

STANDARD OPERATING PROCEDURE	VIOLENCE AND AGGRESSION SOP including SANCTION LETTER TEMPLATES
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**AT ALL TIMES, STAFF MUST TREAT EVERY INDIVIDUAL WITH RESPECT
AND UPHOLD THEIR RIGHT TO PRIVACY AND DIGNITY**

VERSION CONTROL

Version	Date	Amendment

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1. INTRODUCTION

- 1.1 Wrightington, Wigan and Leigh Teaching Hospitals NHS Foundation Trust recognise its statutory responsibilities under the Health and Safety at Work etc. Act 1974 and the Management of Health and Safety at Work Regulations 1999.
- 1.2 The Trust is committed to providing a safe and healthy working environment for all staff, patients, visitors, contractors and any other persons that may be affected by the Trust's work activities.
- 1.3 This Standard Operating Procedure (SOP) document is intended to provide guidance and standard procedures for staff in relation to violence and aggression incidents.
- 1.4 This SOP is to enable the Trust to address violence and aggression incidents in a consistent yet flexible framework.

2. STANDARDS OF BEHAVIOUR

- 2.1 Incidents of Physical and Non-Physical assault against NHS staff and professionals constitute the vast majority of violent incidents reported.
- 2.2 It is acknowledged that from time-to-time delays or service failures or anxiety with regard to their, or a family member's, health can cause much disappointment, frustration or anger for patients, their relatives / carers or visitors to the Trust, particularly at times of critical illness or bereavement. This may cause individuals to express their feelings in a way which can cause distress to members of staff but may fall short of the unacceptable behaviours.
- 2.3 If staff feel that the behaviour displayed by patients/relatives/carers or visitors meet this criteria, they should report this in accordance with the associated policy and the 'linked' policies as defined on the title page.
- 2.4 When dealing with such situations, staff should consider obtaining assistance (from their Line Manager / Duty Matron/Patient Relations Department) as soon as possible to try to resolve the problem and de-escalate the situation at the time.
- 2.5 When incidents of this nature are escalated to the Divisional Director of Performance/Head of Nursing/Service the particular circumstances should be considered and statements obtained before deciding on the contents of any warning letter sent to the alleged aggressor. This may include inviting the individual to provide an account of what happened before deciding on the nature of any warning to be issued.

3. ACTIONS TO BE TAKEN BY THE TRUST FOLLOWING A REPORT OF VIOLENCE AND AGGRESSION BY A VISITOR (I.E. NON-PATIENT OR NON-STAFF MEMBER)

- 3.1 The use of threatening, abusive, insulting or discriminatory language or behaviour by visitors will not be tolerated by the Trust.
- 3.2 Continued failure to comply with the required standard of behaviour will result in Security Staff being called to remove the offending individuals from Trust property in accordance with the Criminal Justice and Immigration Act 2008 (CJIA 2008).
- 3.3 Any person(s) acting unlawfully will be reported to the Police.

- 3.4 Any person acting unlawfully or exhibiting any aggressive, threatening or other unacceptable behaviour may be subject to one or more of the available actions as recorded below in relation to adverse 'patient' conduct in addition to the actions listed above.

4. ACTIONS TO BE TAKEN BY THE TRUST FOLLOWING REPORT OF VIOLENCE AND AGGRESSION BY A PATIENT

- 4.1 A range of measures are available depending on the severity of the violence and aggression incident including:
- 4.1.1 Verbal warnings
 - 4.1.2 Written warnings
 - 4.1.3 Withholding treatment
 - 4.1.4 Civil injunctions and Community Behaviour Order (CBO)
 - 4.1.5 Restraining Orders
 - 4.1.6 Criminal prosecution.
- 4.2 A 'Verbal Warning' would precede a 'Written Warning', and this would precede the 'Withholding of Treatment', although there is no requirement to escalate the response in any particular order should the situation warrant immediate action.
- 4.3 Each case will be looked at individually to ensure that the need to protect staff is properly balanced against the need to provide healthcare to individuals.
- 4.4 The overall aim will be to stop or diffuse unacceptable behavior and to prevent it from developing into more serious situations. This SOP describes the sanctions available in the event of unacceptable behavior including a mechanism whereby patients who are extreme or persistent in their unacceptable behaviour can, as a last resort, be excluded from the Trust.
- 4.5 The following stages should be followed in the event of such behavior by a patient, although, it is emphasised that staff do not have to follow all stages, e.g. extreme violence warrants immediate attention.

5. VERBAL WARNINGS

- 5.1 Verbal Warnings are often an effective method of addressing unacceptable behaviour with a view to achieving realistic and workable solutions.
- 5.2 They will be given by the Matron, Ward or Department Manager or member of staff responsible for the department in line with local escalation policy.
- 5.3 The warning should explain verbally to the patient that their behavior is unacceptable, also explain the possible consequences of any further unacceptable behavior, e.g. alerting hospital security, informing the Police or withholding of treatment if the expected standards of behavior are not observed in future.
- 5.4 This will be recorded in the patient's notes via authorised persons.
- 5.5 If a patient is no longer present to receive a verbal warning then consideration to sending a formal letter (Appendix 5) to their home address should be made by the Matron. A copy of the letter should be held on the patient's file.
- 5.6 The Local Security Management Specialist should be made aware that a verbal warning has been issued and a DATIX must be completed.

- 5.7 In cases where visitors or those not here for advice, treatment or care are violent or aggressive, using CJA 119/120 should be considered. See Appendix 2.

6. WRITTEN WARNINGS

- 6.1 Written warnings should be considered to address unacceptable behaviour from patients, relatives or visitors either when verbal warnings have failed, or as an immediate intervention depending on the circumstances. The written warning is an agreement between parties aimed at addressing and preventing the recurrence of unacceptable behaviour.
- 6.2 The written warning can only be issued by the minimum level of Head of Nursing / Service following consultation with all members of the multi-disciplinary team (i.e. the patient's GP, Consultant, and Local Security Management Specialist).
- 6.3 The fact that a written warning has been issued should be added to DATIX and all relevant staff involved in the care of the patient, or the incident should be made aware that a sanction has been issued.
- 6.4 In addition, copies of the written warning should be forwarded to:
- 6.4.1 The patient / individual
 - 6.4.2 The patient's notes
 - 6.4.3 Local Security Management Specialist.
 - 6.4.4 The patient's GP

7. FINAL WRITTEN WARNING

- 7.1 Advice from members of the multi-disciplinary team managing the patient's care will be sought prior to a final written warning being issued.
- 7.2 A formal written warning will be issued that is signed by the Chief Executive or deputy explaining the Trust's policy and procedures of withholding treatment and asking the patient to refrain from their unacceptable behaviour.
- 7.3 If the patient complies with the written warning, their clinical care will not be affected in any way.
- 7.4 It is recommended that a final written warning should be issued prior to withholding of treatment being instigated.
- 7.5 Copies of the Final Written Warning should also be forwarded to:
- 7.5.1 The patient / individual
 - 7.5.2 The patient's notes
 - 7.5.3 Local Security Management Specialist
 - 7.5.4 The patient's GP

8. WITHHOLDING OF FUTURE TREATMENT – EXCLUDING AN EMERGENCY SITUATION

- 8.1 Under no circumstances should it be inferred to a patient that treatment may be withheld without appropriate consultation taking place. The withholding of treatment should always be seen as a last resort.
- 8.2 Any decision to withhold treatment must be based on accurate clinical assessment and the advice of the patient's Consultant and members of the multi-disciplinary team on a case-by-case basis.
- 8.3 There may be instances of serious assault when the Trust, having obtained legal advice, can decide to withhold treatment immediately.
- 8.4 Where it has been decided that a patient is to be excluded from Trust premises and treatment withheld, a written explanation for the exclusion will be issued by the Chief Executive. A sample letter is contained in Appendix 7.
- 8.5 Copies of the letter should also be forwarded to:
 - 8.5.1 The patient's/individual
 - 8.5.2 The patient's notes
 - 8.5.3 Local Security Management Specialist
 - 8.5.4 The patient's GP
- 8.6 Once the patient has been advised that treatment is to be withheld if the patient is on Trust premises, they must be escorted from the premises by Security staff.
- 8.7 The withholding of treatment should be recorded on the DATIX system, and all relevant staff informed.
- 8.8 The withholding of treatment should not only relate to a physical exclusion, but also for any preparatory acts, carried out within the exclusion period, which relate to the patient, such as referrals from other agencies, making of appointments and so forth.
- 8.9 If an excluded patient requires emergency treatment, this will be given and, if necessary, security will be asked to attend.

9. RISK ASSESSMENTS

- 9.1 Trust wide risk assessments are undertaken and reviewed annually by the Local Security Management Specialist.
- 9.2 Ward/Departmental risk assessments are undertaken and reviewed at least annually by the Ward/Department Managers.
- 9.3 Following incidents arising from DATIX, ward/departmental risk assessments must be updated and with support from the Trust Local Security Management Specialist if required.
- 9.4 Risk Assessments and Action Plans should be developed, monitored and reviewed in accordance with TW10/002 Risk Management Process.

10. HUMAN RIGHTS ACT

Implications of the Human Rights Act have been taken into account in the formation of this SOP and they have, where appropriate, been fully reflected in its wording.

11. ACCESSIBILITY STATEMENT

This document can be made available in a range of alternative formats e.g. large print, Braille and audio cd.

For more details, please contact the HR Department on 01942 77 3766 or email equalityanddiversity@wvl.nhs.uk

BEHAVIOURAL TRIGGERS and DE-ESCALATION TECHNIQUES

Warning signs of potential violence and aggression.

- a) Restless behaviour.
- b) Deliberately provocative conduct.
- c) A person who is unusually quiet or withdrawn acting boisterous.
- d) Over sensitive reactions to corrections or instructions.
- e) A feeling of tension in the ward/department or in the interview.
- f) Threats of violence, which should always be taken seriously.
- g) Previous history of violence.

Conflict resolution de-escalation techniques.

- a) Appear calm, be reasonable (not argumentative) and reassuring and keep person informed.
- b) Bear in mind any relevant information you may have about the person.
- c) If the agitation persists, attempt to involve a more familiar worker who is not involved in the immediate conflict.
- d) Make no physical contact unless absolutely necessary and then try not to be the first to do so.
- e) Do not argue and do not give orders.
- f) Work on the positive if possible. Look for a way out, as the person may well want the same thing.
- g) Consider raising the alarm or summoning help.
- h) If the situation escalates and control is being lost, consider removing yourself from the situation.
- i) Do not put yourself in an isolated place. Always have a means of escape if the situation should escalate.

Types of behaviour		
Non verbal	Verbal	Physical
Agitation Wandering, pacing, following Intimidating facial expressions, staring Intimidating body posture Cornering, invading personal space Interference with equipment or property Being withdrawn extreme passivity, refusal to move	Shouting Swearing Crying Screaming Repetitive statements or questions Personal comments or questions Racist, sexist, offensive speech Bizarre, psychotic content not based on known reality	Scratching Grabbing hair, pulling Biting Hitting, slapping, punching, Pinching Spitting Kicking Pushing, shoving, knocking into someone Striking or throwing furniture or objects Inappropriate touching (self or others) Urinating or smearing. Undressing Self-harm Absconding Removal of lines, masks, dressing, catheters, incontinence pads Non-compliance, resistive behaviour (e.g., refusing medication, blood tests)

HOW DOES THE CRIMINAL JUSTICE AND IMMIGRATION ACT AFFECT THE NHS?

Sections 119–120 of the Criminal Justice and Immigration Act (CJIA) 2008 creates a **criminal offence of causing a nuisance or disturbance on NHS premises and a power for NHS authorised staff to remove a person** suspected of committing this offence. This power can only be used on NHS hospital premises.

The aim is to tackle low-level antisocial behaviour before it escalates to more serious offences such as assault. This is in line with the NHS Protects commitment to protecting NHS staff from violence and, where appropriate, taking action against those who abuse, or attempt to abuse, them.

What is nuisance or disturbance behaviour?

Any form of low-level antisocial behaviour on NHS premises that breaches the peace. This can include:

- using foul language and verbally abusing NHS staff
- using intimidating gestures towards NHS staff, patients or visitors
- creating excessive noise in waiting areas or wards
- obstructing thoroughfares.

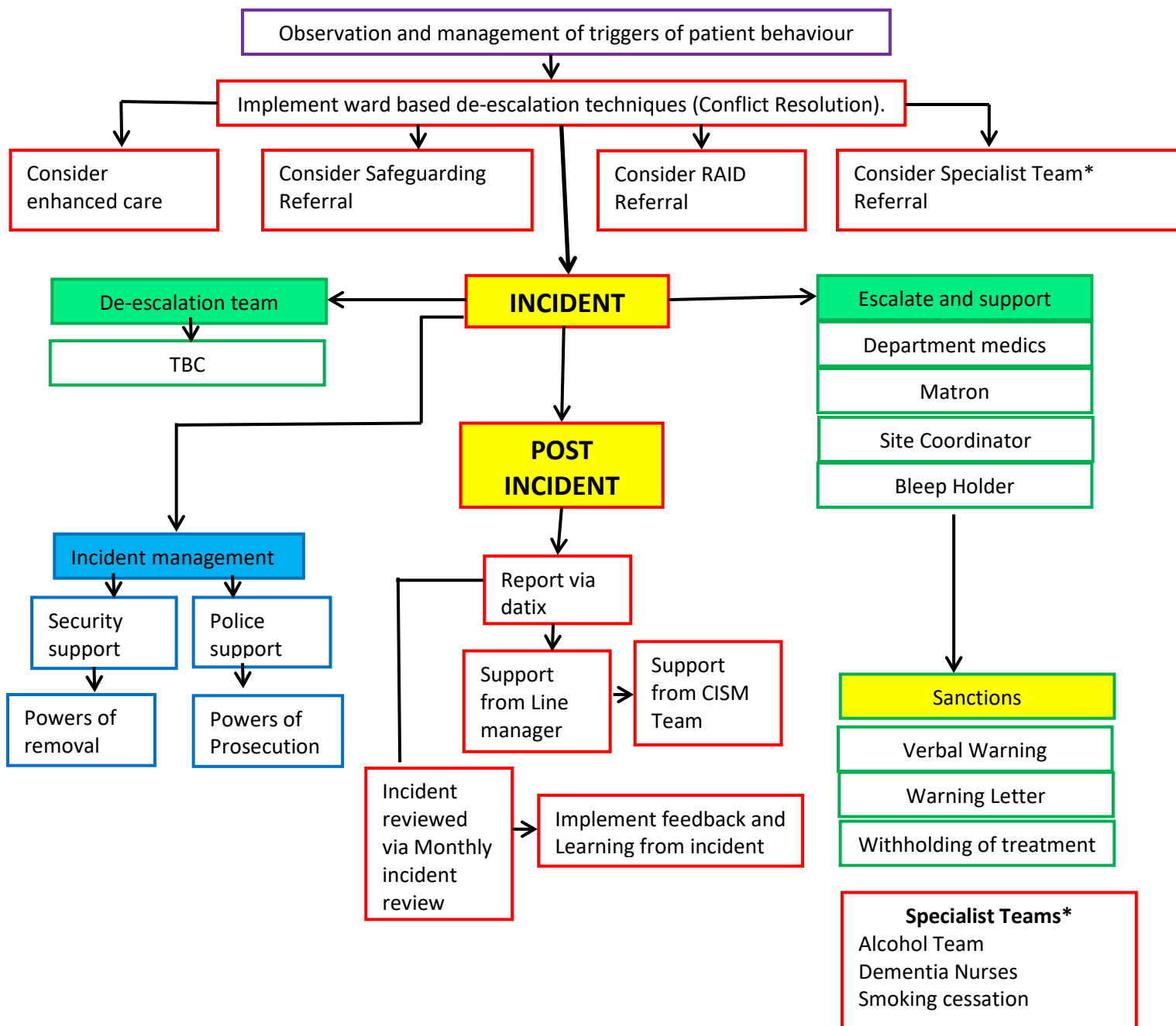
Who can be removed under the new powers?

The offence of causing a nuisance or disturbance and the power of removal apply to NHS hospital premises only. **Patients or those seeking medical advice, treatment or care will not be able to commit the offence or be removed under the CJIA powers.** The Trust has trained Authorised Officers (AOs) who will, if necessary, authorise and facilitate their removal.

If you identify any person who meets the above, ask them to leave. If they refuse, contact Security on fast bleep 2222 or x2588.

For further information contact your Local Security Management Specialists (LSMS) on x8864 or the Contract Security Manager (OCS) on x2475.

APPENDIX 3



TEMPLATE – FIRST WRITTEN WARNING LETTER



**Wrightington, Wigan and
Leigh Teaching Hospitals**
NHS Foundation Trust

<Date>

Dear

It is alleged that on the <insert date> you used/threatened unlawful violence/acted in an anti-social manner to a member of NHS staff/whilst on NHS premises (*delete as applicable*).

Behaviour such as this is unacceptable and will not be tolerated. This Trust is firmly of the view that all those who work in or provide services to the NHS have the right to do so without fear of violence or abuse.

You must not repeat this behaviour on any of our premises and must comply with the following conditions:

< *List the conditions* >

If you fail to act in accordance with these conditions and continue to demonstrate what we consider to be unacceptable behaviour, we will have no choice but to take one of the following actions:

(*Adjusted the following as appropriate*);

- The matter will be reported to the police with a view to this Trust supporting a criminal prosecution by the Crown Prosecution Service.
- The matter will be reported to the NHS Security Management Service Legal Protection Unit with a view to this Trust supporting criminal or civil proceedings or other sanctions. Any legal costs incurred will be sought from yourself.
- Consideration will be given to obtaining a civil injunction in the appropriate terms. Any legal costs incurred will be sought from yourself.

I enclose two copies of this letter. Please sign one copy to show that you will agree to these conditions and return it to me in the envelope provided. If I do not receive a reply within the next fourteen days, it shall be presumed that you agree with the conditions contained herein.

If you do not agree with the details contained in this letter or feel that this action is unwarranted, please contact in writing < *insert details of local complaints procedure* > who will review the decision in light of your account of the incident(s).

This letter will be retained within your Medical Records for a period of 12 months and a copy sent to your GP and Consultant.

Yours sincerely

(Signed by **Matron**)

.....Date.....

I, <insert name>, accept the conditions listed above and agree to keep to them

.....Date.....

TEMPLATE - FINAL WARNING LETTER



**Wrightington, Wigan and
Leigh Teaching Hospitals**
NHS Foundation Trust

<Date>

FINAL WARNING

Dear

I am writing to you concerning an incident that occurred on <insert date> at <*insert location and Trust >.(**if satellite dept;*).

It is alleged that you used / threatened unlawful violence / acted in an anti-social manner to a member of NHS staff / whilst on NHS premises (*delete as applicable*).

Behaviour such as this is unacceptable and will not be tolerated. This Trust firmly believes that all those who work in or provide services to the NHS have the right to do so without fear of violence or abuse. This has been made clear to you in <insert details of previous correspondence/ meetings>.

If your behaviour is acceptable, your care will not be affected. However, if there is a repetition of unacceptable behaviour, we may take into consideration one or more of the following actions:

- Withdrawal of NHS care and treatment, subject to clinical advice.
- Report the matter to the Police with a view to supporting a criminal prosecution by the Crown Prosecution Service.
- Report the matter to the NHS Protect Legal Protection Unit and take any legal action necessary with a view to supporting criminal or civil proceedings or other sanctions. Any legal costs incurred will be sought from yourself.
- We will consider obtaining a civil injunction. Any legal costs incurred will be sought from yourself.

In considering withholding treatment this Trust would review cases on an individual basis to ensure that the need to protect staff is balanced against the need to provide health care to patients. An exclusion from NHS premises would mean that you would not receive care at this trust and (*title, i.e. clinician*) would make alternative arrangement for you to receive treatment elsewhere.

If you believe that the report of your behaviour is not correct or that this action is not justified, you may write to me with your account of the incident(s) and the decision to issue this report will be reviewed through the Trust's Complaint Procedure. I have enclosed a leaflet to provide you with further information on the "Complaints or Concerns "procedure

A copy of this letter has been issued to your GP and consultant and shall be held with your Medical Records for a period of 12 months.

Yours sincerely

Chief Executive

.....Date.....

TEMPLATE - WITHHOLDING OF TREATMENT LETTER



**Wrightington, Wigan and
Leigh Teaching Hospitals**
NHS Foundation Trust

<Date>

Withholding of Treatment

Dear

I am writing to you concerning an incident that occurred on *<insert date>* at *<*insert location and Trust >.(if satellite dept;)*

It is alleged that you were violent (or threatened violence) or acted in an antisocial way to a member of NHS staff or while on NHS premises. *(delete as applicable)*

We will not accept this type of behaviour. We firmly believe that all those who work in or provide services to the NHS have the right to do so without fear of violence or abuse.

Following a number of warnings *<insert details of correspondence and meetings>* where we have explained this to you, and after carrying out a clinical assessment and appropriate consultation, it has been decided that you should be excluded from the Trust premises. The period of this exclusion is *<insert number of weeks / months>* and comes into effect from the date of this letter.

This means you must not come to our premises at any time unless;

- It is a medical emergency; or
- We invite you to attend a pre-arranged appointment.

Contravention of this notice will result in one or more of the following actions:

- Consideration in obtaining a civil injunction. Any legal costs incurred will be sought from yourself.
- Report the matter to the Police with a view to supporting a criminal prosecution by the Crown Prosecution Service
- Reported the matter to the NHS Security Management Service Legal Protection Unit with a view to supporting criminal or civil proceedings or other sanctions. Any legal costs incurred will be sought from yourself.

During the period of your exclusion the following arrangement must be followed in order for you to receive treatment *<list arrangements>*.

In considering withholding treatment this Trust reviews cases on an individual basis; this is to ensure that the need to protect staff is balanced against the need to provide health care to individuals.

If you believe that the report of your behaviour is incorrect or that this action is not justified; please contact me in writing with your account of the incident(s). The decision will then be reviewed through the Trust's Complaint Procedure. I have enclosed a leaflet to provide you with further information on the "Complaints or Concerns" procedure

Copies of this letter has been sent to your GP and consultant; a copy will also be retained with your medical records, and will remain on file for 12 months

Yours sincerely

Chief Executive

.....Date.....

TEMPLATE – PHYSICAL ATTACK RESPONSE LETTER



**Wrightington, Wigan and
Leigh Teaching Hospitals**

NHS Foundation Trust

<Date>

<Ref>

Report of a Physical Assault

Dear

I understand that you were physically assaulted on *[Enter Date]* during the course of your duties. I am sorry to hear about this.

The Trust is determined to tackle all forms of anti-social behaviour and, in particular, where people abuse and assault staff. Wrightington, Wigan and Leigh Teaching Hospitals NHS Foundation Trust will ensure that where a member of staff reports a physical assault:

- The incident is appropriately followed up by the police;
- Where the police do not take action, the assault is investigated to see if any other appropriate action can be taken against the offender.

Furthermore, the Trust and NHS Protect are committed to ensuring that you receive any support and guidance that may be needed following this incident.

As the Local Security Management Specialist for this Trust; I will be monitoring any police action taken in your case. Where it is necessary, I shall explore, with your consent and the support of Wrightington, Wigan and Leigh Teaching Hospitals NHS Foundation Trust, whether alternative or additional actions can be taken.

Please do not hesitate to contact me if you should have any questions or concerns.

Yours faithfully

Local Security Manager Specialist (LSMS)

..... Date