The Prevention and Control of Violence & Aggression Policy

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<tr>
<th>CATEGORY:</th>
<th>Policy</th>
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<tbody>
<tr>
<td>CLASSIFICATION:</td>
<td>Risk &amp; Legal</td>
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<tr>
<td>PURPOSE</td>
<td>This policy is intended to embrace all current guidance and legislation, in regard to the prevention and management of violence and aggression within the Trust.</td>
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<td>Controlled Document Number:</td>
<td>151</td>
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<td>Version Number:</td>
<td>3</td>
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<tr>
<td>Controlled Document Sponsor:</td>
<td>Executive Director of Delivery</td>
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<tr>
<td>Controlled Document Lead:</td>
<td>Deputy Head of Occupational Health &amp; Safety</td>
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<tr>
<td>Approved By:</td>
<td>Chief Executive Advisory Group</td>
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<tr>
<td>On:</td>
<td>12 November 2008</td>
</tr>
<tr>
<td>Review Date:</td>
<td>November 2011</td>
</tr>
<tr>
<td>Distribution:</td>
<td>All Directors, Senior Managers and Department Heads</td>
</tr>
<tr>
<td>Essential Reading for:</td>
<td>All Staff</td>
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<td>Information for:</td>
<td>All Staff</td>
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Policy Statement

1.1 University Hospitals Birmingham NHS Foundation Trust (UHB) recognises that it has a legal duty to ensure, so far as is reasonably practicable, the health, safety and welfare of employees, whilst at work (Health & Safety at Work etc. Act 1974). This policy outlines the Trust’s responsibility and support for those involved in the prevention and management of violence and aggression at work. This policy is intended to embrace all current guidance and legislation, in regard to the prevention and management of violence and aggression within the Trust and will form part of the Trusts’ overall Health and Safety Management Strategy.

1.2 The objectives of this policy are to:

1.2.1 assess the potential risk of violence and aggression by the use of the supporting procedural guidance, (Prevention and Control of Violence and Aggression Procedures);

1.2.2 implement appropriate control mechanisms to reduce the risk of violence and aggression to the lowest achievable level;

1.2.3 comply with the Health & Safety at Work etc. Act (1974) and the Management of Health & Safety Regulations (1999) with regards to the prevention and control of violence and aggression in the workplace.

1.3 The Trust is committed to a policy that deals with such matters effectively and therefore the policy will be reviewed at three yearly intervals, or earlier if necessary, to ensure its continued effectiveness in the working environment.

1.4 This policy is to be read in conjunction with:

1.4.1 The Health and Safety Policy;

1.4.2 The Prevention and Control of Violence and Aggression Procedures;

1.4.3 The Procedures for Lone Working; and

1.4.4 The Withholding of Treatment Policy.

Scope

2.1 This Policy and its associated procedures will apply to all staff employed within the organisation on a formal contract of employment.

2.2 Contractors, Agency and Locum workers as well as those undertaking secondments are subject to their employing bodies’ policies. Receiving managers must therefore ensure that any non employed workers are aware of the requirements of this policy and the associated procedures and how to apply them.
2.3 Within the context of this policy, violent behaviour is defined by the Health and Safety Executive (HSE) as -'Any incident in which a person working in the healthcare sector is verbally abused, threatened or assaulted by a patient, member of the public or member of staff in circumstances relating to his or her employment'.

2.4 The range of incidents covered include those that:

2.4.1 cause major injury;
2.4.2 require medical assistance;
2.4.3 require first aid only;
2.4.4 involve a threat, even if no physical injury results;
2.4.5 involve verbal abuse;
2.4.6 involve non-verbal abuse, for example stalking; and
2.4.7 involve other threatening behaviour.

3 Duties

3.1 Board of Directors

The Board of Directors (BOD) states categorically that violence and/or aggression against any member of its staff will not be tolerated. It recognises and accepts its responsibility in accordance with the Health and Safety at Work etc. Act 1974 and good employment practice to provide, as far as is reasonably practicable, a safe and secure workplace for its staff.

3.2 The Executive Director of Delivery

3.2.1 The Executive Director of Delivery is the Executive Director with responsibility for Health and Safety Management. The Director will provide assurance to the Board of Directors on compliance with this policy and will report any material failures of compliance or other concerns regarding violence and aggression.

3.2.2 The EDD shall approve all procedural documents associated with this policy, including the Prevention and Control of Violence and Aggression Procedures, and any amendments to such documents.

3.3 Head of Occupational Health and Safety

The Head Occupational Health and Safety will:

3.3.1 Provide and maintain a competent resource of Health and Safety Advisers, Occupational Health Practitioners and Staff Support Advisers to support managers and staff to comply with this policy;
3.3.2 Collate reported incidents, identifying any trends, and present these to the divisional consultative committees and Trust Health, Safety and Environment Committee;

3.3.3 Provide information and training on how to deal with potential or actual violence and aggression; and

3.3.4 Report to the HSE any incident that results in either a major injury, as defined by RIDDOR, or involves sickness absence of more than three days as a direct result of violence or aggression.

3.4 Security Management Specialist

The Security Management Specialist will:

3.4.1 Provide assistance to managers to identify appropriate control mechanisms to eliminate or reduce the risk of violence;

3.4.2 Liaise with, and prioritise the activities of, the externally provided security service;

3.4.3 Ensure that existing security mechanisms are maintained and fit for purpose e.g. Close Circuit Television systems;

3.4.4 Liaise with the Police where necessary and to provide information on identified perpetrators of violence; and

3.4.5 Collate and analyse reported security incidents, identifying trends in the interventions required of security staff in respect to violent incidents.

3.5 Senior Divisional and Group Managers

Senior Divisional and Group Managers are responsible for ensuring that the Policy is fully implemented within their Divisions and Groups. They will:

3.5.1 Ensure that each department under their control undertake a risk assessment of the potential for violence and aggression, implement controls where risks are identified and monitor these for effectiveness;

3.5.2 Monitor the level and nature of violent incidents and take appropriate preventative and/or enforcement action; and

3.5.3 Ensure that staff who are identified as working in an area where violence is a potential threat receive training in de-fusion and/or ‘breakaway’ skills training.

3.6 Line Managers

Line Managers are responsible for:

3.6.1 Undertaking a comprehensive risk assessment and creating an environment and climate where violence is less likely. Having undertaken the risk assessment full and proper consideration will need to be given to identifying appropriate measures to improve the situation in order to reduce the risk. This will
include discussion with affected staff and staff representatives (see associated procedural guidance document annex 1);

3.6.2 Ensuring that the Policy, the associated Prevention and Control of Violence and Aggression Procedures, guidelines and any local procedures are made known and available to all their staff;

3.6.3 Supporting any member of staff who has been a victim of an assault or who has lent assistance during an incident;

3.6.4 Ensuring that an Incident Report Form is completed for every incident of violence and/or aggression and the Trust Security Management Specialist together with the Health and Safety Adviser for their area is informed so that, where applicable, the Health and Safety Executive are notified, as appropriate, under the RIDDOR Regulations; and

3.6.5 Monitoring the level and nature of incidents and taking appropriate preventative and/or enforcement action.

3.7 Members of Staff

All members of staff should:

3.7.1 Be conversant with this Policy and any local operational systems to de-fuse or deal with violent situations (see Prevention and Control of Violence and Aggression Procedures annex 2 & 3);

3.7.2 Try to de-fuse the situation if they feel safe to do so and immediately summon assistance when aware of a potential or actual violent incident. Assistance would normally include calling other more experienced staff to the scene and may also include summoning security staff and/or the Police;

3.7.3 If involved in an incident either as a victim or when going to someone’s assistance, use the minimum of force necessary to control the violent person(s) bearing in mind the legal/medical constraints and personal responsibility to act within the law (see Prevention and Control of Violence and Aggression Procedures annex 4); and

3.7.4 Complete an Incident Report Form immediately following such an event or as soon as possible thereafter.

4 Framework

4.1 This policy and its associated procedural documentation and guidance are based upon the underlying principles set out in the HSE Guidance Note ‘Violence and Aggression to staff in health services, Guidance on Assessment and Management’ HSE 2003. This section describes the broad framework for the prevention and control of violence and aggression within the Trust. Detailed instructions are provided in the
associated Prevention and Control of Violence and Aggression Procedures.

4.2 Risk Assessment

The potential triggers to violence and aggression will be risk assessed by managers working collaboratively with staff and appropriate control mechanisms implemented to reduce the risk to the lowest achievable level. The standard risk assessment form is included in the Prevention and Control of Violence and Aggression Procedures at annex 1. Identified risks will be recorded on the local risk register.

4.3 Controls & Specialist Advice and Support

4.3.1 Appropriate controls will be devised and implemented to address specific risks identified through the risk assessments. The Trust will take reasonable measures to reduce the likelihood of violence and aggression towards staff and will consider excluding persons who present an unacceptable risk in accordance with the Withholding Treatment Policy.

4.3.2 Specialist advice on appropriate control mechanisms is available from the Security Management Specialist and/or Health and Safety Adviser.

4.3.3 Psychological support is provided by the Staff Support Advisers for any member of staff involved in an incident of violence or aggression.

4.4 Training

Staff identified as at risk from violence and aggression will be provided with the correct level of training e.g. de-fusion and breakaway skills for ‘on call’ managers, lone workers and staff in Accident and Emergency and other areas where violence is identified and control and restraint training for security staff. Managers with responsibility for undertaking risk assessments will attend the mandatory managing risk course and undertake the e-learning modules that form part of this course.

5 Implementation and Monitoring

5.1 This policy and its associated procedural documents will be available to all staff on the intranet and will be implemented by all levels of management as detailed in section 3.0.

5.2 The main standards to be achieved and the monitoring arrangements to ensure compliance are detailed at appendix A.
6 References

NHS Counter Fraud and Security Management Service (2003) A professional approach to managing security in the NHS.

Secretary of State Directions on work to tackle violence against staff and professionals who work in or provide services to the NHS; November 2033.

HSE (1974) The Health and Safety Work etc. Act

HSE (1995) The Reporting of Injuries, Diseases and dangerous Occurrences Regulations (RIDDOR)

Healthcare Commission Core Standard C20a

### Appendix A - UHB Standards for Monitoring Compliance

<table>
<thead>
<tr>
<th>No.</th>
<th>Standards</th>
<th>Evidence</th>
<th>Where held</th>
<th>Monitored by</th>
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<tbody>
<tr>
<td>1.</td>
<td>The Trust will assess the risks of violence &amp; aggression and implement appropriate control measures to reduce risks to the lowest possible level.</td>
<td>Completed risk assessments.</td>
<td>Manager’s health &amp; safety workbook folder or electronic equivalent.</td>
<td>H&amp;S Audit Team</td>
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<td>Directors of Operations Inspections</td>
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<td>2.</td>
<td>Control measures will be monitored on an annual programme and/or following an incident.</td>
<td>Priority actions entered onto local risk registers.</td>
<td>Risk register held locally which feed into the Trust wide register</td>
<td>H&amp;S Audit Team</td>
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<td>Clinical Governance</td>
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<td>Directors of Operations Inspections</td>
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<td>Divisional Consultative Committees (DCC)</td>
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<td>3.</td>
<td>Staff working in areas identified as a risk for potential violence will be provided with De-fusion and/or Breakaway training and this will be updated bi-annually.</td>
<td>Training data</td>
<td>HR Business Services</td>
<td>Line Managers</td>
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<td>Training Department</td>
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<td>4.</td>
<td>Staff involved in incidents of violence will be provided with both psychological and practical support as required.</td>
<td>Staff Support data</td>
<td>Occupational Health and Safety Department (OHSD)</td>
<td>OHSD</td>
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<tr>
<td>No.</td>
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<td>5.</td>
<td>The Health, Safety and Environment Committee will receive and review quarterly reports on the implementation of this policy.</td>
<td>Incident data</td>
<td>Incident database</td>
<td>Head of Clinical Governance &amp; Head of Occupational Health &amp; Safety.</td>
</tr>
<tr>
<td>6.</td>
<td>The BOD will receive an annual Health &amp; Safety Report.</td>
<td>Annual Occupational Health &amp; Safety Report</td>
<td>Occupational Health and Safety Department</td>
<td>Director of HR</td>
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