	0	0	0	0	0
Suspicious person	2	1	0	1	0	0
Suspicious vehicle	0	0	0	0	0	0
Theft from car	0	0	0	0	0	0
Theft of car	0	0	0	0	0	0
Trespasser	0	0	1	0	0	0
Violence/aggression	0	0	5	2	3	0
Violence self harm	1	0	1	1	0	0
	4	7	3	5	4	0
Other (detailed list at bottom of lists)	2	1	2	2	3	1
Total	5863	5496	4368	4225	2683	2176

**Key:**

Other include;-

Bomb Threats. Suspicious noises. Fly Tipping, Intoxicated persons, Personal items tampered with. Non aggressive Patients trying to leave

Patients locking themselves in premises. SYP incidents.

Dogs/children left in car

APPENDIX 1

TYPE OF INCIDENT	CCDH					
	1/4/06 31/3/07	1/4/07 31/3/08	1/4/08 31/3/09	1/4/09 31/3/10	1/4/10 31/3/11	1/4/11 31/3/12
Alarm Activation	17	0	13	35	13	96
Baby Tagging	0	0	0	0	0	0
Drugs	0	0	0	0	0	0
Insecure Premises	0	0	1	0	1	0
Missing Patients AWOL	0	0	2	1	1	2
Missing Con/wandering	0	0	0	0	1	0
Offensive Weapon	0	0	0	1	0	0
Opass assault by another	0	0	2	0	0	0
Pass assault by patient	0	0	0	0	0	0
Trust property damage	0	0	1	0	0	0
Personal property damaged	0	0	0	0	0	0
Trust property lost/misplaced	0	0	0	0	0	0
Personal property lost/misplaced	0	0	0	0	0	1
Trust property stolen	0	1	0	1	1	0
Personal property stolen	1	1	1	2	3	0
Suicide	0	0	0	0	0	0
Stalker	0	0	0	0	0	0
Suspicious package	0	0	0	0	0	0
Suspicious person	1	0	0	1	1	0
Suspicious vehicle	0	0	0	0	0	0
Theft from car	0	0	0	0	0	0
Theft of car	0	0	0	0	0	0
Trespasser	0	0	0	0	0	0
Violence/aggression	0	0	0	0	0	1
Violence self harm	0	0	0	0	0	0
Verbal abuse	5	5	11	12	9	3
Other (detailed list at bottom of lists)	0	1	0	1	0	0
Total	26	8	34	55	31	103

**Key**

Other include:-

Bomb Threats. Suspicious noises. Fly Tipping, Intoxicated persons, Personal items tampered with. Non aggressive Patients trying to leave

Patients locking themselves in premises. SYP incidents. .

Dogs/children left in car

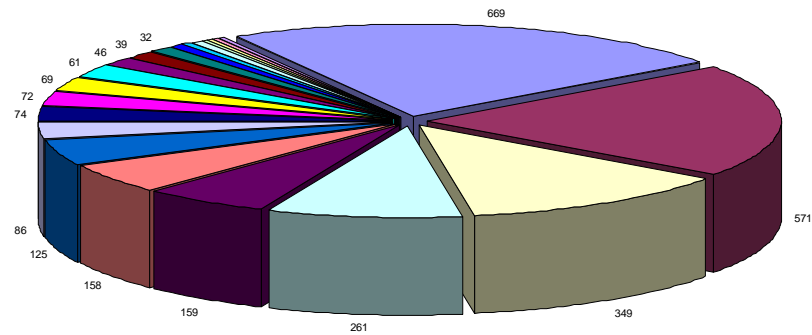
**PRIMARY & COMMUNITY SERVICES CARE GROUP**  
**SECURITY**

<u>Type of Incidents</u>	<u>2007/2008</u>	<u>2008/2009</u>	<u>2009/2010</u>	<u>2010/2011</u>	<u>2011/2012</u>
Alarm activations	<u>1</u>	<u>2</u>	<u>2</u>	<u>5</u>	<u>3</u>
Baby Tagging	<u>Not applicable</u>	<u>Not applicable</u>	<u>Not applicable</u>	<u>Not applicable</u>	<u>Not applicable</u>
Drugs	<u>3</u>	<u>3</u>	<u>1</u>	<u>3</u>	<u>2</u>
Insecure premises	<u>5</u>	<u>13</u>	<u>8</u>	<u>12</u>	<u>17</u>
Missing Patients AWOL	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Missing Con/wandering	<u>0</u>	<u>1</u>	<u>0</u>	<u>0</u>	<u>0</u>
Offensive Weapon	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Assault by another (OPASS)	<u>1</u>	<u>0</u>	<u>0</u>	<u>1</u>	<u>0</u>
Assault by patient (PASS)	<u>5</u>	<u>6</u>	<u>10</u>	<u>10</u>	<u>4</u>
Damage to Trust Property	<u>4</u>	<u>1</u>		<u>5</u>	<u>3</u>
Personal property stolen	<u>6</u>	<u>17</u>	<u>14</u>	<u>8</u>	<u>8</u>
Suicide	<u>2</u>	<u>1</u>	<u>2</u>	<u>2</u>	<u>0</u>
Stalker	<u>1</u>	<u>1</u>	<u>0</u>	<u>1</u>	<u>2</u>
Suspicious package	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Suspicious person	<u>3</u>	<u>5</u>	<u>5</u>	<u>3</u>	<u>3</u>
Suspicious vehicle	<u>0</u>	<u>0</u>	<u>1</u>	<u>0</u>	<u>0</u>
Theft from car	<u>4</u>	<u>4</u>	<u>5</u>	<u>5</u>	<u>0</u>
Theft of car	<u>1</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Trespasser	<u>0</u>	<u>1</u>	<u>2</u>	<u>1</u>	<u>1</u>
Violence/aggression	<u>8</u>	<u>15</u>	<u>12</u>	<u>16</u>	<u>18</u>
Violence self harm		<u>4</u>	<u>4</u>	<u>7</u>	<u>4</u>
Verbal abuse	<u>31</u>	<u>66</u>	<u>57</u>	<u>59</u>	<u>39</u>
Other (detailed list below)	<u>2</u>	<u>5</u>	<u>8</u>	<u>6</u>	<u>6</u>
Total	<u>77</u>	<u>145</u>	<u>131</u>	<u>144</u>	<u>110</u>



Scores = 30 +

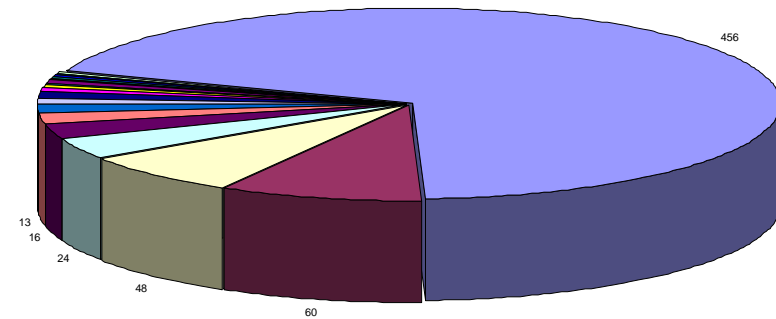
### Security Incidents 2011/12 - NGH



- |  |                               |                                  |                       |
|--|-------------------------------|----------------------------------|-----------------------|
| Missing Patients AWOL                    | Verbal abuse                  | Alarm Activation                 | Trespasser            |
| Other (detailed list at bottom of lists) | Pass assault by patient       | Personal property stolen         | Missing Con/wandering |
| Insecure Premises                        | Insecure Premises             | Personal property lost/misplaced | Suspicious person     |
| Trust property stolen                    | Personal property damaged     | Trust property damage            | Violence self harm    |
| Pass assault by another                  | Trust property lost/misplaced | Theft from car                   | Suspicious vehicle    |
| Drugs                                    | Offensive Weapon              | Suicide                          | Suspicious package    |
| Theft of car                             |                               |                                  |                       |

Scores = 10 +

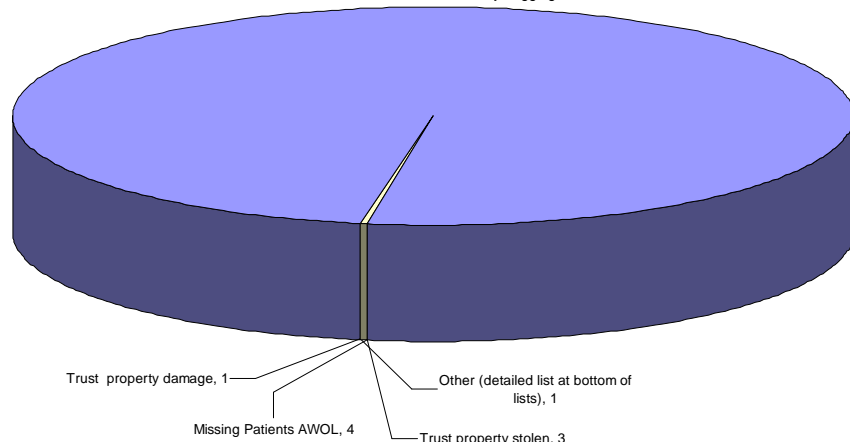
### Security Incidents 2011/12 - RHH



- |  |                         |                           |                               |
|--|-------------------------|---------------------------|-------------------------------|
| Alarm Activation                         | Verbal abuse            | Pass assault by patient   | Violence/aggression           |
| Personal property lost/misplaced         | Missing Patients AWOL   | Personal property stolen  | Missing Con/wandering         |
| Trust property damage                    | Pass assault by another | Trust property stolen     | Violence self harm            |
| Other (detailed list at bottom of lists) | Drugs                   | Personal property damaged | Trust property lost/misplaced |
| Insecure Premises                        | Suspicious package      | Suspicious person         |                               |

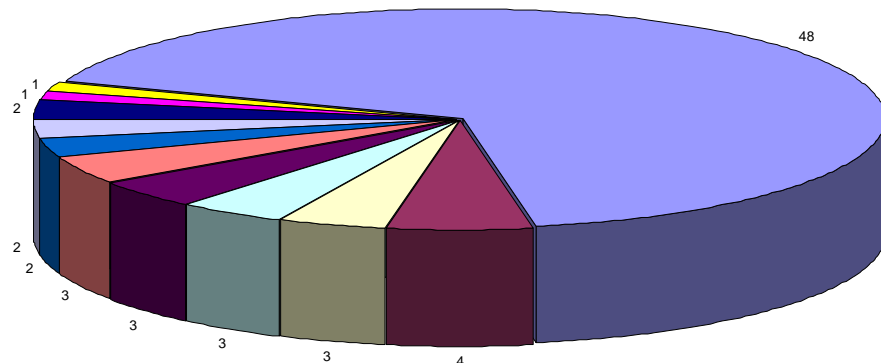
### Security Incidents 2011/12 - JWH

Baby Tagging, 2167



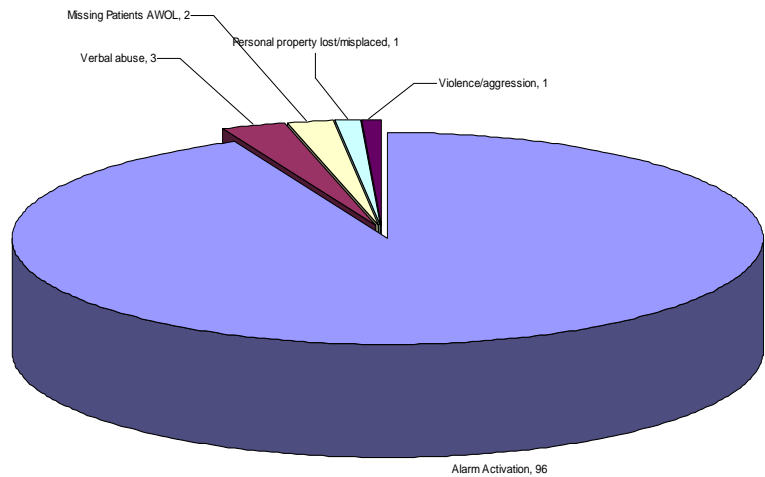
- |              |                       |                       |                       |  |
|--------------|-----------------------|-----------------------|-----------------------|--|
| Baby Tagging | Missing Patients AWOL | Trust property stolen | Trust property damage | Other (detailed list at bottom of lists) |
|--------------|-----------------------|-----------------------|-----------------------|--|

### Security Incidents 2011/12 - WPH



- |  |                   |                               |                                  |
|--|-------------------|-------------------------------|----------------------------------|
| Alarm Activation                         | Drugs             | Pass assault by patient       | Personal property lost/misplaced |
| Personal property stolen                 | Suspicious person | Trust property lost/misplaced | Verbal abuse                     |
| Other (detailed list at bottom of lists) | Insecure Premises | Missing Con/wandering         |                                  |

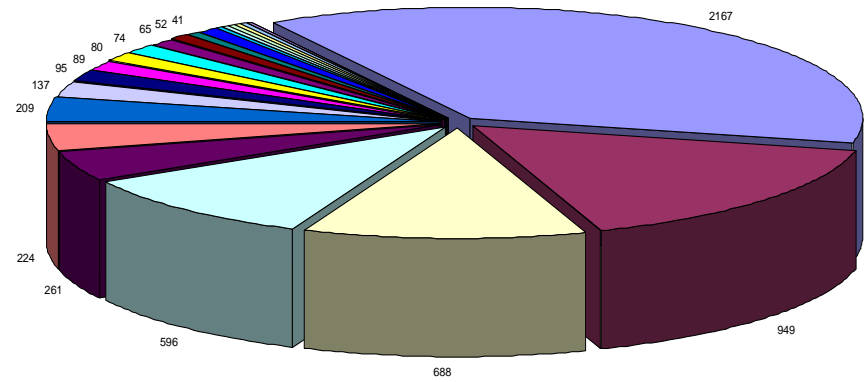
### Security Incidents 2011/12 - CCDH



Alarm Activation Verbal abuse Missing Patients AWOL Personal property lost/misplaced Violence/aggression

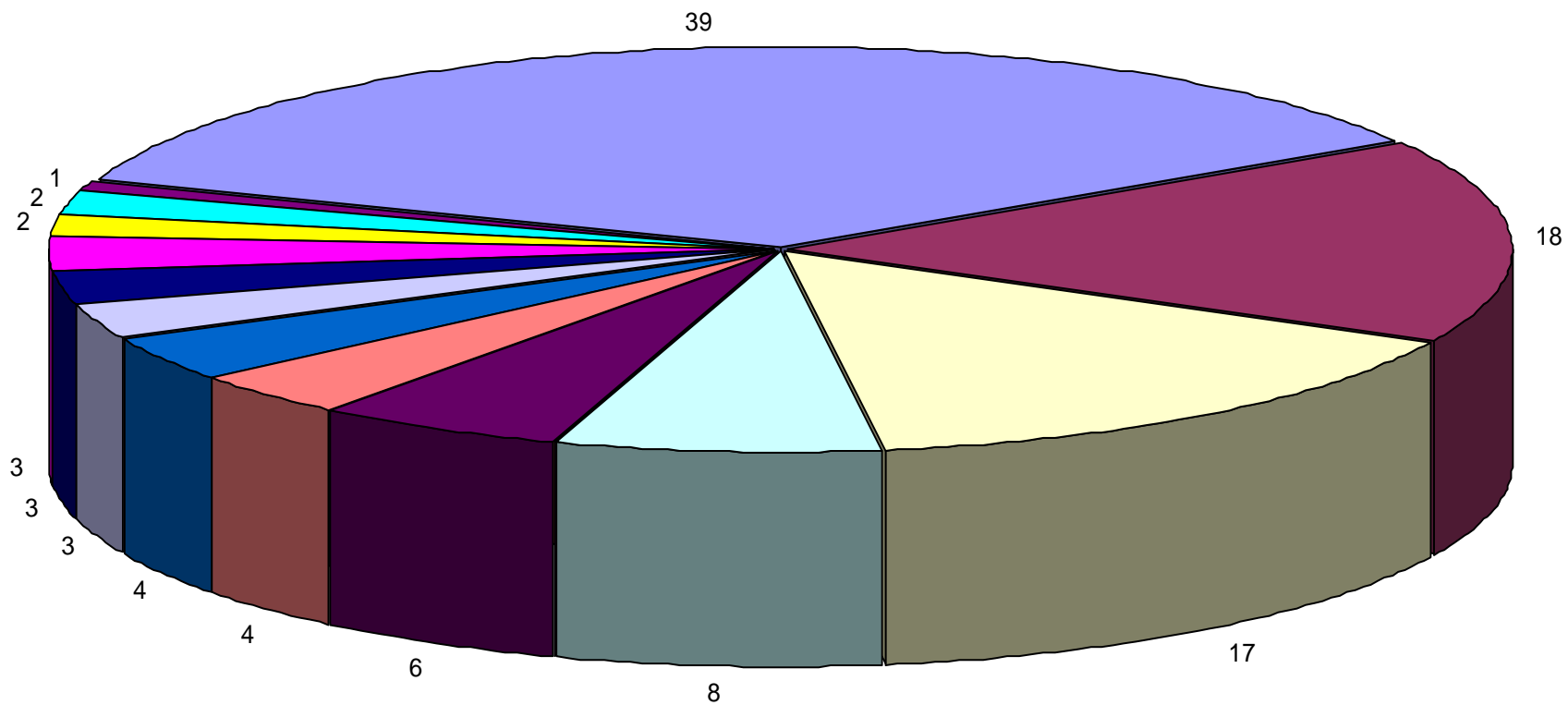
### Security Incidents 2011/12 - STH

Scores = 40 +



- |                         |                                    |  |                            |
|-------------------------|------------------------------------|--|----------------------------|
| ■ Baby Tagging          | ■ Alarm Activation                 | □ Missing Patients AWOL                    | □ Violence/aggression      |
| ■ Trespasser            | ■ Verbal abuse                     | ■ Pass assault by patient                  | □ Personal property stolen |
| ■ Missing Con/wandering | ■ Personal property lost/misplaced | ■ Other (detailed list at bottom of lists) | ■ Insecure Premises        |
| ■ Suspicious person     | ■ Trust property stolen            | ■ Personal property damaged                | ■ Trust property damage    |
| ■ Violence self harm    | □ Pass assault by another          | □ Trust property lost/misplaced            | ■ Drugs                    |
| ■ Theft from car        | ■ Suspicious vehicle               | ■ Offensive Weapon                         | ■ Suicide                  |
| ■ Suspicious package    | ■ Theft of car                     |  |                            |

## Security Incidents 2011/12 - Primary Community Care Group Services



- |  |                         |                    |                          |
|--|-------------------------|--------------------|--------------------------|
| Verbal abuse                             | Violence/aggression     | Insecure Premises  | Personal property stolen |
| Other (detailed list at bottom of lists) | Pass assault by patient | Violence self harm | Alarm Activation         |
| Trust property damage                    | Suspicious person       | Drugs              | Stalker                  |
| Trespasser                               |                         |                    |                          |