

ZERO TOLERANCE POLICY

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Policy Number	HR039/08/2024
Name of originator/author:	HR & OD Business Partner
Name of Sponsor:	Deputy Accountable Officer
Name of responsible committee	Governance Sub-committee
Date issued:	9 September 2021
Review date:	August 2024
Target audience:	All staff working within or on behalf of NHS Sheffield CCG

To ensure you have the most current version of this policy please access via the NHS Sheffield CCG Intranet Site by following the link below:

<http://www.intranet.sheffieldccg.nhs.uk/policies-procedure-forms-templates.htm>

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POLICY AUDIT TOOL

To be completed and attached to any document which guides practice when submitted to the appropriate committee for consideration and approval.

Please give status of Policy:	New
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1.	Details of Policy	
1.1	Policy Number	HR039/08/2024
1.2	Title of Policy:	Zero Tolerance Policy
1.3	Sponsor	Deputy Accountable Officer
1.4	Author:	HR & OD Business Partner
1.5	Lead Committee	Governance Sub-committee
1.6	Reason for policy:	Legislative and best employment practice
1.7	Who does the policy affect?	All employees
1.8	Are the National Guidelines/Codes of Practices etc issued?	See section A 2.1
1.9	Has an Equality Impact Assessment been carried out?	Yes
2.	Information Collation	
2.1	Where was Policy information obtained from?	See 1.6
3.	Policy Management	
3.1	Is there a requirement for a new or revised management structure for the implementation of the Policy?	No
3.2	If YES attach a copy to this form.	n/a
3.3	If NO explain why.	Current management structure satisfactory
4.	Consultation Process	
4.1	Was there external/internal consultation?	Yes
4.2	List groups/persons involved	Staff Forum Joint Staff Consultative Forum
4.3	Have external/internal comments been included?	Yes
4.4	If external/internal comments have not been included, state why.	n/a
5.	Implementation	
5.1	How and to whom will the policy be distributed?	All employees via the intranet
5.2	If there are implementation requirements such as training please detail.	Ongoing via mandatory training
5.3	What is the cost of implementation and how will this be funded	No funding required
6.	Monitoring	
6.2	How will this be monitored	Workforce Reports
6.3	Frequency of Monitoring	Quarterly

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DEFINITIONS

TERM	DEFINITION
Harassment and violence	<p>The Health and Safety Executive (HSE) defines harassment and violence as unacceptable behaviour by one or more individuals that can take many different forms, some of which may be more easily identifiable than others.</p> <p><i>Harassment</i> occurs when someone is repeatedly and deliberately abused, threatened and/or humiliated. This may occur either inside or outside working hours</p> <p><i>Violence</i> occurs when someone is assaulted in circumstances, including in relating to work. This may occur either inside or outside working hours.</p> <p>Harassment and violence can:</p> <ul style="list-style-type: none"> • Be physical, psychological, and/or sexual • Range from minor cases of disrespect to more serious acts, including criminal offences, which require the intervention of public authorities. • Occur in the work environment or outside the work environment. <p>Harassment can be further defined as any conduct which:</p> <ul style="list-style-type: none"> • Is unwanted by the recipient • Is considered objectionable by the recipient • Causes humiliation, offence and distress (or other detrimental effect). <p>The key to distinguishing between what does and does not constitute harassment is that harassment is behaviour that is unwanted by the person to whom it is directed. It is the impact of the conduct and not the intent of the perpetrator that is the determinant.</p> <p>Harassment may be, but is not limited to:</p> <ul style="list-style-type: none"> • <i>Physical contact</i> – ranging from touching to serious assault, gestures, intimidation, aggressive behaviour • <i>Verbal</i> – unwelcome remarks, suggestions and propositions, malicious gossip, jokes and banter, offensive or abusive language

	<ul style="list-style-type: none"> • <i>Non-verbal</i> – offensive literature or pictures, graffiti and computer imagery, emails, texts, isolation or non-co-operation and exclusion or isolation from social activities • <i>Unwanted conduct related to a protected characteristic</i> which has the purpose or effect of violating an individual's dignity or creating an intimidating, hostile, humiliating or offensive environment for that individual.
Aggression	<p>Aggression is defined as:</p> <ul style="list-style-type: none"> • A forceful action or procedure (such as an unprovoked attack) especially when intended to dominate or master • Hostile, injurious, or destructive behaviour or outlook especially when caused by frustration aggression is often the expression of pent-up rage <p>Spoken or physical behaviour that is threatening to the individual and or involves harm to someone or something.</p> <p>Incidents do not necessarily have to cause physical harm. They can:</p> <ul style="list-style-type: none"> • Involve a threat, even if no serious injury results • Involve verbal abuse • Involve non-verbal abuse, for example gestures, emails, texts • Involve other threatening behaviour, for example stalking.
Hate crime	<p>A Hate Crime is defined as:</p> <p>A crime that the victim or any other person perceives to be motivated by hostility or prejudice towards any aspect of a person's identity. Disability, Gender Identity, Race, Ethnicity or Nationality, Religion Faith or Belief and Sexual orientation</p>
Hate incident	<p>A Hate Incident is defined as:</p> <p>Any incident, which may or may not be a crime, that the victim or any other person perceives to be motivated by hostility or prejudice towards any aspect of a person's identity.</p>

SECTION A – POLICY

1. Policy Statement, Aims and Objectives

- 1.1** In line with NHS policy, NHS Sheffield Clinical Commissioning Group (CCG) has a zero tolerance approach to aggression, abuse, violence, hate crimes and hate incidents, or anti-social behaviour towards our staff.

The CCG is committed to ensuring that staff managing direct relationships with the public (face-to-face, through emails, letters or telephone/video calls) are able to carry out their work free from aggression, abuse, violence, hate crimes and hate incidents, or anti-social behaviour from patients, their relatives or members of the public. Where a patient, relative or member of the public is alleged to have carried out an act of violence, aggression or harassed a member of staff, NHS Sheffield CCG reserves the right to respond to the alleged incident, as deemed necessary in light of the circumstances, including involving the police where appropriate.

The CCG believes that any act of aggression, violence or intimidation, both physical and non-physical from any member of staff, patient, visitor or member of the public is unacceptable. The CCG is committed to the creation of a culture and environment where employees may undertake their duties without fear of abuse or violence.

- 1.2** The development of this policy:

- Reduces the risk of instances of aggression, abuse, violence or anti-social behaviour or hate crimes or hate incidents towards our staff occurring
- Enables staff to manage appropriately an aggressive or violent situation should they arise
- Supports staff in the aftermath of any such incidents.

2. Legislation and Guidance

- 2.1** The following legislation and guidance has been taken into consideration in the development of this policy.

- Equality Act (2010)
- Health and Safety at Work Act 1974

3. Scope

- 3.1** This policy applies to those members of staff that are directly employed by NHS Sheffield CCG and for whom NHS Sheffield CCG has legal responsibility.

4. Accountabilities and Responsibilities

4.1 Overall accountability for ensuring that there are systems and processes to effectively manage situations lies with the Accountable Officer. Responsibility is delegated to the following:

<i>Deputy Accountable Officer</i>	<ul style="list-style-type: none">• Maintaining an overview of the corporate ratification and governance process associated with the policy.• Ensuring that the policy is applied fairly, consistently and in a non-discriminatory manner.
<i>Human Resources</i>	<ul style="list-style-type: none">• Leading the development, implementation and review of the policy.• Providing advice and guidance to managers and employees in relation to the policy.
<i>Appointing Officers/ Line managers</i>	<ul style="list-style-type: none">• Ensuring they understand and adhere to their obligations in relation to the policy.• Ensuring the policy is applied fairly and consistently to all employees.• Ensuring employees are aware of this policy including referring new employees to the policy as part of their induction process.• Ensuring that staff understand the methods and timing of reporting;• Ensuring that incident report forms are completed as fully as possible for all reported incidents of violence within one working day;• Supporting and debriefing staff following aggressive incidents;• Informing senior managers;• Conducting environmental risk assessments.

<i>All Employees</i>	<ul style="list-style-type: none"> Ensuring they understand and adhere to their obligations in relation to this policy. Every individual has a responsibility to follow safe working practices and co-operate with the employer to promote safety at work. In the community, where individuals are often working alone or in small groups, they also need to remain watchful of their own safety and that of their colleagues; Individuals have a responsibility to report incidents of violence and aggression, including verbal abuse.
<i>Staff Side</i>	<ul style="list-style-type: none"> Ensuring they are familiar with the policy and procedure. Advising and representing employees who are members of a recognised Trade Union.

5. Dissemination, Training and Review

5.1 Dissemination

The effective implementation of this policy will support openness and transparency. NHS Sheffield CCG will:

- Ensure all employees and stakeholders have access to a copy of this policy via the organisation's website.
- Ensure employees are notified by email, via the Weekly Round Up communication, of new or updated policies.

5.2 Training

All employees will be offered relevant training commensurate with their duties and responsibilities. Employees requiring support should speak to their line manager in the first instance. Support may also be obtained through Human Resources. The Policy should be read in conjunction with:

- Lone Working Policy
- Security Policy and Procedure
- Incident Reporting Policy
- Dignity at Work (Prevention of Bullying and Harassment) Policy

5.3 Review

- 5.3.1** As part of its development, this policy and its impact on staff, patients and the public has been reviewed in line with NHS Sheffield CCG's Equality Duties. The purpose of the assessment is to identify and if possible remove

any disproportionate adverse impact on employees, patients and the public on the grounds of the protected characteristics under the Equality Act (2010).

5.3.2 The policy will be reviewed every three years and in accordance with the following on an as and when required basis:

- Legislatives changes
- Good practice guidelines
- Case law
- Significant incidents reported
- New vulnerabilities identified
- Changes to organisational infrastructure
- Changes in practice

5.3.3 Policy management will be performance monitored to ensure that policies are in-date and relevant to the core business of the organisation. The results will be published in the regular Governance Sub Committee Reports.

SECTION B – PROCEDURE

1. Assessing the risk of harassment, violence or aggression

1.1 NHS Sheffield CCG is a public organisation and is committed to providing an open and supportive environment for the people of Sheffield to make enquiries, seek advice, and raise issues or complaints where it falls within the remit of the CCG to deal with these. However CCG staff, particularly those in public- or patient-facing roles should always be mindful of the risks they may face when carrying out their roles.

1.2 The following may indicate that there is a potential risk of harassment, violence or aggression when interacting with members of the public:

- The person appears to be intoxicated
- The individual appears confused, disorientated, or distressed
- The person has a known criminal history
- The staff member works in a higher risk area, e.g. handling contentious issues or complaints
- The staff member is working alone
- A service has been withdrawn or withheld from the individual
- The individual has a past history of harassment, violence or aggression towards staff.

The list shown above is not exhaustive and staff and their managers must take care to assess all possible personal security risks within their area of responsibility.

1.3 When a staff member feels that they may be at risk of harassment, violence or aggression they should discuss this with their line manager including whether they feel this may be due to a protected characteristic outlined in the Equality Act 2010.

1.4 Possible steps to mitigate the risks include restricting interactions to written correspondence (email or letter) rather than face to face meetings. Should it be necessary to arrange a meeting with the member of the public this should be by appointment only, in a secure and confidential room on the CCG's premises, and with two or more staff members present.

1.5 In any situation where physical assault is considered imminent, staff should immediately leave the area if able and contact security (if available) or the police (9-999 from an internal phone or 999 from a mobile).

2. Procedures for staff handling queries, complaints and other feedback from the public

2.1 Staff whose role is to manage queries, complaints, and patient and public feedback are at potentially greater risk of being subject to harassment, violence, or aggression. Before any interaction with patients or the public staff

should consider the risk factors set out at section 1.2 and agree with their line managers steps to mitigate any perceived risks.

- 2.2** The preferred method of handling interactions with the public is through correspondence by email or speaking by telephone. This approach minimises the risk of harassment, violence and aggression towards CCG staff. Where the patient / member of the public request a face to face discussion the staff member and line manager should first undertake a risk assessment. Where it is felt safe to proceed with a meeting this should be arranged on CCG premises and should be by appointment only. A colleague should be present in any such face to face meetings and a note of the meeting should be taken.
- 2.3** On very rare occasions, again following careful consideration and a risk assessment, CCG staff may feel a visit to a member of the public's home is necessary to investigate a query or complaint. Any such home visits should be undertaken by two people. Further, all such meetings should be minuted, and digitally recorded, where possible and with the permission of all parties present.

3. Dealing with harassment, violence and aggression pro-actively

- 3.1** Staff should attempt to avoid physical intervention at all costs and be aware of their own verbal and non-verbal communication. E- Learning Conflict Resolution Training (CRT) is available to members of staff.
- 3.2** Techniques include:

- Simply ask the person who is becoming aggressive to stop, some people will respond to this;
- Attempting to establish a rapport through neutral communication;
- Offering and negotiating realistic options;
- Avoiding threats;
- Asking open questions and asking about the reason for the service user's concern;
- Showing concern and attentiveness through non-verbal and positive verbal responses;
- Listening carefully;
- Attempting to neither patronise nor minimise the service user's concerns.

4. Dealing with harassment, violence and aggression reactively

- 4.1** Dependent on the circumstances, in an incident involving harassment, violence and aggression, the following course of action (Point 5) could be pursued in conjunction with any other course of action, but always in consultation with Senior Management. Any and all action must be fully and factually documented and an incident report form completed.

5. Actions following violent, abusive or aggressive behaviour

- 5.1** Where a member of staff is alleged to have carried out an act of violence, aggression or harassed a member of staff, the procedure outlined in the Dignity at Work (Prevention of Bullying and Harassment Policy) should be followed.
- 5.2** Where a patient, relative or member of the public is alleged to have carried out an act of violence, aggression or harassed a member of staff, NHS Sheffield CCG reserves the right to respond to the alleged incident, as deemed necessary in light of the circumstances. The level of response will be dependent upon the seriousness of the incident and the outcome of any investigation.
- 5.3** The potential responses or actions available to NHS Sheffield CCG include:
- Verbal warnings with a follow up letter to the individual
 - Recommendation to use advocacy services
 - Contacting provider organisations to suggest that a warning flag is applied to the patient's notes
 - Meeting with the individuals
 - Written warnings from the CCG
 - Withdrawal of services
 - Involvement of the Local Security Manager
 - Involvement of the police
 - Criminal prosecution
 - Civil Prosecution
 - Support mechanisms.
- 5.4** Dealing with actual or threatened violence and aggression could have an effect on an employee's health and wellbeing, and they may feel that they need further support with this. NHS Sheffield CCG is committed to the health and wellbeing of staff and has therefore put in place an employee assistance programme (EAP) to provide additional support where needed, including access to counselling services.
- 6. Processes for staff following violent or abusive behaviour from service users or members of the public**
- 6.1** All instances of actual or threatened violence and aggression must be reported in accordance with the SCCG Incident Reporting Policy. Incident reporting will be used to ensure that other members of staff benefit from shared experiences and training can be realistic and relevant.
- 6.2** Staff that have been subjected to violent / abusive behaviour from service users or members of the public should report such incidents to their line manager. The line manager will need to consider whether the matter should be referred to the Police.
- 6.3** Incidents of violence and aggression can have a detrimental effect on the victim out of proportion to the scale seen by outsiders. Managers are to

ensure that staff are supported as soon as is reasonably practicable after such incident(s). Staff and Managers who are not directly involved could also be subject to anxiousness and concern.

- 6.4** It is important that an investigation into the matter is conducted and staff are informed of the basic details of the incident and any counter measures planned to prevent a similar occurrence.

APPENDIX 1

NHS Sheffield CCG Equality Impact Assessment

Title of policy or service	Zero Tolerance Policy	
Name and role of officers completing the assessment	HR & OD Business Partner	
Date assessment started/completed	June 2021	

1. Outline	
Give a brief summary of your policy or service	Sheffield Clinical Commissioning Group (CCG) has a zero tolerance approach to aggression, abuse, violence, hate crimes and hate incidents, or anti-social behaviour towards our staff.

2. Gathering of Information					
	What key impact have you identified?			What action do you need to take to address	What difference will this make?
	Positive Impact	Neutral impact	Negative impact		

				these issues?	
Human rights	✓				Zero tolerance to any unacceptable behaviour towards our staff
Age	✓				Zero tolerance to any unacceptable behaviour towards our staff in relation to this protected characteristic
Carers	✓				As above
Disability	✓				As above
Sex	✓				As above
Race	✓				As above
Religion or belief	✓				As above
Sexual orientation	✓				As above
Gender reassignment	✓				As above
Pregnancy and maternity	✓				As above
Marriage and civil partnership (only eliminating discrimination)	✓				As above
Other relevant group	✓				As above

Please provide details on the actions you need to take below.

3. Action plan				
Issues identified	Actions required	How will you measure impact/progress	Timescale	Officer responsible
It is important to ensure all staff are aware of the framework that is in place within this policy to support staff and managers.	Communication of policy via All Staff email and intranet.			

4. Monitoring, Review and Publication			
When will the proposal be reviewed and by whom?	Every 3 years		
Lead Officer	HR & OD Business Partner		