

# STANDARD OPERATING PROCEDURE FORENSIC – STAFF SECURITY INDUCTION AND UPDATE

# SOP currently under review – please continue to use this version until it is replaced by the next approved version

| Document Reference                  | SOP20-026                                      |
|-------------------------------------|--|
| Version Number                      | 1.1  |
| Author/Lead                         | Thomas Greenwood – Health, Safety and Security |
| Job Title                           | Lead   |
|                                     |  |
| Instigated by:                      | Security Committee                             |
| Date Instigated:                    |  |
| Date Last Reviewed:                 | June 2022                                      |
| Date of Next Review:                | June 2024                                      |
| Consultation:                       | Ward Managers, Heads of Department             |
| Ratified and Quality Checked by:    | Security Committee Meeting                     |
| Date Ratified:                      | 4 June 2022                                    |
| Name of Trust                       |  |
| Strategy/Policy/Guidelines this SOP |  |
| refers to:                          |  |

#### VALIDITY - All local SOPS should be accessed via the Trust intranet

# **CHANGE RECORD**

| Version | Date              | Change details   |
|---------|-------------------|--|
|         | September<br>2020 | New SOP format   |
| 1.1     | June 2022         | Change of name to forensic division. Mention of guidance notes to identify induction content matched to role. Update to reference doc Approved 4 June 2022 Forensic Security Committee |
|         |                   |  |
|         |                   |  |
|         |                   |  |
|         |                   |  |

# **CONTENTS**

| 1. | INTRODUCTION                             | 3 |
|----|--|---|
| 2. | SCOPE                                    | 3 |
| 3. | PROCEDURE STATEMENT                      | 3 |
| 4. | DUTIES AND RESPONSIBILITIES              | 3 |
| 5. | PROCEDURES                               | 3 |
| 6  | REFERENCES/EVIDENCE/GLOSSARY/DEFINITIONS | 4 |

#### 1. INTRODUCTION

Forensic settings are complex clinical environments, and can place unique demands on staff. In order to ensure that staff are adequately prepared to commence work in a secure setting, it is vital that they receive an induction that addresses the three core components of effective clinical security, namely:

- Physical;
- Procedural and
- · Relational Security.

This procedure is intended to ensure that such an induction is delivered to all staff who work in any of the service's low or medium secure environments.

# 2. SCOPE

This procedure applies to all staff who are to be issued with security equipment in order to fulfil their role/function within any of the low or medium secure environments of the forensic division

# 3. PROCEDURE STATEMENT

The service security induction augments any other inductions that are provided to Trust employees, including the corporate and workplace inductions described in the Trust Induction Policy.

This procedure is intended to support staff in ensuring that they receive a robust and meaningful induction into the complexities and subtleties of working in a secure setting.

This procedure does not constitute restrictive practice/intervention.

#### 4. DUTIES AND RESPONSIBILITIES

The Security Committee will devise and review all induction/update packages.

The Security Lead will maintain a record of all inducted staff as to compliance with induction and update requirements and update heads of department accordingly.

Heads of Department will ensure that staff within their team/department are aware of any non-compliance with induction and update requirements, and that staff act to remedy any training requirements as soon as possible.

All inducted staff will attend an annual security update in accordance with national standards.

#### 5. PROCEDURES

#### 5.1. Induction and Annual Update Package

- The Security Committee will, in consultation with others within the service, devise and maintain an agreed initial induction package and annual update.
- This will be devised in accordance with the national standards set by the Department of Health, NHS England and Quality Network for Forensic Psychiatry.
- Day 1 of the package will include the use of security equipment (i.e. keys and personal alarms). This will always be delivered by one of the following:

- Security Lead or senior technical security officer
- Advanced Nurse Practitioner
- Matron/Service Manager
- Band 7 Ward Manager or Band 6 Nurse
- Band 7 or above Psychologist or AHP
- The security induction is tailored to meet role requirements. Details Guidance Notes
- Staff working across more than one ward area or who move wards) will require a
  local familiarisation induction in line with Trust requirements. Within the service this
  will include the Ward Security Profile, and any notable differences in practice from
  those delivered on other wards.
- The induction package will include the supply of supporting literature (or links thereto), to include those publications referenced in section 6 of this procedure.

#### 5.2. Inductee

- At the earliest opportunity the inductee will be nominated an inductor, who will be responsible for completing the Security Induction.
- Until the induction is complete, the inductee will not work without direct supervision
  of an inducted member of staff delegation of this supervising role will be the
  responsibility of the inductor.

#### 5.3. Inductor

- All staff of band 6 and above, who have worked in the service for over a year can take on the role of inductor.
- The inductor can delegate aspects of the induction to other staff, subject to the inductor being satisfied as to the delegate's competence this can include touring the unit, introduction to reception, etc.

# 5.4. Annual Update

- It is a requirement that all staff will attend an annual security update, to include elements of physical, procedural and relational security.
- The security lead will maintain a record of this training (in addition to that held on the Electronic Staff Record) and will update heads of department as to compliance of their staff with this requirement.
- Failure to update carries a degree of risk. Heads of department will, therefore, consider this in their decision to support the ongoing issue of security equipment to staff who are not up to date. The removal of access to security equipment will have a significant impact on the fulfilment of their duties.
- Annual updates will be delivered as part of a planned programme or at team/departmental meetings and events.
- Any staff delivering an update must, themselves, have been updated using the same package/format.

#### 6. REFERENCES/EVIDENCE/GLOSSARY/DEFINITIONS

- Best Practice Guidance Specification for Adult Medium Secure Services (DoH, 2007)
- Environmental Design Guide Medium Secure Services (DoH, 2011)
- See, think, act your guide to relational security, 2nd Edition (RCP, 2015)
- Standards for Medium and Low Secure Services 4<sup>th</sup> Edition (RCP, 2021)