

Violence and Aggression

Prevention and management in Critical Care

Aim To provide basic guidance to all staff on preventing and managing potentially violent or aggressive situations within Critical Care

Scope All staff within Critical Care

Safety comes first – yours, your patient's and everyone else's

If in doubt, or if escalating towards violence, get help and call security on 2222

Work with relatives

Establish a relationship: Meet early and establish visiting rules

Identify risk factors: Eg. complex family issues, history of aggression, substance misuse, mental health issues

Meet safely: Work with a colleague, choose meeting location carefully, keep yourself between family and exit, know location of alarm

Work with your patient

Minimise delirium: Follow our Sedation & Delirium SOP, keep orientated, promote sleep

Remove hazards: Limit access to sharp / heavy objects eg scissors / oxygen cylinders, consider patient's location within ICU

Work safely: Maintain a safe distance, make a management plan with colleagues

Recognise aggression early

Non-verbal clues: Staring / facial tension / gritted teeth / invading personal space / clenching fists / pale or flushed face / gesticulation / pacing

Verbal clues: Abusive language / shouting / threatening / swearing

De-escalate if possible

Non-verbal measures: Be honest, open and relaxed. Stay confident without staring. Maintain stance on the same level. Allow "venting" within reason. Listen and allow silence.

Verbal measures: Show understanding and express regret. Maintain a soft, non-authoritarian tone. Distract if needed with questions and negotiation.