BrisDoc Patient care by people who care

NHS

Charlotte Keel MEDICAL PRACTICE

Violence and Aggression against staff in CKMP

Version:	Owner:	Created:
V2.1	Kerry Hall	June 2024
Published:	**Approving Director:**	**Next Review**
14/09/2026	Rhys Hancock (Director of Nursing, AHPs and Governance)	14/09/2027

Contents

Background

Patients can be verbally or physically aggressive to staff and other patients in the practice. This document is to give direction as to the actions that staff can take if this happens in different scenarios.

By Telephone

Aggressive / Abusive Calls

Whilst we are committed to providing high-quality care and support to all patients, abusive, threatening, or discriminatory behaviour towards staff will not be tolerated.

Where a patient becomes abusive during an interaction:

1. Remain calm, professional, and courteous at all times.
2. Politely remind the patient that abusive language or behaviour is unacceptable.
3. Inform the patient that if the behaviour continues, the call or interaction will be terminated.
4. Provide a clear warning before ending the call. Staff must not terminate a call without first informing the patient of the consequences of their behaviour.
5. If the abusive behaviour continues following the warning, the call may be ended.

Staff should remember that patients are often distressed, unwell, anxious, or frustrated with the healthcare system rather than with the individual staff member. Where possible, de-escalation techniques should be used whilst maintaining professional boundaries.

Staff Identification and Professional Conduct

Be open and honest with the patient, sharing your name as required – first name only.

If the patient makes threats against you as a person or the practice immediately flag with the team leader. If the patient says that they are coming in to cause injury to you or damage the building lock down needs to be considered.

If a patient requests a second clinical opinion add back to CAS list.

Ensure you add a note to indicate a second opinion is being sought for the patient.

In situations where we receive multiple calls from a patient, inform practice manager and lead GP

Advising the Operational Manager on duty so that they can support you but are also able to consider additional measures such as raising a learning event or contacting the on-call Manager for further support if required.

Our complaints procedure is available for staff on Radar and guidance for patients can be found on www.brisdoc.co.uk under the 'contact us' section.

Violence and Aggression Patient threatening to come to the practice and cause harm to staff and buildings SOP

This is the process to follow if we receive a threat of violence on the phone whereby the patient says they are coming to the practice to cause violence to staff or property. There are 2 processes 1 with the Security Guards on site and one without.

Lock Down of the Practice

Telephone threat received.

Process 1

Inform Security Guards to lock the external doors.

Phone 999 and obtain Police Reference - the patient cannot be removed without this. Add into the notes. If a known patient update EMIS

Inform all staff by Teams and speak to the GP Lead, Operations Manager or Lead on site.

If Security are not in reception follow Process 2

Process 2

Security will leave keys in the top drawer in the Sirona Office for ease of use. This will prevent the need to get the keys from the outside key safe.

KEYS STORED - Outside in the KEYSAFE code 1209.

Using automatic door control key (tiny key 75200) set door to FULL LOCK

DISABLE ELECTRICITY with the manual switch on the wall

Using the TRAPZOID (LORENCO)shape key lock the door

Door can then be manually opened and closed using this key if the aggressor is not in sight but allowing patients to leave via this door.

Claremont Road

Set the internal door on free flow

Outer door into the car park should be kept on full lock.

Use ROUND HEAD KEY (509715) to manually open and close the door.

Security leave keys in the top drawer in the Sirona Office for ease of use. This will prevent the need to get the keys from the outside keysafe.

If security are on site then they will lock the doors:

Security Guard	MOBILE NUMBER	07597 334722
Security Guard	MOBILE NUMBER	07900031673

Advise the Operational Manager on duty so that they can support you but are also able to consider additional measures such as raising a learning event or contacting the on-call Manager for further support if required.

Inform Brisdoc, One Care, ICB, Inform Brisdoc, One Care, ICB,

Complete PCSE forms for immediate patient removal. **You will find full instructions under the zero-tolerance SOP.**

Patients in Reception who are not behaving in a manner that would be acceptable in practice.

Patient removals | PCSE (england.nhs.uk)

Non-physical assault: Inappropriate words or behaviour causing distress, including threats, verbal abuse, and harassment.

Unacceptable behaviour: Includes shouting, intimidation, discriminatory remarks, malicious allegations, refusal to follow reasonable practice processes, repeated derogatory comments, demanding specific clinicians, or persistent unreasonable demands.

Proportional response – Actions should escalate only as necessary.

Consider clinical conditions – Capacity, mental health, or medical causes of behaviour must be considered.

If behaviour is rude or mildly aggressive

- Use calm, de-escalating language.
- Inform the patient their behaviour is unacceptable.
- Flag with Team Leader who will attend the patient with you.
- Warn that continuation will lead to termination of the interaction.

Behaviour is aggressive, threatening, or escalating and causing severe damage to property and threat to self.

Extreme Violence and Aggression Reception

- Front desk to ask patients in the waiting room to leave the building
- Reception front desk team to leave reception – lock the fire door into the back office when they leave by flicking the switch on the door lock.
- Screen message/Teams to alert all other staff of an incident and to request they do not leave their rooms and come into reception.
- CALL 999 – Obtain Police reference as patients cannot be removed without this. Add into the EMIS history of the patient.
- If safe to do so, 2 staff to leave reception by the alternative door and help to move patients from the reception area – this may be onside the practice or externally
- Inform Brisdoc, One Care, ICB.

Complete PCSE forms for immediate patient removal. [Patient removals | PCSE (england.nhs.uk)]

Considerations

- Do not press the Fire alarm button or the emergency green button as staff will immediately leave their rooms and more staff and patients may move through the reception area.
- If safe to do so, close the fire doors to prevent the aggressor from moving around the building.
- After the incident has been resolved staff have an immediate debrief with Line Manager or Team Leader and at this stage provided with details of the 5-Point Plan and BrisDoc Employee Assistant information. If appropriate, consider contacting the Mental Health First Aider.

Version Control

Date	Version	Author	Change Details
06/2024	V1	KLH	New Document
18/8/2026	V2	KLH	Changed language
08/09/2026	V2.1	KLH	Reviewed and updated for accuracy