INTRODUCTION

1. The Doncaster and Bassetlaw Hospitals NHS Trust has a duty to provide a safe and secure environment for both patients, staff, volunteers and visitors. Violent or abusive behaviour will not be tolerated and decisive action will be taken to protect patients, staff, volunteers 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 subject to these arrangements, e.g. an individual who becomes abusive as a result of an illness or injury.

APPLICATION

3. All members of 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 these arrangements.

4. The use of this policy will only apply to violent/abusive visitors and patients who are aged 18 or over.

SUMMARY

5. There has been a dramatic increase in recent years in the level of violence and abuse faced by staff, volunteers, visitors and patients within the hospitals providing service in the Trust. Incidents have included significant injury to staff, damage to vital equipment, and extreme verbal abuse and threats. Sadly some of the perpetrators of violence and abuse are well known to staff and have persisted in these behaviours during repeated visits to hospitals within the Trust. There is widespread recognition amongst staff and management of an outstanding need to tackle such behaviour effectively and a belief and fear of violence is seriously affecting morale and our ability to retain and recruit staff. The Trust has a statutory obligation to provide a safe and secure environment for its staff and others as well as a moral duty to take all reasonable steps to protect and support its staff.

6. This policy is designed as an important step in improving the Trust’s ability to tackle incidents involving violence and abuse. The aim of the policy is to detail the behaviours which are unacceptable and the sanctions available in the face of such behaviour, including a mechanism whereby patients who are extreme or persistent in their unacceptable behaviour can, 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 the period of the sanction.) This policy has been produced in the context of the Government's national Zero Tolerance initiative against violence in the NHS and it must be applied effectively in all appropriate situations.

POLICY

Expected Standards of Behaviour

7. The following examples of behaviour are not acceptable on Trust premises:

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

Sanctions

8. Visitors (anyone who is not a patient, volunteer or a member of staff)

• Visitors who display any of the above behaviours will be asked to desist and offered the opportunity to explain their action

• Continued failure to comply with the required standard of behaviour will result in appropriate staff and the duty manager being bleeped and the removal of the offending individual from the Trust property. The excluded individual may request an immediate review of the exclusion by the duty manager and should be informed of this

• Any visitor behaving in an unlawful manner will be reported to the police and the Trust will seek application of the maximum penalties available in law. The Trust will prosecute all perpetrators of crime on or against Trust property, assets and staff

• The relevant Directorate General Manager/Clinical Nurse Adviser may decide to continue to exclude an individual, remove from the premises or restrict visiting only to specific times, and if necessary, under escort.
9. **Adult Patients (age 18 or over)**

Following any incident the immediate Manager or Department Head (or their deputy) will explain to the patient that his/her behaviour is unacceptable and explain the expected standard that must be observed in the future.

- If the behaviour continues, the responsible Manager or Clinician will give an informal warning about the possible consequences of any further repetition.

- Failure to subsequently desist will result in the application of the Arrangements for the Provision of Care to Individuals who are Violent or Abusive (hereafter referred to as the Arrangements for Care) as a formal written warning of the consequences of such behaviours (a **Yellow Card**). If the patient complies with the arrangements for care he/she can expect the following:
  - That the clinical care will not be affected in anyway.
  - That where substance abuse has been identified appropriate assistance will be provided.
  - That a copy of the confirmation of the Arrangements for the Care of Individuals who are Violent and Abusive will be filed with the Risk Manager, Security Adviser and a copy will also be kept in the patient’s notes.
  - A system for “flagging” on PAS will be developed, and once in place the use of the arrangements for care will be highlighted on this system.
  - That the responsible Managers will be informed.
  - That the Doncaster and Bassetlaw Hospitals NHS Trust will fully investigate all valid concerns raised by a patient.
  - That the arrangements for care will lapse after one year.
  - Failure to comply with the Arrangements for Care will, at the request of the relevant Directorate General Manager and the Clinical Director (or their nominated deputy), result in exclusion from the Trust (a **Red Card**).

- Such an exclusion will last one year, subject to alternative care arrangements being made; the provision of such arrangements will be pursued with vigour by the relevant Clinician. In the event of an excluded individual entering any of the Trust’s Accident and Emergency or Minor Injuries Units for emergency treatment, that individual will be treated and stabilised with, if necessary, appropriate staff in attendance. If the patient is not fit for discharge and continuing treatment is required, the Trust would seek to transfer the patient immediately. However, if admission is unavoidable arrangements will be made to have supporting staff in attendance. The need for additional support will be determined by an appropriate member of staff (see Appendix 2).
Where individuals have been excluded, the process of reviewing that exclusion will begin at 6 months following the issue of the letter of exclusion from the Trust. The outcome of that review, which will coincide with the exclusion of one year, will be notified to the patient concerned. Upon notification to the patient that the exclusion is being withdrawn they would be advised of the requirements to comply with the expected standards of behaviour as a consequence of the exclusion being lifted.

- Any patient behaving unlawfully will be reported to the police and the Trust will seek the application of the maximum penalties available in law. The Trust will prosecute all perpetrators of crime on or against Trust property, assets and staff.

Nigel Clifton, Chief Executive
Dr Emyr Wyn Jones, Medical Director
Sharon Stower, Director of Nursing and Service Improvement

Written by: Joe Brayford
Approved by: Clinical Governance Sub-Committee - September 2002
Reviewed by: Chief Executive
             Medical Director
             Director of Nursing and Service Improvement
Date: November 2003
For Review: November 2005
1. In the event of inappropriate behaviour by a patient and following careful review by the individual’s clinical team (or the on-call team out of hours) the Arrangements for the Provision of Care for Individuals who are Violent or Abusive (hereafter referred to as the Arrangements for Care) can be instigated.

2. In the event of the Senior Nurse on duty on the relevant ward feeling that Arrangements for Care may be appropriate, he/she should contact a suitable member of staff e.g. the Directorate/General Manager, Duty Manager or Executive on-call.

3. It is the responsibility of that suitable person (Appendix 2) to undertake the following:

   • Take full details of the incident and the staff members concerned, document them and decide whether Arrangements for Care are required. Whenever possible get witnesses to the event to sign the record as true and accurate.

   • If arrangements for care are required:

     • Inform and seek advice from the patient’s Consultant or senior member of the medical team (on-call team out of hours), or their GP if necessary.

     • Inform the patient of the ward staff’s concerns and fully explain the Arrangements for Care, ensuring 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 Arrangements for the Provision of Care to Individuals who are Violent or Abusive (Appendix 2), ask the patient to sign the Confirmation. If the patient refuses to sign this should be documented then 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) witness the explanation to the patient and signs the confirmation.

     • Give the patient a copy of the confirmation of the Arrangements for Care and of the policy itself.
• Prepare a copy of the standard letter (Appendix 3) for issue to the patient’s GP. This letter should be signed and sent by the Directorate General Manager. A copy of the policy must be attached.

• Prepare a copy of the standard letter (Appendix 4) for issue to the patient. This letter should be given to the Directorate General Manager with the letter to the GP for checking both the letter and that the procedure and the Arrangements for Care are being applied appropriately, and for onward submission to the Chief Executive’s office for signature. Copies of the confirmation of the Arrangements for Care should be sent to (individuals to be identified).

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 documentation. Doncaster and Bassetlaw Hospitals NHS Trust Arrangement for Provision of Care to Individuals who are Violent or Abusive – Implementation of Checklist.
If arrangements for care are required:

- Inform and seek advice from the patient’s Consultant or senior member of the medical team (on-call team out of hours) or their GP if necessary.

- Ensure that the incident which triggered the procedure is documented in full and signed by a member of staff and any witnesses.

- Inform the patient of the ward staff’s concerns and fully explain Arrangements for Care, ensuring there is no confusion as to the standard of behaviour required or the possible consequences of a failure to comply.

- Complete all the patient’s details on the Confirmation Arrangements.

- Ask the patient (Appendix 2) to:
  - Sign the Confirmation of Arrangements. If the patient refuses to sign, this should be documented, but it should be explained to the patient that the document will be valid with or without their agreement.
  - Ensure that a suitable member of staff (any doctor or registered nurse) witness the explanation to the patient and signs the confirmation of arrangements.
  - Inform the Duty Manager(s), give the patient a copy of the Confirmation of Arrangements for Care and the Policy itself.
  - Prepare a copy of the standard letter (Appendix 3) for issue to the patient’s GP, this letter should be signed and sent by the Directorate General Manager. A copy of the policy must be included.
  - Prepare a copy of the standard letter (Appendix 4) for issue to the patient. This letter should be given to the Directorate General Manager who will give the letter to the GP for checking both the letter and the procedure for the Arrangements for Care have been applied appropriately for onward submission.
  - The incident/behaviour must be documented in the patient’s medical and nursing notes.

- The Directorate General Manager to:
  - Check the procedure has been applied correctly.
  - Issue the letter to the GP.
• Forward the letter to the patient and the Chief Executive’s Office for signature and issue.

• The Chief Executive’s office to issue the signed letter and copy the Arrangements for Care and letters to the identified individuals.
CONFIRMATION OF ARRANGEMENTS FOR PROVISION OF CARE
TO INDIVIDUALS 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 ……………………………………………………………………………

Their Address ……………………………………………………………………………………………

………………………………………………………………………………………………………………

GP's Name ……………………………………………………………………………………………

GP's Address ……………………………………………………………………………………………

………………………………………………………………………………………………………………

GP's Phone Number ………………………………………………………………………………………

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

* I agree to comply with the expected behaviours, set out in the policy, under which care will be provided at Doncaster and Bassetlaw Hospitals NHS Trust.

Signed ………………………………………… Date …………………………………………………

* Delete if refused

Witness for the Trust

(Initiator of Procedure)

Name ………………………………………… Name …………………………………………………

Designation ………………………………… Designation ………………………………………

Signed ………………………………… Date ………… Signed ………………………………… Date …………

Examples of appropriate managerial staff able to initiate the Procedure: General Manager, Clinical Director, Duty Manager, Executive Director, Clinical Nurse Adviser, Senior Clinician (Specialist Registrar or above).

Out of hours - Duty Manager/Executive Director on-call.
APPENDIX 3

DONCASTER AND BASSETLAW HOSPITALS NHS TRUST

CONFIRMATION OF ARRANGEMENTS FOR PROVISION OF CARE TO INDIVIDUALS WHO ARE VIOLENT OR ABUSIVE

To:GP

The above individual is currently an inpatient on Ward at Hospital which forms part of the Doncaster and Bassetlaw Hospitals NHS Trust. In order to protect the ward environment for other patients and members of staff, it has been necessary to instigate Arrangements for the Provision of Care to Individuals who are Violent and Abusive for the above named patient (a Yellow Card, see enclosed).

If you have any queries please do not hesitate to contact:

.............................................................. (name and tel no of patient's consultant)

or

.............................................................. ............ (name and tel no of general manager or head of nursing)

Yours sincerely

(name)
General Manager

Note: A copy of the Arrangements for the Provision of Care to Individuals who are Violent or Abusive must be attached to this letter
DONCASTER AND BASSETLAW HOSPITALS NHS TRUST

ARRANGEMENTS FOR THE PROVISION OF CARE TO INDIVIDUALS WHO ARE VIOLENT OR ABUSIVE

Name ........................................
Address ........................................
 ........................................
 ........................................

Hospital Number  ........................................

Dear

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

The first stage of the Arrangements for Care has been applied to you and you should have received an explanation as to why you are subject to these arrangements.

You should also have a copy of the Arrangements for the Provision of Care to Individuals who are Violent or Abusive to read.

Should you on any occasion in the future fail to comply with the expected standard of behaviour as explained to you by and outlined in the Arrangements for the Provision of Care, you will become subject to the next stage of the arrangements which may involve your immediate exclusion from the Trust premises. Such an exclusion from Trust premises would not mean that you would not receive care as your responsible Clinician would make alternative arrangements for you to receive treatment.

Yours sincerely

Mr N J Clifton
Chief Executive
APPENDIX 5

DONCASTER AND BASSETLAW HOSPITALS NHS TRUST

RED CARD/EXCLUSION – PROCEDURE CHECKLIST

1. The decision to exclude can only be taken by both the relevant Directorate General Manager and the Clinical Director (or in their absence their nominated Deputy), once alternative care arrangements have been made. This does not include the relevant Clinician from discharging a patient who no longer requires inpatient 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 patient must be informed that they may challenge an exclusion by an established Complaints Procedure.

4. The Risk Manager must be informed and they will facilitate the dispatch of a written confirmation from the Chief Executive to the patient's home.

5. (Managers to be identified) must also be informed.

6. A detailed record of the rationale for exclusion and the alternate arrangements for care should be kept in the patient’s medical and nursing documentation.

7. The patient should be “flagged” on the PAS system and the use of the “Red Card” must be entered on the database.

8. If an excluded individual returns in any circumstances other than in a medical emergency appropriate staff should be notified immediately. The Trust will subsequently seek legal redress to prevent the individual from returning to Trust premises.
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YOU DO NOT HAVE TO FOLLOW ALL STAGES OF THIS FLOWCHART IF THE SITUATION WARRANTS IMMEDIATE ACTION