**POLICY ON THE MANAGEMENT OF VIOLENCE AND AGGRESSION**

2013

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<tr>
<th>Lead Managers</th>
<th>K. Fleming</th>
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<td>Responsible Director</td>
<td>Ian Reid</td>
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<tr>
<td>Approved by:</td>
<td>Health and Safety Forum</td>
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<td>Date approved:</td>
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2. INTRODUCTION
NHS Greater Glasgow and Clyde takes extremely seriously the health, safety and welfare of all employees, patients and visitors. It believes that violence and/or aggression towards staff and others is unacceptable. Staff have a right to be able to perform their duties without fear of abuse or violent acts from patients or members of the public.

No member of staff should consider violence or aggression to be an acceptable part of their employment: however, staff identified through risk assessment, should be trained and supported to understand the clinical presentations from patients as a result of physical/psychological illness that may manifest in violent or aggressive behaviour.

The purpose of this policy is to enable NHS Greater Glasgow and Clyde to fulfil its obligation in protecting staff and others so far as is reasonably practicable in accordance with its duties under the Health and Safety at Work etc Act 1974 and the Management of Health and Safety at Work Regulations 1999. This should include those employees who work by themselves without close or direct supervision (Health & Safety Executive 1998).

In addition, the Emergency Workers (Scotland) Act 2005, which created an offence of assaulting, obstructing or hindering doctors, nurses and midwives working in a hospital, and anywhere else whenever they are responding to an emergency, was amended. From 1 April 2008, nurses, doctors and midwives are covered whenever they are on duty.

NHS Greater Glasgow and Clyde aims to provide a safe environment for both patients and staff which eliminates, and where this is not possible, reduces the risk from violence and aggression so far as is reasonably practicable. The organisation recognises, however, that situations do arise where violence and/or aggression are directed against staff or patients. The organisation will therefore strive to put in place measures to minimise the incidence and risk involved, and to equip staff with the skills and support for dealing with incidents effectively and safely. NHS Greater Glasgow and Clyde has agreed that violence and aggression management is one of the key elements of the Health and Safety Strategy for the organisation and so NHS Greater Glasgow and Clyde’s Health and Safety Forum have established the Violence and Aggression Reduction Group to monitor activity on the matter. An annual Violence and Aggression Strategy and Action Plan will be produced and monitored by the Violence and Aggression Reduction Group.

2.1 GUIDANCE
Corporate Services, Partnerships and the Acute Services, will produce local Protocols and Guidance documents to implement this Policy document. Such documents will include information on the legal contexts, issues associated with restraint, emergency security provision, lone working, training for staff, post incident procedures and assessment forms. This will aid and guide managers and staff in complying with this policy. (These documents are available on Staffnet)
Additional guidance documents are available from other organisations including the Health and Safety Executive, Mental Welfare Commission and Royal College of Nursing (see Appendix 1).

Please note that lone working and stalking of staff (and others) are dealt with by separate Policies while bullying and harassment between staff is dealt with in the Dignity at Work Policy.

2.2 DEFINITION OF VIOLENCE AND AGGRESSION
Violence and aggression has been defined in this policy as where persons are abused, threatened or assaulted in circumstances related to their work.

Health and Safety Executive Definition

This definition includes work related incidents which involve staff while off duty.

This definition may be expanded as follows;
Violence and aggression has been defined in this policy as where persons are abused, threatened or assaulted in circumstances related to their work involving an explicit or implicit challenge to their safety, well-being or health.

3. SCOPE
This Policy applies to all NHS Greater Glasgow and Clyde employees, partnership and agency staff, contractors, volunteers, students, those on work experience and members of the public.

4. RESPONSIBILITIES

4.1 Chief Executive and Director of Human Resources
The Chief Executive has overall responsibility for health and safety across NHS Greater Glasgow and Clyde. The Director of HR has been made accountable for ensuring that health and safety policies such as the ‘Violence and Aggression’ policy are implemented across the whole of the organisation in a structured and methodical manner and are appropriately resourced so far as is reasonably practicable.

The Scottish Government has informed NHS Scotland that a sanction of withholding treatment for patients and exclusion of visitors is an option in extreme or persistent cases of violence or aggression. (Ref; PIN Managing Health at Work Guideline 6) Any cases of this nature will be referred to the Chief Executive and a decision made in consultation with senior colleagues, with reference to circumstances surrounding the case and guidelines from the NHS Executive on this matter.
**4.2 Service Directors (CHP/CHCP/Acute Directors)**
Service Directors must ensure that the policy is implemented throughout their area of responsibility.

4.2.1 Ensure that policy implementation is taking place at ward and departmental level.
4.2.2 This can be audited through the performance management/ objective setting procedure within the organisation.
4.2.3 When necessary, Directors must ensure that the policy receives adequate resourcing. This may include time for training or purchase of alarm systems.
4.2.4 Managers of services within Partnerships or the Acute Division are responsible for ensuring that appropriate analysis of incidents is undertaken on a quarterly basis and ensuring that any lessons learned are applied.

**4.3 Senior and Line Managers (including SCN’s, and Team/Department Leads)**
4.3.1 Line managers have the responsibility for ensuring that risk assessments are undertaken and documented within their area of responsibility and that these assessments are acted upon and disseminated to all staff. These assessments should be reviewed annually or following a serious incident. Outstanding risks should be taken to the next level of management for consideration and inclusion within the relevant Service / Directorate / Partnership / Division Risk Register. Guidance and proformas for the risk assessment process are available in the associated guidance documents available on Staffnet. (See Appendix 1)
4.3.2 Senior and/or Line Managers should ensure that staff receive the appropriate level of training for the risks they are likely to be exposed to during their normal work. This will be based on an appropriate risk assessment and training needs analysis. In tandem with this condition specific training should also be prioritised.
4.3.3 In the case of an assault or serious verbal abuse the appropriate manager should liaise directly with the affected individual within 24 hours to provide any immediate support required and inform them of any action to be taken. Where this timescale is not achievable the line manager should undertake this as soon as they are aware of the situation.
4.3.4 Managers should consider the immediate needs of the individual and facilitate support e.g. occupational health, counselling in the medium / long term. Details of support services are provided in Appendix 2.
4.3.5 Managers have a duty to ensure that all incidents have been reported through the incident reporting system; Datix. Managers should promote a culture of recording incidents in their areas.
4.4 Staff
Responsibilities of staff are as for other health and safety risks e.g. taking reasonable care, following procedures, reporting problems etc. In particular staff are required to:-

4.4.1 Attend appropriate training in order to understand how to summon help in case of danger and be aware of local procedures. There are several models of training in use within NHS Greater Glasgow & Clyde which are designed specifically for different groups of staff. Staff who are unsure which training to attend should ask their manager. The various models of training and target staff groups are listed below:

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<th>Staff Group</th>
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<td>Maybo SAFERcare</td>
<td>Health &amp; Safety PartnershipsTeam</td>
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<td>Acute Services Division and Corporate Services</td>
<td>Maybo SAFERcare</td>
<td>Health &amp; Safety Acute and Violence Reduction teams</td>
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4.4.2 Inform their manager (or occupational health, confidentially), if they are suffering from any psychological effects or any physical condition following an incident.

4.4.3 Staff must report all incidents timeously and formally record on the on-line Datix system (DIF1 on Staffnet).

4.4.4 Staff should ensure that they read the associated risk assessments and understand the control measures contained within.

5. PRINCIPLES

5.1 This Policy refers to any form of unacceptable behaviour threat or verbal abuse from patients, relatives or visitors, towards staff arising from their work. These terms are taken to mean any form of behaviour which harms someone else either physically or psychologically. This includes assault, threats, verbal abuse (sexual orientation, race, religion, transgender identity, disability etc.) and any other inappropriate behaviour.

5.2 The Policy covers violence and aggression arising from any number of causes or sources in the work environment, for example:
• Anything which gives rise to an aggressive response in a person: however, all staff should be encouraged to be aware of their own verbal and non-verbal cues in their interactions with patients and visitors and to develop appropriate interpersonal skills.

• Where the aim is to obtain drugs, money etc.

• From visitors or relatives of patients

• The person’s clinical condition: where it is evident that stressed or distressed / challenging behaviour occurs as a symptom or feature of a clinical condition a person centred assessment will be carried out to understand behavioural triggers and determine an appropriate care plan.

Relevant staff should be able to identify stressed or distressed behaviours in patients and determine if a clinical cause should be excluded / treated.

5.3 This policy is supported by a range of guidance relating to the prevention of violence and will be further developed in close collaboration with staff, staff representatives, Professional Bodies eg. RCN, BMA, and with users of our services.

5.4 Through monitoring and reflecting on violent and aggressive incidents, as part of our management strategy, the organisation aims to learn from experience and seek to improve our understanding and knowledge of the prevention and management of violent and aggressive incidents e.g. using incident data to ‘inform’ training programmes for staff.

5.5 The organisation shall create a non-discriminatory working culture within which differences between people are valued and respected and are never used as a source of personal abuse. This will be adopted through appropriate Human Resource policies such as ‘Dignity at Work’.

5.6 In cases of incidents involving violence and aggression against members of staff, encouragement and full support will be given to the individual involved to enable them to pursue the incident through reporting it to the Police. The organisation will also work in conjunction with relevant staff side organisations on this matter.

5.7 In the event of alleged violence/aggression from an employee, this will be dealt with under the Disciplinary and Grievance Procedure. Further advice and guidance should be sought from Human Resources. Staff representatives may also be contacted. This does not exclude a staff member informing the police if they deem this appropriate.

5.8 In relation to managing information on risks to personal safety the organisation will ensure that systems (eg Trakcare) are in place to share information appropriately and effectively to ensure that the risks to staff and partner agencies are minimised.

Further guidance on specific obligations under the Data Protection Act and other relevant legislation may be necessary. This does not negate the obligation
placed on individuals to ensure that appropriate information is shared in order to ensure the safety of not only themselves but work colleagues including those from partner agencies and members of the Public.

5.9 Patients and Visitors
The organisation expects that patients and visitors conduct themselves in a respectful manner and at no time verbally or physically abuse staff or any other persons.
It is acknowledged that in healthcare settings patients may exhibit behaviours which are challenging. Relevant staff should be appropriately trained in the recognition and management of these conditions with specialist support as appropriate.

5.10 Multi-Agency Public Protection Arrangements
In accordance with the Management of Offenders (Scotland) Act 2005 Multi-Agency Public Protection Arrangements (MAPPA) requires information sharing in relation to public protection and staff safety. Please see guidance Handling Procedures for Dealing with MAPPA Requests for Information /Action from Information Governance Manager.

5.11 MANAGERIAL AND STAFF SUPPORT
The Head of Health and Safety will ensure that detailed incident data is supplied to relevant Directors.
Local Protocols and Guidance must be developed as described in Section 2.1.
Health and Safety Practitioners and Staff trained on the Management of Violence and Aggression are available to provide advice and support in developing such guidance.
With regards to managerial and staff support, the organisational strategy is to:

5.11.1 Minimise risk through a process of risk assessment and control.
5.11.2 Consult employees and their representatives in all matters.
5.11.3 Control the risk at source where possible: minimising situations where violence and aggression develops.
5.11.4 Provide appropriate information, instructions, supervision and training for staff on the legal and practical approaches regarding their own safety and patient care.
5.11.5 Provide personal attack alarms or mobile telephones where this is deemed necessary by the risk assessment process. (Where required, these alarms will be issued to individuals directly for their own personal use. They should be carried by staff when required.)
5.11.6 Ensure appropriate training for staff on managing conflict/aggression is provided in tandem with condition specific training. See 4.4.1
5.11.7 Utilise and provide physical security measures such as access control, CCTV and security personnel when identified through risk assessment.
5.11.8 Respond to incident reports and conduct appropriate investigations including trend analysis.
5.11.9 Provide support for staff after an incident such as offering counselling or providing opportunity for staff to talk with colleagues/management as appropriate. (See Appendix 2)

5.11.10 Provide information and support for staff giving evidence in legal proceedings e.g. time for staff to attend court, and/or visit court before trial date. (See Appendix 2).

5.11.11 In extreme cases the organisation may impose specific conditions in the treatment of particular patients who exhibit violence and/or aggressive behaviours and pose a risk to staff and others.

5.11.12 Regularly review the policy implementation and performance, at Service and departmental levels.

5.11.13 Ensure appropriate resources are provided to achieve the aims of the policy and guidance document.

6. REVIEW
The Policy will be reviewed every 3 years or earlier in the light of any new legislative changes or where specific guidance requiring review is issued by NHS Scotland, or where as a result of a serious critical incident a review is recommended.

All staff are responsible for adhering to approved safe systems of work and departmental procedures for the management of violence and aggression, when they are working in a hospital, health centre, clinic, or in the community.

7. REFERENCES
The Health and Safety at Work etc Act 1974
The Management of Health and Safety at Work Regulations 1999 (as amended)
The Emergency Workers (Scotland) Act 2005 (as amended)
The Management of Offenders (Scotland) Act 2005
Health and Safety Executive Guidance 1998
NHS Scotland Pin Managing Health at Work Guideline 6. 2003
Data Protection Act 1998
Lone Working Policy
Stalking Policy
Dignity at Work Policy
Supporting Information

A Communication and Implementation Plan
This should include any training required and clear plan for communications with anyone expected to be aware of or implement the Policy.

B Monitoring
Monitoring will be undertaken by the Health and Safety Forum, Violence and Aggression Reduction Group, local Health and Safety Committees and groups across NHS GG&C, utilising incident reporting data. Furthermore, advisory services including Management of Aggression teams and the NHS GG&C Health and Safety Service will review incidents on a regular basis reporting to local committees and forums. Any issues highlighted by trend analysis will be escalated through the Health and Safety Forum to Board level.

C Impact Assessment
Completed in accordance with NHS GG&C guidance
APPENDIX 1  

GUIDANCE DOCUMENTS

NHS Greater Glasgow and Clyde Documents (available on Staffnet)  
Management of Violence and Aggression Strategy and Action Plan

Health and Safety Management Manual:
• Managing Violence and Aggression  
• Violence and Aggression Risk Assessment

Acute Division
Standards of Behaviour Protocol & Guidance for Patients and Visitors within the Acute Division July 2012  
Guidance in Handling Violence Against our Staff and Patients  
Post Incident Checklist  
Post Incident care review pro-forma

Partnerships
Guidance Relating to the Management of Violence and Aggression for Health Centres, Clinics, Resource Centres and Other Premises

Other Agencies
Newcastle Psychological Intervention for managing Stress and Distress in Dementia

Sources of Further Information and Guidance
Health and Safety Executive  
Mental Welfare Commission for Scotland  
Royal College of Nursing  
British Medical Association  
Royal College of Psychiatrists  
National Institute for Clinical Excellence  
National Patient Safety Agency  
Security Management Service NHS
APPENDIX 2

Staff Support Services

There are several external agencies, as well as services provided by NHS Greater Glasgow & Clyde, available to staff who have been affected, either physically or mentally by violence and aggression. Information on services provided and contact details are shown below

External Agencies

Employee Counselling Service
This is a free, confidential and wholly independent service which you can access. Counsellors are specially trained to help with:

- Personal and emotional difficulties
- Relationship or family concerns
- Stress
- Harassment or bullying
- Bereavement
- Addiction

The helpline advisers can also provide a gateway to professional advice and support for Debt or Legal problems.

Lines open 24 hours 7 days per week
To ring the Helpline for advice and information call 0800 389 7851
To arrange an appointment for structured counselling call 0800 435 768
Employee Counselling Service
8th Floor, Savoy Tower
77 Renfrew Street
Glasgow
Tel/Fax 0141 332 9833
E-mail: ecs@empcs.org.uk
http://www.empcs.org.uk

Victim Information Advice Service
The VIA service provides general information about the criminal justice process and informs victims of the progress of court proceedings following violent or aggressive incidents.

VIA Office
Procurator Fiscals Office
10 Ballater Street
Glasgow
G5 9PS
Tel: 0844 561 3000
http://www.crownoffice.gov.uk
Victim Support
Victim Support Scotland is an independent voluntary organisation providing practical and emotional support and information about the criminal justice system to victims, witnesses and others affected by crime. Trained staff and volunteers deliver this assistance through a network of community and court-based services throughout Scotland. There is a community-based victim service in every local authority area and a court-based witness service in every Sheriff Court.
Services provided include:

A sympathetic ear
Emotional support
Practical help
Support in court for witnesses, including a pre-trial visit to the court
Information about compensation, including assistance in completing forms
Information about criminal justice procedures
Information about other agencies which provide further specialist support

West Dunbartonshire Office
28 Kilbowie Road
Clydebank
G81 1TH
victimsupport.westdumbartonshire@victimsupportsco.org.uk
Tel: 0141 952 2095
Victim Support Scotland
15/23 Hardwell Close
Edinburgh
EH8 9RX
Telephone: 0845 603 9213
Fax: 0131 662 5400
The helpline operates from 9am - 4.30pm Monday to Friday.
Outside these hours, you can contact the UK Victim Support line: 0845 30 30 900, which operates from:
9am – 9pm Monday to Friday
9am – 7pm at weekends
9am – 5pm on Bank Holidays
E-mail: info@victimsupportsco.demon.co.uk
Website: www.victimsupport.org

NHS Greater Glasgow & Clyde Support Services

Health & Safety Services
Details of how to contact health and safety practitioners and the violence and aggression management team can be found on Staffnet via Info Centre.
**Occupational Health Service**
The NHSGGC Occupational Health Service is delivered from a central hub located on the 2nd Floor, former Outpatients Department, Victoria Infirmary with satellite clinics across Glasgow and Clyde.

Appointments can be made by phoning 0141 201 5674

**Legal Office**
**Witness Support**
In the event that the Legal Office is approached by a member of staff who is feeling anxious or vulnerable due to being Cited to attend Court, there is a Court based service called the “Witness Service” that offers support and guidance to all witnesses attending every Sheriff and High Court.
This support can include:-

- Practical help
- Information on court procedures
- Arrange pre-trial familiarisation visit to the court
- Guidance regarding further support
- A listening ear for your anxieties/concerns
If you have been cited to attend Court and require any further guidance or support then contact the NHSGGC legal office.