



Bishop Creighton House
378 Lillie Road, London
SW6 7PH
Tel: 020 7385 9689 Fax: 020
7386 9149

BISHOP CREIGHTON HOUSE SETTLEMENT PERSONAL SAFETY GUIDELINES FOR STAFF AND VOLUNTEERS

1 STAFF AND VOLUNTEERS SAFETY

BCH takes the safety of its staff and volunteers seriously, and is committed to taking action against anyone who threatens or abuses them.

In order to protect staff and volunteers, BCH uses a Client Risk Register which logs incidents of violence, aggression, threats or other behaviours which may harm or have harmed staff and/or volunteers.

The charity has put these safety guidelines in place to minimise and control risk to staff and volunteers and volunteers, and to ensure that, if anything does go wrong, it is dealt with quickly and effectively.

To enable us to do this, staff and volunteers must follow these guidelines, for their own safety and that of their colleagues.

We really welcome input from all staff and volunteers, and comments and suggestions for improvements.

2 WHAT IS UNACCEPTABLE BEHAVIOUR?

BCH will not tolerate any threats, abuse or violence towards its staff and volunteers, and will take immediate action if clients or visitors to the Community Centre display unacceptable behaviour. This includes (but is not necessarily limited to):

- Verbal abuse
- Physical abuse
- Inappropriate sexual language or physical act
- Uses threatening behaviour, shouting, or swearing
- Negative reference to staff and /or volunteers' gender, religion, ethnicity, sexual orientation, disability or social status
- Making false and malicious allegations against staff or volunteers

Where any of the above are exhibited by clients (or their family, friends or carers), BCH colleagues, volunteers, users or members of the public, staff and /or volunteers *must* report it immediately to their manager/co-ordinator. An incident report form (Appendix 1) must be completed, and the matter will be investigated to see what further action is needed.

We appreciate that situations may not always be as clear-cut as the list above indicates. There may be other signs that might 'ring alarm bells' and indicate that more background information is needed, or that particular care needs to be taken, or that a situation is escalating.

BCH would rather staff and volunteers played it safe than put themselves in potentially dangerous situations.

Signs to look out for

If someone:

- Appears to be under the influence of alcohol or drugs
- Successive broken appointments
- Shows particular confusion, or seems divorced from their surroundings or from reality
- Moving too close, solid stance
- Shows anger or resentment
- Pacing about
- Clenched fists or pointing; teeth clenched
- Persistent staring or avoiding eye contact
- Lack of concentration
- Raised voice, interrupting, demanding

We do appreciate that these behaviours do not always signal danger, and may often be completely benign. Having the right level of background information on clients and visitors can help staff and volunteers make to make a decision.

3 WORKING/VOLUNTEERING SAFELY

All staff should follow these guidelines when at work:

A. Taking Referrals (Staff only)

Staff taking referrals should always try to ensure they have answers to the following questions:

- Does the client have any health or behavioural difficulties? If so, ask for details
- For home visits, who else lives in the property, are there animals on site?
- Does the referrer know of any potential risk to staff and volunteers?

It may be necessary to carry out an in-depth risk assessment with some clients before accepting them on to some BCH projects.

B. Recording home visits (Staff only)

- All home visits should be recorded clearly in the shared BCH calendar showing time out, client's name, address, telephone number, and expected time back.
- It is the responsibility of all staff to ensure this is done on each and every visit.

C. Working safely

- Personal alarms are available free to any staff and/or volunteers who would like one.

- If staff and /or volunteers feel unsure or fearful about visiting a client, no appointment should be made without discussing the case with the appropriate manager
- If staff are not planning to return to BCH after a visit, they are responsible for agreeing with a colleague or 'buddy' that they will phone by an agreed time to let their buddy know that they are safe.
- If a staff member does not contact their buddy by the agreed time, the buddy should try to contact them by mobile phone, or contact the client direct.
- If the buddy is still unable to make contact they must call the worker on their home number and/or inform a colleague or manager as soon as possible. If contact can't be made, the Director or a Manager should be informed, and where it is appropriate it may then be necessary to call the police.
- All staff and volunteers who make any home visits must carry a mobile phone – which can be provided free by BCH - and must ensure that it is switched on during visits.
- Staff (**and volunteers**) who make home visits must ensure that their correct mobile number is kept on the appropriate database and that their manager/coordinator has details of their phone number in case of emergency.
- To ensure that we can effectively support each other, staff and volunteers should try to ensure that they have colleagues' mobile/home phone numbers with them when out and about. Managers should keep a record of staff and volunteers contact details at work and at home.

4. WHAT TO DO IF SOMETHING GOES WRONG

Phases of a difficult incident	
From the aggressor's perspective	From the staff and volunteers perspective
<ul style="list-style-type: none"> • Provocation 	<ul style="list-style-type: none"> • Diffusion strategies might work (see Appendix 2 for diffusion techniques)
<ul style="list-style-type: none"> • Escalation • Crisis • Assaultive behaviour • Recovery • Depression 	<ul style="list-style-type: none"> • Diffusion strategies are increasingly unlikely to work - get out of the situation

During the incident - Home visits

If you are concerned that there may be a risk to your safety or well being, you should leave the clients home immediately, return to BCH/ your home and *you must report the details to your manager or coordinator.*

During the incident - At BCH

If you feel unsure or fearful of any person within the communal areas or offices of BCH

- you should call staff for back-up, by phone, panic alarm under the Reception desk, or by asking a colleague to bring back-up
- colleagues should respond quickly, but should stay in the close background as far as possible, to avoid threatening the person or escalating the situation.
- if the person cannot be placated and their behaviour continues, you should warn them that the Police will be called (unless this would escalate the situation)
- If this is unsuccessful the Police must be called
- If the person calms down both staff and volunteers members should take them to a quiet area to try to resolve the difficulty
- wherever possible the persons name and address should be obtained, but only if it is safe to do so

It may be appropriate to consider other actions, such as offering the visitor the BCH Complaints Procedure, trying to get them to leave the building, referring them on to some other agency, etc.

Never hesitate to call the police at any stage if you feel it would reduce the risk to yourself, to colleagues or to other clients.

Tips for dealing with difficult situations

- Keep your responses under control – remain calm and friendly
- Avoid using either threatening language or body language
- Show understanding and empathy
- Take care not to patronise or belittle
- Respect personal space – try to stand at arms length, do not crowd
- Maintain eye contact, show that you are listening
- Avoid reacting to abusive remarks
- Never hesitate to seek help
- Don't put yourself in a position from which you cannot escape; plan your exit route – think ahead
- IF IN DOUBT, GET OUT

RECORDING & INVESTIGATING THE INCIDENT

In order to protect staff and volunteers, BCH uses a Client Risk Register which logs incidents of violence, aggression, threats or other behaviours which harm or may harm staff and volunteers.

The following procedure should be used:

- If an incident occurs the staff and/or volunteers *must* report it to their manager; then they and their manager should complete an incident report form (Appendix 1). Forms should be completed even if full details are not known (such as a visitor's name and address).
- The manager will then investigate the incident as quickly as possible, getting information from witnesses, the client etc as needed. If appropriate, the manager should call the client

to inform them of the reasons why the worker left the client's home, or to express the concerns the worker had about the visit. Written records must be kept.

- If the situation is unresolved the manager and a second person may try to arrange a visit to the client's home, if it is felt safe and useful to do so. Again, written records must be kept of all encounters and conversations.
- Following investigation, a decision will be made about future service provision, for example, withdrawal of service, or that two staff and volunteers should be present at future contact.
- Incident Report Forms are held securely by the Director in a locked cabinet; access is strictly on a need to know basis and information is held in accordance with data protection guidelines.
- If the incident is serious, the client may be placed on the Client Risk Register. If so, the client's name and address is placed on an electronic file (the Register), accessible to BCH Managers. Responsibility for this rests with line managers.
- It is the responsibility of Managers to ensure that clients requesting services are checked against the risk register, and appropriate action is taken. It is the responsibility of staff to pass new client names to their Manager *before* providing a service.
- It is the manager's responsibility to report serious action - such as withdrawal of services - to the client, stating the reasons. The client will be offered the opportunity to appeal, using the BCH Complaints Procedure.
- Any staff and /or volunteers involved in such incidents will be kept fully informed of progress and will be fully consulted on any actions taken. Staff and volunteers will be offered appropriate support following any incident.
- Where risk to staff and/or volunteers or users is involved, it may also be appropriate to pass information on incidents to referrers, colleagues in partner organisations or outside agencies such as the police, insurers etc. This must be done in line with BCH's policy on confidentiality and data protection principles.

APPENDIX I

BISHOP CREIGHTON HOUSE SETTLEMENT

INCIDENT REPORT FORM FOR STAFF AND VOLUNTEERS

Your Name:

Date:

Your Job/ Role Title:

Your Manager's/Coordinator's Name:

Date & Time of the incident:

Where did the incident happen?

Who was involved? Client, family member etc

Description of the incident:

Was anybody injured? Yes/No
(if yes, you must also complete an accident report form)

Accident Report No:

Were there any other witnesses? Yes/No (if yes, please give details below)

Do you think any of your actions may have contributed to their behaviour?

Have you had the opportunity to discuss the matter fully Yes/No

Would you like to discuss the matter further with anyone else Yes/No (if yes, who?)

Signed:

Date:

To be completed with your Manager/Coordinator

Manager's/Coordinator comments:

Action to be taken:

Is client to be put on the client risk register? Yes/No

What are the reasons for your decision?

What action should staff and volunteers take during future visits

Is the service being withdrawn? Yes/No

If Yes, what are the reasons for this?

Is client to be contacted to discuss the incident Yes/No

If Yes, by telephone or in person (please give details)

Has the client's referrer and/or other professionals been advised? Yes/No

Have the police been contacted or legal advice sought? Yes/No

Has client been given the opportunity to reply? Yes/No

Has client been advised in writing of action we have taken? Yes/No

Has client been advised of our complaints procedure? Yes/No

Is an insurance claim to be pursued? Yes/No

Have the outcomes/actions been discussed with the member of staff and volunteers?
Yes/No

Are they satisfied with the outcomes/actions? Yes/No

If No, is this being taken further? (grievance procedure etc)

Any other action needed/taken

Form placed in incident log on:

Signed:

Date: