

**POLICY FOR WITHHOLDING TREATMENT  
FROM VIOLENT AND ABUSIVE PATIENTS**

## Simply Teeth Dental Practice

### **POLICY FOR WITHHOLDING TREATMENT FROM VIOLENT AND ABUSIVE PATIENTS**

<b>Review Date</b>	March 2012
<b>Adopted</b>	June 2009
<b>Distribution</b>	By email, website and staff training

#### **1. Policy Statement**

**This policy forms part of an overall approach to managing violence and aggression, which includes local guidelines and clinical procedures, for example, the mental capacity act and the management of confused patients. It is expected that this Policy will be implemented as a last resort.**

There has been a dramatic increase in recent years in the level of violence and abuse

faced by staff, visitors and users of the services within our practice. There is a widespread recognition within this our practice, and by Government, that we need to tackle such behaviour effectively. Our practice has a moral duty to take all reasonable steps to protect and support its staff. This policy is designed as an

important step in improving the our practice's ability to tackle incidents involving violence and abuse. The aim is to detail the types of behaviour which are unacceptable and the sanctions available in the face of such behaviour. This will include a mechanism whereby patients or service users who are extreme or persistent in their unacceptable behaviour can, as a last resort, be excluded from that specific service.

Persistent unacceptable behaviour refers to behaviour both within one admission /episode of care / or contact and /or over a number of separate occasions within the period of the sanction.

The policy aims to create a balance between the need to protect staff properly and the need to provide healthcare. As the first step in tackling the issues of violence and abuse, the our practice will continue to develop initiatives and training, following the introduction of this policy.

This Policy has been introduced in the context of the Government's national Zero Tolerance initiative against violence in the and it must be applied effectively in all appropriate situations.

## **2 Introduction**

2.1 Simply Teeth Dental Practice has a duty to provide a safe and secure environment. This applies to all staff and users of the service. Violent or abusive behaviour will not be tolerated and decisive action will be taken to protect staff and all users of services.

2.2 This policy applies to all members of our practice staff, including those on honorary contracts and those working primarily for other organisations but on our practice business. All staff have a duty to enact this policy.

2.3 All clinical guidelines and procedures, by involving staff who work in the specialty.

Where possible, local guidelines should include a method of identifying patients / service users or their relatives where there are known problems or where the individual is subject to sanctions or exclusion. Local guidelines and procedures will be relevant to the services provided and the specific needs of their clients while remaining within the framework of this policy.

2.4 Clinical Directorates will ensure that where they do provide treatment or care to violent or abusive patients (i.e. patients or client groups with known behavioural problems), staff are aware of the local procedures for doing so. These may include the use of medication, physical intervention and/or involvement of the police.

2.5 Where staff are required to work with patients or client groups with known behavioural problems or where the nature of the work entails additional personal risk (i.e. lone workers and workers entering high risk situations) our practice will support specific strategies and initiatives aimed at protecting those staff.

2.6 Staff must report individual incidents to their manager and submit an incident report to the Management Team. A local decision will be made regarding the action to be taken, such as reporting the incident to the police. Every incident will be looked at individually to ensure that the need to protect staff properly is balanced against the need to provide healthcare.

### **3. Application**

There will be circumstances where withholding treatment will be inappropriate and all local procedures should provide exceptions in the following cases:

3.1 Those patients who, in the expert judgment of the relevant clinician, are not competent to take responsibility for their actions, will not be subject to this procedure, e.g. an individual who becomes abusive as a result of an injury or illness. In situations where clinicians are not involved in the delivery of a particular service then a manager who is expert in that specialty will be responsible for providing expert judgment.

3.2 Patients / clients who are mentally ill and, as a feature of their illness, may be under the influence of drugs or alcohol.

3.3 Patients who, in the expert opinion of the relevant clinician require urgent emergency treatment

3.4 Patients who are aged 16 years or under, other than in exceptional circumstances.

3.5 Patients / clients where behavioural problems (which may include violent, aggressive and abusive behaviour) are a product of their medical or psychological condition, requiring support from clinical services in this our practice. Each of these patients will have a management plan in place, based on a risk assessment. NB. Violence and abuse which is detrimental to the patient / client's care and prevents either the individual themselves, or other patients, from deriving benefit from the service, should be considered as a reason for transferring the patient to another health service which may meet the patient / client's needs more effectively. A decision to transfer or refer a patient / client to another health service will be made on clinical need.

## **4. The Policy**

### **4.1 Principles**

4.1.1 The decision to withhold treatment will always be based on a clinical assessment and the advice of the senior clinician or key worker involved in the patient's care.

4.1.2 The decision to withhold treatment will be as a last resort and strategies for managing violent or abusive behaviour must be in place and implemented.

4.1.3 The decision to withhold treatment must be made with the involvement of relatives and advocates of the patient wherever possible and in conjunction with other agencies where this is appropriate.

4.1.4 The instigation of withholding treatment must involve all members of the relevant clinical team.

The advice should be given to the practice manager who will issue a formal letter to the individual explaining the reasons why this action is being taken and the mechanism lodging an appeal, using the our practice Complaints Procedures, should they wish to do so.

4.1.5 Withholding treatment is time limited and must be for no more than twelve months, after which the situation may be reviewed.

4.1.6 Only in very exceptional circumstances will treatment be withheld from a patient as a result of the behaviour of a relative or person accompanying the patient. However, the sanctions apply to visitors, who may be excluded from an in-patient service / clinic / residential premises. Staff need to feel protected from violent and abusive relatives / friends when visiting the patient's home and must leave the premises immediately if they feel at risk. The management will undertake to seek alternative means of treating a patient where others present a risk, for example, arranging for a patient or client to attend a different clinic for treatment.

4.1.7 Staff must be aware of the Prevention and Management of Violence and Aggression Policy, including the Directorates guidelines for dealing with specific situations.

#### 4.2 Expected Standards of Behaviour.

Our practice identifies the following examples as unacceptable behaviour, which, dependent on the degree of severity, will not be tolerated:

4.2.1 Violence (towards a member of staff, another patient / client or visitor)

4.2.2 Theft

4.2.3 Threats or threatening behaviour

4.2.4 Willful damage to personal or our practice property

4.2.5 Offensive sexual gestures or behaviours

4.2.6 Derogatory remarks, including racial, sexual remarks

4.2.7 Threatening or abusive language involving swearing, shouting or offensive remarks

4.2.8 Abusing alcohol or drugs on our practice premises (other than where this has been

identified as part of the patients medical psychological condition requiring treatment)

4.2.9 Illegal behaviour, such as drug dealing, on our practice premises

4.2.10 Inappropriate requests that make staff feel uncomfortable or jeopardises their personal safety (e.g. requests for particular members of staff to visit alone.

4.2.11 Malicious allegations relating to members of staff, other patients / clients or their relatives.

#### 4.3 The Sanctions

4.3.1 When an incident occurs, the staff member may need to withdraw immediately and inform their immediate manager. The staff member / manager or departmental head will explain to the patient that his / her behaviour is unacceptable and explain the standards which must be observed in future.

4.3.2 If the behaviour continues, the responsible manager or clinician will give an informal warning about the possible consequences of any repetition.

4.3.3 Failure to desist will result in the application of the local procedure.

4.3.4 If the patient gives, and maintains, a commitment not to repeat their unacceptable behaviour s/he can expect the following:

- That their clinical care will not be affected in any way
- That, where substance abuse has been identified, appropriate assistance will be provided
- That a copy of their agreement not to repeat the behaviour in question will be placed on their file and a copy kept in suitable confidence at our practice.
- That relevant staff will be informed.
- That the our practice will investigate fully any concerns raised by the patient.
- That the Procedure for Care will lapse after one year.

4.3.5 Failure to comply with the Procedure for Care will, at the request of the relevant Clinical / Service staff, result in withholding treatment.

4.3.6

4.3.5 The exclusion lasts for a maximum of twelve months subject to alternative care arrangements, which the relevant clinician/s should pursue.

**Our practice will consider reporting any unlawful activity, involving our practice personnel or property, to the police and will prosecute all perpetrators of crime against our practice staff.**

References:

1. *Withholding Treatment from Violent and Abusive Patients* - Resource Guide