



Violence and Aggression Prevention

Your Choice of Treatment....

www.ctsma.nhs.uk



STOP ABUSE OF NHS STAFF

Verbal or physical abuse of our staff could result in prosecution



Security Management Service



Definitions

Aggression -refers to a number of types of forceful behaviour. It can be defined as emotional energy channelled towards achieving a goal in sports, business or another area.

Violence -any act that involves physical force, with or without a weapon, resulting in harm, injury or death to another person(s).



Healthcare Associated Violence

- The most common aggressors/attackers were patients
- Of staff who experience violent/aggressive incidents less than 77% report the incident.
- From those staff who experience violent/aggressive incidents, but do not reported them, the most common reason given for not reporting the incident was that they consider it part of the job



Cost of violence against NHS staff 2008/09

Since the introduction of NHS Zero Tolerance Zone campaign
1999/2000, in 2008/09:

- Physical assault incidents = £26,095,203
- Litigation and damages = £1,807,019
- Conflict Resolution Training = £2,612,443
- Staff quitting the NHS2 = £29,740,036
- Anti-violence policing = £299,066
- 'Category A' assaults, which are by law reportable under RIDDOR, cost an average of £6,475 per incident





International Problem

- Data held in different formats
- Nurses (comparable hospitals) in Amsterdam 15% cf Tel Aviv 45% p.a. (1990)
- Canada 33% of nurses p.a. (1991)
- Australia 23% ambulance personnel p.a. (1990)
- Sweden 47% of all assaults at work to health and care workers (1995)
- Finland 10.5% of health workers reported violent incidents (1999)



Causes of violence and aggression

1. Early Training
2. Biology
3. Cultural Expectations
4. Instinct
5. Influence of the Media
6. Use of Alcohol

Violence and aggression is NOT acceptable in any form



Early Training

Children who are punished severely by their parents are more aggressive, became more aggressive adults, are more likely to have criminal records and more likely to have a history of violence

Children copy what their parents do





Biology



High levels of male hormone testosterone

Testosterone increases the amount of adrenaline released by the body

Evidence shows that males are quicker to aggression (Frey et al. 2003) and more likely than females to express their aggression physically (Bjorkqvist et al. 1994)

Although females are less likely to initiate physical violence, they can express aggression by using a variety of non-physical means to inflict harm on others



Cultural Expectations

Varies from culture to culture

In militaristic cultures higher levels of aggression and violence are accepted

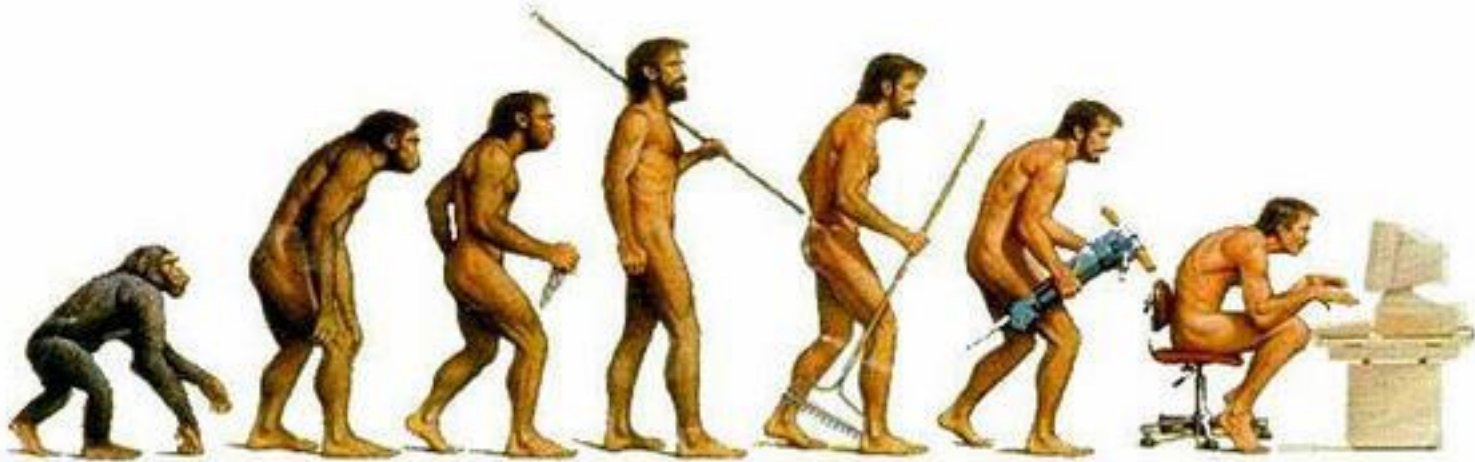




Instinct

Humans have natural aggressive and violent instincts because traditionally the more aggressive humans survived and passed on this genetic code to their children

This is based on anthropological views of "survival of the fittest"





Influence of the Media

Connection between TV violence and real-life violence

People are less likely to be emotionally upset by real-life violence after viewing TV violence

Evidence suggests that watching violence on television increases the likelihood of short-term aggression in children (Aronson, Wilson, & Akert, 2005)





Use of Alcohol

Alcohol may reduce the inhibitions that would normally prevent a person from acting violently

Alcohol impairs judgment, making people much less cautious than they usually are (MacDonald et al. 1996).

It also disrupts the way information is processed. A drunk person is much more likely to view an accidental event as a purposeful one, and therefore act more aggressively (Bushman 1993, 1997; Bushman & Cooper 1990).





Environment

Pain and discomfort also increase aggression. Even the simple act of placing someone's hands in warm water can cause an aggressive response. (Carlsmith & Anderson 1979)

Hot temperatures have been implicated as a factor in a number of studies. One study completed in the midst of the civil rights movement found that riots were more likely on hotter days than cooler ones (Carlsmith & Anderson 1979)

A digital display board with a blue background and white text. The title is 'Patients now in A&E'. Below it is a table with four rows of patient statistics.

Patients now in A&E		
Resuscitation	3	Patients
Major Injuries	12	Patients
Minor Injuries	25	Patients
See & Treat	4	Patients



Violence Prevention by HFR volunteers

Volunteers can help to prevent violence and aggression by:

- Attending training
- Understanding HFR policies and procedures
- Monitoring the volunteering environment and informing HFR Exec. of potential problems
- Following the rules and boundaries established by HFR Exec
- Treating all people fairly and with respect





Violence Prevention Strategies

- Use strategies such as:
 - acknowledge an angry person's concerns,
 - allow the person to express their feelings
 - use non-confrontational language
 - speak in a soft tone of voice
 - avoid yelling or speaking loudly
- Intervene as early as possible to prevent incidents from escalating
- Use common sense
- Let the person know you are there to help



Dealing with Angry People

- How volunteers treat people who are angry and/or frustrated has a direct impact on the probability of aggressive or violent behaviors.
- When faced with an angry person:
 - Focus on acknowledging the feelings of the person
 - Speak slowly and softly (use a calming voice)
 - Be aware of your own body posture - stay relaxed (not stiff and rigid)
 - Move to solving the problem if at all possible



What to say

- Here are a few phrases you can use:
 - It seems like you're pretty upset about . . . Let's see what we can do
 - It has to be frustrating to have to . . .
 - Most people would be angry if [insert what they are upset about]



Listening as Intervention

Listening is a tool that allows you to:

- Ensure your understanding of the situation
- Get and give information
- Build trust
- Achieve what you want with people
- Active listening
- Paraphrasing
- Acknowledging



Barriers to Active Listening

- Barriers include
 - Distractions (physical & emotional)
 - Trigger words
 - Vocabulary
 - Limited attention span
 - Emotions
 - Noise
 - Cultural differences





When Aggression Happens

Sometimes, even if volunteers react to warning signs and use appropriate de-escalation techniques violence and/or aggression occurs anyway.

In which case:

- Withdraw to a safe distance
- Call other volunteers / organisers (who are on site) for assistance
- Remove other people from the area
- Scan the area for potential weapons and move away from these
- Verbally attempt to calm the violent person down
- Avoid becoming physical - Maintain a safe distance
- Dial 999 if needed
- Report the incident



Restraint

- In some cases, a patient who lacks capacity may resist treatment and the health professional may need to restrain that patient to administer the treatment.
- If any HFR volunteer feels that restraint is necessary, the NHS Ambulance Service (and Police if needed) must be contacted. A HFR incident form must be completed afterwards.
- The Mental Capacity Act 2005 provides that a person may lawfully restrain a person who lacks capacity, providing that person believes it is reasonably necessary to prevent harm to the patient, and it is a proportionate response to the likelihood of the patient suffering harm and the seriousness of that harm.



Restraint

- Restraint means: using, or threatening to use, force to secure the doing of an act which the patient resists; or restricting the patient's liberty of movement, whether or not the patient resists.
- Types of restraint include:
 - Overt (wrapping in blanket/ straps on carry chairs and stretchers);
 - Physical/Mechanical (held by persons, withdrawing of aids eg: zimmer);
 - Chemical (medication/sedation);
 - Psychological (stating a patient is not allowed to do something)



Acknowledgements and References

- V&Q Ms. A. McFadden
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