

Emergency Medicine Standard Operating Procedures

WRH – Recording of Assault Location by Receptionists

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Approved by	
Date of Approval	
Date of next review This is the most current document and is to be used until a revised version is available	

Aim and scope of Standard Operating Procedure

Target Staff Categories

INTRODUCTION

National guidance states that the ED should be sharing anonymised assault data with the community Crime Partnerships. This information can be used by police and others to identify violence ‘hotspots’ to allow preventative measures to be put into place. The police can also use this information when licensed premises (pubs, clubs) apply for renewal of their alcohol license.

For the information to be useful then the actual location of the assault needs to be recorded rather than just a post code or where the ambulance picked the patient up from. Information needs to be recorded as “Red Lion Pub, Worcester”, “The Mangrove Night Club, Evesham”, “St. James High School, Pershore” etc.

Clearly there are benefits to patients and the ED in supplying this information to try to help reduce the number of assaults that are taking place.

PROCESS

Register as usual.

Complete the entire assault drop down boxes as accurately as possible.

Injury Form
 CARMEL YEOMANS Presenting Complaint: ASSAULT Date of Birth: [REDACTED] NHS No: [REDACTED] Eps No: [REDACTED] Hospital No: [REDACTED]

Injury Date Time: 27/03/2018 12:45

Place Of Injury
 Place Group: Indoor
 Place: Licensed premises e.g. bar cafe club

Injury Mechanism
 Mechanism Group: Blunt injury
 Mechanism: Blunt force / pushed

MUST BE COMPLETED
 * → Injury Intent: Apparent assault

Injury Activity Status: Lethal

TO BE ABLE TO COMPLETE
 Assault information
 Police informed: No Yes
 Last Location Visited: Licensed Premises
 Assault Relationship: Stranger
 Area: Upper Body
 Other details: BUSHWACKERS - WORCESTER

Drug/Alcohol
 Select all that applies:
 Alcohol - retail beer / wine / spirits
 Alcohol - not sold for consumption e.g. methyl / antiseptic
 Cannabis
 Heroin
 Morphine
 Codeine
 Dihydrocodone
 Oxycodone
 Methadone

Injury Activity
 Activity Group: Lethal
 Activity: [REDACTED]

Post Code: [REDACTED]

NAME OF Pub, Club, Shop, School where assault actually took place

Save Done

Email C.Yeomans to Reception Team

Assault Information

Please book in the presenting complaints box **Assault**

The Injury Intent box must state **Apparent Assault** (Without this – the drop down boxes will NOT appear)

In the other details box please state the **Name of the Pub/Club/School** etc the **Street Name**, and the **Town**.

If you do not have this information please write in the box **Unable to get information** or **No information given**. (This will help with the report that is generated each month and will help me sift through any queries).

Thank you for your cooperation

Screen shots are in the striped folder – please do not hesitate to come and see me if you are unsure.