



National Ambulance Service (NAS)

Policy

Care of Violent or abusive Patients

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1.0 POLICY STATEMENT

- 1.1 The National Ambulance Service (NAS) is fully committed to ensuring that staff members are fully supported in the management of risks of violence and aggression which they may face in the course of their work.
- 1.2 This specific Policy is developed in the light of Procedure – NASCC013 - Withholding of Care from Individuals who are Violent or Abusive (age 18 years and above), and should be read in conjunction with NAS Policy – NASWS020 – Managing Violence and Aggression towards Staff which describes appropriate risk assessment and control measures to be undertaken by staff, and procedures for the reporting of incidents of violence or abuse.

2.0 PURPOSE

- 2.1 To state the NAS's commitment towards care for any patient, while at the same time, providing protection for staff in the performance of their duties
- 2.2 To set out how NAS will attempt to provide care in circumstances where staff may be at risk of violence from patients, clients, members of the public or from other persons or animals.

3.0 SCOPE

- 3.1 Applies to all Managers, Supervisor and Staff in the NAS

4.1 LEGISLATION/OTHER RELATED POLICIES

- A. National Ambulance Service Parent Safety Statement
- B. Policy – NASWS020 – Managing Violence and Aggression towards Staff
- C. Procedure – NASCC012 - Dealing with Aggressive, Offensive or Abusive Calls
- D. Procedure – NASCC013 - With-Holding Care for Individuals who are Violent or Abusive (Aged 18 and above)
- E. Non Fatal Offence against the Person Act, 1997
- F. Mental Health Act 2001
- G. Safety, Health and Welfare at Work Act, 2005
- H. Policy – NASWS011 – Protection of Lone Workers

5.0 GLOSSARY OF TERMS AND DEFINITIONS

- 5.1 For the purpose of this policy, violence or abuse is defined as any incident where staff are abused, threatened or assaulted in circumstances related to their work, involving an explicit or implicit challenge to their safety, wellbeing or health.
- 5.2 The action may be carried out by a patient, member of the public or arise from other persons or animals.
- 5.3 Examples may include:
- A. Verbal abuse and/or threats which make staff feel unsafe
 - B. Threat or risk of injury to the member of staff, to a colleague, another patient or bystander
 - C. Actual violence towards staff or others present
 - D. Damage or destruction of property or equipment
- 5.4 In the following paragraphs, all references to “care” should be read to include other services provided by NAS e.g. Intermediate Care, Training Services, etc.

6.1 ROLES AND RESPONSIBILITIES

6.2 Senior Management Responsibilities

- 6.2.1 This policy is an integral part of the NAS Health and Safety Statement and therefore the overall responsibility for its effective implementation rests with the relevant Senior Manager.

6.3 Line Manager Responsibilities

- 6.3.1 Individual Line Managers are responsible for ensuring that the policy is implemented, that it operates effectively and that systems are in place to allow appropriate remedial action to be taken.
- 6.3.2 The responsibility for maintaining the High Risk Register will rest with the relevant Control Manager
- 6.3.3 Operational Support and Resilience Managers will be responsible for maintaining systems to monitor the effectiveness of the policy in their Area, ensuring the appropriateness of training following consultation with the Education and Competency Assurance Team and ensuring advice on health, safety and welfare matters is available to Line Managers.

7.1 PROCEDURE

7.2 MEASURES TO ADDRESS VIOLENCE OR ABUSE

- 7.2.1 It is established Policy that staff may request Garda assistance when attending potential high risk incidents, and should not go forward unless they judge safe to do so.
- 7.2.2 Examples of situations where it may be appropriate to withhold or delay care will include where violent or abusive behaviour is likely to prejudice any benefit from the care given, or the consequence of attempting to give care may result in injury to the member of staff, to the patient, or to others present.
- 7.2.3 While each reported incident of abuse or violence against Staff will be carefully examined to identify potential extenuating circumstances (particularly those listed as Exceptions at paragraph 7.3 below), it is open to the NAS to take action at one of two levels.

YellowCard

To give a formal written warning issued by the Area Operations Manager or Operational Support and Resilience Manager, advising that withholding of care until the arrival of the Gardai will apply in the event of any further repetition of the violent or abusive behaviour.

RedCard

To confirm withholding of future care subject to any specific safety conditions that may apply (e.g. attendance of An Garda Siochana). These stages will normally apply sequentially, though in the event of a particularly serious incident a Red Card may be immediately applied.

7.3 CONDITIONS SURROUNDING THE WITHHOLDING OF CARE

- 7.3.1 A decision on the withholding of future care, or the application of certain conditions, is a serious matter and will be subject to defined criteria as follows:
 - A. The advice of the Area Medical Advisor and clinical assessment of other clinicians involved in the patient's care must be taken into account
 - B. Withholding of care can only be authorised by the Area Operations Manager or Operational Support and Resilience Manager
 - C. The maximum period for which care may be withheld until the arrival of the Gardai is twelve months
 - D. The patient should have the opportunity to request a review of the decision, through the Appeals System
 - E. Action taken under this Policy should be initiated within 21 days of the specific incident or complaint which gives rise to concern

7.4 EXCEPTIONS

7.4.1 Exceptions to withholding of care may apply in the case of:

- A. Patients not responsible for their actions because their behaviour is a manifestation of their clinical condition
- B. Patients suffering from mental disorder (as defined in the Mental Health Act 2001) or significant learning disability
- C. Patients under the influence of drugs or alcohol
- D. Patients under the age of 18
- E. Where immediate care is required to meet a potentially life threatening or urgent medical condition

7.5 NOTIFICATION

7.5.1 A decision to withhold care until the arrival of the Gardai will be confirmed in writing to the patient, and a copy will be retained on the High Risk Register.

7.5.2 The patient's GP should be notified, also other local health services if appropriate, and the patient's name and address should be flagged within the Ambulance Control Computer Aided Dispatch (CAD) system.

7.5.3 Data Protection requirements should be taken into account in such notifications.

7.6 NOTIFICATIONS RECEIVED FROM OTHER HEALTH SERVICES

7.6.1 Where Notification of a violent or abusive patient is received from other health services, the patient's name and address will be appropriately flagged within the Ambulance Control Computer Aided Dispatch (CAD) system.

7.6.2 Care should not be withheld until the arrival of the Gardai, but due caution exercised by those responding if called upon to do so.

7.7 CONCLUSION

7.7.1 It is expected that this Policy and the measures outlined therein will be applied only rarely, if ever, and only in cases where persistent and/or extreme violent or abusive behaviour occurs.

7.7.2 It is however right that Staff should be aware of the NAS's support for their safety at work, and its willingness to act as far as reasonably practical in protecting them from violence or abuse.

8.0 IMPLEMENTATION PLAN

- 8.1 This Policy will be circulated electronically to all Managers, all Supervisors and Staff
- 8.2 This Policy will be available electronically in each Ambulance Station and Ambulance Control for ease of retrieval and reference
- 8.3 Each Operational Support and Resilience Manager will ensure that the Manager/Supervisor responsible for updating Policies and Procedures will return the Confirmation Form to NAS Headquarters to confirm document circulation to all staff

9.0 REVISION AND AUDIT

- 9.1 This policy will be reviewed whenever necessary following changes in procedures and/or legislation and/or a relevant event.
- 9.2 The Medical Directorate has the responsibility for ensuring the maintenance, regular review and updating of this policy.
- 9.3 Revisions, amendments or alterations to the policy can only be implemented after consideration and approval by the NAS Leadership Team, following consultation with the Quality and Patient Safety Directorate.
- 9.4 This policy must be adhered to at all times to ensure maximum safety for NAS employees.
- 9.5 Operational Support and Resilience Managers and any Health and Safety Governance Groups will monitor compliance with this Policy through regular reviews of equipment maintenance and Incident/Near Miss reports.

10.0 REFERENCES

NoneApplicable

11.0 APPENDICES

Appendix I – Policy Acknowledgement Form

Appendix II – Procedure – NASCC012 - Dealing with Aggressive, Offensive or Abusive Calls on the Telephone

Appendix III - Procedure – NASCC013 - With-Holding Care for Individuals who are Violent or Abusive