

# Trauma and its impact upon risk management

It needs more than hopeful clinicians to move from survive to thrive  
and enable change

# A case example of trauma, system impact and patient care

- In 2000 I got my dream job as a psychologist in NHS (safety & hope)
- By 2002 I reduced my hours to part time due to bullying in the MDT (fear & shame)
- 2004 I left the NHS to go to the independent sector (survival & shame)
- 2006 became clinical director and set up one of the first Psychologically led trauma focussed secure services in the UK (hope, drive & thrive)
- 2008 a service user died under my care (Fear, shame & guilt)
- 2008-2010 I worked in a traumatised team, (fear & survive - leading to thrive)



It is always with the best intentions  
that the worst work is done.

— *Oscar Wilde* —

AZ QUOTES

# What happened next ?

- CQC inspection ‘we want see how you manage a crisis’
  - (the day after, was this TiC?)
- Internal review (what tools did we use to predict this, what safeguards do we need to add now to prevent it?)
- Coroners court (you **failed** to keep this person safe, what **Validated tool** did you use to assess risk)
- Team was traumatised, but also grieving
  - in a state of threat, became risk averse, a shift from being positive risk takers (it was our fault)

# Trauma in the workforce

- Often dysregulated
- Sense of guilt and shame
- Hypervigilant to threat / danger
- Overly cautious
- Increased restrictions
- Fear of reprisal
- Anxiety about coroners
- Resignations
- Increased sickness levels

# Risk assessment

'its not right but I understand why it's tricky to change'



# What were we taught / asked to do as clinicians and providers in the 2000's

- Risk assessment, should use validated tools (*gold standard*)
- Work in an evidence based framework (see above)
- Most risk tools in the 2000s were ratings based but had formulation element (which was the good practice part!)
- 2014 HCR-20 FAM added H14 suicide and self harm rating scale
- NHSE KPI contract 2000s HCR-20 **must** be completed
- Use one type of scale that was consistent to aid discharges
- **You** are responsible for this persons safety

# 2009 best practice guidance



## Best Practice in Managing Risk

*Principles and Evidence for Best Practice in the Assessment and Management of Risk to Self and Others in Mental Health Services*

# Recommended tools for practitioners in 2009

	Page	Violence	Sexual violence	Antisocial and offending behaviour	Self-harm/suicide	Self-neglect/vulnerability
<b>Multiple risks</b>						
CRMT	35	•			•	•
FACE	36	•			•	•
GRiST	39	•	•	•	•	•
RAMAS	37	•	•	•	•	•
GIRAFFE	38	•	•	•	•	•
START	40	•			•	•
<b>Risk of violence, sexual violence, antisocial or offending behaviour</b>						
HCR-20	42	•				
PCL-R	43			•		
PCL:SV	44			•		
STATIC-99	45		•			
SVR-20	46		•			
VRAG	47	•				
<b>Risk of self-harm or suicide</b>						
ASIST	49				•	
BHS	50				•	
SADPERSONS	51				•	
SIS	52				•	
SSI	53				•	
STORM	54				•	



# STAR WARS

A NEW HOPE

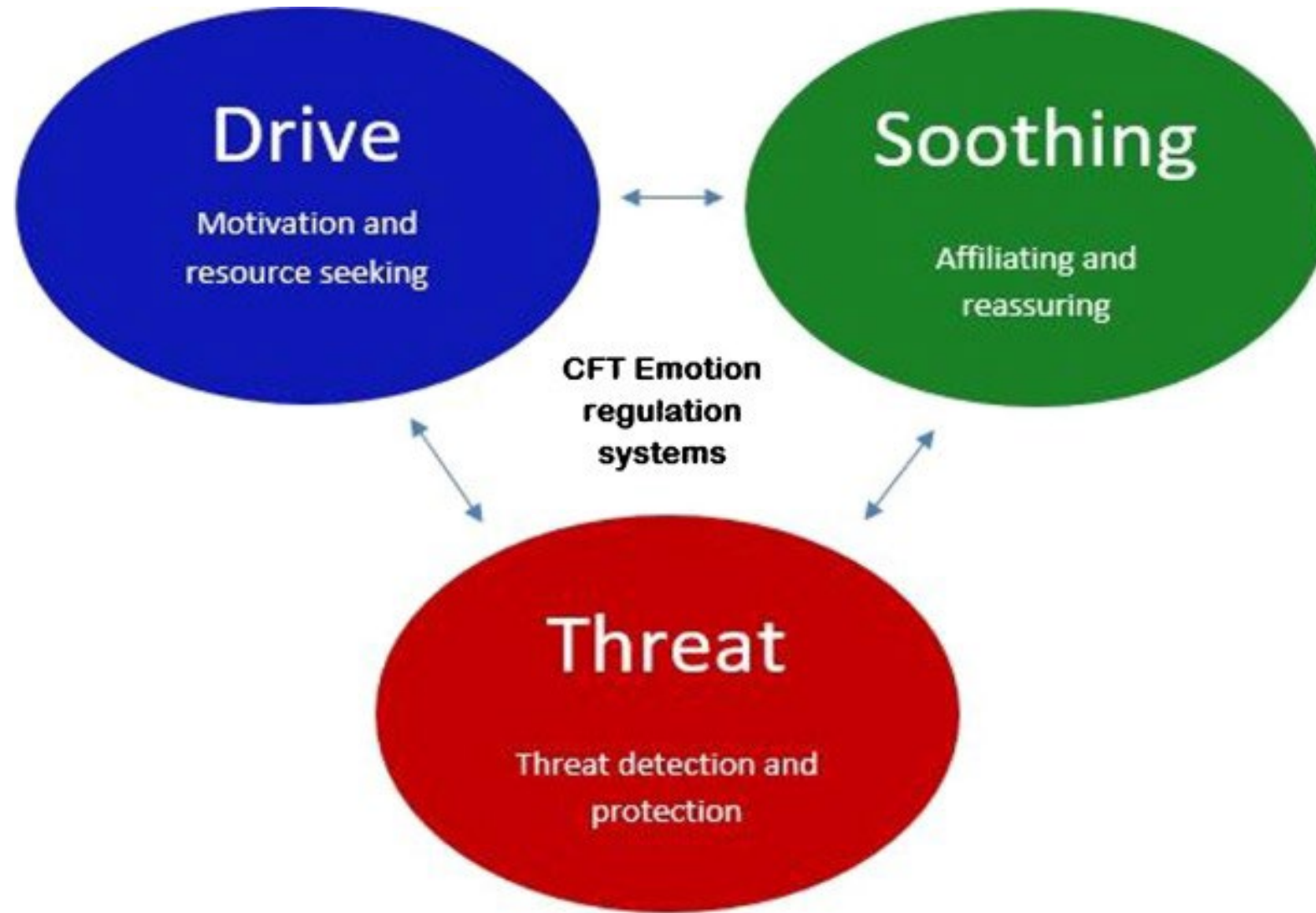
# We are working with legacy and history in healthcare, but I still believe there is hope

- Recognise and support trauma in the workforce
- Embrace 'Just' cultures (look for the blame statements / language)
- Integrate TiC across all areas not just health
- Fund TiC as a dedicated area
- Share our learning and experiences (PSIRF) don't shame
- Being a clinician can be scary
- Be compassionate
  - sensitivity to suffering and self and others with a commitment to try to relieve and prevent it (Gilbert)

# This goes beyond mental healthcare services

- *"It's no secret that there is an ongoing crisis in retention of staff in the NHS. A large contributor to this, which I feel is frequently overlooked, is the role of trauma - causing burnout, moral injury, exhaustion and ultimately pushing staff away from jobs they love. A change in culture around trauma is crucial, not just for the huge number of individuals affected, but for the health service in general"*
  - *Adam Kay*

Let's acknowledge where we are, as a person,  
as an organisation, as a society



Thanks for listening to my rant / musings /  
experience / story

