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Tackling Violence in General Practice

Excluded Patient Service Policy and Procedure

Version:	4
Ratified by:	LMC
Date ratified:	September 2010
Name of originator/author:	Marion Hall
Name of responsible committee/individual:	Marion Hall
Date issued:	October 2010
Review date:	July 2012
Target audience:	GP Surgeries Out of Hours Provider Health Care Professionals District Nursing, Physiotherapists, Walk in Centre, Occupational Health , Local NHS Trust

Wolverhampton is committed to zero tolerance of violence in general practice.

Aim and Objectives of the Policy

The purpose of this document is to set out Wolverhampton's City Primary Care Trust commitment to GPs and their staff to minimise the risk of violent attacks from patients.

Serious acts of violence by patients towards GPs and their staff are relatively infrequent. Nevertheless, they do occur and minor acts of violence or abuse are common. It is recognised that GPs and their staff may be justifiably concerned about their vulnerability when dealing with patients.

Patients who access primary care services may be ill, distressed, angry, disturbed or deprived. These factors can lead some people to be violent. It is therefore the nature of the work that is carried out in general practice that there are occasions where staff may be subjected to violence. Violence is not viewed as an acceptable occupational hazard. Such behaviour is totally unacceptable and will not be tolerated.

The PCT and LMC recognise that violent behaviour against GPs and their staff is a continuing concern to the profession and that action needs to be taken to make general practice a safer environment.

This policy outlines agreed processes to tackle the risk to which GPs and their staff are exposed.

However this policy does not negate the need for GPs to have in place a robust violence and aggression operational procedure, as part of their overall statutory Health and Safety responsibilities as an employer

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Excluded Patients Service

Background

The Primary Care Trust acknowledges that doctors and health care professionals should not be required to place themselves or their staff at risk by treating potentially violent patients.

Guidance issued by the NHS Executive clearly states that violent patients will not be excluded from receiving primary care services but their behaviour compromises their right to access services in normal locations. Violence includes actual or threatened physical personal violence or verbal abuse leading to a fear for person's safety. Therefore, patients who have physically assaulted a GP or a member of their staff or caused criminal damage i.e. those which fall into the categories detailed below will be immediately removed from a GPs list following the violent incident.

These patients will not be allocated to another GP but due to their violent behaviour will have their general medical services provided through the excluded patient service. The patient will not be transferred back into mainstream general medical services until they have been assessed as no longer posing a threat to GPs and their staff.

The right of a practice to remove a violent patient will be extended to safeguard all those who might have reasonable fears for their safety, this includes members of the practice's staff, other patients and any other bystanders present where the act of violence is committed or the behaviour took place.

Wolverhampton City PCT has introduced a scheme to exclude violent patients from mainstream General Practice, and ensure they receive full Primary Care medical service in a secure unit

The Out of Hours provider will be the contact point for patients whilst they are treated as an excluded patient. They will also facilitate the link for the patient between the duty doctors and the Security Service. All consultations will be held at the Phoenix Health Centre. In extreme circumstances the patient will be visited at home, when two security officers will accompany the duty doctor.

Reasons a person will be treated by the Excluded Patients Services

Definition of Violence

The NHS Executive definition of violence is:

“Any incident in which an employee is abused, threatened or assaulted verbally or physically by a member of the public in circumstances arising out of the course of his or her employment”

This included verbal abuse as well as physical abuse, and covers violence enacted by patients, their relatives or carers, anyone who poses a threat to NHS staff

Category 1.

Physical Assault

Any incident where an individual intentionally and deliberately strikes, physically restrains in any way a health care worker i.e. with a weapon or just holds, pushes, prods, pulls hair, or repeated and/or serious threats are made against an employee.

Criminal Damage

Any incident where an individual intentionally and deliberately causes damage to property belonging to another.

Category 2

Threatening or Abusive Behaviour

Any incident where an individual intentionally, verbally abuses a health care worker using language in an abusive way that makes someone feel at risk and afraid. Behaviour such as following or stalking, using an object in a manner that makes someone feel at risk of violence or abuse.

Verbal abuse and Intimidation

Any incident where an individual intentionally verbally abuses a health care worker, members of the practice's staff, other patients and any other bystanders present by using unacceptable language, (such as swearing or sexually explicit statements, racial and sexual discrimination), or shouting and using their raised voice to intimidate

Telephone Abuse

Any incident where an individual persistently pesters causes distress or disturbance to health care workers. The difference is identified between anonymous/identifiable callers and malicious telephone calls under the Malicious Telecommunications Act.

Other Circumstances

It is not envisaged that any other circumstance will result in patients accessing the service. If other complex/difficult cases do arise the relevant GP will need to alert the Patient Data Managers, or other relevant PCT senior managers. These cases will need to be escalated to Director Level for a final agreement to refer into the Excluded Patient Scheme.

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Procedure

Reporting and Notification Process after a Violent Incident has occurred at the Surgery

Following an Incident in General Practice

GPs and their staff must commit to reporting any incident of violence, once the immediate danger has been resolved at the practice. All incidents should be reported using the Incident Reporting Form. In order to make the system as streamlined as possible reports have been split into three areas.

Immediate Patient Removal Request,

Category 1 Incidents: this procedure can only be followed if the incident has been reported to the police.

Patient Removal Request

Category 2 Incident: this procedure can only be followed when the practice request the removal of the patient where the police were not involved but a health care worker felt at risk.

Notification of Violent/Aggressive Patients.

Category 2 Incident: this procedure should be followed where the practice wants to report to the PCT an incident that has happened but on this occasion the issue was diffused

Informing the Police

If an immediate threat of violence is present at the surgery it is important that the GP or a member of the practice staff calls the Police Station Control Room on 0845 1135000 and ask for the help desk, or dial 999 this will ensure a prompt response to the incident. The police will start a file and issue the practice with a log/crime number. GPs should be aware that the police response time will vary depending on the location of the surgery and the circumstances at the time. However, the Police will make every effort to respond within ten minutes of a call. If anyone in the practice believes there is a threat to life or serious injury this should be explained to the operator. Once the police have resolved the problem they will give you an incident or a crime number

If the patient has left the premises and there is no immediate danger the Police must be notified of the incident. It is advisable to obtain a crime reference number for logging purposes. It is preferable to advise the police of the incident in writing setting out the name of the patient, address, date of birth and a brief description of the incident. The police will take no further action unless the incident was serious and the GP wishes to take legal action. The police may, however, record on their intelligence database the details of the patient who caused the incident. Alternatively the GP can inform the police by phone or fax, but a record must be kept of the incident.

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In any event it is important that the practice completes and submits an incident reporting form to the PCT. A supply of the forms or an incident book has been distributed to all GP practices.

Notification to the PCT

Request for removal from the GPs List these are incidents which fall under threats to staff, verbal abuse that is intimidating, telephone abuse or any incident where the health care worker is made to feel at risk, but where the police have not been called. Once the immediate threat no longer exists contact the Police Station Control Room on 0845 1135000 and ask for the help desk, or dial 999. The police cannot guarantee an immediate response but will attend as soon as possible. It is advisable to obtain a crime reference number to help complete the Incident Reporting Form for the PCT.

Telephone Julie Allen (01902 444865) or Elaine Rodgers (01902 444869) if not available any member of the Patient Data Department at the PCT. Alternatively contact Customer Service Department on 01902 444882 to report the incident. If you are faxing the incident Report Form to the PCT please mark it for the attention of Julie Allen and Elaine Rodgers. The fax number is 01902 444877.

The PCT will immediately allocate the patient to a practice and inform the receiving GP about the situation which led to the removal of the patient. The practice will be informed in writing that the patient has been removed from the list and allocated to another GP.

Reporting an incident of violence or aggression – without requesting the removal of the patient

Forward a copy of the Incident Reporting Form to Julie Allen or Elaine Rodgers, Registration Department, at the PCT. The reports will be kept on file for future reference.

Notification of immediate removals should be sent to the PCT. Telephone Julie Allen (01902 444865) or Elaine Rodgers (01902 444869) if not available any member of the Patient Data Department at the PCT.

If the notification is done out of hours please e-mail Elaine.allen@wolvespct.nhs.uk or elaine.rodgers@wolvespct.nhs.uk clearly state that you are requesting immediate removal of that patient from the list due to violent/aggressive behaviour.

Please include the following information:

Name of GP Surgery

Name and address of patient, Date of Birth, and NHS Number

Crime reference number

Reasons for removal

Date of the removal

Any relevant medical information relating to the patient (such as Mental Health problems, etc) this will help the panel to establish where the patient is best placed to receive continued general medical services in primary care.

Alternatively fax a letter to Elaine Rodgers or Julie Allen on (01902 444877) and send the original in the post. If a fax is used it must be followed up within 7 days by a letter.

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On receipt of the Incident Reporting Form the assessment group will meet to decide if the incident should result in the patient being transferred to the excluded service.

This meeting will be set up within 2 working days of receiving the report.

The group will include the following members:-

Dr S V Sharma, LMC. Marion Hall, Primary Care Development Manager, PCT.
Julie Allen and Elaine Rodgers Joint Patient Data & Screening Managers, PCT.
Representative from Customer Service if required.

Once the patient has been review by the PCT team and a decision made the PCT will:
Notify the practice that the patient has been removed and requesting the medical notes to be returned to the PCT.

Notification to the Patient

Where possible, the practice should take immediate steps to contact the patient informing them of the action that has been taken. The patient should be informed in writing to their home address.

Excluded Patient Assessment

Once the group have met and a decision has been made for the patient to be put in the Excluded Patient Services, the following options are available to be implemented.

Option 1

If the decision is that the patient is not to be transferred to the excluded patient service, they will be allocated to another GP. When a patient with a history of violence is allocated to a GP the PCT will:-

- Give the patient's new GP information regarding the event(s) which led to their removal from GP list
- Give details of the patients history of violence/threatening behaviour in the past

Option 2

If the patient is transferred to the excluded patient service and the patient's name will be removed from all GP's lists. The PCT will:-

- Write to the patient confirming their removal from the GP's list
- Inform the patient that they must not register with another GP and that their general medical services will be provided from the secure unit at the Phoenix Health Centre Parkfields, Wolverhampton.
- Explain the appointment process at the secure unit. All appointments will be made through the Out of Hours provider.
- Notify the Out of Hours provider, duty Doctor and the Police that the patient has been included in the excluded patient service.

Out of Hours Provider will:

- Set up a surgery rota on the appointment/clinical system for the on-call duty doctor. The rota will be in addition to the normal on call arrangements and will show the GP providing the excluded patients service. The rota will be

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maintained daily and the Out of Hours provider must be informed of any changes.

- Patients will be listed as excluded patients on the Out of Hour's Provider data base. Special notes can be kept in the system.
- The Out of Hours Provider will ensure that the patients' not advised of the duty doctor's identity.
- The Out of Hours provider will make all referrals on behalf of the duty Doctor.
- The Out of Hours provider will work to this procedure.

Patient Treatment

The patient will telephone the Out of Hours provider to request an appointment.

- Out of Hours provider will take the patient details and ask for a contact telephone number to call them back with the appointment time. This will enable the Out of Hours Provider to establish the person is in the excluded scheme, and they are talking to the right person.
- Out of Hours Provider will contact the duty doctor to give him the patient details. And agree a suitable time for the appointment
- The duty Doctor will assess triage the patient to establish the most suitable way to treat the patient. .i.e. face to face or telephone consultation.
- If the duty doctor decides that a face to face consultation is necessary he will:
- Contact the Out of Hours provider to agree a time for the consultation at the Phoenix centre. Or in extreme circumstances agree a time for a home visit.
- If at home the Out of Hours Provider will arrange for a security guard to accompany the duty Doctor to the home of the patient.
- The Out of Hours Provider will contact the patient once everything has been finalised and notify them of the appointment time.
- The duty doctor will keep robust notes on the patient including behavioural issues.

Referrals

If the duty Doctor decides that the patient needs to be referred to other services i.e. Mental Health Services, or secondary care, the referral will be made using the letter headed paper of the out of Hours provider. If the service of a community health care worker is required i.e. District Nursing Services the Out of Hour provider will facilitate this, but will need 24 hours to make the arrangements.

The Duty Doctor will inform the PCT team of all referrals made into other NHS services...

Extreme Circumstances

If the duty doctor is not available GP's working for the Out of Hours Provider will be able to offer advice to the patient over the telephone.

If a consultation is required but the patient's condition cannot wait and the condition is not appropriate for Primary Care, the patient will be directed to A&E.

The Out of Hours Provider will contact A&E and speak to Senior Nurse on Duty and pass on appropriate information to assist with the imminent A&E attendance by the excluded patient

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If the patient is known to the A&E department of the local NHS Trust, it may be that the local NHS Trust have already exclude him/her from attending the A&E for treatment they will under their own excluded patient policy refer that person to a neighbouring NHS Trust for treatment.

Returning to Mainstream Health Services

The duty doctor will provide the PCT with monthly and quarterly reports on the condition of the patient.

When the patient has been treated in the excluded patient service for six months, the assessment group will determine whether the patient should be transferred to mainstream health services. The group will take advice from the duty doctors before making the decision. If at any time during the six-month period, the duty doctors feel that the patient should be transferred into mainstream health services, they will notify the PCT. The assessment group will make the final decision, based on the recommendation of the duty doctors, about transferring the patient to mainstream health services.

When the patient is transferred to mainstream services the PCT will:

- give the patient's new GP information regarding the event(s) which led to their removal, and
- give details of the patient's history of violent/threatening behaviour.

The patient and the new GP will be offered a meeting with a mediator prior to the patients transfer to mainstream services.

Relatives

The person that has been put into the Excluded Patient Service for general medical services cannot attend a GP appointment with a member of their family.

Family and other household members cannot be removed immediately. GPs must notify the PCT in writing and the removal will take place in the normal way on the eighth day after the PCT has received notification or when the patient has been accepted by another GP, whichever is the sooner.

It is not automatic that other members of the household should be removed at the same time. However, there may be circumstances where a GP believes that because of the possible need to visit patients at home or because the violent patient may accompany other family members to the practice, it is reasonable to terminate the responsibility for other members of the family or the entire household.

Only the patient, who has actually been violent, will be included in the Excluded Patient Services, the other family members will be allocated to other practices.

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PCT Incident Reporting Form

Details of the Person Reporting the Incident

Name & Job title	
Practice Name: Address Telephone number	

Incident Details

Incident Date	Incident Location	Incident Time
Police Notified and crime number	Name of the aggressor	address
Date of Birth	NHS Number	Requesting removal Yes/ No

Incident description: to include the cause of the incident, where it happened, any injury(ies) Suffered, witness to the event (continue on the back of the sheet if necessary)

Action Taken to prevent the incident occurring again.

Please return to Elaine Rodgers or Julie Allen Joint Patient Data Managers at the PCT by
fax: 01902 444877, e-mail elaine.rodgers@wolvespct.nhs.uk or
julie.allen@wolvespct.nhs.uk