

Organising for Health & Safety

UNISON Scotland  
Community and Voluntary Sector



# It's not part of the job

A health and safety guide on  
tackling violence at work

September 2017

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## **UNISON Scotland Community and Voluntary Sector A health and safety guide on tackling violence at work**

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## Introduction

Violence at work is a major occupational hazard for many UNISON members. Physical attacks are the most serious form of violence, but verbal abuse and threats are much more common and can have long-term health effects.

This guide is produced for safety representatives and stewards in the community and voluntary sector in Scotland – who we believe are especially vulnerable to violence at work. It deals with violence from non-employees, eg service users or other members of the public. (Separate UNISON guidance is available on bullying and harassment - see further information).

This guide is based on the Healthy Working Lives strategy and toolkit *Occupational Violence and Aggression in the Workplace* published in 2010 and a UNISON UK health and safety guide on tackling violence at work *It's not part of the job* produced in 2013. We have retained the title because so many workers in the community and voluntary have reported a prevalent attitude amongst employers that violence is “just part of their job”.

UNISON's UK Community service group conference in March 2017 called for a charter to commit employers to tackle violence at work. <https://www.unison.org.uk/news/article/2017/03/community-violence/>

The Violence at Work Charter would include:

- collecting and monitoring data on violent incidents;
- proper structured support for staff who experience violence;
- thorough risk assessments when staff are placed in vulnerable situations;
- training for staff so they know how to deal with threatening situations.

The tools provided in this guide along with the proposed charter on violence at work will give UNISON activists the means to ensure that violence is never “part of the job”.

## Workers' experience

### Violence on staff in the community and voluntary sector

From *Violent Assaults on Public Service Staff in Scotland Survey, UNISON Scotland, Oct 2016*

We know from the direct experience of our members in the community and voluntary sector that violent assaults on workers especially in care jobs are a huge problem. This is made worse partly because it is regarded by many employers and others as just 'part of the job'.

Unfortunately the Freedom of Information legislation which we use for our annual survey of public service employers does not cover all of the areas in which UNISON has members, e.g. councils' Arms Length Bodies, charities, private care homes, etc. As a result we can not easily obtain accurate data on violent assaults on staff in the community and voluntary sector who are doing vital but frequently low paid jobs looking after vulnerable people in our communities. Many of the clients they care for present challenging behaviours and often the workers also face poor levels of support from their employers, even when they report violent incidents.

In 2016 we ran a pilot survey of workers in the community and voluntary sector focusing on violence against staff. The preliminary results from our pilot survey only underline our longstanding concerns over violence at work in the community and voluntary sector.

Of the members - mainly women - who had experienced violence in the course of their work, 50% had been physically assaulted, 61% had faced threatening behaviour, 56% were verbally abused - and 56% had experienced a combination of all three. These were often frequent and sometimes daily occurrences.

All of these workers had reported at least one violent incident to a manager. Only 56% said their report had been followed up by their employer and only 44% felt the report was taken seriously.

Most worryingly, although most said their employer did actually encourage the reporting of violent incidents - 83% said that their employer regarded the violence as 'part of the job'.

The lack of support only adds insult to injury when we look at some of the personal testimony of the workers who had been attacked.

A female project worker with a large care charity described her experience thus:  
"The majority of people we work with are on the autistic spectrum and many have extremely challenging behaviour. I have been verbally abused, hair pulled, scratched, bitten, punched, kicked, pushed, objects thrown at me and spat on."

When asked how this made her feel, she said:  
"Worthless. I reported some of the incidents - only if I was injured. We would be told this is the young person's normal behaviour."

A male support practitioner working with two other large charities described his direct experience of violence:  
"People lashing out, threatened when things out of your control don't work out, these things constantly happen in the disability and learning disability sector - usually on a daily basis."

When asked how this made him feel, he replied:  
"Awkward, useless, powerless, wondering where the backup - real not verbal - comes from?"

A female support worker in a large care charity said her experience had been:  
"Spit on, items thrown at me, swore at, locked in a room."

As a result she had felt "inadequate, teary, stressed, anxious, unsupported (wasn't the person I was supporting's fault) but they got rewarded for that behaviour so it continued."

Another female support worker in a different charity gave this graphic description:  
"I was speaking to another staff member when the client got up from his chair. Thinking he was going to the toilet I opened the door for him and

stood back to allow him to pass. Instead he came towards me and hit me on the face, pushing my glasses and resulted in two black eyes. For the remainder of the shift he was constantly trying to hit out or push me."

How did it make her feel?

"Very insecure and threatened, upset at first and then shocked."

Many staff reported that no follow up action at all was taken, and others commented that even if they were moved from working with a specific client, someone else had to do the job and that training was not even offered.

We now plan to do a full scale survey of members in these areas which will supplement this annual violence at work report and form the basis of a campaign to challenge the acceptance of violence in the care sector as 'part of the job' - and ultimately to eliminate it.

## Tackling violence at work

### What is violence at work?

The Health and Safety Executive (HSE), defines violence at work as “any incident in which an employee is abused, threatened or assaulted in circumstances relating to their work”. Any definition must include incidents leading to death, major injury (requiring medical assistance) and minor injury (requiring first aid or no medical aid). But, it is equally important to include threats and verbal abuse even if no physical injury occurs.

Such abuse can lead to physical violence and will contribute to the levels of stress experienced by members. According to the HSE, physical attacks are “obviously dangerous, but serious or persistent verbal abuse or threats can also damage employees’ health through anxiety or stress”. Repeated verbal abuse can also lead to depression, reduced morale and increased sickness absence.

It is also important to remember that work-related violence is not limited to the actual workplace and can take place in the community, to and from work, in isolated areas or even at the home of the worker.

### Recognising the issue and developing a policy

The first thing is to get the employer to agree that there is a violence problem and recognise that it is a health and safety issue. It is in the employer’s interests to develop policies to prevent violence at work, not only because health and safety law requires it, but also because there is a cost for failing to do so. The cost of violence can include:

- increased absenteeism because employees are hurt, afraid or stressed
- the loss of investment in training and of experience with more staff leaving
- the cost of legal compensation
- bad publicity
- low morale.

Developing a policy on the management and prevention of violence will help employers avoid these costs. However, the policy should not be developed in isolation without proper consultation with employees. Staff work better if they feel that they have been party to decisions and they have first hand experience of the job and the risks. In addition, employers are legally required to consult UNISON safety representatives on matters of health and safety.

A policy can also demonstrate to staff that employers are committed to preventing violence and are not prepared to wait until an incident occurs to introduce measures.

Any policy should include:

- a definition of work-related violence
- a statement that commits the employer to managing and preventing all forms of work related violence and that makes it clear that all such attacks on staff are unacceptable and not part of the job.
- arrangements for monitoring and reviewing the policy.

Developing a policy is only a first step and it must be implemented to be effective. It must then be monitored and reviewed to ensure that it is achieving its aim to reduce or minimise violence to staff. Once agreed the policy must be brought to the attention of staff. Employers can do this by circulating a copy to all staff, holding staff meetings and including it in induction and health and safety courses.

UNISON members expect a “zero tolerance” approach. This means that violence at work is not acceptable and is not part of the contract of employment. This does not mean there are easy simple solutions that can immediately eradicate all attacks on staff. However, some employers appear to see violence as inevitable, unpredictable and therefore uncontrollable.

Employers should do all they can to prevent attacks occurring in the first place and, if attacks do occur, provide their employees with all the support they need. For example, where members are on sick leave because of work related violence, they should not be penalised under the organisation’s sickness absence procedures.

## Prevention

The risk of work-related violence is often foreseeable, eg where previous incidents have occurred. It can therefore be assessed, minimised or prevented and employers have clear legal duties to do this. In short, employers must make an assessment of the risks, remove those risks and, only where it is not possible, to eliminate them, introduce comprehensive strategies to control them. Violence should not be put down to bad luck, incompetence or the result of individual personalities. It is work related, arising directly out of members' jobs and the circumstances in which they have to work.

The law (see also Toolkit – Relevant Legislation). Under the Health and Safety at Work Act (HSWA) employers have a duty to protect the health and safety of their employees. This applies to risks from violence, just as it does to other risks at work.

In addition, the Management of Health and Safety at Work (MHSW) Regulations require employers to assess health and safety risks in order to identify measures needed to reduce them.

Where the risk of violence is identified it must be eliminated or reduced to the lowest level possible.

Employers must also establish procedures to be followed in the event of serious or imminent danger and provide information and training on the identified health and safety risks and the control measures in place to deal with them.

Under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR), employers must report all incidents involving (physical) violence on employees that result in death, major injury or absence from work for more than seven days. Unfortunately, RIDDOR does not cover threats and verbal abuse, or absences resulting from these. However, it is in both the employers' and workers' interest to record these incidents. The information can then be used to spot trends and improve any training and preventive measures in place. The duty under RIDDOR is separate

from the duty to record all accidents in an accident book. Risk assessment: under the MHSW Regulations, employers must assess health and safety risks to identify what steps they need to take to reduce them. The risk of violence must be assessed in the same way as any other hazard. Where the assessment shows a possibility of violence occurring, employers must take action to remove or minimise that risk.

The HSE suggests the following five-step approach to assessing the risk of violence:

- step one: look for hazards
- step two: decide who might be harmed and how
- step three: evaluate the risks and decide on precautions
- step four: record the findings and implement them
- step five: review the assessment and update if necessary.

### Step one: look for hazards

A key part of looking for hazards, deciding who might be harmed and evaluating the risks, is a proper reporting system. All too often assaults and, in particular, threats and verbal assaults, go unreported. All assaults should act as a trigger in identifying hazards. This is why UNISON is campaigning for proper national systems of reporting across all sectors. Staff will not report incidents unless they are confident about how their report will be received by management. Many have the fear, and some the experience, that involvement in a violent incident will be seen as their failure. Others may be distressed by the experience and believe that reporting it will add to that distress, particularly where no clear preventative action takes place.

For these reasons, the reporting and recording of violent incidents should be established as part of an overall strategy that can be seen to be tackling this serious work-related risk. It is especially important that all workers are included, particularly the vast majority of our

members whose work takes place in the homes of service users. The following information should be gathered as a minimum:

- an account of what happened
- the circumstances in which the incident took place including details of the victim, the assailant and any witnesses, plus details of the location of the incident
- the outcome, including working time lost to both the individual affected and to the organisation as a whole.

Just because an employer is unaware of any violent incidents it does not mean that there is not a problem. The HSE has found that incidents regarded as isolated often reveal, upon further investigation, that violence was under-reported and affected a wider range of jobs than at first thought.

Investigations into work-related deaths from violence (usually described as one-off, totally unexpected and something which could not have been avoided) reveal a history of other injuries, threats, and circumstances that clearly show a potential risk.

Verbal assaults: a verbal assault is not only distressing in itself, but is also often a precursor to a physical assault. There should be a system for monitoring all verbal assaults.

### **Step two: who might be harmed and how**

It is important to identify which groups of workers are likely to be most at risk of work-related violence. For example, according to the HSE, staff who work directly with the public face a higher risk of violence.

This would apply to a large percentage of UNISON members, for example, those working in health and social care, community and residential work, enforcement, housing, education, and a range of other areas where UNISON is involved, are all likely to be at risk of abuse, threatening behaviour or assaults.

Much of the violence is because these members work with client groups where they might be at a higher risk, for example drug

abusers, the mentally ill, etc. In other cases it is because the member deals with money or property that is likely to be of value to thieves.

However, it is not only the jobs people are asked to do that have the potential to cause work related violence. Other factors include how these jobs are done and the circumstances in which they are carried out. These include jobs that involve:

- handling money
- handling drugs or having access to them
- carrying expensive equipment such as laptops etc.
- providing care to people who are ill, distressed, afraid, in a panic or on medication
- relating to people who have a great deal of anger, resentment or feelings of failure
- dealing with people who have unrealistically high expectations of what the organisation can offer and who are seeking quick easy solutions to very long term and complex problems
- dealing with the friends and families of clients who may be concerned or feel inadequate in relation to the large organisation from which they are seeking help
- working with people who have used violence to express themselves or achieve their needs
- exercising power to restrict the freedom of individuals
- enforcing legislation
- working alone, in clients' homes, in physically isolated units, or at hours when few other employees are around
- following procedures which do not provide much information to clients about what is happening
- working in units which do not have a human image - often crowded, busy, uncomfortable and lacking in essentials for the public such as refreshments, telephones and children's toys
- working under pressure created by increased workloads, staff shortages, and the absence of alternative support for the client.

Women are at higher risk because of the nature of work they are often employed in (such as in nursing, as care workers, and as social practitioners). The risk is even higher still for black women.

Black women are far more likely than white women to be involved in the health and care sector. Black and Asian workers are also far more likely to be the victims of racial violence.

Other factors that that can increase the likelihood of being assaulted include:

- gender
- race
- age
- gender identity
- disability
- sexual orientation
- religious belief
- pregnancy and maternity
- marriage and civil partnership (relationship status)

### **Step three: evaluate the risks and decide on precautions**

Existing preventative measures and current ways of working should be checked to determine if they are still adequate. A combination of factors is often the cause of work-related violence. Employers can influence some of the factors including those below.

### **The type and level of training, information and support provided**

Training is not a substitute for safe systems of work, but it is an essential part of any strategy developed to reduce work-related violence. Any training must be appropriate for the risk and the particular circumstance, yet many employers offer the same type of training to all staff regardless of the effectiveness of doing so. For example, ambulance staff responding to emergencies may face pushes, punches, and kicks - therefore training should focus on diffusion and positioning to prevent injuries.

The approach is different for staff working in mental health or the education sector where there is closer interaction with clients, and for lone working care staff in the homes of service users. Here staff may need additional training in breakaway techniques and management of violent clients. They may also need to practice team based approaches for emergency situations, such as when colleagues feel threatened or are held hostage by a client. Training in the prevention and management of violence should be provided to all workers where a risk of violence has been identified, and should also be included in health and safety induction and refresher training courses.

A training needs assessment should be carried out to identify appropriate training, but at the very least workers should be trained to recognise the warning signs of aggression so that they can either avoid or cope with it. They should understand any system set up for their protection and should be provided with any information they might need to identify clients with a history of violence. Relevant questions include:

- have all staff who come into contact with members of the public in their jobs been given appropriate training?
- are other staff who may have to help in the management of a potential or actual violent situation been given specific training?
- are all staff clear about what to do if an incident occurs?
- is specific training provided for those who work alone?
- is the training regularly reviewed?

### **The working environment**

The working environment can play a crucial role in the prevention of work-related violence. The seating, lighting, facilities available and the level of information offered while waiting may affect behaviour. Some staff do not work from a fixed workplace and may be at a higher risk for this reason, especially if their job involves lone working in service users' homes. It is essential that this is also taken into account when the working environment is assessed.



Relevant questions that the safety representatives can ask include:

- can public waiting areas be changed to reduce tension levels through lighting, decoration, making them smaller and less impersonal, the number and arrangement of seats available, access to refreshments and telephones, and the provision of children's play areas, etc?
- can the system for seeing people be changed so that people do not feel that they are part of a large crowd waiting too long and for very different services?
- do interviewing rooms offer staff a means of easy retreat as well as offering privacy to the client?
- are arrangements for care staff on 'sleepover' duty, including sleepover rooms, assessed for safety and security?
- are any offices or work areas sited away from the main part of the unit, leaving staff to work alone but still accessible to a member of the public?
- is there a policy on home visits/does it need to be re-assessed, especially with regard to visits made late at night/in isolated areas? And is there a 'permit to work' or 'call in after visit' system operating?
- is there a policy for care workers working alone in the homes of service users?
- can members of the public wander about the workplace unnoticed and unchecked?
- are any premises or parts of premises more isolated at particular times of the day or night?
- are areas between buildings and car parks well lit at night?
- have employees been provided with an alarm/ switch on their desks, in their rooms, or (for those working outside) a convenient outside location, to enable them to summon help? Are these maintained and has a procedure been established to ensure that help is always forthcoming? Employees must be encouraged to use the alarms whenever they feel unsure or uncomfortable and this must not be taken as a sign of weakness.
- is there enough support for workers dealing with service users whose behaviour may become challenging or violent, eg when

having a necessary but difficult conversation - including the allocation of two or more staff in possible risk situations.

### **The design of the job**

Jobs should be examined to ensure that they do not have built in risk factors that can increase the likelihood of violence occurring. Relevant questions include:

- is the use of cash avoided wherever possible?
- are the credentials of clients and the arrangements for meeting away from the workplace checked?
- what arrangements exist to prevent/reduce violence to lone workers?
- are arrangements in place for staff to keep in touch when they are away from the workplace?
- is a system in place to warn staff about aggressive or violent clients?
- do employees know what to do if they are involved in a violent incident?
- is counselling and support available for those involved in a violent incident and for their colleagues?

### **Step four: record the findings and implement them**

The main findings of the risk assessment should be recorded. A written record provides a useful working document for managers and staff. The record should include:

- the hazards identified
- potential assailants
- high risk areas and/or times
- the workers exposed
- any existing preventative measures in place
- an evaluation of the remaining risks
- any additional measures needed
- the person responsible for implementing control measures
- the date by which things will be done and reviewed.

When considering additional measures the following points should be considered.

1. Why is the job done in a particular way? Is it because it has always been done that way? Has the working method just developed over time or has it been shown that it is the only way to do the job well? When decisions are taken about working methods, is any consideration given to the risk of violence? Can the way a job is done be changed to reduce the risk of violence? For example, is it necessary or safe to have one person working alone with a service user? Might two staff be safer and more effective?

2. Do team discussions about service users needs also consider the health and safety risk to staff? For example when planning lone working shifts or home visits does the team share information about patients, service users or their family members with a history of violence?

3. Are service users given information about procedures, timing, and why some things can only be done in a specific way so that the employees are not held responsible?

4. Is the risk of violence considered when determining staffing levels, staffing rotas and the length or time individuals work directly with service users or the public?

5. Unpredictable and unremitting workloads can lead to fatigue and a diminished ability both to identify early and to cope subsequently with violent situations.

6. There should be sufficient flexibility in the provision of staff to adjust levels to meet actual needs.

7. Individuals should not be left isolated for long periods nor should junior, new or inexperienced staff have to cope alone, especially in situations of potential violence. Non-essential home visits should not be carried out in the evening, at night, or by a lone worker. Before any home visits are made the risk of violence should be assessed and procedures developed to protect staff. The area where visits take place should also be assessed.

In general employers should consider systems for keeping in contact with colleagues. UNISON and the HSE have produced detailed guidance on lone working. (See Further information and Links on last page).

8. Many employees are now required to wear name badges while at work. This has caused concern to some UNISON members who believe that they can be more vulnerable to work-related violence and abuse from service users or the public - at work and at their home.

For example some service users have used the electoral register to identify the home address of members; other members have been called to the phone at work and have been subjected to abusive and sexist language.

To ensure such risks are identified, the use of name badges should be assessed as part of any risk assessment for work related violence. If the assessment shows a risk of violence from the use of name badges then alternative arrangements should be considered. This could include the use of first names only or a work or 'made-up' name rather than the employee's own name.

9. Often when the risk of violence is raised, the discussion turns to the idea of personal alarms, panic buttons, and mobile phones. These can be useful but they are not a replacement for a well planned systematic approach and can, at best, only be part of a solution. In addition they focus on the individual by passing the responsibility for dealing with the risk to the worker. Personal alarms do not prevent violence but can be useful as they may enable help to arrive more quickly.

However any system is only as good as the procedures that support it. In addition they can give staff a false sense of security and are no replacement for a safe system of work. Mobile phones may also appear useful by helping lone workers maintain contact with their base - but this is not always the case as some phones don't work well in some areas and are not always reliable. They may also create an additional risk as the user can potentially be attacked for the phone.

10. Similarly self-defence training can create its own risks as it can mean different things to different people. While some may see it as assertiveness or inter-personal skills training, others will see self-defence training as a physical way of dealing with an assailant. This is unacceptable because this type of training is only effective if regularly practiced and it passes all the responsibility for dealing with the risk to the worker.

### **Step five: review the assessment and update if necessary**

The risk assessment should be checked regularly to ensure that it remains valid and reflects the current work situation. This process works best if it is part of the day-to-day management of health and safety. If incidents occur or the job or circumstances change then the risk assessment should be reviewed to consider what additional measures are needed.

### **Support**

One assault on a worker can have devastating consequences, not only for the individual, but their colleagues and the entire organisation. That is why it is important that the first priority must be to prevent the assault in the first place. However, when an incident occurs it is vital that support and assistance is at hand. Obviously trade union safety reps are a vital part of this support process. However, it is employers who are legally responsible for the safety and welfare of their workers. Staff need to know what support is available:

1. during and immediately after an incident
2. in the short term
3. in the long term.

During and immediately after an incident: when an incident does occur staff need to know they have the support of their employer. This could include security staff, and in some circumstances may also involve the police. Staff may require:

- first aid and/or a medical assessment
- a colleague asking if they are OK
- an informal chat with their line manager, who should make sure the incident is recorded and investigated
- a coffee break
- to go home

Short term: the sort of support that could be required in the short term includes:

- a change of work area or in the type of work they do (however this should only be by agreement with the victim otherwise staff may get the impression that they are being blamed for the incident)
- regular meetings with their line manager to talk about any problems
- a discussion about what can be learnt from the incident
- advice from occupational services (when available)
- advice from safety reps.

Long term: sometimes individuals may experience long-term symptoms such as post traumatic stress disorder. In such cases, staff will require support from occupational health services and access to independent counselling services. They may also require time off, which should not be counted as sick leave under the sickness absence procedures.

However, what will help all staff is the knowledge that their incident has been treated with the seriousness it deserves, lessons have been learnt and measures have been implemented to prevent re-occurrences.

Policy for dealing with violent service users: employers should have clear and workable procedures in place for dealing with violent service users. In some cases this may involve the withdrawal of care or services. However this may not always be possible. For example a nurse may be treating a service user with a life threatening condition, or a support worker may be dealing with service users with learning difficulties or mental health problems. In such cases arrangements should be put in place to treat the service user in a safe and secure environment, eg where the appropriate

security backup is in place. Of course, the key to identifying those who may be potentially violent is a robust risk assessment procedure.

UNISON safety reps and stewards: throughout the process it is vital that the member who was attacked knows they have access to, and the support of, their safety reps and local stewards.

Obviously safety reps should be involved in risk assessments and any preventive measures that result from the incident. It is also important that members get access to their local stewards who can offer assistance and support if it is needed.

Legal help: if you have been assaulted at work and sustained injury you may be able to claim compensation. The UNISON legal assistance scheme offers support to members in these circumstances (subject to a qualifying period of membership) and can be easily accessed via your branch.

## **Toolkit: Relevant legislation**

There is no specific health and safety legislation addressing work-related violence. However, the following legislation applies to both issues.

### ***The Health And Safety At Work etc Act 1974***

places general duties that are applicable to work-related violence and personal safety on both employers and employees. The three primary examples are:

- Section 2 (1): It shall be the duty of every employer to ensure, so far as is reasonably practicable, the health, safety and welfare at work of all his employees.
- Section 2 (2)(c): Employers must provide adequate information, instruction, training and supervision to ensure, so far as is reasonably practicable, the health, safety and welfare of their employees.
- Section 7: Employees must take reasonable care of their own safety and that of others and must cooperate with employers so far as it is necessary to enable them to meet their own obligations.

***Management of Health And Safety At Work Regulations 1999:*** Employers must assess the risks to employees and make arrangements for their health and safety by effective planning, organisation, control, monitoring and review.

Regulation 3 of the Management of Health and Safety at Work Regulations 1999 requires risk assessments to be undertaken. Any lone working, violence at work and/or personal safety issues must be taken into consideration when conducting such assessments and, where any significant hazards are identified, specific risk assessments should be initiated.

***Reporting of Injuries, Disease and Dangerous Occurrences Regulations 1995 (RIDDOR):*** many of the incidents referred to in this guidance may not be reportable under RIDDOR. However, for those that involve physical injury, employers must notify the local authority of an accident at work resulting in death, major injury or incapacity for normal work for more than three consecutive days. This includes any act of non-consensual physical violence inflicted on a person at work.

This can be reported in a number of ways; email, by telephone, or in writing to the Incident Contact Centre, where a unique reference number will be allocated and the report forwarded appropriately.

***Safety Representatives and Safety Committees Regulations 1977 (a), Health and Safety (Consultation with Employees) Regulations 1996 (b):*** Employers must inform, and consult with, employees in good time on matters relating to their health and safety. Employee representatives, either appointed by recognised trades unions under (a) or elected under (b) may make representations to their employer on matters relating to the health and safety of those they represent.

***Employment and Civil Law*** includes:

- Equality Act 2010
- This regulation creates the framework that obliges employers to protect employees from harassment from the public and allow the employee to take their employer to an employment tribunal.

***Emergency Workers (Scotland) Act 2005,*** as amended, (EWA) makes it a specific offence to assault, obstruct or hinder someone providing an emergency service - or someone assisting an emergency worker in an emergency situation. The EWA is generally used for less serious assaults. More violent incidents can be prosecuted using a range of common law offences from assault to murder.

## **Toolkit: Safety representatives checklist**

### **Developing a policy**

- Does the employer include procedures for dealing with violence in their written safety policy?
- Does responsibility for implementing the violence policy lie with a named senior manager?
- Are all safety reps provided with a copy of the violence and aggression policy?
- Is the policy regularly reviewed and updated in consultation with safety reps?
- Are safety reps checking that the policy works and is being followed properly?

### **Prevention**

- Has the employer introduced a reporting form system specifically for violent incidents?
- Do all employees, including agency staff and part-timers know about the system?
- Are staff encouraged to report all violent incidents including incidents of verbal abuse and threats?
- Are supplies of report forms readily available to staff?
- Are the results of monitoring used to check the effectiveness of the employer's policy?
- Does the employer consult with safety reps to seek possible solutions to the problem?
- As part of the consultation, are the returns from the report form system reviewed and classified?
- Has the employer consulted any outside experts (such as a security consultant, the local police crime prevention officer, or victim support etc)?
- If so, were safety representatives involved in the discussion?
- Are all preventive measures based upon local risk assessment?
- Is there anything that can be done to increase physical security of car parks, grounds etc to restrict access to buildings and provide refuges for staff?
- Are panic buttons fitted? If so, do they work? Is there a reliable procedure for responding to them quickly?
- Are personal attack alarms provided? If so, are they backed up by the proper procedures?

- Are specialist security staff employed? If so, are they properly trained and vetted? If not, who is responsible for security matters, such as dealing with intruders? Are they given specialist training?
- Is there a policy/procedure for home visits?
- Is there a system for passing on information about potential incidents, or about service users, including for new staff?
- Has attention been given to rooms or areas used by public/service users to make sure they are suitable, do not create tension, or leave staff trapped if an incident arises?
- Have measures been taken to prevent staff working in isolated buildings, offices or other work areas on or off site?
- Have arrangements been made for lone workers and staff working in the community, including care workers in the homes of service users?
- Does the employer take account of the risk of violence when setting staffing levels, altering working hours or shifts?
- Are all staff, including part-timers, given training in the procedures for dealing with violence?
- Is that training suitable and appropriate?
- Does it make clear that staff should not put themselves at risk to protect cash/property?
- If name badges are worn has the risk of violence been taken into account?
- Are there detailed procedures for dealing with cash handling and banking?

### **Support**

- Does the employer give sympathetic support to staff who work with awkward, aggressive or abusive service users? (access to counselling, time off to recover, awareness of psychological effects)
- Are safety reps included in discussions with victims after violent incidents?
- Is first aid or medical assistance easily available?
- Are independent counselling services available?
- Does your employer have a policy for dealing with violent service users?
- Does your employer have arrangements with the police for dealing with and reporting violent incidents?

**Toolkit: Model risk assessment form**

From Health Scotland

<http://www.healthscotland.com/uploads/documents/2596-HWLRiskAssessmentFormBlank.pdf>

# Risk assessment



Company:  Location:  Assessor:

Assessment review date:  Usually within one year, or earlier if working habits or conditions change.  
 Signed: (Employer)  Date:

All employers must conduct a risk assessment. Employers with five or more employees have to record the significant findings of their risk assessment and bring them to the attention of those at risk. Look at how this might apply to your business, using this form to record significant findings. Continue by identifying the hazards that are the real priorities in your case and complete the table to suit. You can print and save this template so you can easily review and update the information as and when required. You may find other example risk assessments a useful guide (see [www.hse.gov.uk/risk/casestudies](http://www.hse.gov.uk/risk/casestudies)). Simply choose the example closest to your business.

Employers with five or more employees should have a written health and safety policy and risk assessment. For advice and support, contact the Healthy Working Lives Adviceline on **0800 019 2211**. For further information go to [www.hse.gov.uk/risk](http://www.hse.gov.uk/risk)  
 Combined risk assessment and policy template adapted from the version published by the Health and Safety Executive 09/09.

Talk to the Healthy Working Lives experts FREE on:  
**0800 019 2211**  
[www.healthyworkinglives.com](http://www.healthyworkinglives.com)



Note: Pages 2 to 4 can be reprinted if additional sheets are required.

## Risk assessment

What are the hazards?	Who might be harmed and how?	Control measures	Further actions necessary?	Action by?	Action done	Initial

Additional information

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Talk to the Healthy Working Lives experts free on: 0800 019 2211

[www.healthyworkinglives.com](http://www.healthyworkinglives.com)

**Toolkit: Personal safety checklist**

This checklist is designed to identify issues which impact on your personal safety in your daily duties. It should help focus your mind on how your actions can be improved to ensure your safety is not compromised.

Tick the appropriate box in response to each of the questions.

Description	Yes	No
I regularly work alone		
I regularly conduct visits outside normal working hours		
I regularly come into contact with violent/aggressive/abusive people		
I always take a colleague with me when visiting service users who have a history of aggressive behaviour		
I have been the victim of violence or threatening behaviour		
I am confident that departmental arrangements concerning my personal safety are adequate		
I always leave a diary of visits at my base		
I am provided with a personal attack alarm which I carry at all times when I am out of the office		
I have been provided with a mobile phone which I carry at all times when I am out of the office		
I maintain regular contact with my base throughout the day when out of the office		
I always advise my supervisor or colleagues when my daily duties are completed		
I always risk-assess service users for potential problems (e.g. violence or aggressive behaviour) before conducting a visit		
I always keep records and report details of violence or aggressive behaviour and inform my colleagues accordingly		
I often handle large sums of money		
I am familiar with departmental policies and codes of practice in relation to violence, aggression and personal safety		



**Toolkit: Home visiting risk assessment guidance**

The following guide to risk-assessing is intended to be a flexible tool and should be adapted according to your service needs

<b>Service user's name</b>		<b>Employee's name</b>	
<b>Home address</b>		<b>Base address</b>	
<b>Place being met</b>		<b>Date of visit</b>	

**Part 1. To be completed in the planning stages prior to a home visit and thereafter at any time, if necessary**

	<b>High risk</b>	<b>Medium Risk</b>	<b>Low Risk</b>
Does the person have a history of antisocial behaviour including violent or aggressive tendencies towards employees?			
Are they likely to be under the influence of alcohol or drugs?			
Will you be withholding or altering a service?			
Does the patient have a history of mental health problems?			
Does the patient have mobility complications that require you to assist them to move or transfer?			
Will you have to operate moving and handling equipment such as a hoist?			
Does the location of the visit give you concerns that make you feel vulnerable?			
Have the relatives or friends of the patients ever posed any problem to employees?			
Are you carrying any injury or illness at this time that may affect your prompt response in an emergency situation?			

**What actions have you taken to reduce risks?**

<b>Action to be taken</b>	<b>Tick</b>
Visit the service user with a colleague	
Find out more information from other agencies/documentation	
Seek advice from risk management advisers	
Activate a buddy system	
Other:	

**Part 2. To be completed after the home visit**

**Were there any unforeseen risks?**

**NO** (sign form and file in service user notes) **YES** (Tick and comment below)

Reason	Comments	Tick
Required a second member of employees on the visit		
Insufficient information given on referral		
Moving and handling of equipment		
Moving and handling of service user		
Deterioration of service user's medical state		
Verbal abuse, violent or threatening behaviour		
Service user under the influence of alcohol or drugs		
Problems with relatives/ friends of service user – state who		
Transportation or vehicle problems		
Communication problems – no phone, etc.		
Problems getting to location, e.g. dark, isolated, etc		
Pet problems		
Other		

**IMPORTANT- An occurrence recording form must be completed for any adverse incident or near-miss**

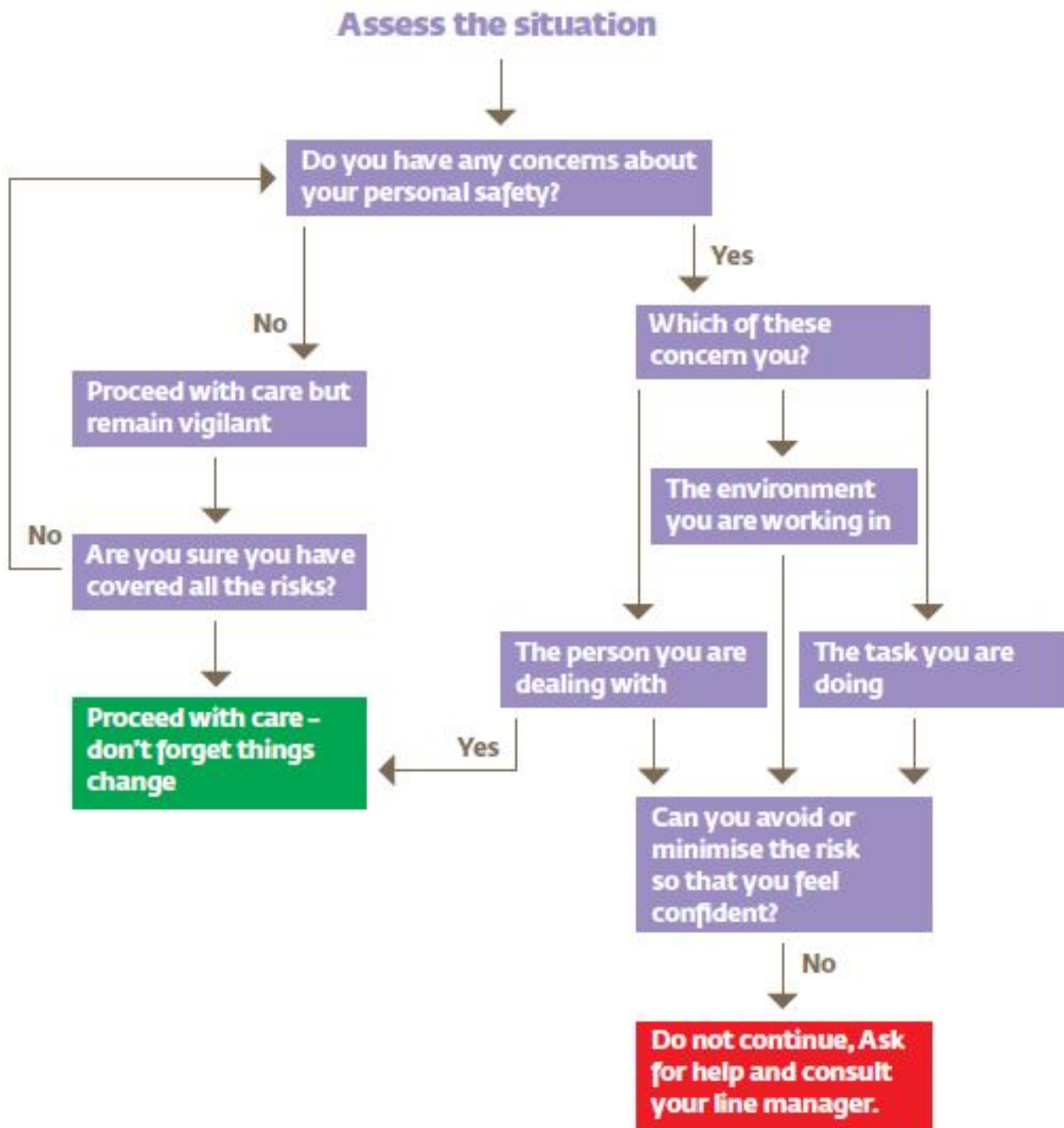
<b>Are any other health or social care employees at risk when visiting this service user?</b>	
---	--

<b>Have they been informed?</b>	
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<b>Signature</b>		<b>Date</b>	
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**Toolkit: Dynamic risk assessment**

The chart below has been developed by the Suzy Lamplugh Trust for use in assessing personal safety.



## **Toolkit: Minimum standards for a successful buddy system**

A buddy system is the terminology used to describe a system where one employee keeps a check on another employee or a number of employees (lone worker(s)) for safety reasons.

If the lone worker fails to contact their buddy following a visit or at a designated time, the buddy would follow a procedure informing the appropriate individuals and in some cases the police.

The system ensures that lone workers' whereabouts can be identified earlier and colleagues/managers are aware of problems more quickly.

The system is not designed to be like Big Brother; it should be friendly and used only for safety purposes.

### **Buddy systems - minimum requirements**

Buddy systems will differ between services, but common themes should exist between each. The following are the minimum requirements needed to ensure a successful buddy system.

1. There needs to be a process that the buddy and the lone worker must adhere to.
2. If possible, the buddy should not be a lone worker or not lone working at the same time. The buddy must always be available to take a call and respond appropriately.
3. The buddy may have to change as circumstances change. However, if possible try to keep the same buddy for continuity.
4. Workers need to have a system for assessing risk before going on a home visit which prompts them to instigate a safe system of working. This is the manager's responsibility.
5. There needs to be an effective method of communication between the lone worker and the buddy, ideally via telephone.

6. Diary or visit details must be available to the buddy 24 hours per day. The details must include names and addresses of visits and contact numbers, as well as when and how long the lone worker intends to be there.

7. There needs to be a sequential protocol in place for the buddy to follow, that will alert colleagues and if necessary the police of a missing lone worker.

8. The buddy must know the contact numbers for the individuals responsible for the lone worker. This should include a minimum of three people, however up to five names may be appropriate. The initial contact should be the lone worker's manager and then the next manager in line, and so on.

9. There must be accurate information held about the lone worker that can be accessed 24 hours per day and handed to the police so they can start their investigations without delay. The information should be kept secure and only accessible by managers during time of annual leave, etc.

### **The process**

1. The lone worker should always be able to contact the buddy.
2. The buddy should have access to details of the lone worker's visits for the day. This may be presented in diary form, but details must be documented, including:
  - the visit address
  - the name of the service user
  - a contact number at that address
  - the time when the lone worker intends to be there
  - an estimate of how long the visit will last for
  - the lone worker's mobile phone number

3. The lone worker and the buddy must agree on the arrangements between them at the beginning of the relationship or as often as daily if situations change. Different scenarios may include:

- the lone worker contacting the buddy at the beginning and end of each day and if necessary at any point during the day

OR

- The lone worker contacting the buddy before and after a particular visit.

4. The lone worker must be the instigator of all communication and the buddy should follow up if no communication has been received.

5. The buddy must be informed of any changes to visits as they arise.

6. The buddy must know the procedure to follow if a lone worker fails to make contact with them at the agreed time.

### **Guidelines regarding missing lone workers**

1. If the lone worker fails to contact the buddy at the agreed time, the buddy should contact the individual, trying their mobile telephone number, office number, home number and pager (if applicable).

2. If the lone worker fails to answer the calls, the buddy should notify the next responsible person. This would be the lone worker's line manager in most circumstances. If they do not respond then the buddy should notify the next identified individual on the contact list.

3. The line manager must collate all visit details for the lone worker for that day and the contact number for the lone worker.

4. The line manager should contact the service user that the lone worker is due to be visiting at that time. The manager should ascertain if the individual is there, has been there or has contacted the service user.

5. If the lone worker has not been seen at that visit, the manager should work through the diary to identify which service users have been visited. During this time the buddy should continue to try to make contact directly with the lone worker via telephone. The individual may be in a mobile phone black spot, so time may be allowed for them to reach their next visit before contacting this service user via landline. Every effort must be made to keep trying the individual during this time.

6. If no contact can be made with the lone worker and they cannot be located, the line manager should notify the senior manager for the service.

7. The senior manager should collate the diary, visit details and lone worker details for the police immediately.

**Toolkit: Model report form**

<b>Staff name</b>		<b>Job title</b>	
<b>Date</b>		<b>Time</b>	
<b>Location of incident</b>			

Type of incident, whether face to face or by telephone:

<b>Physical abuse</b>		<b>Verbal abuse</b>		<b>Verbal threat</b>	
<b>Physical posturing</b>		<b>Physically armed</b>		<b>Spitting</b>	

Any other form of violence, please describe below:

<b>Account of what happened (including details of injuries and damage)</b>	
<b>Name of assailant (or description if name unknown, see overleaf)</b>	
<b>Names and contact details of witnesses</b>	

Further investigation required:

<b>Date RIDDOR form submitted to enforcing authority</b>		<b>Police incident no. (if applicable)</b>	
<b>Details of preventative measures implemented to prevent recurrence</b>			
<b>Date employee informed of preventative measures taken to prevent recurrence</b>			
<b>Line manager/responsible person</b>			
<b>Date</b>		<b>Signature</b>	

If the attacker or aggressor is not known please use the pro-forma overleaf to give as much information as possible as to their description.

Description of person responsible

**Sex**

Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
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**Age**

Under 16	<input type="checkbox"/>	16-30	<input type="checkbox"/>	30-50	<input type="checkbox"/>	over 50	<input type="checkbox"/>
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**Build**

Slim	<input type="checkbox"/>	Proportionate	<input type="checkbox"/>	Heavy	<input type="checkbox"/>
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**Ethnic appearance**

White	<input type="checkbox"/>	Asian	<input type="checkbox"/>	Black	<input type="checkbox"/>	Mixed	<input type="checkbox"/>
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**Facial hair**

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

**Glasses**

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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**Hair colour**

Blonde	<input type="checkbox"/>	Brown	<input type="checkbox"/>	Black	<input type="checkbox"/>	Grey	<input type="checkbox"/>
--------	--------------------------	-------	--------------------------	-------	--------------------------	------	--------------------------

Red	<input type="checkbox"/>	Dyed	<input type="checkbox"/>	Please describe	<input type="text"/>
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**Accent**

Local	<input type="checkbox"/>	Other	<input type="checkbox"/>	Please state	<input type="text"/>
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**Tattoos**

No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Please describe	<input type="text"/>
----	--------------------------	-----	--------------------------	-----------------	----------------------

**Scars**

No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Please describe	<input type="text"/>
----	--------------------------	-----	--------------------------	-----------------	----------------------

**Clothing**

Please describe	<input type="text"/>
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**Other witnesses**

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If yes, please give details	<input type="text"/>
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## **Toolkit: De-escalation hints and tips checklist**

1. Think about your own words, tone and body language and the environment you are in:

- Remember that personal space should be maintained – keep a safe distance.
- Maintain an exit strategy – ensure you are nearest to the door/escape route.
- Carry out a ‘dynamic risk assessment’ to assess potential weapons available to the aggressor. Remain aware at all times.
- Avoid being isolated with the aggressor and alert others that you may need assistance.
- Recognise that you may start to feel anxious – use keep calm strategies, for example controlled breathing, to allow you to act and speak confidently. This can help the situation to feel less out of control to both you and the aggressor.
- Take time to think about what you are going to say and say it clearly and calmly.
- Ensure that any instructions or requests are made in a clear manner and that the aggressor knows what is acceptable and unacceptable.
- State your position about the unacceptable behaviour and give consequences, for example, that you want the person to stop shouting. If he/she does stop shouting, you will try your best to help – if they don’t then you will not continue the conversation. Remember to carry out the stated consequence based on their chosen action.
- Do not stay longer than is safe – continually assess your capabilities and the situation – GET OUT and stay out if necessary.

2. Think about the aggressor:

- Do not allow the aggressor to ‘play to an audience’. Move away from unhelpful onlookers.
- Be aware that aggression can be a sign of worry, frustration nervousness, etc.
- Be careful to allow the aggressor plenty of space – adrenalin can make the aggressor perceive you as closer, and therefore more threatening.
- Make good eye contact but not a stare down.
- Consider what you know about the person – are they inclined to this sort of outburst? What has helped before?
- Read the aggressor’s words, tone and body language – can you pick up indicators of triggering or escalating aggression?
- Encourage the person to talk – don’t trivialise their issues or feelings.

Contributed by the Suzy Lamplugh Trust  
[www.suzylamplugh.org](http://www.suzylamplugh.org)



## Toolkit: Violence to staff survey

Safety representatives can adapt and use the following survey to help them identify incidences of work-related violence.

### UNISON violence to staff survey

Your UNISON branch is concerned about the number of violent incidents to our members. Violence includes threats, verbal abuse and harassment as well as actual attacks and injury to staff by clients and members of the public. To gain more information about the risks of violence your UNISON branch is conducting a confidential survey. UNISON does not accept that you should put up with violence at work as part of your job. It is not the individual's fault when it happens. Work related violence can be prevented and controlled, and your employer has legal duties to ensure your safety.

To help us raise the issue of violence with your employer we need more evidence of the extent and causes of violence against staff. **Please complete this confidential questionnaire and return it to your UNISON representative.** Please help us to help you.

1. Where do you work?

---

2. What is your job?

---

3. Are you worried about violence in your job? YES  NO

---

4a. In the last year have you suffered any of the following in relation to your work? (If more than once, state how many times)

Major injury – requiring medical assistance	YES <input type="checkbox"/>	NO <input type="checkbox"/>	How many times .....
Minor injury – requiring first aid	YES <input type="checkbox"/>	NO <input type="checkbox"/>	How many times .....
Threatened with a weapon	YES <input type="checkbox"/>	NO <input type="checkbox"/>	How many times .....
Threats or verbal abuse	YES <input type="checkbox"/>	NO <input type="checkbox"/>	How many times .....
Racial harassment	YES <input type="checkbox"/>	NO <input type="checkbox"/>	How many times .....
Sexual harassment	YES <input type="checkbox"/>	NO <input type="checkbox"/>	How many times .....
Harassment or abuse for other reasons — Please describe	YES <input type="checkbox"/>	NO <input type="checkbox"/>	How many times .....

4b. Describe details of incident(s) – when, where, whom, and what happened?

---

5. Do you think your manager takes your concerns about violence seriously? YES  NO

---

6. Do you know if there is a policy for dealing with violence at work? YES  NO

---

7. Have you been given training on how to deal with violent situations? YES  NO

---

8. Have you been told how to report incidents, involving:

Actual injuries YES  NO

Verbal threats or abuse YES  NO

---

Racial, sexual or other forms of harassment YES  NO

---

9. Are you aware of any measures that management have taken to deal with violence (for example, changes in staffing, the working environment, lighting, security arrangements, etc)?

---

10a. If you have suffered violence at work, did your employer give you any help, for example, counselling, or paid time off work, etc? YES  NO

**10b.** What help were you given?

---

**10c.** Were you satisfied with the help given?

YES

NO

---

**10d.** If not, what more could have been done to help you?

---

**11.** In more general terms what could be done to prevent violence to staff and improve the help given to staff following a violent incident?

---

**12.** Is there any more information or advice relating to violence at work that you would like to share?

---

**Thank you for your co-operation. Please return this form to your UNISON representative.**

## Links and sources of other information

*Union charter to commit employers to tackle violence at work, UNISON Community Conference, 5 March 2017*

<https://www.unison.org.uk/news/article/2017/03/community-violence/>

*Violent Assaults on Public Service Staff in Scotland Survey, UNISON Scotland, Oct 2016*

[http://www.unison-scotland.org/library/ViolentAssaultsonPublicServiceStaff\\_UNISONScotlandSurvey\\_Oct2016.pdf](http://www.unison-scotland.org/library/ViolentAssaultsonPublicServiceStaff_UNISONScotlandSurvey_Oct2016.pdf)

TUC Health and Safety pages on Violence at work

<https://www.tuc.org.uk/workplace-issues/health-and-safety/violence>

The Scottish Centre for Healthy Working Lives

works closely with NHS Scotland, local authorities and trade unions

[www.healthyworkinglives.com](http://www.healthyworkinglives.com)

*Occupational Violence and Aggression in the Workplace, Scottish Centre for Healthy Working Lives, Oct 2010*

<http://www.healthscotland.com/uploads/documents/12251-OccupationalViolenceAndAggressionInTheWorkplace.pdf>

Violence and Aggression

<http://www.healthyworkinglives.com/advice/Legislation-and-policy/employee-issues/violence-aggression>

Lone Working

<http://www.healthyworkinglives.com/advice/Legislation-and-policy/employee-issues/lone-working>

*Working Alone - A health and safety guide on lone working for safety representatives, UNISON, Jan 2016*

<https://www.unison.org.uk/content/uploads/2016/01/23604.pdf>

*Protecting workers from violence and abuse - a union rep's guide, LRD Booklets, Feb 2017*

<http://www.lrdpublications.org.uk/publications.php?pub=BK&iss=1861>