

PERSONNEL POLICIES, PROCEDURES AND GUIDELINES

Title: PROCEDURES FOR CARE OF PATIENTS WHO ARE VIOLENT AND ABUSIVE		Policy no: SEH 009																	
		Version No: 1																	
Staff groups covered: ALL																			
DIRECTOR RESPONSIBLE FOR IMPLEMENTATION Director of Nursing																			
Key objectives To ensure that ALL staff are aware of the procedure to follow when a patient becomes violent or abusive																			
Reference(s): HSC 2001 (18) Withholding Treatment from Violent Abusive Patients in NHS Trust.		Cross Reference to other policies: Trust security policy (SHE 002) Complaints procedure Management of Violence and Aggression policy (SHE 006)																	
Date of first issue/ circulation	Date(s) of subsequent circulation(s)	Date this copy issued:																	
<table style="width: 100%; border: none;"> <tr> <td style="width: 30%;">Policy approved/authorised by:</td> <td style="width: 30%; border-bottom: 1px solid black; text-align: center;">Trust Board</td> <td style="width: 20%;">Date:</td> <td style="width: 20%; text-align: center;">12/05/03</td> </tr> <tr> <td>Policy approved/authorised by:</td> <td style="border-bottom: 1px solid black;"></td> <td>Date:</td> <td></td> </tr> <tr> <td>Policy approved/authorised by:</td> <td style="border-bottom: 1px solid black;"></td> <td>Date:</td> <td></td> </tr> <tr> <td>Policy approved/authorised by:</td> <td style="border-bottom: 1px solid black;"></td> <td>Date:</td> <td></td> </tr> </table>				Policy approved/authorised by:	Trust Board	Date:	12/05/03	Policy approved/authorised by:		Date:		Policy approved/authorised by:		Date:		Policy approved/authorised by:		Date:	
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To be reviewed: Sept 2008		Policy Origin																	
Process of review: Risk Management Group		St Emlyn's Acute Services NHS Trust <input type="checkbox"/> New <input checked="" type="checkbox"/>																	
Training needs and processes: Training seminar for all key staff. Presentations at meetings with clinicians																			

St Emlyn's NHS Trust

Procedure For Care Of Patients Who Are Violent or Abusive (Age 16 years and over)

TRUST CORE POLICY

Introduction

1. St Emlyn's NHS Trust has a duty to provide a safe and secure environment for patients, staff and visitors. Violent or abusive behaviour will not be tolerated and decisive action will be taken to protect staff, patients and visitors
2. Those patients who, in the expert judgement of the relevant clinician are not competent to take responsibility for their actions will not be subjected to this procedure e.g. an individual who becomes abusive as a result of an illness or injury.

Application

3. All members of the Trust staff, including those on honorary contracts and those working primarily for other organisations but on Trust premises have a duty in the enactment of the policy.
4. The use of this policy will only apply to violent/abusive patients who are aged 16 or over. It is not the intention of this policy to withhold treatment from those visitors who are removed as abusive. In the event of visitors becoming violent or abusive please refer to the Trust's Management of Violence and Aggression policy

Summary

5. Each case to which this policy is applied will be looked at individually so that the need to protect staff is properly balanced against the need to provide healthcare to the individual patient.
6. Official figures indicate that the skilled and dedicated people who work in the Trust caring for others are far too often the victims of violence and intimidation. The Trust is determined to make life safer for patients and the people who work and visit our hospitals. Violence not only causes injury and distress, it stops patients being treated and leads to increased sickness absences and poor morale amongst staff.
7. This policy is designed as an important step in improving the Trust ability to tackle incidents involving violence and abuse. The aim of this policy is to detail unacceptable conduct and the sanctions available in the face of such conduct, including a mechanism whereby patients who are extreme or persistent in their unacceptable behaviour can, be as a last resort, be excluded from the Trust. (Persistent unacceptable behaviour refers to behaviour both within one admission and/or over a number of separate attendances within a period of the sanction). This policy has been introduced in the context of the government's national Zero Tolerance initiative against violence in the NHS and must be applied effectively in all appropriate situations.

The Policy

Expected standards of conduct

Violence is defined as “any incident where staff are abused, threatened or assaulted in circumstances related to their work, involving an explicit or implicit challenge to their safety and wellbeing or health” European Commission DC-V 1997

8. The following are examples of unacceptable conduct on Trust premises

- a) Excessive noise, e.g. loud or intrusive conversation or shouting
- b) Threatening or abusive language involving excessive swearing or offensive remarks
- c) Derogatory racial or sexual remarks
- d) Malicious allegations relating to members of staff, other patients or visitors.
- e) Offensive sexual gestures or behaviours
- f) Offensive or aggressive gestures or behaviours
- g) Abusing alcohol or drugs in hospital (however, all medically identified substance abuse problems will be treated appropriately)
- h) Drug dealing
- i) Wilful damage to Trust property
- j) Theft
- k) Threats or threatening behaviour
- l) Violence

Sanctions

Patients (age 16 or over)

- Following any incident the Senior Manager or Departmental Head on duty (or their deputy) will explain to the patient that his/her behaviour is unacceptable and explain the expected standards that must be observed in the future, and the consequences to the patient of any further misconduct.
- An Incident Report must be completed for the Trust and a note made in the patient's record of which the patient should be informed.
- If the behaviour continues, the responsible manager or clinician will give an informal warning about the possible consequences of any further repetition.
- Failure of the patient to subsequently desist will result in the application of the ***Procedure for Care of Individuals who are violent or abusive*** (hereafter referred to as the ***Procedure for Care***). As a formal warning of the consequences of such behaviours (A "Yellow Card")
- In exceptional circumstances where there is a threat of serious and imminent danger, or where the nature of an actual incident is serious, or there is failure to comply with the "***Procedure for Care***" then, subject to proper clinical assessment by the Consultant or senior member of the medical team (on call team for out of hours), the Trust can withhold treatment immediately upon implementation of the Trust's exclusion procedure (see Appendix 5 – "Red Card")
- In those instances which are dealt with under "***Procedure for Care***" (Yellow Card), if a patient complies with the terms of the "***Procedure for Care***" he/she can expect the following:
 - That there clinical care will not be affected in any way.
 - That where the substance has been identified, appropriate assistance will be provided
 - That a copy of the Confirmation of the "***Procedure for Care of Individuals who are Violent or Abusive***" will be filed in the Clinical Risk Department and a copy will also kept in the patient's notes. A system for "flagging" on PAS will be developed, and in one place, use of the "***Procedure for Care***" will be highlighted on this system.
 - That the Trust Security Manager and the Divisional / Directorate Managers will be informed.
 - That St Emlyns NHS Trust will fully investigate all valid concerns raised by the patient
 - That the *Procedure for Care* will lapse after one year

- Failure to comply with the *Procedure for Care* will, at the request of the relevant Divisional /Directorate Manager and the Clinical Directorate (or their nominated deputies) result in exclusion from the Trust premises or withdrawal of Trust services (a “Red Card”)
- Such an exclusion will last one year, subject to any required alternative care arrangements being made; the provision of such care arrangements will be pursued with vigour by the relevant clinician. In the event of an excluded individual presenting at the Trust Emergency Department for emergency treatment, that individual will be treated and stabilised with, if necessary, security staff in attendance. The need for security attendance will be determined by an appropriate member of staff (see appendix 2)
- Patients behaving in an unlawful manner will be reported to the police and the Trust will support the prosecution of the perpetrators of the crime on or against Trust property, assets and staff
- Treatment will not be withheld from a patient as a result of the behaviour of a person accompanying or visiting a patient.
- Any patient who wishes for a review either to evoke the *Procedure for Care* or withhold treatment may do so using the NHS Complaints procedure

Dr S. Mann
Chief Executive St Emlyn’s NHS Trust

Dr B. Wigg
Medical Director St Emlyn’s NHS Trust

Mrs I Carer
Director of Nursing St Emlyn’s NHS Trust

St Emlyns NHS Trust

Procedure For Care Of Patients Who Are Violent or Abusive

AND

CHECKLIST FOR IMPLEMENTATION (SEE ATTACHED 1a)

In the event of violent and/or abusive behaviour by a patient and following careful review by the individual patients clinical team (or the on callout of hours), the *Procedure for Care of individuals who are Violent or Abusive* (hereafter referred to as the *Procedure for Care*) can be instigated, following the steps set out below.

1. in the event of the senior nurse on duty on the relevant ward feeling that a *Procedure for Care* may be appropriate, he/she should contact a suitable member of staff e.g. the Divisional/Directorate manager/Senior Nurse on duty.
2. It is the responsibility of that suitable person (see appendix 2) to undertake the following:
 - Take full details of the incident and the staff member's concerns, document them and decide whether a *Procedure for Care* is required. Wherever possible, get witnesses to the event to sign the record as true and accurate

If a *Procedure for Care* is required:

- Inform and seek advice from the patient's consultant or senior member of the medical team (on call out of hours), or their GP if necessary. In order to satisfy the requirement that this procedure will only apply to patients who are competent to understand what they are doing.
- Inform the patient of the ward staff's concerns and fully explain the *Procedure of Care*, ensuring that there is no confusion as to the standard of behaviour required or the possible consequences of failure to comply.
- Ask the patient to sign the completed form *Confirmation of Procedure for Care of Individuals who are Violent or Abusive* (Appendix 2 hereafter referred to as the *Confirmation of Procedure of Care*). If the patient refuses to sign, this should be documented, but explained to the patient that the document will be valid with or without the patient's agreement.
- Ensure that a suitable of staff, any doctor, registered nurse or Senior Manager, witness the explanation to the patient and signs the completed form *Confirmation of Procedure for Care*.
- Give the patient a copy of the standard letter (Appendix 3), for issue to the patient's GP. This letter should be signed and sent by the Divisional/Directorate Manager. A copy of the Policy should be attached.

- Prepare a copy of the standard letter (Appendix 4), for issue to the patient. This letter should be given to the Divisional/Directorate manager with the letter to the GP for checking both the letter and the *Procedure of Care* has been applied appropriately and for onward submission to the Chief Executive Office for signature.
 - Copies of the completed and signed *Confirmation of Procedure for Care* should be sent to the Clinical Risk Manager, originating Divisional/Directorate Manager, the Trust Security Manager and the Emergency Department Manager (for input on to the Ed System). A copy must be kept in the patient's notes and once the PAS "flagging" system is developed this system must be used to record Yellow Card status.
 - The full process must be recorded in the patient's medical and nursing records.
3. The implementation checklist must be gone through to ensure that every stage of the procedure has been completed. The checklist must be completed

St Emlyns NHS Trust

Procedure For Care Of Patients Who Are Violent or Abusive

Implementation Check List

If a *Procedure if Care* is required:

- Inform and seek advice from the patient's Consultant or senior member of the medical team (on call out of hours), or their GP if necessary
- Ensure that the incident which triggered the procedure is documented in full, and signed by the member of staff and witnesses
- Call the Divisional/directorate Manager, manager on call and Executive on call to determine whether a *Procedure for Care* is appropriate and if so that a Divisional/Directorate manager/senior Nurse will take the matter forward.
- Inform the patient of the ward staff's concerns and fully explain the *Procedure of Care*, ensuring that there is no confusion as to the standard of behaviour required or the possible consequences of failure to comply.
- Complete all patient's details on the *Confirmation of Procedure for Care of Individuals who are Violent and Abusive* (Appendix 2)
- Ask the patient to sign the *Confirmation of procedure for Care*. if the patient refuses to sign, this should be documented, but explained to the patient that the document will be valid with or without the patient's agreement.
- Ensure that a suitable member of staff (any doctor or registered nurse or Senior Manager) witness the explanation to the patient and sign the *Confirmation of Procedure for Care*.
- Give the patient a copy of the *Confirmation of Procedure for Care* (Appendix 2) and the policy itself.
- A copy of the standard letter (Appendix 3) should be issued to the patient's GP. This letter should be sent by the Divisional/Directorate Manager. A copy of this policy should be attached.
- A copy of the standard letter (Appendix 4) should be issued to the patient. This letter is to be given to the Divisional/Directorate manager with the letter to the GP for checking prior to issue.
- The incident/inappropriate conduct must be documented in the patient's medical and nursing notes.

- Divisional/Directorate Manager to:
 - check the procedure has been applied correctly;
 - issue the letter to the GP
 - forward the letter to the Chief Executive, or deputy, for signature and to issue to the patient (as soon as practicable).

Chief Executive to issue signed letter, and send a copy of the letter to the Clinical Risk Manager, originating Divisional/Directorate Manager, Head of Security and Emergency Medicine Manager

St Emlyn's NHS Trust

Procedure For Care Of Patients Who Are Violent or Abusive

WARD _____ HOSPITAL _____

PATIENT'S FAMILY NAME _____

PATIENT'S FORENAMES _____

HOSPITAL NUMBER(S) _____

HOME ADDRESS _____

HOME PHONE NUMBER _____

CONTACT NAME OF NEXT OF KIN _____

GP'S NAME _____

GP'S ADDRESS _____

GP's PHONE NUMBER _____

The consequences of failure to comply with the *Procedure for Care* have been fully explained. I understand my GP will be informed

* I agree to comply with expected behaviours, set out in the policy, under which care will be provided at St Emlyn's NHS Trust

Signed _____ Date _____

* Delete if refused

WITNESS FOR THE TRUST

(Initiator of Procedure)

NAME _____ NAME _____

DESIGNATION _____ DESIGNATION _____

Signed _____ Dated _____ Signed _____ Dated _____

Examples of appropriate members of staff able to initiate the Procedure: Clinical Director, Medical Director, Divisional/Directorate General Manager, Director of Nursing, Director of Operations, Senior Clinician (registered or above) Senior Nurse/Senior Sister out of hours – Senior Manager on Call

GP's name and address

Date

Dear

Private and Confidential

Re: Patient's name
Patient's address
Patient's date of birth
Patient's hospital health records number

The above individual is currently an * inpatient /outpatient on.....*ward/department at St Emlyn's NHS Trust (delete as appropriate)

In order to protect the ward environment for other patients and members of staff, it has been necessary to instigate a *Procedure for Care of Patients who are Violent or Abusive* for the above-named patient.

A yellow card, see enclosed Trust "*Procedure for Care of Individuals who are Violent or Abusive*", has been issued for the following reason (s), please tick as appropriate:-

- | | |
|--|--------------------------|
| Excessive noise e.g. loud or intrusive conversation or shouting | <input type="checkbox"/> |
| Threatening or abusive language involving excessive swearing or offensive remarks | <input type="checkbox"/> |
| Derogatory racial or sexual remarks | <input type="checkbox"/> |
| Malicious allegations relating to members of staff, other patients or visitors | <input type="checkbox"/> |
| Offensive or sexual gesture or behaviours | <input type="checkbox"/> |
| Offensive or aggressive gesture or behaviour | <input type="checkbox"/> |
| Abusing alcohol or drugs in hospital
(however, all medically identified substance abuse problems will be treated appropriately) | <input type="checkbox"/> |
| Drug dealing | <input type="checkbox"/> |
| Wilful damage to Trust property | <input type="checkbox"/> |
| Theft | <input type="checkbox"/> |
| Threats or threatening behaviour | <input type="checkbox"/> |
| Violence | <input type="checkbox"/> |

If you have any queries, please do not hesitate to contact(name and telephone number of patient's Consultant), or(name and telephone number of Divisional/Director Manager or Director of Nursing)

Yours sincerely

Signature
Name
General Manager

St Emlyns NHS Trust

Procedure For Care
Of Patients Who Are Violent or Abusive

LETTER TO PATIENT

Patient's Name.....

Patient's Address.....

.....

.....

Hospital Number.....

Private and Confidential

Date:

Dear.....

This is to formally confirm that due to your unacceptable behaviour on.....at
.....you are now subject to the conditions outlined in the *Procedure for Care of Individuals
who are Violent and Abusive*.

The first stage of the procedure for care has been applied to you and you should have received an explanation as to why you are subjected to this Procedure. You should also have a copy of the *Procedure for Care* to read.

Should you, on any occasion in the future, fail to comply with the expected standards of behaviour explained to you by.....and outlined in the *Procedure for Care*, you will be subjected to the next stage of the Procedure, which may involve your immediate exclusion from the Trust premises by our security staff/police. Such an exclusion from Trust premises would mean that you would not receive care, as your responsible clinician would make alternative arrangements for you to receive your treatment.

Yours sincerely

Chief Executive

St Emlyns NHS Trust

Procedure For Care Of Patients Who Are Violent or Abusive

“RED CARD”/EXCLUSION – PROCEDURE CHECKLIST

1. The decision to exclude can only be taken by both the relevant Divisional/Directorate Manager and the Clinical Director (or in their absence their nominated deputies), once any required alternative care arrangements have been made. This does not preclude the relevant clinician discharging a patient who does not require in-patient care in the normal manner.
2. The responsible consultant must be informed and write to the patient’s GP detailing the exclusion and the reasons for it.
3. The Clinical Risk and Complaint Departments must be informed. A letter to the GP containing a final written explanation of exclusion from the premises, and the withholding of treatment must be sent by the Trust’s Chief Executive to the patient at his/her home address. The letter must be copied to the patient’s GP.
4. The patient must be informed that they may challenge an exclusion via the established complaints procedure.
5. The Trust Security Manager and the Divisional/Directorate Managers must also be informed
6. A detailed record of the rationale for exclusion and the alternative arrangements (if any) for care should be kept in the patient’s medical and nursing documentation.
7. Once a system for “flagging” on PAS is developed, the use of the Red Card must be entered on this database.
8. If the excluded individual returns in any circumstances other than a medical emergency, security staff should be called immediately. The Trust will subsequently seek legal redress to prevent the individual from returning to Trust premises.

**YOU DO NOT HAVE TO FOLLOW ALL STAGES OF THIS FLOWCHART
IF THE SITUATION WARRENTS AN IMMEDIATE **RED CARD**
VIOLENT OR ABUSIVE BEHAVIOUR**

