

**Promise Care Services Ltd**

**BEHAVIOURS THAT CHALLENGE, VIOLENCE AND AGGRESSION**

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# Policy Statement

From time to time, service users present behaviours that challenge, violence, or aggressive tendencies that need to be fully documented in the assessment of need and the care plan. For this particular policy, behaviours that challenge include self-harm, self-neglect, self-abuse, or harm to others. If behaviours that challenge, violence, or aggressive tendencies are present, a full and robust risk assessment must be undertaken to protect not just the resident, but the staff. This needs to include the use of any restraint techniques where appropriate.

# The Policy

This document outlines the policy of this organisation concerning dealing with behaviours that challenge, violence, and aggression among service users.

# Principles

* This organisation seeks to demonstrate respect for the lifestyles and human rights of its service users.
* We recognise, nevertheless, that exceptional circumstances may arise when our workers might be called upon to place limitations on a service user’s behaviour, either for their interest or for the protection of others.
* We will attempt to anticipate these possibilities and to follow precise procedures, designed to ensure that the limitation to a service user’s lifestyle or human rights is kept to a minimum.

# Common Types of Behaviour

There are three common types of behaviour:

# Non-Verbal

* Agitation
* Wandering, pacing, following
* Intimidating facial expressions, staring
* Intimidating body posture
* Cornering, invading personal space
* Offensive gestures
* Interference with equipment or property
* Being withdrawn, extreme passivity, refusal to move

# Verbal

* Shouting
* Swearing
* Crying
* Screaming
* Repetitive statements or questions
* Personal comments or questions
* Racist, sexist, offensive speech
* Bizarre, psychotic content, not based on known reality

# Physical

* Scratching
* Grabbing, hair pulling
* Biting
* Hitting, slapping, punching
* Pinching
* Spitting
* Kicking
* Pushing, shoving, knocking into someone
* Striking or throwing furniture or objects
* Inappropriate touching (self or others)
* Urinating, smearing
* Undressing
* Self-harm
* Absconding
* Removal of lines, masks, catheters, dressings, incontinence pads
* Non-compliance, resistive behaviour (e.g. refusing medication, blood tests)

# Service User Plan

In all instances where our workers are likely to encounter behaviours that challenge, violence, or aggression, to an extent that might limit a service user’s lifestyle or human rights, we will seek, when the service user plan is drawn up or revised, to discuss the facts with all concerned and record the decision and the proposed action in detail. We will seek to understand the reasons for the possible action and to initiate action which will tackle the problem more positively.

# Risk Assessment

In the course of considering the service user plan, we will carry out and fully record a risk assessment to calculate the possible danger that is faced, and the balance of benefits and disadvantages of the proposed course of action.

Assess and regularly review the following areas of risk during any assessment of behaviour that challenges:

* suicidal ideation, self-harm (in particular in people with depression) and self-injury
* harm to others
* self-neglect
* exploitation, abuse, or neglect by others
* the rapid escalation of the behaviour that challenges

# Service User’s Consent

We will make every effort to involve a service user at risk of limitation to their lifestyle or human rights in the discussion about possible physical intervention and to obtain their agreement that such an intervention might be necessary. For service users who are permanently unable to understand the situation or to give informed consent, we will seek agreement from someone close to them and knowledgeable about the situation, who can genuinely represent their interests.

# The Use of Restraint

The circumstances in which we regard as justified intervention by a worker of this organisation, which would have the effect of limiting a service user’s lifestyle or human rights are:

* To prevent self-harm or self-neglect by the service user.
* To prevent abuse or harm to others.

We class intervention as the use of chemical, physical, or mechanical methods of restraint.

The intervention used must be the least that can contain the risk, last for as short a time as possible, be administered only by appropriately trained and competent staff, and neither intervention nor the threat of intervention should ever be used as a form of punishment. Refer to the Restraint Policy for detailed information.

# Reporting

Any instance of the use of intervention methods should immediately be recorded. The worker involved should report what happened to their manager as soon as possible, and the manager should review the position and initiate any possible action to avert a recurrence.

# Inappropriate Use of Intervention by Others

We regard the use of medication simply as a means of chemical intervention to be unethical. Because our staff operate in the homes of service users, on occasions they observe the services provided by other professionals and the care given by relatives and friends. If we learn of situations where we believe physical intervention is being used inappropriately by others, we will bring the matter to the attention of the appropriate authorities.

# Related Policies

Assessment of Need and Eligibility

Adult Safeguarding

Care and Support Planning

Consent

Dignity and Respect

Mental Capacity Act 2005

Restraint

# Related Guidance

NICE Quality Standard [QS154] June 2017: Violent and aggressive behaviours in people with mental health problems:

https://www.nice.org.uk/guidance/qs154

NICE Quality Standard [QS101] October 2015: Learning Disabilities: challenging behaviour:

https://www.nice.org.uk/guidance/qs101

NICE Guideline NG 116: Post-traumatic stress disorder, December 2018;

https://www.nice.org.uk/guidance/ng116

The Challenging Behaviour Foundation:

https://www.challengingbehaviour.org.uk/

NHS How to deal with challenging behaviour in adults:

https://www.nhs.uk/

# Training Statement

All staff, during induction, are made aware of the organisation’s policies and procedures, all of which are used for training updates. All policies and procedures are reviewed and amended where necessary, and staff are made aware of any changes. Observations are undertaken to check skills and competencies. Various methods of training are used, including one to one, online, workbook, group meetings, and individual supervisions.

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Person responsible for updating this policy: **IFEYINWA ODOEMENAM**

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