In healthcare...

- NHS employs more than 1.6 million people
- NHS deals with 1 million patients every 36 hours
- In vast majority of cases, interactions are positive and result in successful outcomes
- But staff sometimes find themselves the victims of violence
Educatio and Risk Management

Workplace violence:
any incident in which a person is abused, threatened or assaulted in circumstances relating to their work
The Health and Safety Executive

Physical assault:
the intentional application of force against the person without lawful justification resulting in physical injury or personal discomfort. Spitting is included in the definition of a physical assault

Non-physical assault:
the use of inappropriate words or behaviour causing distress and/or constituting harassment
NHS Business Services June 2012
Reports of violence

- 67,864 reported physical assaults against NHS staff in England 2014/15
- 1,616 occurred in Primary and Community Care Sector, including GP practices
  
  NHS protect 2015
- One in three staff have been verbally abused or threatened by a patient
  
  Ipsos MORI Poll 2010
**Government response**

- 1999 Government launched NHS Zero Tolerance campaign
- Primary Care Organisations instructed to implement campaign
- Message that aggression, violence and threatening behaviour will no longer be tolerated
- NHS Business Services Authority: NHs Protect
- NHS England Zero Tolerance Scheme
What makes an interaction difficult?

Consider what are the common triggers?

- For the patient
- The environment/system in which we work
- Ourselves and our practice team
Common causes of conflict: the patient

- Poor communication
- Unrealistic/differing expectations
- Familiarity
- Differing values
- Making assumptions
- Underlying stress and tension
- Illness

- Personality clashes
- Culture, gender, religion
- Mental health problems, drugs/ alcohol
- Lack of knowledge and ability to deal with conflict
- Time pressures
Environment/System in which we work

- **Waiting room:**
  - lack of privacy
  - background noise
  - heating
  - ventilation

- **System and organisational issues:**
  - waiting times
  - lack of appointments
  - lost prescriptions
  - telephone conversations
  - lone working
  - staffing
Ourselves and the practice team

- Isolation
- Personality clash
- Communication skills
- Motivation
- Multitasking
- Training
- Distractions
- Feeling undervalued
- Illness, alcohol, drugs
- Ability to cope under pressure - stress
- Own life experiences and expectations
Communication - verbal
Communication – non verbal
Non-verbal communication: Welcoming smile
Expectations

- People have varying expectations of the service an organisation can provide
- People often get dissatisfied when their expectations are not met
Medical Protection

A.I.D.© Model

- **Acknowledge** the patient’s position
- **Inform** them about your position
- **Discuss** a way forward
Acknowledge the patient’s position

- Actively listen to the patient’s concerns
- Summarise their position and feelings
- Check that your understanding is right

Mr Smith, I am aware that your appointment was at half past eight. I am very sorry for your delay and I can understand why you are feeling upset
Inform them about your position

- Clearly state your position and the reasons behind it
- Acknowledge the difficulty in the interaction

Unfortunately the doctor had to deal with an emergency so this has lead to him running behind time this morning. I understand your position and that you are worried about your son, it really would be better if you were able to take a seat with your son for the moment
Discuss a way forward

- Inform the patient what you can do to help the situation
- Discuss possible alternatives
- Involve the patient and encourage them to suggest alternatives

Mr Smith I will ensure that the doctor knows that you are waiting and that you are concerned as you need to get back to work. I will do everything that I can to make sure that your son is seen as soon as possible
Tips for avoiding escalation and reducing tension

- Smile
- Apologise when mistakes or errors have occurred
- Avoid getting into an argument
- Allow the person plenty of body space
- Ensuring that patients are well informed about how systems at the practice work to try and reduce unrealistic expectations
- Don’t make promises you can’t keep
- Offer alternatives rather than refusal
Tips for avoiding escalation and reducing tension

- Protocol for involving the police & removing patients from the list
- Separate area to deal with upset/aggressive patients
- CCTV or other measures in the physical environment
- Locks placed to areas where patient access should be restricted
- Layout of the consulting rooms / reception area
- Good external lighting
Reporting incidents

- All incidents of physical assault must be reported to the NHS Security Management System (SMS)
- System for reporting conflict
- Significant event
- Consider a marker in patient's record
- Panic alarms
- Police
And finally…

- Be aware of verbal and non-verbal communication
- Be aware of patient expectations
- Flight should be your preferred and safer option
- Report, discuss, record
About MPS Educational Services

- MPS is committed to helping prevent avoidable harm to patients through education:
  - Risk management workshops
  - Communication skills training
  - Risk assessments
  - Web-based learning
  - Publications and factsheets
  - Conferences and presentations
- For further information:
  
  www.medical-protection.org.uk
For further information visit

www.medicalprotection.org

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