NHS

Conflict Resolution

Conflict Resolution

Level 1 - All frontline staff who have contact with the public

Core Skills Framework for the North West Health Sector

What you will learn in this session

1. The role of NHS Protect
2. The role of Specialist Security personnel
3. Common causes and the different stages of conflict
4. Reducing the risk of conflict including use of reflection of previous experiences
5. Methods of communicating and the role of verbal and non-verbal communication
6. Causes of communication breakdown including cultural differences
7. Communication models for conflict resolution
8. Behavioral pattern of individuals during conflict
9. Warning and danger signs of conflict
10. Procedural and environmental factors affecting conflict situations
11. Using safe distances in conflict situations
12. Different methods of dealing with diverse conflict situations
13. The appropriate use of 'reasonable force'
14. The range of support available for those affected by a violent incident
15. The need to provide support and the wider benefits

Why is this so important?

- In 2012/13, there were 63,199 reported physical assaults against NHS staff in England
- It is essential that all staff feel safe whilst at work
- Violent behaviour can have an adverse personal effect on staff
- It can also impact negatively on the standards of patient care

Role of NHS PROTECT

NHS Protect leads on a wide range of work to protect NHS staff and resources from crime
Main objectives are to:

- Educate and inform about crime in the health service and how to tackle it
- Prevent and deter crime in the NHS
- Hold to account those who have committed crime against the NHS by detecting and prosecuting offenders and seeking redress where viable
- Further information on NHS Protect can be found at: http://www.nhsbsa.nhs.uk/Protect.aspx

Conflict Resolution

NHS Security Management roles and responsibilities

- **Security Management Director (SMD)**
  An Executive Director of the organisation with ultimate responsibility for security management
- **Nominated Non-Executive (NED)**
  Sits on the board with the responsibility to support or challenge the SMD over security management issues
- **Local Security Management Specialist (LSMS)**
  Operationally responsible for the implementation of the National Strategy for managing security and tailoring it to local requirements
- **Senior Quality and Compliance Inspectors (SQCI)**
  Prove support in matters relating to quality and compliance.
  This includes anti-fraud and security management qualitative assessments
- **Area Security Management Specialist (ASMS)**
  Provision of operational support to ensure health bodies deliver consistently high quality security management work

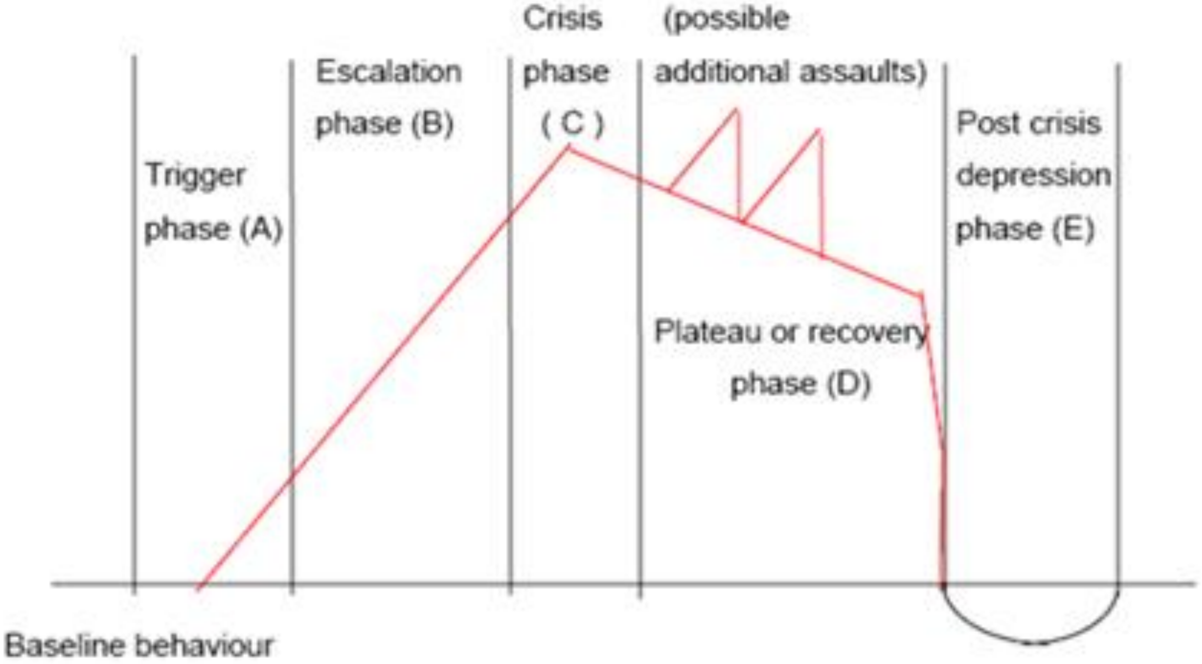
Common causes of conflict

- Unreasonable expectations and demands
- Perceived poor level of service/care
- Long waiting times
- Heightened sense of vulnerability or anxiety
- Delayed or cancelled appointments
- Inability to get an appointment
- Ingestion of alcohol and/or drugs
- Mental illness
- Unclear operational systems

What is assault?

- An extreme form of conflict
- Physical assault
  - The intentional application of force to the person of another, without lawful justification, resulting in physical injury or personal discomfort
- Non-physical assault
  - The use of inappropriate words or behaviour causing distress and / or constituting harassment

The "Assault Cycle"


Crisis phase (C)
(possible additional assaults)
Escalation phase (B)
Trigger phase (A)
Post crisis depression phase (E)
Plateau or recovery phase (D)
Baseline behaviour

Kaplan & Wheeler, 1983

- A 5-stage model that helps to identify
  - why the assault has occurred
  - the most appropriate type of intervention

Communication

- Verbal
    - Spoken words
- Para-verbal
    - Tone, pitch, volume
- Non-verbal
    - Facial expression, eye contact, proximity, body language such as gestures and posture

Body language to avoid conflict

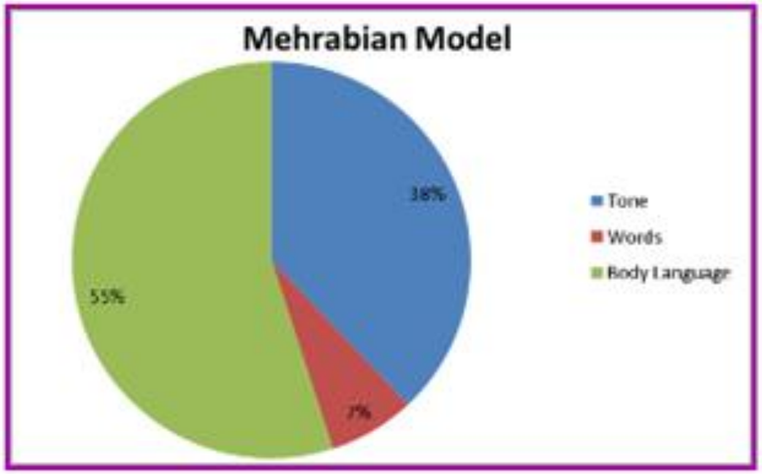
- Keep your body relaxed and open
- Use open hand language
- Breathe deeply and calmly
- Respect personal space
- Be aware of your facial expressions
- Avoid making sudden movements
- Don't stare

Non matching behaviour is when your body language contradicts what you say

Communicating feelings and attitudes

Communication impact

- 7% comes from the spoken word
- 38% from the tone of voice
- 55% from non-verbal / body language



In other words

- What you say is less important than how you say it
- People believe what they see before they believe what they hear
- People are persuaded by attitude and appearance
- Non verbal communication is particularly important when dealing with emotional issues

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Communication breakdown

Could be because of:

- The language used
- Noise levels - too loud or too quiet
- Stress or Anger
- Alcohol or drugs
- Confusion
- Cultural differences
- Stereotyping
- Conflict between what you say and how you say it
- Educational background differences

Cultural differences

- Gender
- Eye contact
- Clothing
- Personal space
- Chaperoned communication
- Shaking Hands

Communication models for conflict resolution

- Conflict is part of every day life and can be present in healthy relationships
    - If handled well, it can actually result in something positive
    - If it's not managed properly it could have serious consequences
- Using effective communication techniques can reduce conflict and resolve arguments and tension
- For example you may use one of the following communication models to resolve conflict:
    - LEAPS
    - PALMS
    - 5 Step Appeal

Communication Models
1. LEAPS

L
- listen

E
- empathise

A
- ask

P
- paraphrase

S
- summarise

Communication Models
2. PALMS

The open **PALMS** model is a non-aggressive stance designed to help you communicate to the other person that you do not want to confront or fight them, but instead you want to help them.

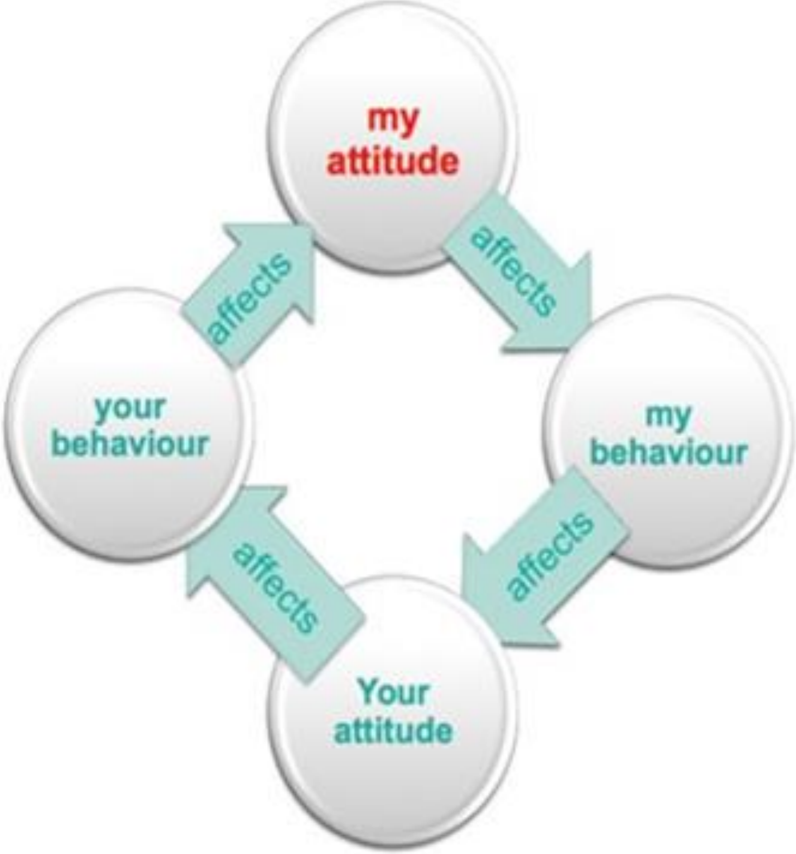
- **P**osition
- **A**ttitude
- **L**ook and listen
- **M**ake space
- **S**tance

Communication Models
3. Five Step Appeal

Step 1	Step 2	Step 3	Step 4	Step 5
Ethical appeal	Reasoned appeal	Personal appeal	Practical appeal	Action
Ask the person to carry out the task	Reinforce the rules. Explain why you have made the request	'How would you feel if…?'	The final appeal. 'you may be asked to leave'	This depends on the threat as you see it

The attitude and behavioural cycle

- Establishes a link between attitude and behaviour
- Positive attitude creates a virtuous cycle of positive behaviour



my attitude

affects

my behaviour

affects

Your attitude

affects

your behaviour

affects

De-escalation
The basics

- Assess the individual's emotional state
- Identify trigger factors
- Reassure to reduce anxiety
- Talk / listen
- Problem solving
- Keep a relaxed and alert posture

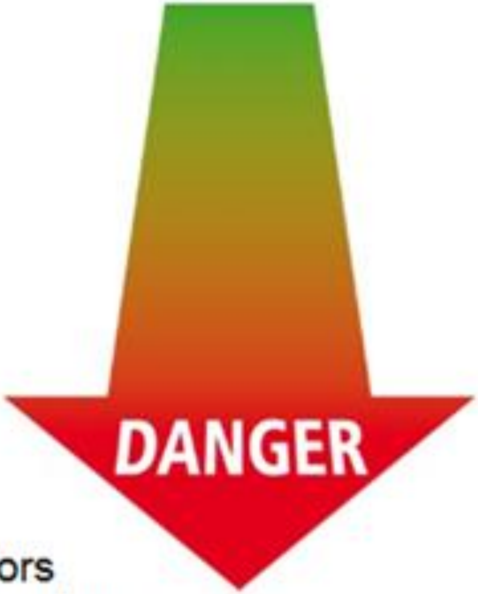
De-escalation
Personal safety

- Maintain adequate distance
- Allow space and time - back off if they advance
- Stand side-on to protect yourself
- Move towards a safe place
- Ask for any weapon to be put down (not handed over)

NEVER attempt to deal with an armed individual!

Patterns of behaviour

- Behaviours that may be encountered during conflict:
    - Compliance
    - Verbal resistance
    - Passive resistance
    - Active resistance
    - Aggressive resistance
    - Serious or aggravated resistance
- Recognising the pattern can help you to react before a situation becomes dangerous
- The stages may present in the above order but certain factors may cause an individual to jump between stages without warning



Warning signs

- Indicators that signal the possibility of aggressive behaviour:
    - Prolonged eye contact
    - Darkening facial colour
    - Increased breathing rate
    - Kicking the ground
    - Standing tall
    - Head held back
    - Large movements
    - Erratic behaviour

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Danger signs

- Indicators that signal the probability of immediate aggressive behaviour:
    - Fist clenching
    - Facial colour paled
    - Lips tightened over teeth
    - Eyebrows dropped
    - Chin drops
    - Hands above waist height
    - Shoulders tensed
    - Staring at intended target
    - Body lowered

Impact factors

- Sex – Age – Size
- Relative strength
- Alcohol/Drugs
- Mental illness
- Injury or exhaustion
- Position of disadvantages
- Numbers present
- Weapons

Lone Workers

- Increased vulnerability
    - Increased risk of physical/ verbal abuse and harassment from patients, relatives or members of the public
- Employers have a duty to protect them from risk of physical and verbal abuse
    - Risk assessments
    - Provision of lone worker devices
- Employees should take practical steps to improve their personal safety
    - Attend training
    - Adhere to lone workers policy and procedures
    - Report near misses and incidents

Risk assessment

What do you know about the individual?	What do you know about the situation?	What impact could you have?
Age	Time of day	Specialist knowledge
Physical appearance	Weapons	Physical attributes
Client history	Lone worker	Control
Medical condition	Assistance	
	Location.	
	Escape	

Conflict Resolution

Personal space

- Is culturally defined, but usually:
  - **Intimate** (up to 0.5m)
    People we feel very close to
  - **Personal** (about 1.2m)
    Friends and associates
  - **Social** (about 2.4m)
    New acquaintances
  - **Public** (2.4m plus)
    Larger audiences

The use of 'distance' for dealing with conflict

- Distance gives us:
    - Time to think
    - Time to react
    - Time to get out of the way

- Reactionary gap:
    - The distance between you and an attacker (taking into consideration whether they have a weapon)
    - An appropriate and comfortable space between you and an aggressive person

Fight or flight?

- **GET AWAY** if communication has not resolved the situation
- **PASSIVE COMPLIANCE**
  if you can't get away
  Property is not worth risking physical injury
- **ONLY** fight back
  if there is absolutely no alternative

Reasonable force

- The use of force in self-defence must be reasonable:

  > "A person may use such force as is reasonable in the circumstances in the prevention of crime, or in the effecting or assisting in the lawful arrest of offenders or suspected offenders or persons unlawfully at large"
  > (Section 3 Criminal Law Act 1967)

- Reasonable force is force that is deemed as:
  - Proportionate
  - Necessary

Range of support available following a violent incident

- Immediately after a violent incident a number of actions need to be taken
- The following questions provide a useful guide:
  - Has anyone been injured?
  - Do they need medical or any other assistance?
  - Have the individuals affected been moved to a place of safety?
  - Does the cause of the incident remain?
  - Is there risk of further incidents?
  - Has the incident been reported or the alarm raised?
  - Have the police been called?
  - Has an incident report form been completed?

- If the incident is not reported, it is like it did not happen
- Without reporting it, steps can't be taken to prevent it happening again

Range of support available following a violent incident

- Following a violent incident, longer term support may be required
- People requiring support may include those directly affected, anyone who witnessed the incident and those who are based or work in the vicinity
- Post incident support may involve:
    - Peer support from colleagues
    - Staff side or trade union support
    - An individual's line manager
    - Occupational Health services
    - HR (for example in relation to a phased return to work)
    - Employee counselling services
    - Victim Support
    - Criminal Injuries Compensation Authority

The need and benefits of providing support

- An organisation needs to fully supports it's employees
  - They have a legal duty for their safety
  - No-one should be placed needlessly at risk
  - Reduce the potential impact of an incident
  - All incidents need to be fully investigated
  - Appropriate training provided

- The benefits include
  - Employees feel valued and respected
  - Preventative measures provide assurance and security
  - Employee welfare supported
  - Lessons learnt can prevent future incidents from occurring
  - Employees feel empowered
  - Financial and reputational cost or impact reduced

Personal safety

- **DO NOT:**
  - Show hostility
  - Use provocative language
  - Show signs of irritation
  - Adopt a 'square-on' stance
  - Behave in an overly authoritative manner
  - Give an ultimatum unless you are prepared and able to follow it through

Personal safety

- **DO:**
  - Be prepared for problems
  - Avoid behaviour that is likely to provoke patients
  - Keep calm and don't raise your voice
  - Be respectful and tolerant
  - Remember that silence can be helpful
  - Listen and try to understand
  - Get help if you fear that violence is likely

Remember

- Use common sense
- Apply what has worked well in the past
- Every situation is different
  - modify your responses appropriately
- Consider your own personal safety
- Listen to your gut instinct
- Seek help if you feel you need it

Thanks to

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For their support in developing these materials

Assessment

The assessment includes 10 questions. All questions must be answered correctly to pass.

Once you have started, tick the correct option or options for each question. When you have chosen your answer move onto the next question.

At the end of the assessment, there is a declaration to sign and date. This is to ensure you have read and understood the content of the presentation and answered all of the 10 questions.

The assessment and declaration needs to be sent to clinicalbank.mrt@dgh.nhs.uk or posted to; Bank Information Co-ordinator, Professional Development Team, 2nd Floor South Block, Russells Hall Hospital, Dudley, DY1 2HQ.

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Assessment

Which of the following are aids to improving communication? (Select ALL that apply)

☐ Repeat information if required

☐ Speak slowly and clearly

☐ Check that you are being understood

☐ Don't talk down to a patient

☐ Adopt an open posture

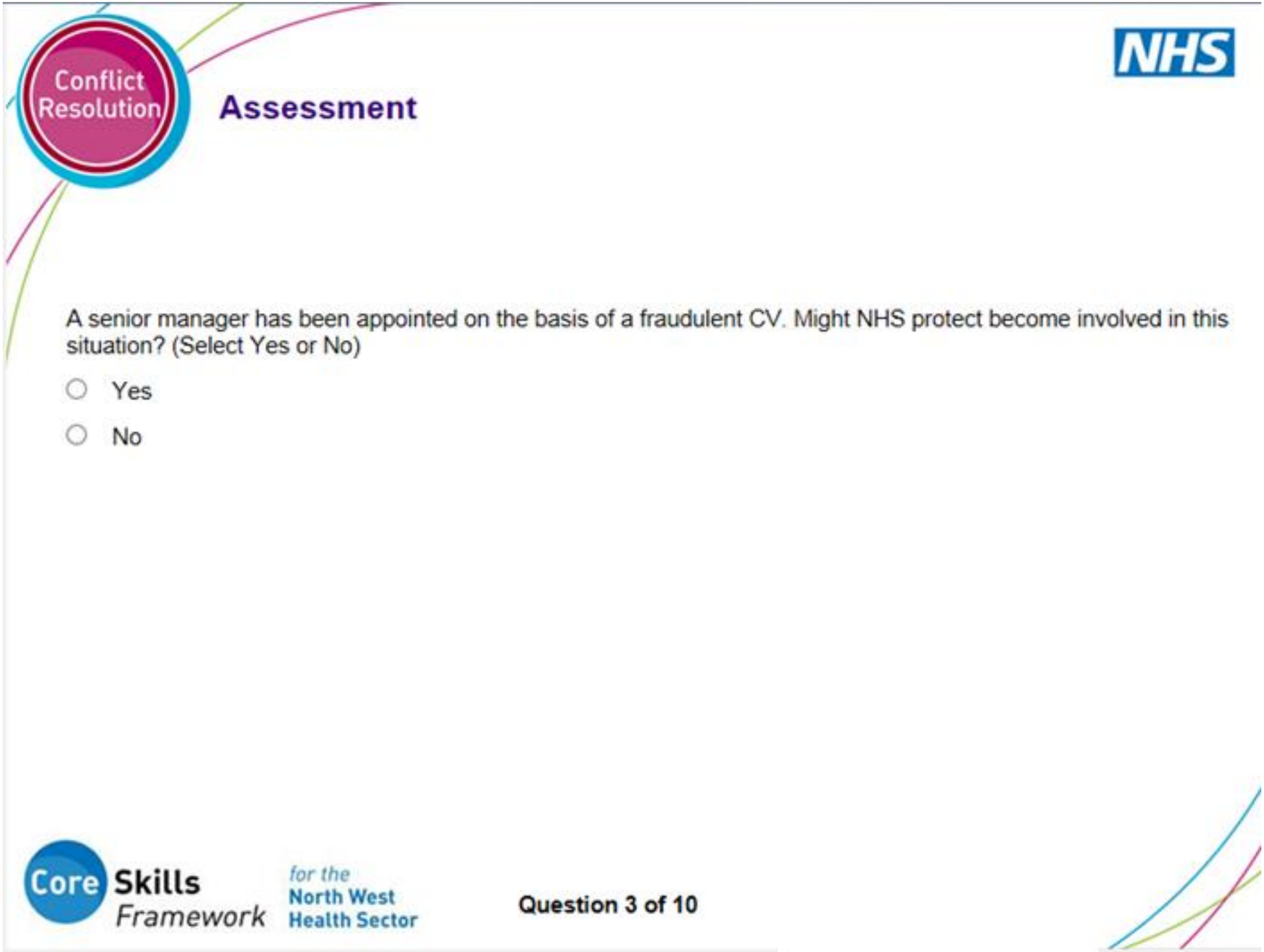
Assessment

What is the role of the Area Security Management Specialist? (Select ONE of the following options)

○ To provide support to local security management specialists

○ To investigate discrepancies in mileage claims

○ To be the named responsible board member for security management within the Trust



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Assessment

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A senior manager has been appointed on the basis of a fraudulent CV. Might NHS protect become involved in this situation? (Select Yes or No)

○ Yes

○ No

Core Skills Framework for the North West Health Sector

Question 3 of 10

Assessment

How might your previous experience of conflict help you to cope with situations where conflict may arise again? (Select THREE of the following options)

☐ Thinking about the escalation process last time may help to de-escalate

☐ Reflecting on the use of communication last time may help develop communication strategies

☐ Considering the environment may help in reducing triggers for conflict

☐ The previous experience will ensure that I never have to face conflict again

Assessment

Which of the following are forms of non-verbal communication? (Select THREE of the following options)

☐ Body position

☐ Tone of voice

☐ Eye contact

☐ Folded arms

Assessment

Indicate the correct order of individuals emotions during a conflict escalation (Select ONE of the following options)

○ Frustration, anger, aggression, violence

○ Anger, violence, frustration, aggression

○ Frustration, aggression, answer, violence

○ Violence, anger, frustration, aggression

Assessment

Which of the following may cause conflict? (Select ALL that apply)

☐ A patient in a drop-in centre not realising that they need to pick up a ticket before they sit down.

☐ A family member expecting an immediate response to a question about a patient's condition.

☐ A drunken person coming in off the street

☐ A patient being told that a consultant can't make an arranged appointment due to an emergency.

Assessment

During a conflict situation, the aggressor looks away and goes quiet. How might these signs be interpreted?
(Select ONE of the following options)

○ A physical attack is imminent

○ You have successfully de-escalated this conflict

○ You have scared the aggressor into submission

Conflict Resolution

Assessment

Which of the following are good examples of verbal communication? (select THREE of the following options)

○ Pleasant tone of voice
○ Constant eye contact
○ Considerate use of words
○ Polite telephone manner

Assessment

The attitude-behaviour cycle suggests: (Select ONE of the following options)

○ How it's important to be nice to everyone

○ How we act can ultimately influence how those around us act.

○ How people will usually act in predictable ways

○ It is always best to turn the other cheek when someone is acting inappropriately

Declaration – Conflict Resolution

- I confirm that I have read and understood the content of the Conflict Resolution presentations.

- I confirm that I have answered all 10 questions as part of the assessment.

NAME: …………………………………………………………….

POSITION: Bank Only Clinical Support Worker/ Registered Nurse (cross off where appropriate)

SIGNATURE: ………………………………………………………

DATE: ……………………………………………………………..