

# VIOLENCE AND AGGRESSION POLICY

## Introduction

The purpose of this policy is to address instances of unacceptable behaviour which may cause harm or the fear of harm to any person within the Practice. The scope of this policy is therefore:

Instances of violence or aggression committed by any person, whether patient, visitor or any other person working within the practice against any patient, visitor, or other person working within the practice.

## Definition

Violence and aggression are defined as:

- Violence is the use of force against a person and has the same definition as “assault” in law (i.e. an attempt, offer or application of force against the person). This would cover any person unlawfully touching any other person forcefully, spitting at another person, raising fists or feet or verbally threatening to strike or otherwise apply force to any person.
- Aggression is regarded as threatening or abusive language or gestures, sexual gestures or behaviour, derogatory sexual or racial remarks, shouting at any person or applying force to any practice property or the personal property of any person on the practice. This would cover people banging on desks or counters or shouting loudly in an intimidating manner.

This policy applies throughout the premises, including any car park and grounds. It also applies to any employee or partner away from the practice but only in so far as it relates to the business of the practice.

## Responsibilities

### Employee Responsibilities

- Employees have the responsibility to ensure their own safety and that of their colleagues at work. It is essential, therefore, that all employees are familiar with practice policies and procedures, equipment and precautions adopted to combat the risk of physical and verbal abuse.
- Familiarise themselves with practices policies and procedures, guidelines and instructions.
- Use any equipment or devices provided for ‘at risk’ situations i.e. alarms.
- Participate in relevant training made available by the practice.
- Report all incidents of physical and verbal abuse (threatened or actual).
- Record details of incidents in compliance with practice procedures.
- Contribute towards reviews by nominated managers concerning any incidents in which they have been involved.
- Suggest precautionary measures involving changes in the layout of the work environment that can reduce risk.
- Make use of any available staff support and counselling through the practice.
- Advise the practice manager/line manager of any perceived risks involved in work activities.

### Practice Responsibilities

- Carry out risk assessments to assess and review the duties of employees, identifying any ‘at risk’ situations and taking appropriate steps to reduce or remove the risk to employees.
- Assess and review the layout of premises to reduce the risk to employees.

- Assess and review the provision of personal safety equipment i.e. alarms.
- Develop practice policies, procedures and guidelines for dealing with physical and verbal abuse.
- Provide support and counselling for victims, or refer to suitably qualified health professionals.
- Make employees aware of risks and ensure employee involvement in suitable training courses.
- Record any incidents and take any remedial action to ensure similar incidents are prevented.
- Ensure that employee's personal data, including information about their health, collected when preventing and dealing with violence at work (for example during risk assessments and incident investigations) is handled in accordance with the practice's Data Protection Policy.

## **What to Do**

If violence and aggression is encountered:

- In the first instance a member of the staff should ask the perpetrator to stop behaving in an unacceptable way. Sometimes a calm and quiet approach will be all that is required. Staff should not in any circumstances respond in a like manner.
- Should the person not stop their behaviour the [Practice manager] should be asked to attend and the member of staff should explain calmly what has taken place, preferably within hearing of the perpetrator.
- If the person is acting in an unlawful manner, causes damage or actually strikes another then the police should be called immediately.
- Should it prove necessary to remove the person from the practice then the police should be called and staff should not, except in the most extreme occasions, attempt to manhandle the person from the premises.
- If such a course of action proves necessary then those members of staff involved must complete a written note of the incident, detailing in chronological order what has taken place and the exact words used prior to leaving the building at the end of their working day.
- It is the policy to press for charges against any person who damages or steals practice property or assaults any member of staff or visitor/patient

## **Procedure Following an Accident**

- Review the incident with the practice partners immediately in order to determine severity
- Determine if the patient should be removed from the practice list forthwith
- Decide if a written warning should be given
- Decide whether to take further action if the matter has been sufficiently dealt with by the advice already given

Any employee or patient/visitor who receives any injury, no matter how small, should be the subject of an entry in the practice Accident Book and should always be strongly advised to be examined by a doctor before they leave the premises

Every violent incident involving staff will be reasonably supported by the provision of medical or other treatment as necessary and all incidents should be brought to the attention of the Practice Manager, if not already involved. If an injury has occurred this may be notifiable to the HSE.

The practice re-affirms its commitment to do everything possible to protect staff, patients and visitors from unacceptable behaviour and their zero tolerance of any incident that causes hurt, alarm damage or distress.

## **Marking Patients' Records**

In the event of an act of violence or aggression taking place, it is possible to mark the patient's record to warn other staff of the potential threat of violence.

If paper records are used, this may involve placing physical markers inside the record in a discrete manner, for example using a coloured sticker or symbol to indicate physical assault and a different colour or symbol to indicate non-physical assault.

Where an electronic records system is used, a marker can be used to alert staff when they securely access the patient's record. If both paper records and electronic records systems are used, tagging of paper-based records should be used in addition to the electronic marker to ensure consistency.

When visible markers are used to mark paper records, their meaning should be clear, unambiguous and well-known to staff, while also being discreet and not recognisable to patients themselves.

## **LGBTQ+**

Under no circumstances does the practice accept or tolerate phobia, homophobia, biphobia and transphobia against members of the LGBTQ+ community.

Any patient found guilty of the above will be removed from the practice and struck off as a patient. In addition, the matter will be reported to the Police.

## **Support for Employees Subjected to Abuse**

The practice takes a serious view of any incidents of physical and verbal abuse against its employees and will support them if assaulted, threatened or harassed.

The first concern of managers after an incident is to provide appropriate debriefing and counselling for affected employees. Depending on the severity of the incident this counselling may be undertaken by trained professionals.

The practice manager/line manager will assist victims of violence with the completion of the formal record of the incident and where appropriate will report the incident to the police.

In the event of serious physical and verbal abuse patients will be removed from the practice list.

## **Resources**

[pathways.nice.org.uk/pathways/violence-and-aggression](https://pathways.nice.org.uk/pathways/violence-and-aggression)

## **APPENDIX 1 –**

OUR PRACTICE STAFF ARE HERE TO HELP YOU.  
OUR AIM IS TO BE AS POLITE AND HELPFUL AS POSSIBLE TO ALL PATIENTS.

IF YOU CONSIDER THAT YOU HAVE BEEN TREATED UNFAIRLY OR INAPPROPRIATELY, PLEASE ASK THE RECEPTION STAFF TO CONTACT THE PRACTICE MANAGER, WHO WILL BE HAPPY TO ADDRESS YOUR CONCERNS.

HOWEVER, SHOUTING AND SWEARING AT PRACTICE STAFF WILL NOT BE TOLERATED UNDER ANY CIRCUMSTANCES AND PATIENTS WHO ARE ABUSIVE MAY BE REMOVED FROM THE PATIENT LIST.

PLEASE HELP US TO HELP YOU.  
THANK YOU.

## **APPENDIX 2 – Action in the event of Panic Button activation.**

Refer to the Emergency Incident Procedure <sup>[\*]</sup>

**APPENDIX 3 - Do's and Don'ts when facing angry patients**

<b>Do</b>	<b>Don't</b>
Recognise your own feelings	Meet anger with anger
Use calming body language	Raise your voice, point or stare
Put yourself in their shoes	Appear to lecture them
Be prepared to apologise if necessary	Threaten any intervention unless you are prepared to act on it
Assert yourself appropriately	Make them feel trapped or cornered
Allow people to get things off their chest	Feel that you have to win the argument

## APPENDIX 4

### Draft Warning Letter to Patient re: Abusive Behaviour

Dear *[Insert Name]*,

I am *[insert name]*, the *[insert title]* for *[insert practice name]*. As part of this role, I am responsible for protecting staff at the practice from *[abusive / violent / unacceptable]* behaviour.

I am writing to discuss the report/s I received about *[the event / behaviour / incident]*, which took place on *[insert date]*. As you are already aware *[insert details of actions already taken]*.

A repeat of such behaviour on your part in the future will not be tolerated by the practice. Please treat this letter as a formal warning that any such behaviour in the future will not be tolerated.

Any repetition of abusive/aggressive behaviour *[may/will]* result in you being removed from this practice's patient list and you will be required to register elsewhere.

Yours sincerely,

*[Insert title]*