

# Challenging Behaviour in Renal patients

Update on Meeting hosted by Guys & St Thomas

## Introduction by DJ O'Donoghue

- Dealing with a cohort of disadvantaged patients – loss of opportunities
  - Excess of depression
- Remit for Services to provide Quality care
  - Safety
  - Patient experience
- Gap between expectations and reality – raised by political comment
  - Choice
  - Personalised care

## Julia Jones, Barts & Royal London

- Renal second to A&E in reported incidence of abusive and violent patient behaviours
  - Under-reporting is likely
- Reported on a 2 year study (first empirical study) due to complete 31/03/09
  - Aims to identify factors that contribute to...or predict disruptive patient behaviours
  - Qualitative and quantitative

- 74 incidents in a 12 month period
  - 26 patients, 6 relatives, 1 staff member
  - Repetitive behaviour
    - 1 patient – responsible for 21 incidents
    - 2 patients – account for 38% of incidents
  - 71/74 involved verbal aggression
    - Offensive/swearing
    - Derogatory
    - Threats of violence
  - Excess on a M/W/ F, around times of shift change
  - Transport a key trigger
  - ‘Loss of control’

# Legal Aspects (England & Wales)

- Statutory duty to provide/commission health care (NHS Act 2006)
  - Discretion as to how to use resources
    - Cost-effectiveness
    - Affordability, extent of provision
- Equality legislation
- Human Rights Act
- Health & Safety at Work Act

# Staff entitlement

Ability to personally withdraw from caring for an aggressive patient

- Safe working environment
- Respect and dignity
- Protection from Harassment Act – for an individual (Civil prosecution)
- Hospital Entitlement to exclude aggressive patients
- *Lack of clarity as to how to resolve the absolute requirement to deliver health care against absolute right of individual staff members to not deliver it*

# G&T's Experience

- Security
  - Importance of recording incidents
  - Training and support for Staff
    - V&A; conflict resolution
  - Modifying behaviour, Setting limits
    - Patient information, choice
    - Handing back control
  - Risk Assessment
  - Contracts
    - “this is what we will provide”
    - “ this is what we expect”
  - Use of isolation areas
    - Removing the audience
    - Improving security
  - Panic alarms/CCTV/Audio

- Communication Training
  - Interaction between Health professional and patient
    - Exploring patient concerns
    - Listening skills
    - Explaining skills
    - Checking understanding
    - Ability to respond to cues
    - Empathetic response
    - Giving feedback
- This is an area that all (medical, nursing, AHP, clerical) Staff in Renal units would probably benefit from increased and regular training

# Psychological support

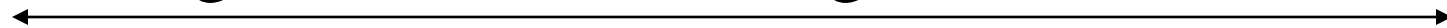
- Role of Psychological Assessment
  - At start/routine follow-up – ‘normalising’ psychological support
  - How to handle the information?
  - Needs adequate resource
- National agenda
  - All units should have access to appropriate clinical psychology. (National Renal Workforce Planning Group 2002)
- Role of Peer support; ?expert patient programme
- Giving staff adequate training
  - Dealing with deaths, cardiac arrests etc

# Staff support

- Education – mandatory
  - Courses – communication, V&A
  - Adequate skills
- De-briefing, psychological support
  - Expectation that there is a discussion after a particular episode involving violence/aggression
- Morale
- Funding of this...

# Strategies

- Documentation vital
- Communication
  - Handover – patients use other Depts
  - Consistency
  - Patient involvement in their care
- Intervene early
- Range to deal with range of behaviours



Single episode of aggression  
From a distressed, anxious  
Patient acting out of character

Sustained violent or threatened  
Violent behaviour from a patient  
acting entirely within character

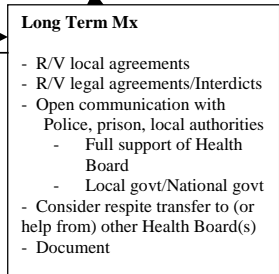
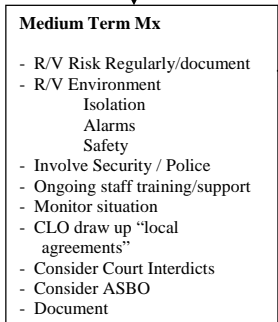
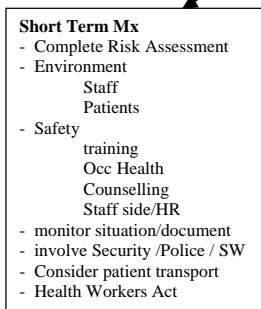
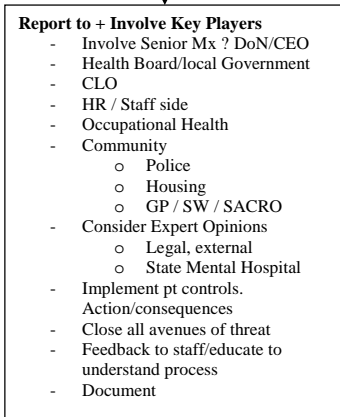
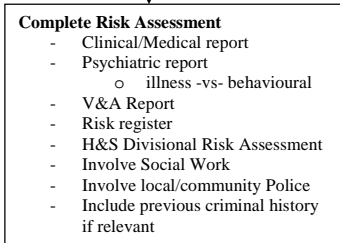
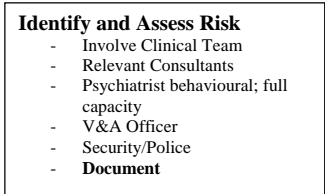
At Risk

Hospital Staff  
Other Patients/visitors  
Transport drivers  
Security staff  
Primary care contacts

External bodies  
Council housing

Where at risk

Work  
Community



Flow chart  
managing  
Challenging  
Behaviour  
  
Edinburgh 1/09