Management of Violence & Aggression (MOVA)

Policy and Procedure

Human Resources & Organisational Development
March 2011
Management of Violence & Aggression (MOVA)

Name of Policy: Management of Violence & Aggression (MOVA)

Purpose of Policy:
- To achieve a positive attitude and approach towards Trust staff.
- To prevent incidents of abuse, including aggression and violence occurring. The Trust recognises that this is not always possible but strives to achieve the lowest level of incidents through exerting suitable controls including training staff in the appropriate use of risk assessment.
- The Trust will seek to ensure that staff receive appropriate support in recovering from the affects of an incident and in trying to prevent recurrence.
- To ensure the Trust complies with its statutory responsibilities under the Health & Safety at Work (NI) Order 1978 and other related legislation/guidance.

Directorate responsible for Policy: Directorate of Human Resources & Organisational Development

Name & Title of Author: Janet Taylor, Human Resources & Organisational Development
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Does this meet criteria of a Policy? Yes/No/Not Applicable

Staff side consultation? Yes/No/Not Applicable

Equality Screened by: Anne Forsythe

Date Policy submitted to Scrutiny Committee: 13 June 2011

Members of Scrutiny Committee in Attendance: Vivienne Toal, Head of Employee Engagement & Relations (Chair), Anita Carroll, Assistant Director of Acute Services – Functional Support Services, Dawn Connolly, Professional Support and Governance Lead for Acute (Surgery) on behalf of Fiona Wright, Claire Graham, Head of Corporate Records on behalf of Siobhan Hanna, Marita Magennis, Social Care Governance Lead – Mental Health & Disability / Specialist Child Health & Disability and Acute Services on behalf of Mary McIntosh, Danny McKevitt, Head of Specialist Estate Services, Brendan Whittle, Assistant Director of Older People’s Services

Policy Approved/Rejected/Amended: Approved

Communication Plan required? Yes/no/not applicable
Training Plan required? Yes/no/not applicable
Implementation Plan required? Yes/no/not applicable

Any other comments:

Date presented to SMT

Director Responsible: Director of Human Resources & Organisational Development

SMT Approved/Rejected/Amended

SMT Comments

Date returned to Directorate Lead for implementation (Board Secretary)

Date received by Office Manager (HQ) for database/intranet

Date for further review: March 2013
Circulation List:

This policy was circulated to the following staff and groups for consultation:

- Trust Directors
- Trade Union Side
- Education, Training & Workforce Development Committee
- Social Services Training Unit
- Assistant Director Functional Support Services
- SHSCT Security Manager
- Positive Options (MAPA® accrediting body)
- Police Service of Northern Ireland (relevant elements)

Following SMT approval this Policy Document will be circulated to the following:

- All Trust staff
- Trust Intranet site (for public release under the Freedom of Information Act 2000)
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POLICY

1.0 INTRODUCTION

1.1 Health and Social Care staff are facing an increase in the number of physical and verbal attacks against them. Circular HSS (Gen) (3) 2007\(^1\) and associated action plan, sets out the Department’s commitment to protect staff to ensure that they can provide a quality service without the fear of abuse. It is however recognised that an individual’s human rights must be respected and it is important to ensure that the need to provide health and social care is properly balanced against the need to protect staff.

1.2 The Southern Health and Social Care Trust (hereinafter referred to as the “Trust”) does not accept that members of staff should be subjected to verbal abuse or physical violence of any nature. The Trust will encourage police intervention and offer support to staff that have suffered mental and/or physical distress or trauma. Any assault on a member of staff will be treated extremely seriously and may result in criminal charges being pursued or access to Trust sites/service provision being affected.

1.3 The Trust is committed to working towards preventing attacks on staff and ensuring that perpetrators face the full rigour of the law.

2.0 PURPOSE AND AIMS

- To achieve a positive attitude and approach towards Trust staff.
- To prevent incidents of abuse including aggression and violence occurring. The Trust recognises that this is not always possible but strives to achieve the lowest level of incidents through exerting suitable controls including training staff in the appropriate use of risk assessment.
- The Trust will seek to ensure that staff receive appropriate support in recovering from the affects of an incident and in trying to prevent recurrence.
- To ensure the Trust complies with its statutory responsibilities under the Health & Safety at Work (NI) Order 1978 and other related legislation/guidance.

3.0 STATEMENT

3.1 The Trust will not tolerate violence and aggression towards staff or attacks on property and will take whatever action considered necessary against perpetrators.

3.2 The Trust is committed to ensuring, as far as is reasonably practicable,
- a safe working environment,
- care for staff and others after they have experienced a violent or aggressive incident,

\(^1\) DHSSPS Circular HSS (GEN) (3) 2007 Zero Tolerance on abuse of staff; protecting healthcare and emergency staff from violence
• appropriate support of staff in their chosen course of action including reporting violence, or the threat of violence, to the police and during any prosecution process.

3.3 The Trust will continue to develop and implement policies, procedures and strategies aimed at preventing and managing violence and aggression at work.

3.4 The Trust is committed to providing learning and development opportunities in support of the prevention and management of violence and aggression.

4.0 SCOPE

4.1 Management of Violence and Aggression (MOVA) applies to violence and aggression towards staff; arising out of or in connection with work and/or those undertaking work on behalf of the Trust, whether from service users, relatives, carers, other staff or members of the public.

5.0 RESPONSIBILITIES

5.1 Trust Board
The overall responsibility for these arrangements lies with Trust Board.

5.2 Chief Executive
The Trust Board’s responsibility for ensuring implementation is managed through the Chief Executive.

5.3 Director of Human Resources and Organisational Development
The Chief Executive has appointed the Director of Human Resources & Organisational Development as the identified Lead Person for Health and Safety within the Trust which includes responsibility for establishing and monitoring the implementation of the Trust policy on Management of Violence and Aggression.

5.4 Directors
The Chief Executive requires Directors to establish and monitor the implementation of these arrangements and compliance within their area of responsibility.

5.5 Managers are responsible for:
• Ensuring that staff are aware of the arrangements for the management of violence and aggression.
• Ensuring that staff are trained in appropriate techniques for dealing with incidents of abuse, aggression and violence.
• Ensuring that staff are aware of the arrangements for reporting incidents of violence and aggression at work.
• Providing support to staff who experience abusive, violent or aggressive incidents.
• Ensuring risk assessments are undertaken in accordance with the Trust Risk Management Strategy.
5.6 **Staff** must:

- Comply with policy, related procedures and strategies and co-operate with supervisors and managers on all health and safety matters.
- Take reasonable care of their own health and safety and that of others, including those in their care.
- Advise line managers of any concerns or risks.
- Report all incidents of abuse, aggression and violence in accordance with the Trust Policy for the Management of Adverse Incidents.
- Attend appropriate training and carry out activities in accordance with training, instructions, policies, procedures and strategies.
- Support colleagues who have been the victim of a violent incident or a witness to it.
- Co-operate fully in any subsequent investigation of an incident.

5.7 **Rights & Responsibilities**

Staff and service users must be treated with dignity, respect, positive attitudes and considerate behaviour at all times. The Trust expects staff and service users to afford each other this courtesy. To contravene acceptable standards of behaviour may result in management action to redress the situation in accordance with Trust policy and procedures.

6.0 **MONITORING AND REVIEW**

6.1 The Trust is committed to ensuring that all policies, procedures and strategies are kept under review to ensure that they remain compliant with all relevant legislation and reflect organisational development.

6.2 The Trust is committed to regular auditing of abuse, aggression and violence management/practice and will also monitor agreed performance indicators as determined by the Trust Board and/or the Lead Director for Health & Safety.

6.3 Additionally, Trade Union Side representatives may also monitor incidents, conduct risk assessments, carry out workplace inspections, etc.

6.4 This document will be reviewed by the Director of Human Resources and Organisational Development within two years or earlier in light of any changes in statutory legislation and/or operational experience that prevents these arrangements being implemented as intended.

7.0 **SUPPORT AND FURTHER ADVICE**

Further information and advice with regard to the Management of Violence and Aggression is available from the Health & Safety Department, Trade Union Side representatives and/or the MOVA Lead and Specialist Advisors.

This policy and procedure should also be read in conjunction with other relevant Trust policies and procedures, for example:

- Strategies for the Management of Violence and Aggression
• Health & Safety at Work Policy
• Policy for the Management of Adverse Incidents
• Risk Management Strategy
• Lone Working Policy and Procedure
• Harassment at Work Procedure
• Disciplinary Procedure
• Equal Opportunity Policy
• Whistleblowing Policy

8.0 EQUALITY AND HUMAN RIGHTS

This document has been screened for equality implications as required by Section 75 and Schedule 9 of the Northern Ireland Act 1998. Using the Equality Commissions screening criteria, no significant equality implications have been identified. It is therefore not subject to equality impact assessment.

This document has been considered under the terms of the Human Rights Act 1998 and was deemed compatible with the European Convention Rights contained in the Act.

9.0 ALTERNATIVE FORMATS

This document can be made available on request in alternative formats, eg plain English, Braille, DAISY, audiocassette, disk and in other languages to meet the needs of those who are not fluent in English.

10.0 COPYRIGHT

The supply of information under the Freedom of Information does not give the recipient or organisation that receives it the automatic right to re-use it in any way that would infringe copyright. This includes, for example, making multiple copies, publishing and issuing copies to the public. Permission to re-use the information must be obtained in advance from the Trust.
11.0 DEFINITIONS

The definition of violence is not limited to physical assault/injury it can range from cases of disrespect to more serious verbal aggression and the perceived threat of physical violence.

11.1 Physical Assault (Violence)
‘The intentional application of force to the person of another, without lawful justification, resulting in physical injury or personal discomfort’ – Counter Fraud and Security Management Service – Secretary of State 2003.

11.2 Non-physical Abuse (Aggression)
‘The use of inappropriate words or behaviour causing distress and/or constituting harassment’ – Counter Fraud and Security Management Service – Secretary of State 2003.

11.3 Anti-Social Behaviour
The following are examples of anti-social behaviour that are not acceptable at or in connection with work:

- Excessive noise eg loud or intrusive conversation, or shouting.
- Threatening or abusive language involving excessive swearing or offensive remarks/gestures.
- Derogatory racial, religious or sexual remarks and behaviour.
- Malicious allegations relating to members of staff or service users.
- Inappropriate behaviour as a result of alcohol or misuse of illicit drugs, including non-prescribed medication or drugs\(^2\).
- Intimidation, threats or threatening behaviour (eg “I know where you live”).
- Harassment or stalking.
- Violence, perceived acts of violence or threats of violence.
- Any explicit or implicit challenge to the safety, well-being or health of any member of staff or service user.
- Brandishing weapons or objects which could be used as weapons.
- Wilful damage to Trust/staff property including creating a mess in waiting areas.
- Obstructing thoroughfares.

12.0 PRIMARY INTERVENTION STRATEGIES

The Trust requires staff to implement the following prevention strategies in order to promote a safe environment and positive behaviours.

12.1 Rights & Responsibilities
Unfortunately, due to the rise in the number and severity of instances of unacceptable behaviour from some people using its services, the Trust has adopted a zero tolerance approach on abuse of its staff. See also Section 3.2 and 5.7.

\(^2\) Medically identified substance abuse problems will be treated appropriately
Service User Rights & Responsibilities
The Trust and its employees owe service users a duty of care. We aim to provide treatment/service/care to meet assessed needs which is sympathetic and responsive to individual needs, within the resources which are available to the Trust. However, it is important for service users, including their visitors and companions who may be present during provision of care on Trust premises or in the home, to understand and respect that there is an expected minimum standard of behaviour. Any behaviour that puts staff, service users or other persons at risk is not acceptable.

Service users have the responsibility to behave in an acceptable manner which does not involve any behaviour considered violent, aggressive or anti-social. An information sheet ‘Protecting Southern Health and Social Care Trust Staff from Violence and Aggression’ (click here) has been developed and should be shared with service users and others as appropriate.

Staff Rights & Responsibilities
All health and social care staff must be protected to ensure that they can provide a quality service to service users and their families without the fear of abuse. The Trust expects all its employees to show respect, positive attitudes, professional and considerate behaviour in all contacts with service users.

All staff should receive induction and appropriate training to develop their knowledge and skills in managing incidents of violence, aggression and anti-social behaviour. (Reference also 5.6 – Staff responsibilities.)

12.2 Provision of a Therapeutic Environment
The structure and management of the environment influences the risk of aggression and violence. A therapeutic environment will be provided to meet individual needs for safety, security, privacy, dignity, choice and independence in an effort to prevent violent and aggressive behaviours. Consideration should be given to:

- Premises design/layout and furnishings
- Visibility, lighting and noise levels
- Security Measures: alarm systems, response protocols and drills
- Staffing Levels: skill mix and resources
- Working Practices: policies, procedures, consistency in practice balanced with flexibility to meet individual needs
- Communication
- Hours of Business: routines, times and structure
- Lone Working procedures
- Training: skilled staff, mentoring, supervision
- Partnership Working: service user and others involvement.

12.3 Risk Assessment
Where there is the potential for violent, aggressive and/or anti-social behaviour, a risk assessment is required\(^3\). This includes identification of individual, environmental and service provision risk factors. The risk

\(^3\) Ref: Management of Health and Safety at Work NI Regulations.
assessment informs the care plan/safe system of work with the development of appropriate local intervention managements strategies, based on Strategies for the Management of Violence and Aggression together with appropriate local lone working protocols/safe systems, for example use of alarms, buddy systems, etc. (Click here to access the Lone Working Policy and Procedure.)

Regular reviews are necessary. Please refer to the Trust Risk Management Strategy (click here) for guidance on the risk assessment process.

12.4 Needs Assessment and Care Plan
A comprehensive needs assessment will determine the service to be provided to an individual. Service users should be involved in the development of their care plan. This may include the development of advance directives⁴. To avoid confusion and frustrations it is vital that the subsequent care plan matches the expectations of the service user and is clearly understood by the service provider. A consistent approach is required. Where several disciplines are involved it is highly recommended that a joint meeting takes place to determine roles and responsibilities and avoid any ambiguity. Any change to the care provision must be communicated to all parties, including those with parental responsibility in the case of children. Regular care plan reviews should include an opportunity to discuss and resolve any concerns.

12.5 Communication
Managers should ensure that the Trust’s expected standards of behaviour are made known at the outset of service provision to patients/clients/relatives and visitors (Reference Section 12.1).

Balancing the need to provide information on potential risks in protecting an individual’s right to privacy.

Legislation allows for the sharing of confidential information for the protection of health. This must be justified on a case by case basis. (Ref: Human Rights Act 1998, HSW Order NI 1978, The Safety & Health Practitioner, November 2002)

There should be communication of information and risks between services/other agencies which may be providing service/treatment/care to the same individual. This should be documented. All relevant disciplines providing treatment/service/care should be informed about the potential for violence and aggression, including trigger points.

Managers should ensure that appropriate documentation is transferred with the patient (as per the O’Neill Report⁵) when transfers take place between Trusts/other agencies.

Following risk assessment, methods of communication will be made available, which will facilitate safe working practices, eg buddy systems, use of two-way radios, silent alarms linked to switchboard, personal safety alarms etc.

⁴ A written statement of a person’s wishes regarding their treatment, often including a living will, made to ensure those wishes are carried out should the person be unable to communicate them.
It is the responsibility of every staff member to familiarise themselves with the risk assessment, care plans, safe systems and any subsequent changes following reviews.

12.6 Policies and Procedures
A series of Trust and local policies, procedures, strategies, working protocols and safe systems of work have been developed to minimise the risk of violence and aggression. Managers should ensure staff are aware of these and that they are implemented within their area of responsibility. Staff should be encouraged to highlight difficulties with implementation to prompt a review of effectiveness.

12.7 Training
All staff must ensure they have the appropriate level of training including refresher courses as per MOVA Training Guide (click here) to develop and maintain their knowledge and skills in managing incidents of violence, aggression and anti-social behaviour.

The Trust has adopted the training models of Therapeutic Crisis Intervention (TCI) for residential childcare staff including children with disabilities and Management of Actual or Potential Aggression (MAPA®) for all other health and social care staff. This includes conflict resolution and personal safety advice.

Additionally specialist training is provided for staff who have particular responsibilities and/or require additional skills in order or implement a specific strategy for the management of violence and aggression.

It is the responsibility of the individual and the line manager to identify any training needs and to ensure that these are met/facilitated. Training including updates will be available to all staff based upon the level of risk. A Training Needs Analysis is required. This should be completed and reviewed as necessary in conjunction with Trust MAPA®/TCI Trainers, to ensure training is and continues to be relevant to need. Managers are responsible for keeping a record of staff training.

All training and training needs analysis requests or reviews should be directed to the Trust Education, Learning and Development Department or, with regard to TCI, the Social Services Training Unit.

13.0 SECONDARY INTERVENTION STRATEGIES
Unfortunately incidents of violence and aggression do occur. Managers should ensure that staff have the skills and have received instruction on how to manage such incidents.

13.1 Incident Management
Depending on individual circumstances the following immediate and/or emergency strategies for the management of violence and aggression may be instigated. A combination of strategies may be employed in practice and localised as appropriate. Managers must ensure that staff have received the relevant training in order to implement these strategies, ie:
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### 14.0 TERTIARY INTERVENTION STRATEGIES

Where there is a known/assessed significant risk of violence and aggression a planned approach to the management of an individual must be taken. The following strategies, some of which have already been listed as secondary intervention strategies, may form part of such a local management plan. Managers must ensure that staff have received the relevant training in order to implement these strategies.

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15.0 POST INCIDENT MANAGEMENT

The following information should be read in conjunction with the MOVA Guide to Post Incident Management. (click here)

Following an incident Managers are required to consider

- provision of support after an incident
- incident reporting
- post incident analysis and
- post incident management processes.

15.1 Providing support after an incident

The Trust wishes to promote a culture of support that permeates the whole organisation. Each Directorate should demonstrate a commitment to providing support to those involved in an incident. Line managers are responsible for ensuring that the individual receives the appropriate form of support. Additionally, Trade Union Side support is available.

The form of support should be responsive to the individual need. The following options should be offered, as appropriate:

**Initial Support**
- Prompt and appropriate medical care
- Emotional first aid - common human support, eg comforting the individual and offering refreshments
- Assistance and accompaniment to hospital
- Contacting a relative or friend
- The opportunity to go off duty
- Arranging for a taxi home or transport arrangements
- Advising the individual to contact their GP
- Support and assistance with making a complaint to the Police (required within 48 hours)

**Ongoing Support**
- Managerial support
- Nominated buddy/identified colleague
- Ensure individual(s) are kept informed of the investigation process
- Confidential staff counselling
- Occupational Health Services
- Trade Union Side representative
- Victim Support
- Individual/group support eg focus groups
- Advice regarding Criminal Injury Compensation
- Advice on health and wellbeing initiatives
- Support to pursue a prosecution eg accompaniment to Court

**Return to Work**
- Staff should be kept informed of any actions taken especially if they are absent from work following the incident and steps taken to ensure that the individual feels they are returning to a safe working environment.
- Further guidance on staff returning to work following an incident is contained within the Trust Sickness & Absenteeism Policy & Procedures. **NB:** Absence related to an incident of violence and aggression at work is excluded as an ‘episode’ as defined in the Trust Sickness & Absenteeism Policy.

**Support for Others**
Line managers should also ensure that an assessment is made of the needs of others who may have been affected following an aggressive incident and support provided or referrals made to other agencies as appropriate.

**15.2 Incident Reporting**

Unfortunately incidents of violence and aggression do occur. It is therefore important to report incidents of violence and aggression in order to highlight and manage incidents and incident trends with the aim of preventing future recurrences.

An incident of violence is defined as:

> “Any incident where staff are abused, threatened or assaulted in relation to their work, involving an explicit or implicit challenge to their safety, well-being or health.”

All incidents of violence, aggression and anti-social behaviour must be reported and recorded in accordance with the Trust Policy and Procedures for the Management of Adverse Incidents ([click here](#)) and [Supplementary Guide on information to be included on an IR1 Form when reporting incidents of Violence & Aggression](#). Incidents involving threats of violence or actual violence and other crimes against individuals and property should be reported to the Police.

**15.3 Post Incident Analysis**

All managers have a responsibility for ensuring the appropriate level of investigation is undertaken as soon as is practicable following an incident depending on the level of risk in accordance with Trust incident management and investigation arrangements.

The appropriate format of the analysis will be required to consider such factors as: the individual’s capacity, any underlying mental health condition;

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6 European Commission DG-V 1997, HR CAS
alcohol or other drug dependency or serious underlying clinical condition and or learning disability; including those individuals involved in an ongoing behaviour support/treatment plan.

As far as possible the analysis process should include:

- all individuals involved in, or affected by, the incident as appropriate including, at manager’s discretion, seeking the views of service users;
- consideration of the contributing factors which may have led to the incident;
- the review of what worked well and lessons to be learned: this may be processed on an individual or group basis;
- the review of existing policy and practice, and the update of care plans and risk assessments, as necessary, in order to minimise the risk of recurrence;
- ensuring that written confirmation of what was agreed at all stages of the analysis is shared with individual(s) as appropriate;
- ensuring that staff are kept informed (including those absent from work) of any actions taken throughout the process;
- reviewing training needs;
- reviewing use of emergency response equipment and protocols eg alarms;
- ensuring that all documentation in relation to the matter is completed and stored securely.

15.4 Post Incident Management

Post Incident Analysis may provide reassurance that control measures to prevent the incidence of violence and aggression are in place however a series of action points may be determined to minimise recurrence even further. Managers are responsible for ensuring such action plans are addressed. Post Incident Management should include every effort to seek early resolution of unacceptable behaviour. MOVA Strategy No 14: Staged Approach to Addressing Unacceptable Behaviour (click here) provides guidance on such a process.