



FAST FACT, REF NHSF:015:00:11

## HSE POLICY ON THE PREVENTION & MANAGEMENT OF WORK-RELATED AGGRESSION & VIOLENCE 2025

**FAST FACTS** provide a brief overview of various health and safety topics to support our managers, employees, safety representatives and others. Why not bring this to your Safety Committees/Departmental Meeting for discussion? Additional information is available by visiting our website at: <https://healthservice.hse.ie/staff/health-and-safety/>

This FAST FACT provides a brief overview of the **HSE Policy on the Prevention & Management of Work-related Aggression and Violence 2025**. The policy can be downloaded [here](#).

**DID YOU KNOW THAT** Organisations who implement preventive measures such as comprehensive policies, training programmes, effective reporting systems, security measures, regular risk assessments, communication channels, and maintaining a healthy work environment, can reduce the risk of work related aggression and violence.

**DEFINITION(S) (AS PER POLICY)** The HSE has adopted the EU definition of work related aggression and violence as: “Any incident where staff are abused, threatened or assaulted in circumstances related to their work, involving an explicit or implicit challenge to their safety, wellbeing or health”.



**POLICY STATEMENT** The HSE is committed to creating a safe environment within which to work or to be treated. The HSE does not tolerate verbal or physical aggression in any form by employees, service users, members of the public or others. While it is accepted that the provision of health services can involve situational conflicts, this recognition should not be equated with considering any form of aggression and/or violence as being inherent, inevitable or acceptable. Behaviours that challenge are understood to occur on a spectrum from unintentional (clinical) to intentional (non-clinical), even criminal. The appropriate response will vary accordingly from understanding and compassionate management to non-tolerance.

**PURPOSE** Provide a framework which enables safe systems of work to be put in place to avert incidents of aggression and violence, and minimise associated risks so far as is reasonably practicable.

**SCOPE** The Policy applies to all HSE staff, and others working in the HSE including temporary employees (to include agency staff) where work-related aggression and violence is directed towards staff by service users and others relating to the performance of their occupational role. Section 38 and Section 39 agencies are required to adopt or develop a Policy which is consistent with this Policy.

### MANAGER'S KEY ROLES AND RESPONSIBILITIES

- Ensure a hazard identification and risk assessment process is completed in consultation with employees that reflects the specific work activities of employees and others in the place of work.
- Ensure where service user specific clinical risk assessment are undertaken, they inform the service department risk assessment and relevant information is communicated to relevant staff at the earliest opportunity.
- Ensure employees identified as being at risk are given appropriate training based on training needs assessments.
- Be aware of the range of supports available and communicate to employees.

### EMPLOYEE'S KEY ROLES AND RESPONSIBILITIES

- Adhere to and apply this Policy, local procedures and safe systems of work and any associated risk assessments and controls.
- Utilise any preventative measures and strategies provided to minimise risks that might compromise safety e.g. emergency response procedures.
- Undertake relevant education and training as identified in the Training Needs Assessment.
- Report risks or concerns identified and all incidents of work-related aggression and violence.

**Detailed Roles & Responsibilities are outlined in the Section 3.0 of the Policy**

## KEY HEALTH AND LEGISLATION

- Safety, Health and Welfare at Work Act, 2005
- Safety Health and Welfare at Work (General Application) Regulations, 2007

**RISK MANAGEMENT** A proactive approach to occupational safety and health (OSH) risk assessment must be adopted which considers overall hazards and risks within the service and understand what could potentially cause harm. In the context of aggression and violence consideration must be given to the following risk factors that could contribute to incidents of aggression and violence:

SERVICE USER	ENVIRONMENT
<p><b>Medical factors</b> e.g. medication (side effects/withdrawal); Delirium; Infection; psychosis etc.</p> <p><b>Physical factors</b> e.g. pain; thirst; hunger; intoxication etc.</p> <p><b>Cognitive factors</b> e.g. comprehension; insight &amp; awareness; Perceptual difficulties etc.</p> <p><b>Psychological factors</b> e.g. anxiety; fear; depression</p> <p><b>Historical factors</b> e.g. history of aggressive/violent Behaviour intent to harm self or others</p> <p><b>Other factors</b> e.g. distressed relatives, careers and friends; cultural factors etc.</p>	<p>Inadequate staffing levels</p> <p>Lack of privacy</p> <p>Excessive noise</p> <p>Poorly designed waiting areas, interview rooms, treatment rooms</p> <p>Overcrowding</p> <p>Long waiting times (and no clear updates)</p> <p>Isolated or remove working locations</p>
TASK/INTERACTION	SERVICE PROVIDER (EMPLOYEE)
<p>Administration of medication</p> <p>Transporting service users</p> <p>Interviewing services users</p> <p>Imparting difficult news</p> <p>Engaging with family members</p> <p>Admitting service user as patient (voluntary/involuntary)</p>	<p>New or inexperienced employees</p> <p>Employee Characteristics e.g. age, gender, race, communication style</p> <p>Lack of clarity on the role, function, purpose of security personnel</p> <p>Inadequate training specific to the needs of the service user and/or staff skill set</p>

The OSH risk assessment process is outlined in Section 3.3. of the Policy and includes evidence based control measures.

**Dynamic Risk Assessment** : It is recognised that situations can change rapidly and the associated risks can also change. In these situations employees have to make operational decisions based on risks which cannot necessarily be foreseen e.g. a person under the influence of drink or drugs, escorting a service user alone. This process is referred to as a dynamic risk assessment and involves being alert to potential warning signs, behavioural cues and body language. Concerns must be reported to the Line Manager at the earliest opportunity and the OSH risk assessment and care plan reviewed and updated as appropriate.

**Risk Assessments and Clinical Risk:** When a service user poses a risk of aggression or violence, clinical risk assessments must be completed and reviewed regularly as part of the care planning process. Management, clinical teams, and relevant parties should be involved in this evidence-based decision-making process. Clinical risk assessments must inform the service department risk assessment and communicated to relevant staff.

## INCIDENT MANAGEMENT

In the event of an incident, the line manager should provide immediate support to those involved and initiate reporting and notification in accordance with the [HSE Incident Management Framework](#). This will help reduce the likelihood of reoccurrence and ensure vital learning takes place.

## EMPLOYEE SUPPORTS

Following a work related aggression and violence incident, most employees will require only minimal post-occurrence support, others may require a wider range of support measures. Consequently integrated support measures together with information as to how services may be accessed should be readily available to employees. Refer to Section 3.12 of the Policy.

## SUPPORTING RESOURCES

[Work-Related Aggression and Violence Risk Assessment Prompt Sheet](#)