

AGGRESSION AND VIOLENCE TO STAFF.

AGGRESSION AND VIOLENCE TO STAFF			
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INTRODUCTION

Violence and aggression in residential care facilities can differ from that experienced in other work settings.

Challenging behaviour from residents, including aggressive behaviour, may be a component of the service, it may be a manifestation of the resident's condition, it may be due to the resident being acutely ill, having impaired judgement or misinterpreting their environment.

As a result, staff may unavoidably need to cope safely with resident related aggressive behaviour as part of their daily work.

The service provider will need to balance the rights and needs of the service user with the rights and safety of the employee.

This Policy and Procedure should be read in conjunction with Behavior Management.

Extra pressure is now on our Home and staff due to the Pandemic.

Although health-care workers have generally been met with an outpouring of support and gratitude, there have also been alarming incidents of health workers being stigmatized, ostracized, harassed or threatened for allegedly spreading the

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virus. Health-care professionals have faced aggression when residents don't understand procedures or refuse to comply with isolation rules.



LAW/ REGULATIONS/GUIDELINES

Non – Fatal Offence against the Person Act, 1997

[Assault is a serious criminal offence which can result in imprisonment in the event of a conviction. In the event of an assault as defined by statute, there is an obligation on the Provider/ PiC to report the assault to the authorities. (See definition of Assault)]

The Safety, Health and Welfare at Work Act, 2005 and the Safety, Health and Welfare at Work (General Application) Regulations 2006

PURPOSE

The purpose of this procedure is to assist management and staff in dealing with aggression and assault to employees from residents.

SCOPE

This Policy and Procedure covers aggression to staff from residents, relatives and others. It does not cover staff aggression to residents.

POLICY STATEMENT

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This Policy Statement is part of the overall programme for managing Health and Safety in our Home in particular reference should be made to the Policy and procedure on Behavior that Challenges.

We recognize that there can be a risk of violence and aggression directed at staff and the Provider & Management of the home are committed to take all necessary precautions, as outlined in this document, to reduce that risk.

The PiC will be responsible for enforcing the procedure aimed at reducing risks.

All staff who come into contact with residents will be trained in dealing with aggressive and violent behavior.

The management are committed to providing support to staff who have been assaulted or verbally abused.

DEFINITION

2 (1) a person shall be guilty of the offence of assault, who, without lawful excuse, intentionally or recklessly –

(a) Directly or indirectly applies force or causes an impact on the body of another or

(b) Causes another to believe on reasonable grounds that he or she is likely immediately to be subjected to any such force or impact. (Non – Fatal Offence against the Person Act, 1997)

“Any incident, in which a person working in a care home is verbally abused, threatened or assaulted by a resident or a member of the public, in circumstances relating to his or her employment.” (*The Health and Safety Executive*).

EXAMPLE OF AGGRESSION MIGHT INCLUDE:

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- A carer is bitten by a resident with learning disabilities, in the course of the normal care of that person.
- The person in Charge is verbally abused by an irate relative who considers that his relative has not been properly cared for.
- A Nurse is verbally abused and threatened by a resident who is unwilling to take prescribed medicine.
- A contractor repairing an item of equipment is punched by a confused resident.
- A carer/nurse faces aggression when residents don't understand procedures or refuse to comply with isolation rules due to COVID - 19.

Providers and staff should not accept aggressive/violent behavior as an unavoidable occupational hazard, but instead establish systems to prevent or reduce aggressive behavior. The ABC tool is commonly used. The provider and the staff must work together to tackle violence and aggressive behavior.

Ensure the Home helps staff to stay vigilant about protocols by making information easily accessible: provide posters, reminders and checklists.

This will help keep everyone protected from infection without escalating stress by requiring staff to memorize new protocols and guidelines.

- Create a schedule for rest and meal breaks and follow it as closely as possible.
- Remember that health-care staff, residents and their families – especially those who are isolated – have psychological and social stressors.

We will ensure in as much as possible we support the mental health and psychosocial needs of staff and residents.

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- Encourage staff to communicate about their stress, fears, concerns and frustrations. Promote self-care practices, including at work, and create channels of communication between staff and managers to discuss needs and concerns.
- Remain attentive to signs of burnout and other stressors, such as harassment outside the workplace.
- Do not encourage overworking and “selfless” behavior: media messages and society’s depiction of health-care workers as heroes might encourage some to push their limits, leading to errors due to fatigue or burnout.
- Remember that health-care workers are essential to this effort to combat COVID – 19, so ensuring their safety and well-being must always come first.

While it is important to take into account business continuity and the availability of materials, we will ensure not to neglect security measures such as:

- Controlling entrances and exits.
- Entering into dialogue with agitated or aggressive residents and/or family members.
- ensuring staff are able to de-escalate tensions
- Setting up a focal point to respond to questions from the press and the community in a culturally sensitive manner.

Our Emergency Preparedness Contingency Plan will ensure that it covers: availability and use of essential resources, isolation measures and/or staff rotation, what to do if there is a security threat / incident or outbreak, and the protocol for managing it.

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It is important to keep in mind:

- Quarantine and isolation enhance tensions and separate people from their loved ones. Be sure to take gender and other factors into account when directing people to isolate.
- We will communicate clearly about the parameters and protocols our Home has adopted, in the interest of openness, transparency and accountability.
- We will ensure there is adequate signage that can be easily understood by all.
- Where possible, we will set up communication channels for residents and their families to ask questions and express concerns.
- We will ensure we deliver updates on the COVID-19 response while maintaining confidentiality.

We will ensure all staff are aware of infection prevention and control measures.

We will ensure we report any violent incidents, blocked access to care, discrimination and/or stigmatization happening in areas where health-care teams are working.

This will make it easier to make informed changes to security measures

RISK ASSESSMENT

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Where work related violence and aggression has been identified as a hazard the associated risk must be assessed and managed to ensure that controls in place are effective and to identify any further controls that may be required.

When identifying the potential for violence and aggression consider the triggers, situations and work activities which make aggressive behaviour more likely.(See ABC Tool)

With regard to residents who have aggressive behaviour, the assessment of risk may include clinical assessment of a resident's behaviour and identification of appropriate interventions to help reduce the risk.

A Risk Assessment needs to be carried out to establish the level of aggression from individuals in the home. Part of the assessment should include information from previous incidents and include staff perception on the issue. Consideration should be given to particular activities that can trigger aggressive responses, for example a resident who is not permitted to smoke unsupervised and who has to wait for a cigarette.

CONTROLLING THE RISK

There are a number of precautions that can be used in care homes to prevent and control aggression/violence to staff. Not all of these measures will be suitable and some will be easier to implement than others. They include changing the following aspects:

Work Activities/ Job Design

The jobs people do and how they do them

Instructions, verbal and written for the job

The systems for sharing information about residents

Avoid lone working where possible

Adequate staffing levels determined by the risks, including cover for meal breaks, handover etc.

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The response to incidents, the corrective and preventative action and the proper recording of these activities.

Not having items that could be used as weapons available.

Workplace

Arrange seats with social distancing in mind.

Plants and fixtures firmly anchored to prevent use as a weapon

Restricting exits, try to have one way systems if possible.

Security systems such as personal alarms linked to the building alarm system

Communication

Up to date Information passed on in a timely manner

Systems for communication of information to staff, relatives, volunteers, GPs, other health professionals

Appropriate training to assist staff to work safely when dealing with potentially aggressive or violent people.

Having emergency telephone numbers readily available.

If risks from aggression and violence are to be managed successfully there must be support for staff from the Provider and The Person in Charge.

INFORMATION AND TRAINING

A flow of information about potentially violent situations within the home will help staff assess the possibility of violence or aggression. This is particularly important when:

- New staff are being inducted
- New residents are admitted as part as the pre admission assessment
- There has been a change in the resident's mental or physical state, medication, behavior, mood etc.
- Known violent residents are being transferred to the home.

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Employees will also need to be advised of:

- The correct use of security measures in place: for example, how to use personal alarms correctly;
- Any dress code in place such as restrictions on wearing jewellery like large rings, necklaces and neckties which may cause difficulties;
- The system for reporting accidents and incidents

In addition, training in the prevention and management of violence/ aggression can provide staff with techniques to reduce or defuse aggression/violence. It should be available to all employees who come into contact with residents.

The training should cover:

- Cause of violence
- Recognition of warning signs
- The ABC tool
- Relevant interpersonal skills
- Details of working practice and control measures
- Incident reporting procedures
- Incident recording

Confidence and capability are important when dealing with potentially aggressive or violent incidents and it is important that staff regular refresher training and this training must form part of the induction of new staff.

Establishing a relationship of trust and understanding with the resident will help to ensure that tensions and anxieties are expressed before they reach a stage where they are released through violent behavior.

HELPING STAFF AFTER AN INCIDENT

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It can be helpful to bring staff together after an incident to discuss what happened. This process of debriefing may have two functions: to establish details of the incident and to provide emotional help. It is sometimes appropriate to supplement debriefing by confidential counseling.

Staff are a critical part of the nursing home's success and their morale is important as it will reflect on both the business and the care of the residents. Morale and confidence will be improved by a genuine commitment from the provider to deal with incidents of violence and aggression to staff even if, in more serious incidents of assault, they are prepared to report the matter to the Gardaí.