



## **POST-INCIDENT/DEBRIEF SUPPORT POLICY** **(Training will be developed in line with individual organisational policy & procedure requirements)**

### **1. Policy Statement**

1.1 This policy reviews existing Post-Incident Support Policy for all employees working within Young People and Adult Health & Social Care Services.

1.2 Young People and Adult health & Social Care Providers should regard all forms of violence & aggression to staff as unacceptable and will actively provide support to all employees who have experienced an incident. Organisations should recognise that the nature of the work may put its employees in situations where they are at risk and they are legally required to ensure, as far as reasonably practicable, the health, safety and welfare at work of its employees.

1.3 It is the right of all employees to be offered emotional and physical support following an incident, which meets their individual needs and the duty of employers to offer it.

1.4 The organisation promotes the well-being of employees to ensure that those who are subjected to an act of violence or aggression are valued and supported in a way, which ensures that they continue to work confidently to their capacity.

### **2. Purpose**

2.1 To recognise that the organisations aim is to enable employees to respond confidently in difficult situations by identifying and reducing risks, providing information and training, and supporting employees following an incident.

2.2 To give a framework that proactively seeks to ensure that employees receive effective support following violent or aggressive incidents at work.

2.3 To ensure that proper consideration is given to the overall well-being and confidence of all employees.

2.4 To create a reflective culture in order for practical solutions to be put in place, to reduce the risk of such incidents recurring and to promote the development of a learning organisation.

2.5 To adequately assess the post incident provision in order to ensure that the individual is not placed in a position that could have a detrimental effect on their physical and emotional health and welfare.

### **3. Scope**

This policy applies to all staff employed by Young Persons and Adult Health & Social Care Organisations.

### **4. Definitions**

For the purpose of this policy, the definition of work related violence is based on that used by the Health and Safety Executive and the Association of Directors of Social Services:

*“...any incident, in which a person is verbally abused, threatened or assaulted in circumstances arising out of the course of their employment which results in damaging or hurtful effects either physically or emotionally.”*

This includes any racist, sexist or homophobic abuse, which should be reported in accordance with existing procedures. The policy also seeks to support those staff who have witnessed a violent incident or who suffer trauma as a result of a violence being perpetrated against a service user or colleague.

### **5. Legal Context**

The Health and Safety at Work Act 1974 which states that Employers have a legal duty to ensure, so far as is reasonably practicable, the health, safety and welfare at work of their employees.

The Management of Health and Safety at Work Regulations 1999 whereby employers have a duty assess the risks to employees, including the need to protect employees from exposure to reasonably foreseeable violence.

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 where employers must notify their enforcing authority in the event of an accident at work to any employee which results in death, major injury or incapacity for normal work for three or more consecutive days.

Safety Representatives and Safety Committees Regulations 1977 (a) and the Health and Safety (Consultation with Employees) Regulations 1996 (b) requires employers to consult with their employees on matters of health and safety and employee representatives may make representations to their employer.

GSCC Code of Practice for Employers of Health & Social Care Workers

### **6. Practice Guidance**

#### **Indicators**

6.1 Managers need to be aware that employees may have unresolved issues following an incident of violence and aggression and this may manifest itself in a variety of different ways including:

- Depression
- Anxiety
- Stress
- Change in performance
- Increased absence from work
- Anger
- Inconsistency/unreliability
- Avoidance of confrontational situations.

6.2 If a manager identifies that an employee displays any of these indicators then they should discuss the possible causes if employee is willing, and what further options are open to them with regards to support from Organisation or another appropriate body e.g. Victim Support.

6.3 If the employee refuses such help then a formal note of the discussion should be recorded in the supervision notes. If managers are sufficiently concerned about an employee, they should consult with Human Resources about the management of the situation. This may involve referral to occupational health, counselling, temporary alteration of duties etc.

## **Mandatory Procedures (sections 7 - 9)**

### **7. Support for staff**

#### **Immediate**

7.1 The purpose of this level is to provide immediate support to the employee, to ensure the safety of all those involved and devise an initial action plan. The support will be based on an initial assessment of the situation and should include:  
Any medical treatment, which may be needed.

An action plan.

Defusing the situation –employee may need to talk through their experience as soon as possible after the event and preferably within the hour. It is important to create a supportive and positive atmosphere where acceptance of the situation is encouraged.

The involvement of appropriate emergency services, if necessary.

Managers need to be sure that the employee was properly briefed about the situation and followed proper procedures.

#### **Long Term**

7.2 The Action plan should include any long-term support, which is deemed to be necessary. It is essential that the manager takes a proactive role in ensuring that appropriate support is given. The nature of the support can take a variety of forms: Debriefing should be offered to all the staff involved in the incident, preferably within 24 – 72 hours. If the member of staff is absent from work then the manager must decide if they are ready to attend. This is a more formal process than defusing.

Absence from work is a possibility because individual staff members will react differently and may need differing amounts of time to recover.

Identifying support systems, this may be through colleagues, appropriate work groups or specialist counselling.

Contact arrangements if the employee is away from work.

A review date

Referral to appropriate internal or external organisations e.g. Occupational Health, harassment network etc.

Consideration of a claim under the terms of the organisation insurance policy, if the incident is very serious.

Training, which may be needed by more than just the member of staff involved, to enable them to deal with similar situations.

## **8. Action with regards to People who are known to the Organisations**

Whilst this policy is essentially about support to staff, the needs of any person involved, either as a witness, victim or perpetrator, in the incident must also be taken into account.

A decision has to be made as to how their need to debrief will be met. This could be through support from their peers, family, user group or professionals.

Following an incident, a review needs to be completed to consider the current risk assessment of the person in consultation with the involved professionals and family, carers and/or advocates. Following the review any amendments to the care plan must be completed.

## **9. Recording**

9.1 Managers must ensure that staff complete the accident, incident or near miss form and agreed documentation within agreed times.

9.2 A copy of the following information is to be placed on the employee's supervision file:

The initial discussion

Action plan

Review

Subsequent plans and reviews

Record of support offered and refused

9.3 The following information must be placed on the person who perpetrated the abuse's file:

Review

Updated risk assessment

Updated care plan

Log book (in residential settings)

Case file

Consideration must be given to place a case file warning on any electronic records

## **10. Cross References**

Safer Working Practices for Staff Policy

Raising Concerns Policy

Countering Bullying Behaviours

LAC Planning and Review Processes

Community Care Procedures

Absence Management Procedures

## **11. Implementation**

The policy should be implemented within an agreed timescale.

## **12. Monitoring and Review**

This policy should be monitored through the existing accident, incident and near misses reporting procedures and through staff supervision.

This policy should be considered for review every 12 months via the established policy review system and any amendments identified will be raised and addressed via the agreed policy process.