

Ref: QS15

MANAGEMENT OF VIOLENCE AND AGGRESSION POLICY

Executive Sponsor & Function:	Executive Director of Strategic Transformation, Planning and Digital
Document Author:	Trust Health and Safety Manager
Approved by:	Quality, Safety & Performance Committee
Approval Date:	16 th January 2024
Date of Equality Impact Assessment:	November 2023
Equality Impact Assessment Outcome:	This policy has been screened for relevance to equality. A positive impact has been identified.
Review Date:	16 th January 2027
Version:	8.0

Item no	Contents	Page
1.	Policy Statement	3
2.	Scope of Policy	3
3.	Aims and Objectives	3
4.	Responsibilities	3
5.	Definitions	7
6.	Implementation/Policy Compliance	7
7.	Equality Impact Assessment Statement	10
8.	References	10
9.	Getting Help	11
10.	Related Policies	12
11.	Information, Instruction and Training	12
12.	Main Relevant Legislation	13
	Appendix 1 – Example Patient Undertaking Form	14
	Appendix 2 – Example Patient Undertaking Letter	15
	Appendix 3 – All Wales NHS Violence and Aggression Risk Assessment Form	16
	Appendix 4 – Unacceptable Standards of Behaviour	23
	Appendix 5 – Visitor Undertaking Contract	24
	Appendix 6 – Visitor Undertaking Letter	25

1. Policy Statement

Velindre University NHS Trust recognises its duty to provide a safe and secure environment of service users, staff and visitors. Violent or abusive behaviour will not be tolerated, and appropriate action will be taken to protect staff, service users and visitors.

The Trust, whilst managing the risks from Violence and Aggression will work in partnership with the Welsh Government and will utilise guidance within the All Wales Violence and Aggression Training Passport and Information Scheme (V&A training scheme) to ensure adequate and effective training is provided to staff. The Trust is also supportive of the Obligatory Response to Violence published by the Welsh Government and the Crown Prosecution Service and supported by the All Wales Anti Violence Collaborative

Velindre University NHS Trust takes a zero-tolerance approach to violent or aggressive behaviour, aiming to minimise the incidents of violence and aggression faced by staff and tackle these effectively where they do occur by utilising criminal, civil and internal managerial actions.

2. Scope of Policy

This policy applies to all staff employed by or contracted to the Trust, including those within Hosted Organisations.

3. Aims and Objectives

The aim of the policy is to raise awareness that violence and aggression against NHS staff is unacceptable and will not be tolerated. It seeks to reduce and prevent incidents of violence and aggression towards NHS employees by supporting staff to identify and deal with unacceptable behaviour.

The objectives of the policy are to: -

- Provide appropriate staff training as identified by risk assessment and training needs analysis in line with the V&A training scheme.
- Reduce the effects of violent incidents and the risk of intimidation by provision of managerial support and aftercare at the earliest opportunity.
- Reduce the severity of injuries from violent incidents, by building staff confidence in de-escalation skills and breakaway techniques gained at training.
- Identify staff/groups via risk assessment, who may be considered as higher risk and ensure adequate controls to minimise the risks arising from violent incidents.
- Establish sanction procedures for those who demonstrate violent behaviour towards staff and outline the circumstances where sanctions will be applied.

4. Responsibilities

4.1 The Chief Executive

The Chief Executive has overall accountability for health and safety within the organisation, making sure that arrangements are in place for:

- an Executive Director to be appointed as a lead for health and safety
- the Trust Board and Executive Management Board to be informed as required on violence and aggression issues that affect employees and/or the public
- the Trust's Management of Violence and Aggression Policy to be implemented
- supporting the training and development of staff
- ensuring that there are sufficient resources for the implementation of this policy
- authorising the exclusion of service users or their relatives/carers or visitors, who represent an unacceptable risk of violence and aggression to staff and or other service users

4.2. Director of Strategic Transformation, Planning and Digital

The Director of Strategic Transformation, Planning and Digital has delegated responsibility at Trust Board level for managing health and safety and is responsible for ensuring that:

- the Trust's Management of Violence and Aggression Policy is reviewed as and when appropriate
- regular updates on violence and aggression issues are reported to the Executive Management Board
- activities are planned, measured, reviewed and audited so that legal requirements are satisfied and health and safety risks arising from potential violence and aggression are minimised
- information regarding the management of violence and aggression is effectively communicated throughout the Trust
- The approach to the management of violence and aggression is both systematic and appropriate

4.3. Executive Director of Organisational Development and Workforce

The Director of Organisational Development and Workforce is responsible for ensuring that: -

- there is an effective mandatory and induction training programme that includes the management of violence and aggression, which is appropriately monitored and recorded.
- reports on work related illness or work-related ill health are submitted to the Health Safety & Fire Trust Board Meeting. This should include information

on work related stress and mental health wellbeing that may arise from an act of violence or aggression.

- arrangements are in place for health surveillance, support and counselling for employees.

4.4 Divisional Directors / Directors of Hosted Organisations

Directors have overall responsibility for making sure that arrangements are in place for:

- establishing a local health & safety group which comprises representatives from all relevant departments and staff representatives, within their service area, where issues or concerns regarding the management of violence or aggression can be discussed.
- liaising with the Trust Capital Planning and Estates Department
- ensuring that local procedures for the management of violence and aggression are developed and implemented in line with the overarching trust policy.
- preparing and implementing the organisational structure and allocating responsibility for the management of violence and aggression within the service area and that the identified personnel (e.g. Senior Manager) are aware of their responsibility.
- ensuring that risk assessments for the management of violence and aggression have been implemented for all relevant activities within the service area.
- ensuring that employees have access to a level of training appropriate to their role.
- ensuring that they are familiar with and ensure that all employees under their control are aware of any emergency plans for the management of violence and aggression.
- ensuring that effective local arrangements are in place are proportionate to the risk within their service.

4.5. Assistant Director of Estates, Environment & Capital Development

The Assistant Director of Estates, Environment & Capital Development will make arrangements to

- ensure that competent risk management and health and safety advice is available to all divisions and hosted organisations of the Trust and to support the appointed local lead managers in developing and maintaining their safety management systems and training in the management of violence and aggression. Competent advice may be sourced both internally and externally, dependant on the nature of the topic.
- provide support to the Executive Director with delegated responsibility for risk and health and safety management across the Trust, divisional directors, operational managers and health and safety leads in the implementation of policy,

- ensure that statistical information is available on health and safety performance throughout the Trust and interpret such information in order to evolve action plans to improve or maintain standards.
- investigate incidents and report to senior managers on findings and where necessary provide recommendations

4.6 Departmental Managers

Department managers have overall responsibility for making sure that arrangements are in place within their department to:

- identify any potential concerns arising from the management of violence and aggression on a day to day basis.
- ensure that a risk assessment is carried out, in line with current legislation and trust policy. The assessment should include sufficient information about the risks that are faced and the preventive / control measures that are required. The risk assessment should be regularly reviewed.
- identify any specific training that may be required by departmental staff via the PADR process and advise the Education and Development Team to ensure that this is reflected within the job profile on the ESR system.
- identify any health surveillance or support that may be required by staff following an incident and liaise with local Workforce personnel to ensure that an appropriate level of occupational health support is readily accessible to staff
- have access to specialist advice by liaising with the local Health & Safety lead, specialist advisor or the Trust Capital Planning and Estates Department
 - ensure that individuals are aware of their responsibilities for the management of violence and aggression and have access to current information and risk assessments.
- develop and implement a local departmental procedure or safe system of work for the management of violence and aggression
- consult and involve staff and safety representatives with local management arrangements
- report **all** violent and aggression incidents.

Following a violent or aggressive incident the manager will:

- ensure that V&A incidents are reported in the incident reporting system Datix
- discuss the incident with the staff member
- where appropriate investigate the incident
- ensure the controls are adequate to manage the risk
- provide a supporting role to encourage staff well being
- ☐ refer staff to occupational health where required
- advise on workplace options and counselling available
- seek advice or guidance where necessary
- identify and escalate any identified risks, in accordance with the Trust risk assessment policy

- ensure that any outcome e.g. a change in process, further training required or a sanction against the perpetrator, will formally be fed back to the staff member concerned.

Services are strongly encouraged to ensure that their correspondence and information leaflets incorporate a statement to advise service users and their relatives of the appropriate standard of behaviour expected on Trust premises and towards Trust staff, noting that there will be consequences for non-compliance. Suggested wording for this statement is:

Velindre University NHS Trust aims to provide safe, high quality services to all service users. The Trust has a zero-tolerance approach towards violence and aggression against our staff and on our premises and may utilise CCTV and/or audio recording devices whenever personal safety is threatened. Evidence obtained will be used to secure sanctions against perpetrators."

4.7 Employees

All employees are expected to:

- act in a responsible manner and treat others with dignity and respect whilst performing their duties
- comply with policies and procedures developed to protect and control violence and aggression
- report all violent or aggression incidents (verbal or physical) including any form of intimidation or harassment regardless of an injury
- discuss any health and safety concerns with their manager
- cooperate with their manager in relation to health and safety and risk assessment
- undertake the relevant level of Violence & Aggression training and maintain their competence
- consider the offer of support and advice or counselling when given.

4.8 Occupational Health Departments

The Trust has service level agreements in place for the provision of Occupational Health which is covered by local procedures. Please seek advice from your Organisational Development and Workforce department, who will be able to direct you to the appropriate service provider. Where health issues have been identified, a self-referral is available to the Employee Assistance Programme. The manager is also able to refer staff involved in an incident of violence and aggression to Occupational Health, however, this referral is not covered by the service level agreement and will incur an additional fee.

The role of the Occupational Health Department in the management of violence and aggression is to:

- provide expert advice on physical and psychological trauma
- undertake appropriate health evaluation

- provide a confidential counselling service that may be required following an incident of violence and aggression. (please note that a charge will be made for this service)

5. Definitions

The Health and Safety Executive define work related violence as:-

“Any incident where staff are abused, threatened or assaulted in circumstances relating to their work, involving explicit or implicit challenge to their safety, well-being or health. This can incorporate some behaviour identified in harassment and bullying, for example verbal violence”.

6. Implementation/Policy Compliance

6.1 Incident Reporting

All violence and aggression incidents, including physical, verbal, harassment and abuse, must be reported through the Trust and Divisional Incident Reporting Procedures. Violent incidents where required should be appropriately investigated to identify the cause even where no injury occurs. Managers are responsible for ensuring any investigation outcome or further action required is added to the Datix incident system and any feedback to staff is formally noted on this record.

All Managers are required to assess whether staff involved in a violence and aggression incident require help and/or support, this could include:

- arranging cover for the staff member to seek medical advice
- providing assistance and support and appropriate debriefing
- where necessary staff should be allowed to go home to recover
- arranging follow up support, occupational health or further training
- offering staff confidential advice from the employee assistance program (EAP).

It is recognised that staff have the choice as to whether debriefing or counselling is desired, it is not a mandatory requirement.

6.2 Risk Assessment

Managers are responsible for ensuring that risk assessments are completed for the staff within their control, including staff who are classed as public facing, lone workers and care or home visitors and also to ensure the risk assessment should identify the controls in place and any further actions required.

Individual risk assessments may be required for a small number of staff, (see appendix 3 All Wales V&A Training and Information Scheme Risk Assessment Form). It is not necessary to provide individual assessments for every staff member unless they have been identified as higher risk e.g. lone worker (including out of hours working and isolated working).

Consideration should be given to situations that may be identified both from local and national perspectives. These include service users and visitors who maybe under the influence of alcohol and/or drugs, confused, elderly, or suffering brain cancer/disease, suffering from a paranoid illness where their perception of reality is distorted and or unable to communicate or service users with a history of violent behaviour who are more likely to become violent again. However, it is essential to emphasise that reoccurrence of violence is not definite and may be preventable.

There are also some specific staff situations where the risk would appear to be higher, these include: Individuals or small numbers of staff alone on night duty, porters/security staff who assist others during violent incidents, dealing with relatives and carers who may be anxious or angry, areas with cash or drugs which could be deliberately broken into and or home visits

6.3 Lone worker assessment / domiciliary / home visits

The risk assessment needs to consider options to eliminate or control a hazard in order to decrease the degree of risk to as low as reasonably practicable. The assessment should consider the suitability of the member of staff to undertake Lone Worker duties – expert advice is available from Occupational Health.

Written procedures are also required to ensure that support systems are in place for lone working including home visits, out of hours working and working in isolated areas. For further guidance on lone working please refer to the Lone Working Policy.

6.4 Personal Communication Devices

Due to the low severity of violence and aggression incidents, the Trust does not automatically provide staff with personal communication devices. If a need for staff to use such a device is identified via a risk assessment, local arrangements should be put in place to provide and monitor the use of such devices.

Personal communication devices could include telephones, mobile phones, radios, automatic warning devices and emergency alarms. It should be noted that personal communication devices alone will not prevent incidents from occurring. However, if used correctly and in conjunction with robust procedures, they will improve the protection of lone workers.

6.5 Sanctions available to the Trust

Managers may have an informal meeting with the perpetrator (service user) where a one-off incident occurs and discuss requirements for an improvement in behaviour. However, if no improvement is noted a formal meeting may be held.

A warning letter may be issued to a perpetrator whose behaviour is violent or aggressive towards staff, where the unacceptable behaviour has been established and meets the advice given within the V&A Training Scheme. (See appendix 1 & 2 for example of the Patient Undertaking letters).

The removal of treatment/service is a significant action and must be approved by the Chief Executive prior to initiation. It will also ensure that those Trust services that may be affected are informed. This action will be undertaken within both the legal and control of data constraints.

Divisional procedures are in place for the removal of services for those service users who repeatedly refuse to co-operate with the required behaviour and/or present a serious threat. These procedures shall ensure that the service users and their GP are informed of the reason for and duration of such action.

Divisional sanctions may be developed, to ensure a consistent and common approach these will be discussed at Health Safety & Fire Trust Meeting.

Information sharing protocols with the Police, GP's and Ambulance services have been established to ensure that communications and risks related to the violent service users are appropriately handled.

Patients without capacity

Where patients do not have capacity to understand the ramifications of their behaviour, punitive actions are inappropriate, and the emphasis must be placed upon risk control measures to ensure that care can be provided in as safe a manner as is reasonably practicable.

Patient Undertakings, exclusion and legal action are usually inappropriate in these cases, although prosecution to determine a finding of fact rather than to achieve a criminal sanction may be a consideration.

Patients with fluctuating capacity

Where patients have fluctuating mental capacity, their capacity at the time of the incident should inform the action taken. Where the patient does not have capacity at the time of the violent or aggressive incident, opportunities should be taken to discuss the behaviour in as part of the therapeutic engagement process at the point that the individual has capacity.

Implementing Remedies/Sanctions Against Visitors and Relatives

The majority of incidents involving visitors take the form of verbal abuse and/or threatening behaviour. Verbal abuse is a form of violence. All incidents must be reported to the line manager and an online incident report form must be completed. Harassment is a criminal offence and violent incidents should be reported to the police.

If a situation escalates and involves a vulnerable adult (patient or relative) then a vulnerable adult referral form should be completed.

The exclusion of a visitor does not prevent them from attending the Trust for their own treatment. Staff may wish to seek advice and support from the Health & Safety team when considering applying remedies and/or sanctions. Example of a visitor undertaking letter is listed in the appendices.

6.6 Security Guards

Security guards employed by the Trust should be trained to the appropriate level as indicated in the V&A training scheme. The degree of involvement expected from security guards in a V&A incident should be clearly identified within localised procedures / emergency plans and their job descriptions.

6.7 Case Manager

The Trust considers it is not appropriate at this time to employ a full time Case Manager, due to relatively size of the organisation. However, the Trusts Health and Safety Manager will act as the Case Manager. If an incident occurs that is of the severity that would require advice and support from a Case Manager, staff and/or Service leads should contact the Divisional Health and Safety Advisors in the first instance.

6.8 Contacting the Police

The Trust supports prosecution action against individuals acting in a violent or aggressive manner towards staff. However, the trust itself cannot initiate a prosecution, this needs to be done by the victim or a witness to the incident. If the victim wishes police action to be taken, they, or local management on their behalf, should contact the police using either the 999 number in an emergency, or 101 where nonemergency crime or antisocial behaviour has been committed. Management/supervisory authorisation is absolutely not required before calling the police.

Staff should err on the side of caution and “if in doubt, call the police”

7. Equality Impact Assessment Statement

This policy has been screened for relevance to equality. A positive impact on the safety and wellbeing of staff has been identified.

8. References

[The Health and Safety Executive Guidance on Violence in Health and Social Care](#)

[All Wales NHS Violence and Aggression Training Passport and Information Scheme](#)

[Obligatory Responses to Violence in Healthcare.](#)

9. **Getting Help**

Advisors for certain aspects of Health, Safety and Risk Management have been incorporated within the Trust structure, to provide specialist advice as outlined below:-

**Assistant Director of Estates,
Environment and Capital
Development**

Velindre NHS Trust Headquarters
2 Charnwood Court
Heol Billingsley, Parc Nantgarw
Cardiff CF5 7QZ

Health and Safety

Trust Health & Safety Manager
Velindre NHS Trust Headquarters
2 Charnwood Court
Heol Billingsley, Parc Nantgarw
Cardiff CF5 7QZ
Tel: WHTN 01875 6522

VCC Health & Safety Advisor
Velindre Cancer Centre
Velindre Road
Whitchurch
Cardiff CF14 2TL
Tel: 02920615888

WBS Health & Safety Advisor
Welsh Blood Service
Ely Valley Road
Talbot Green
Pontyclun CF72 9WB
Tel: 1797 2356

Occupational Health

Cardiff and the Vale University LHB
Heath Park
Cardiff CF14 4XW
E-mail: occupational.health@wales.nhs.uk
Telephone; 02920743264

Occupational Health provision has been established via formal service level agreements with the above-named local health board. Staff working outside the Geographical region of South East Wales are provided with Occupational Health services via local arrangements with their Occupational Health provider. Where practical, the occupational health provision should cover pre-employment checks, formal health surveillance, health assessments in connection with fitness to work, identification of occupational hazards and risks, along with support and advice for staff.

Employee Assistance Programme (EAP)

The Trust's EAP provider is [Workplace Options](#), who provide the Employee Assistance Program which has a wide range of health and wellbeing services including counselling available to staff. Information on services available:

- Free of charge
- Available 24 hours a day, every day of the year
- Confidential
- Independent from your employer
- Immediate access to impartial specialists
- Support on an unlimited number of issues
- Saves time and legwork
- Helps you plan ahead with practical matters
- Supports you during more difficult times

10. **Related Policies**

This policy should be read in conjunction with, or reference made to, the following trust documents: -

Health, Safety and Welfare Policy	QS18
Lone working policy	QS30
Incident Reporting and Investigation Policy	QS 01
Security Policy	PP 02
Risk Management Process	GC 04b

11. **Information, Instruction and Training**

The V&A Training Scheme was developed in conjunction with Welsh Assembly Government and many other interested parties.
Its aims are to:

- achieve consistency in violence and aggression risk assessment
- provide training methods that are standardised across Wales
- reduce training resources and duplication, where staff moved from one Trust to another.

Welsh Assembly Government mandated all NHS staff are required to undertake Module A. Staff requiring Module B and C training will be identified by the risk assessment and the training needs analysis.

Violence and aggression training will be available at a divisional level and attendance information will be held within the Electronic Staff Record (ESR) system. Training compliance is monitored on a quarterly basis at the Health Safety & Fire Trust Board Meeting.

Module A: Induction and Awareness (Induction or via E Learning)

Provides all staff with general awareness and highlights appropriate local policy and procedures in place. Also gives a clear definition of violence and aggression and raises the importance of managing and reporting violence and aggression incidents in the workplace.

Module B: Theory of Personal Safety and De-escalation

Provides selected front-line staff identified via risk assessment /training needs analysis with a greater awareness of V&A issues and outlines the theory of personal safety and de-escalation. Emphasis is placed upon the importance of de-escalation and the steps which can be taken to prevent incidents of violence and aggression occurring. This module is intended to develop the skills to recognise and de-escalate potential violent incidents and will include issues associated with customer care and diversity.

Module C: Breakaway and Escape Techniques

Provides selected front-line staff identified via risk assessment /training needs analysis with practical skills to enable them to break away from a situation of violence and aggression. Emphasis will be placed upon the importance of communication skills and management of personal safety throughout all breakaway techniques.

Exemptions:

New staff to Velindre University NHS Trust will be required to attend the correct level of training as identified via Divisional risk assessment. Exemptions from training will only be accepted where the staff member provides the training department with evidence from their previous employer of training attended. Any refresher training will coincide with the original training date proven.

12. Main Relevant Legislation

The Health and Safety at Work etc. Act 1974

The Management of Health and Safety at Work Regulations 1999

Assaults on Emergency Workers (Offences) Act 2018

**Appendix 1: Velindre University NHS Trust
Responsibilities and Rights – A Patient Undertaking**

Patients Name:.....	
NHS number:.....	GP/Consultant:.....
<p>Your Rights</p> <p>Velindre University NHS Trust and its employees owe to me, as a patient, a duty of care and aim to provide services to meet my needs for healthcare and treatment at all times.</p> <p>Velindre University NHS Trust and its employees aim to provide health services that are sympathetic and responsive to my individual needs within the resources, which the Trust has available.</p> <p>Velindre University NHS Trust and its employees want to deliver appropriate and effective health care and treatment to me.</p> <p>Velindre University NHS Trust expects all its employees to treat me with courtesy and respect.</p> <p>Velindre University NHS Trust will only restrict or withdraw my rights to care in exceptional circumstances when I have failed to comply with any of my responsibilities in a manner which is deemed unacceptable.</p>	<p>Your Responsibility</p> <p>I will not behave in a way, which can be considered to be violent or abusive.</p> <p>Violence includes any incident where any member of staff are abused, threatened or assaulted in circumstances related to their work. An act of violence may involve an explicit challenge to the safety, wellbeing or health of any member of staff or other patients.</p> <p>Violent behaviour may include verbal abuse, racial or sexual harassment, threat of injury, abuse of alcohol or drugs, destruction of Trust property as well as physical acts of violence.</p> <p>I will treat NHS staff, fellow patients' carers and visitors politely with respect at all times.</p> <p>I will not consume alcohol or take any form of non-prescribed medication or drugs whilst on any premises of the Trust.</p> <p>I accept and understand that Velindre University NHS Trust is obliged to provide a safe and secure environment for all its staff and to care for their health and safety. I accept and understand that no member of staff has to jeopardise their safety in providing me with care.</p>

I confirm that I understand that if my behaviour has been unacceptable and if I do not comply with my responsibilities as a patient, then this can result in the withdrawal of my rights as a patient and I can lose my right to receive care from Velindre University NHS Trust except for treatment in an emergency.

Signature of Patient:	Signature of Named Nurse/Core worker:
Print Name:.....	Print Name:.....
Date:	Date
Witnessed by:.....and Date.....	

Patient letter 1 (Stage 2)

Insert patient name and address

Dear (insert patient name)

Re: Access to Velindre NHS Trust (insert name of service) Services

I write with reference to the alleged incident of violence and aggression on (insert date) at (insert site and location).

It is alleged that you (insert details of incident). An investigation has been undertaken as the Trust takes this issue very seriously and has a commitment and duty of care to ensure a safe and secure working environment for all members of staff.

I am taking this opportunity to express my concern at your behaviour towards staff involved; it is considered unacceptable and will not be tolerated by the Trust. As a result of the incident, I am writing you this letter. A meeting took place between (insert job titles of managers) on (insert date). We considered all of the evidence, which had been gathered from our investigation, including statements from staff and yourself. We also consulted relevant Trust policies and national guidance. After considering all of the above, we have come to the decision that although the Trust will continue to provide you with (insert service) Services at (insert site), your treatment will be subject to adherence to a Patient Undertaking agreement. A draft copy of the agreement is enclosed for your information.

A meeting has been arranged between yourself and (insert managers job title) on (insert date) at (insert location) in order to agree and sign the Patient Undertaking agreement. Failure to comply with conditions of the agreement, even if you refuse to sign it, is likely to lead to the Trust modifying services to you. Any future verbal or physical intimidation of staff is likely to lead to the Police being called and the Trust pursuing relevant legal sanctions.

In the meantime, to reduce the risk to our staff, I have put in place control measures (list control measures such as no home visits, visiting in pairs, no attendance at a base unless prior appointment arranged).

These control measures will be reviewed in (insert number) months' time. A copy of this letter will be kept on your patient record. Please note that if we consider you to be a risk to other healthcare professionals (such as your GP), we will inform them of the incident and the action we have taken.

Should you have any queries as to the contents of this letter, or arrangements for the meeting please do not hesitate to contact me.

Yours sincerely (Insert job title of Manager)

cc Insert details of patient/clients GP cc Prevention of Violence & Aggression Lead

Appendix 3 All Wales NHS Violence and Aggression - Risk Assessment Form

These risk assessments should be conducted in consultation with employees and reviewed at least annually or after a serious incident has occurred. If a major change is required as part of a review a new form must be completed.

Section A: Administration Details

Division

Primary Location (e.g. VCC, WBS, etc.....)

Exact Location, (e.g. Interview Room, Reception).....

Name of
Assessor:.....

Designation:.....

Date of Initial Assessment.....

Date of Review:

.....

Name/Designation of Assessor:

.....

.....

.....

Date of Review

.....

Name/Designation of Assessor

.....

.....

Section B: Task or Activity

Description of task or activity which could lead to a risk of violence and aggression.

Personnel involved (e.g. carer, nurse, security staff, contractor, off site worker, etc.

h of the sections, tick the appropri

1.a	Is there any historical evidence of verbal or physical abuse to staff?	Yes	No
	Verbal Abuse (with intent/directed at staff)		
	Verbal Abuse (abusive remarks not directed at staff)		
	Punch/strike/slap		
	Wounding		
	Kicking		
	Biting		
	Scratching		
	Grabbing by service user		
	Pushing or shoving		
	Hair Pulling		
	Stalking		
	Victimisation		
	Intimidation		
	Threat with / use of weapon (e.g. knives, needles, walking sticks etc.)		
	Harassment (racial, sexual, bullying)		
	Offensive Messages		
	Telephone abuse		
	Robbery		
	Other (Please specify)		
b	<p>Is it perceived that there could be a risk of any of the above</p> <p>Please specify:</p> <p>If there is no perceived or known risk of verbal or physical aggression there is no need to continue with this assessment.</p>		
2	How often do violent incidents occur?		
	Never		
	Every few months		
	Once a month		
	Several times a month		
	Once a week		
	Several times a week		
	Once a day		
	Several times a day		

3a	If hurt or wounded as a result of an attack, has it led to:	Yes	No
	Bruising/swelling		
	Dislocation		
	Fracture		
	Cuts		
	Multiple injuries		
	Sprains		
	Stress		
	Other		
b	Is it perceived that an incident could lead to any of the above		
	Please Specify		
4	Following attacks or incidents of abuse, has this led to time off work?	Yes	No
	A few hours		
	Days		
	Weeks		
	Months		
5	When are violent incidents more likely to occur (Please Tick) 8am to 5pm 5pm to 12 midnight 12 midnight to 8am at any time	6. On what day of the week Mark days when incidents Are more likely to occur, if known 7 = most likely, 1 = least likely Monday to Friday Saturday and or Sunday Any Day	
7	Is the workplace overcrowded?		
	All the time		
	Never		
	During specific times Please specify		

8	Are the following adequate	Yes	No	N/A	Are the following readily available for service users?	Yes	No	N/A
	Lighting				Public telephones			
	Temperature				Toilet			
	Ventilation				Light refreshments			
	Décor /Colour schemes				Information service			
	Housekeeping				Up to date magazines			
	Seating for patients/visitors				Children's play area			
	Other Please Specify				Music			
					Tv/Videos			

9	Internal environmental issues	Yes	No	N/A
	Are there excessive noises which could cause distraction?			
	Are there isolated areas such as treatment rooms, offices, etc.?			
	Are the rooms laid out in such a way as to allow staff to exit in an emergency?			
	Could the aggressor be situated between the employee and the door?			
	Are there designated waiting areas?			
	Are these adequately supervised?			
	Are there corridors/areas where aggressors could hide/congregate?			
	Is there adequate signage displaying the Trust Zero tolerance stance?			
	Are staff protected by additional security measures where required e.g. screens, security locks, intercoms, Internal CCTV, panic alarms?			
	Is money/valuables kept in the work area?			

10	Are there potentially dangerous fixtures and fittings, e.g.	Yes	No	N/A	11	Is there room a room available to speak privately with:	Yes	No	N/A
	Ash Trays					Service users			
	Tables					Visitors			
	Waste bins					Other staff			
	Seats								
	Sharp corners								
	Surgical/medical equipment								
	Office equipment								
	Other Please specify								

12	External environmental issues	Yes	No	N/A
	Are there adequate parking spaces within suitable distance from work area?			
	Is there adequate lighting?			
	Is it distant from the work area?			
	Have routes to parking areas/external walkways been surveyed for safety?			
	Is there CCTV coverage of routes?			
	Are these cameras monitored?			
	Is there a security escort service to parking areas when walking on external routes?			

13	Are there any times when tasks are undertaken alone?		Yes	No	
	If yes please specify				
	Are there any procedures in place to help ensure safety?				
	If yes please specify				
14	Are there alarm systems in place by which you can summon help?		Yes	No	N/A
	If yes please state type of system				
	Are alarms fitted in rooms used for interviewing potentially aggressive/violent individuals?				
	Are these alarms accessible to staff?				
	Are the alarms easy to activate				
	Are staff trained in its use?				
	Do others know how to respond if the alarm is raised?				
	Are there documented procedures in place for ensuring this?				
	Can the alarm be heard in all areas of the ward/department?				
15	Have staff attended appropriate training in accordance with the All Wales Violence and Aggression Training Scheme and Trust Policy		Yes	No	
	Level of training required, and number of staff identified in Training Needs Analysis as requiring each level of training:-				
	Module A - Induction and Awareness Raising				
	Module B – Theory of Personal Safety and De-escalation				
	Module C – Breakaway Techniques				
	Number of staff who have attended training:-		Numbers		
	Module A – Induction and Awareness Raising				
	Module B – Theory of Personal Safety and De-escalation				
	Module C – Breakaway Techniques				
	What procedures are in place to ensure that all staff (including medical staff) have information and access to violence and aggression training?				
16	Is there a contingency plan if violence is threatened or breaks out toward:		Yes	No	
	Service users				
	Visitors				
	Staff				
	Please specify arrangements:				
	Are staffing levels adequate to ensure that contingency plans can be followed?				

17	Home / Community Visits	Yes	No	N/A
	Are home / community visits essential?			
	Is any information sought highlighting previous / known risks associated with the patient and / premises / or locality?			
	Where joint agency working takes place are there protocols for sharing information regarding known risks of violence and aggression?			
	Is joint agency visiting considered where appropriate?			
	Are individual risk assessments undertaken?			
	Is there a tracking system to ensure safety prior to, during and at the end of a visit (e.g. buddy systems, lone working procedures)?			
	Are mobile phones provided together with training in their use?			
	Are personal safety alarms provided and information given in their use?			
18	Policy / Procedure	Yes	No	
	Is the Trust policy easily accessible to all staff?			
	Is there a Trust Information Leaflet available to all staff?			
	Do you have departmental policies / procedures?			

Section D: Current Risk Control Measures (see Section C)	
<p>Control Measures Currently in Use:</p>	
<p>Initial Risk Rating Figure</p> <p>Probable Likelihood Rating <input type="text"/> x Potential Severity Rating <input type="text"/> =</p>	<p>Section E: Initial Risk Rating Figure</p> <p>(to calculate see Risk Matrix):</p> <p>Risk Rating Score <input type="text"/></p>

Section F: Additional Risk Control Measures Required	
<p>Additional measures to be recorded within this box. The request for these measures will be given a risk priority along with other risks within the location and will be recorded in the risk register.</p>	

No.	Risk Reduction Measures / Further Action

If the above control measures are implemented, calculate the **New** Risk Rating Figure:

Probable Likelihood Rating x Potential Severity Rating = **Risk Rating Score**

<div style="border: 1px solid black; padding: 5px; text-align: center;"> Section G: Action Plan Agreed with Manager </div> <p style="text-align: center;">.....</p> <p style="text-align: center;">Managers Signature</p>				
No	Action Plan	Responsible Person	Projected Completion Date	Date Completed / Signature

Once the above action plan has been implemented, calculate the **Final / Residual** Risk Rating Figure:

Probable Likelihood Rating X Potential Severity Rating = **Risk Rating Score**

Additional Comments

Appendix 4 – Unacceptable Standards of Behaviour

The following are examples of behaviours that are not acceptable on NHS premises, or locations where patients receive treatment:

- Excessive noise e.g. loud or intrusive conversation, shouting or uncontrollable misbehaviour
- Threatening or abusive language involving excessive swearing or offensive remarks
- Derogatory racial or sexual remarks
- Wilful damage to Trust property
- Malicious allegations relating to members of staff, other patients or visitors (N.B. any allegations made by children against staff must be reported to a Named Professional for investigation)
- Offensive and derogatory comments relating to members of staff, other patients or visitors
- Language that belittles a person's abilities
- Inappropriate behaviour as a result of alcohol or misuse of drugs
- Threats or threatening behaviour
- Violence, perceived acts of violence or threats of violence
- Unreasonable behaviour and non-cooperation such as repeated disregard for hospital visiting rules
- Bullying, victimisation or intimidation
- Stalking
- Spitting
- Any explicit or implicit challenge to the safety, wellbeing or health of any member of staff or patient
- Theft
- Drug dealing
- Persistent smoking in inappropriate areas within the Trust (n.b., all Trust premises and property are smoke free).

It is important to remember that such behaviour can either be in person, by telephone, letter or email or any other form of communication such as graffiti on NHS property for example.

Appendix 5

VISITOR UNDERTAKING (Stage 1)

Your Responsibilities

I will not behave in any way which can be considered to be violent or abusive.

Violence includes any incident where any members of staff are abused, threatened or assaulted in circumstances related to their work. An act of violence may involve an explicit challenge to the safety, well-being or health of any member of staff or other patients. Violent behaviour may include verbal abuse, racial or sexual harassment, threats of injury, abuse of alcohol or drugs, destruction of hospital property as well as physical acts of violence.

I will treat NHS staff, fellow patients, carers and visitors politely and with respect at all times.

I will not consume alcohol or take any form of non-prescribed medication or drugs whilst on any premises of Velindre Trust.

I accept and understand that the Trust is obliged to provide a safe and secure environment for all its staff and to care for their health and safety. I accept and understand that no member of staff has to jeopardise their safety in providing me with information and my relative/friend with care.

I confirm that I understand that if my behaviour is unacceptable and I do not comply with my responsibilities this can result in the withdrawal of my rights as a visitor as outlined in the Trust's Policy for Management of Violence and Aggression Policy.

Signature of Visitor:	Signature of Velindre Representative:
Print name:	Print name:
Date:	Date:
Witnessed by:	Date:
Print name:	

Appendix 6

Visitor Undertaking Letter 1 (Stage 2)

Visitor's name.....

Visitor's address

.....

.....

Date:

Dear

This is to formally confirm that due to your unacceptable behaviour on..... at.....

You are now subject to the conditions outlined in Velindre Trusts Visitors Undertaking in order to protect the patient, other vulnerable adults and staff.

The procedure for using a Visitors Undertaking has been applied to you and enclosed is a copy of the Trust's Policy for Handling Violence and Aggression.

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 Visitors Undertaking, you will become subject 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 could only attend the Trust premises accompanied by Security or the Police.

Yours sincerely

Senior Manager