

Central Surgery

Patient Behaviour Policy

Central Surgery – Unacceptable Behaviour Policy

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B. Document Details

Classification:	
Author and Role:	Bev Snell CEO
Organisation:	Central Surgery
Document Reference:	Unacceptable Behaviour Policy
Current Version Number:	1.0
Current Document Approved By:	Clinical Director – Dr Nassif Mansour
Date Approved:	16.04.25
Review Date:	16.04.27

C. Document Revision and Approval History

Version	Date	Version Created By:	Version Approved By:	Comments
			-	

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1. Introduction

At Central Surgery, we believe that patients have a right to be heard, understood, and respected. We work hard to be open and accessible to everyone.

As an employer, the practice also has a duty to care for the health and safety of its staff and a legal responsibility to provide a safe and secure working environment for staff.

As an employer, the practice also has a duty to care for the health and safety of its staff and a legal responsibility to provide a safe and secure working environment for staff.

All patients are expected to behave in an acceptable manner which overall most patients do. However unfortunately we have experienced situations where a patient may engage in unacceptable, unreasonable and or abusive behaviour towards staff or other patients.

When this happens, within our responsibilities as employers, we must consider the impact of this behaviour on our ability to work and provide a service to other patients.

In certain situations, unacceptable behaviour may result in removal from our practice list or even criminal proceedings.

We understand that people may act out of character in times of trouble or distress however, we do not expect that these actions will become unacceptable.

Unacceptable behaviours include abusive behaviour, unreasonable demands, and violent behaviour, all of which are outlined in more details in the sections below.

This policy aims to set out what behaviours/actions the practice deems as unacceptable and how we deal with them.

2. Unacceptable Behaviours

Aggressive, abusive, or violent behaviour

We understand that patients may be angry about the issues they have raised with the Practice. If that anger escalates into aggression towards Practice staff, we consider that unacceptable.

Any violence or abuse towards staff will not be accepted.

Violence is not restricted to acts of aggression that may result in physical harm. It also includes behaviour or language (whether verbal or written) that may cause staff to feel offended, afraid, threatened or abused. We will judge each situation individually and appreciate individuals who come to us may be upset.

Language, which is designed to insult or degrade, is derogatory, racist, sexist, transphobic, or homophobic or which makes serious allegations that individuals have committed criminal,

corrupt, perverse, or unprofessional conduct of any kind, without any evidence, is unacceptable.

We may decide that comments aimed not at us, but at third parties, are unacceptable because of the effect that listening or reading them may have on our staff.

The following list is not exhaustive but is provided to explain the actions and behaviours that the practice considers to be unacceptable:

- Violence (towards members of staff and/or other patients)
- Excessive noise e.g., recurrent loud or intrusive conversation or shouting
- Threatening or abusive language involving swearing or offensive remarks
- Derogatory remarks regarding protected characteristics (e.g., racist, sexist, or homophobic behaviour)
- Making inflammatory statements e.g. "You are incompetent and should be sacked"
- Derogatory, abusive, or insulting comments made about staff online or in the media
- Harassing, abusing, or threatening staff on their personal social networks
- Malicious allegations relating to members of staff, other patients, or visitors
- Offensive sexual gestures or behaviours
- Abusing alcohol or drugs on practice premises
- Drug dealing on practice premises
- Wilful damage to practice property or threats to damage practice property
- Threats, threatening behaviour or intimidation
- Theft
- Abuse of practice processes/policy

Unreasonable demands

A demand becomes unacceptable when it starts to (or when complying with the demand would) impact substantially on the work of the Practice.

Examples of actions grouped under this heading include:

- Repeatedly demanding responses within an unreasonable timescale
- Repeatedly requesting early supplies of medication
- Repeatedly requesting further supplies of stolen medication, without the required Police Incident number
- Repeatedly ordering prescriptions outside the set timeframe (72 hours for Central Surgery)
- Insisting on seeing or speaking to a particular member of staff when that is not possible
- Repeatedly changing the substance of an issue or complaint or raising unrelated concerns
- Repeatedly insisting on a course of medical treatment for which there is no clinical evidence
- Not ensuring that a review appointment is in place, prior to ongoing medication finishing
- An example of such impact would be that the demand takes up an excessive amount of staff time and in so doing disadvantages other patients

Unreasonable levels of contact

Sometimes the volume and duration of contact made to our Practice by an individual causes problems.

This can occur over a short period, for example, excessive number of calls in one day or one hour.

- Repeated appointments for an ongoing issue that is being dealt with, within a very short timeframe.
- It may occur over the life-span of an issue when a patient repeatedly makes long telephone calls to us, or inundates us with letters or copies of information that have been sent already or that are irrelevant to the issue.
- We consider that the level of contact has become unacceptable when the amount of time spent talking to a patient on the telephone, consulting with the patient on the issue or responding to, reviewing and filing emails or written correspondence impacts on our ability to deal with that issue, or with other Patients' needs.

Unreasonable refusal to co-operate

When we are looking at an issue or complaint, we will ask the patient to work with us. This can include agreeing with us the issues or complaint we will look at; providing us with further information, evidence, or comments on request; or helping us by summarising their concerns or completing a form for us.

Sometimes, a patient repeatedly refuses to cooperate, and this makes it difficult for us to proceed.

We will always seek to assist someone if they have a specific, genuine difficulty complying with a request. However, we consider it is unreasonable to bring an issue to us and then not respond to reasonable requests.

We work closely with our patients to ensure they get the best health outcomes. In situations where a patient refuses to co-operate with efforts to ensure their clinical safety e.g. monitoring of vital signs such as blood pressure or doing blood tests, taking into consideration all their prevailing circumstances we may ask such patients to register with another practice, if they repeatedly refuse to cooperate with us on monitoring their health.

Unreasonable use of the complaints process

Individuals with complaints about the Practice have the right to pursue their concerns through a range of means. They also have the right to complain more than once about the Practice, if subsequent incidents occur.

- This contact becomes unreasonable when the effect of the repeated complaints is to harass, or to prevent us from pursuing a legitimate aim or implementing a legitimate decision.
- We consider access to a complaints system to be important and it will only be in exceptional circumstances that we would consider such repeated use is unacceptable – but we reserve the right to do so in such cases.

3. How the practice deals with aggressive/abusive/violent behaviour

There are two processes in place for dealing with unacceptable or abusive behaviour.

These are the

- Unacceptable behaviour process and
- Removing violent patient process

The unacceptable behaviour process will be followed if the practice feels a patient's behaviour is unacceptable but does not warrant immediate removal from the practice register. The removing violent patient process will be followed if a patient is violent or exhibiting behaviour that makes staff or other patients fear for their safety. This will result in the police being contacted and immediate removal of the patient from the practice register.

4. Unacceptable behaviour process

This process will be followed when the actions/behaviour of a patient are unacceptable but do not warrant immediate removal from the practice list. The process consists of an internal review to investigate the circumstances of the behaviour/actions to decide on further action

The process

A member of staff identifies unacceptable incident from a patient and reports this to the management team.

The incident is reviewed by the executive leadership team within 5 working days.

The incident review agrees that the behaviour did not meet the threshold for further action. The reasons for this decision will be explained to the member of staff who raised the concerns. No action to be taken against patient. The reasons for the decision will be explained to the member of staff who raised the concerns.

The incident review agrees that the behaviour was unacceptable.

If the behaviour was unacceptable

1. Patient's first offence within the last 12 months

Patient is sent a warning letter, explaining the reasons.

Further repeat instances of unacceptable behaviour within 12 months of the first letter will result in removal from the practice register. Appendix. 1 Patient Behaviour Incident – Formal Warning

2. Patient's second offence within the last 12 months

Patient is sent a second letter explaining the reasons and that they are being removed from the practice list. Appendix. 2 Patient Behaviour Incident – Removal from Practice List

- The Practice will send a written notice to the PCSE giving the patient's name, address, date of birth and NHS number, requesting removal of the patient.
- The removal will take effect on the eighth day after the request is received.

Removal of Violent Patients including verbally abusive patients

This process will be followed if a patient commits an act of violence or behaves in such a way that makes staff or other patients fear for their safety.

Such behaviours include, but are not limited to:

- Assault
- Threatening behaviour
- Behaviour resulting in damage to property
- Verbal aggression including use of swear words/derogatory language
- Racially motivated abuse

All such instances will be reported into the police.

This process has been designed to adhere to the requirements of removing patients under the NHS Special Allocation Scheme.

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

The process

Should a patient commit an act of violence or behave in such a way that makes staff or other patients fear for their safety is as outlined below

- Where possible, such actions should be reported to the duty doctor, management team or other supervisor. This individual will contact the police to report the incident and if necessary, request police attendance.
- If one of the above individuals is unavailable or reporting to them will delay contacting police and/or may result in harm coming to any individual present the police should be contact immediately.

As soon as possible after the incident notify PCSE about the incident and provide them with the patient details for the removal. The removal takes effect at the time at which the practice contacts PCSE. The practice will write a letter to the patient with an explanation for immediate removal from the practice list. Appendix. 3 Patient Behaviour Incident – Immediate Removal from Practice List Due to Serious Incident

5. Notifying patients of our decision (to issue a warning letter or remove a patient from the list)

- When a Practice employee makes an immediate decision in response to offensive, aggressive, or abusive behaviour, the patient is advised at the time of the incident.

- When a decision has been made by Senior Management team a patient will always be given the reason in writing as to why a decision has been made to issue a warning (including the duration and terms of the warning) or remove them from the Practice list.
- This ensures that the patient has a record of the decision

How we record and review a decision to issue a warning

- We record all incidents of unacceptable actions by patients.
- Where it is decided to issue a warning to a patient, an entry noting this is made in the relevant file and on appropriate computer records.
- Each quarter a report on all restrictions will be presented to our Senior Management Team so that they can ensure the policy is being applied appropriately.
- A decision to issue a warning to a patient as described above may be reconsidered either on request or on review.

Management of aggressive/abusive telephone calls/correspondence

- Practice staff will end telephone calls if they consider the caller aggressive, abusive, or offensive.
- Practice staff have the right to make this decision, to tell the caller that their behaviour is unacceptable and end the call if the behaviour persists.
- We will not respond to correspondence (in any format) that contains statements that are abusive to staff or contain allegations that lack substantive evidence. Where we can, we will return the correspondence. We will explain why and say that we consider the language used to be offensive, unnecessary, and unhelpful and ask the sender to stop using such language.
- We will state that we will not respond to their correspondence if the action or behaviour continues and may consider issuing a warning to the Patient

How the Practice deals with unreasonable demand

We have to take action when unreasonable behaviour impairs the functioning of our Practice.

We aim to do this in a way that allows a Patient to progress through our process.

We will try to ensure that any action we take is the minimum required to solve the problem, considering relevant personal circumstances including the seriousness of the issue(s) or complaint and the needs of the individual.

Where a patient repeatedly phones, visits the Practice, raises repeated issues, or sends large numbers of documents where their relevance isn't clear, we may decide to:

- Limit contact to telephone calls from the patient at set times on set days, about the issues raised
- Restrict contact to a nominated member of the Practice staff who will deal with future calls or correspondence from the patient about their issues
- See the patient by appointment only
- Take any other action that we consider appropriate
- Where we consider continued correspondence on a wide range of issues to be excessive, we may tell the patient that only a certain number of issues will be considered in a given period and ask them to limit or focus their requests accordingly.
- In exceptional cases, we reserve the right to refuse to consider an issue, or future issues or complaints from an individual.

- We will take into account the impact on the individual and also whether there would be a broader public interest in considering the issue or complaint further.
- We will always tell the patient what action we are taking and why

Appendix. 1 Patient Behaviour Incident – Formal Warning

[Practice Name]
[Practice Address]
[Date]

PRIVATE & CONFIDENTIAL

Dear [Patient's Name],

Re: Patient Behaviour Incident – Formal Warning

I am writing to you regarding an incident that occurred at the practice on [Insert Date].

While we understand that you may have been feeling upset or frustrated at the time, the behaviour you displayed was considered unacceptable and falls outside the standards we expect from all patients.

[Insert a clear and factual description of the incident, including what occurred and why it is considered unacceptable.]

Please be advised that the practice has a zero-tolerance policy regarding abusive, aggressive, or otherwise inappropriate behaviour towards staff or other patients. We are committed to providing a safe and respectful environment for everyone.

This letter serves as a formal warning. Should there be any further incidents of unacceptable behaviour within the next 12 months, we will initiate the process of removing you from our practice list. You would then be required to register with an alternative GP practice.

We hope this letter will serve as a reminder of the importance of mutual respect and cooperation. If you would like to discuss this matter further, or, if you disagree with the account of the incident or believe there were extenuating circumstances, you have the right to appeal this decision. You may do so by writing to Dr Nassif Mansour, Clinical Director, or Beverly Snell, CEO at the following email address swlicb.csmanagers@nhs.net or, requesting a meeting with the practice immediately.

Yours sincerely,

Your Name
Your Title
Practice Name

Appendix. 2 Patient Behaviour Incident – Removal from Practice List (8 days' notice)

[Practice Name]
[Practice Address]
[Date]

PRIVATE & CONFIDENTIAL

Dear [Patient's Name],

Re: Removal from Practice List

I am writing to you following an incident that occurred at the practice on [Insert Date].

While we recognise that you may have been upset or distressed at the time, the behaviour you displayed on this occasion was unacceptable and in breach of the standards of conduct we expect from all patients.

[Insert a clear and objective description of the behaviour and why it was considered inappropriate or unacceptable.]

As noted in our previous correspondence dated [Insert Previous Letter Date], you were formally warned that any further incidents of this nature within 12 months would result in removal from our patient list. The practice has carefully considered this matter and has concluded that there has been an irrevocable breakdown in the relationship. Therefore, due to this second incident, we have now taken the decision to request your removal from our practice list. If you disagree with the account of the incident or believe there were extenuating circumstances, you have the right to appeal this decision. You may do so by writing to Dr Nassif Mansour, Clinical Director, or Beverly Snell, CEO at the following email address swlicb.csmanagers@nhs.net or, requesting a meeting with the practice immediately.

I have contacted Primary Care Support England to request your removal from the practice list, and they will be in touch with you shortly.

You must now register with a new practice. Please note that the practice is obliged to provide you with care up to and including DATE, which is eight days following the incident. After this date, you will need to seek care from a new practice.

Details of local practices can be found at <https://www.nhs.uk/nhs-services/gps/how-to-register-with-a-gp-surgery/>

I wish you well in your ongoing care.

Yours sincerely
Your Name
Role

Appendix. 3 Patient Behaviour Incident – Immediate Removal from Practice List Due to Serious Incident

[Practice Name]
[Practice Address]
[Date]

PRIVATE & CONFIDENTIAL

Ref: Immediate Removal from Practice List Due to Serious Incident

Dear [Patient's Name],

I am writing to formally inform you that, due to a serious incident involving violent and/or threatening behaviour on [Insert Date], you have been immediately removed from our practice list.

[Insert a clear and objective description of the behaviour and why it was considered inappropriate or unacceptable.]

During the incident, your behaviour was deemed to pose a significant risk to the safety and wellbeing of our staff and patients. As a result, the police were called to attend the practice. This level of conduct is wholly unacceptable and constitutes a serious breach of NHS

guidelines and our practice's zero-tolerance policy. If you disagree with the account of the incident or believe there were extenuating circumstances, you have the right to appeal this decision. You may do so by writing to Dr Nassif Mansour, Clinical Director, or Beverly Snell, CEO at the following email address swlicb.csmanagers@nhs.net or, requesting a meeting with the practice immediately.

Under NHS regulations, where there is a risk of harm or where behaviour is violent or threatening, a patient may be removed from a GP's list with immediate effect. In accordance with this, we have contacted Primary Care Support England to request your immediate removal. This action has already taken effect.

You will now need to register with an alternative GP practice. If you require support in doing so, you can contact NHS England or visit the following website for guidance:
<https://www.nhs.uk/nhs-services/gps/how-to-register-with-a-gp-surgery/>

We regret that this step was necessary, but the safety of our staff and patients must always remain our highest priority.

Yours sincerely,

Your Name
Role