

Practice Information
Special Allocation Scheme (SAS) Process Flow Chart
(Previously known as the violent patient scheme / Safe Haven)

The following information is intended to be an easy-to-use guide, setting out the process for referring patients to the Special Allocation Scheme (SAS).

For the full guidance for referring into the Special Allocation Scheme and information about what is regarded as violent unacceptable behaviours, please see the [Primary Medical Care Policy and Guidance Manual](#) Section 7 – including a 10 point process.

Practices should be aware that it is important that the Special Allocation Scheme is used only for those patients who meet the criteria for immediate removal, resulting from an incident being reported to the police. Violence does not have to be physical or actual. It can be perceived, threatened or indeed a perceived threat of violence. As such, healthcare staff could fear for their safety.

Removing a patient under the regulations should only be used as a last resort when all other ways of managing the patient's behaviour have been exhausted. We would encourage Practices to discuss the situation and undertake a risk assessment before enacting an immediate removal. This is, in part, to consider the nature of the incident. It is not the intention to encourage a situation where patients are immediately removed for comparatively minor offences (e.g. that have not been reported to the police) or for behaviour that could be ascribed to a health condition and which could be alleviated through careful management, care and treatment, including putting reasonable adjustments in place for individuals. For these patients, consideration should be given to an acceptable behaviour agreement / management plan to support future improved behaviours within the surgery.

If the incident does not warrant an immediate removal from the practice but following the risk assessment it is concluded that support is required to manage patient behaviour, the practice should consider an alternative solution, as detailed below: *(sample templates are included at the end of this document).*

- Issue an initial warning letter (some Practices call this a *Be Kind* letter)
- Develop an acceptable behaviour agreement / management plan, to facilitate the patient staying with the practice
- In the event of an **irrevocable breakdown** in GP/patient relationship, commence an **8-day removal process**, if a previous warning has been given within the proceeding rolling 12 months and the patient has been given the opportunity to moderate their

behaviour. Removal can only normally be effected if the behaviour is repeated and then the patient can be given 8 days' notice to find a new GP.

Please see Section 6 of the [Policy Guidance Manual](#) for further information - "*Managing (non-violent) inappropriate and unacceptable behaviours, including protecting against discrimination, harassment, or victimisation*".

The aim of a Special Allocation Scheme (SAS) is to ensure any patient removed has access to essential and additional medical services, as well as to communicate behavioural expectations to patients and educate them to behave responsibly wherever possible, while at the same time minimising the risks to the safety of health professionals and others.

If the practice makes the decision to immediately remove a patient, PCSE must be notified immediately (within 24 hours where possible) to enable timely correspondence with the patient and registration with the SAS provider.

Practices are reminded of the statutory requirement to notify the Care Quality Commission (CQC) about any incident related to their service that is reported to or investigated by the police. In addition, where appropriate, the practice should consider if the incident and subsequent removal from its list warrants notification to any other agency (e.g. Local Authority).

To note:

1. All patients who are removed from General Practice to the SAS team have the right to appeal the decision. In these instances, Practices will be contacted by the ICB to provide details of the incident, including how the process was managed in conjunction with the Policy Guidance Manual. An appeals panel will be convened by the ICB.
2. Practices can only remove the individual patient to the SAS team. Risk assessments and plans should be put in place for other family members registered at the Practice, especially vulnerable children and adults.
3. At the point when a patient is permitted to return from the SAS Service and register with a mainstream GP Practice, the new Practice may decide to establish an acceptable behaviour agreement / management plan with the patient at the outset.

Special Allocation Scheme (SAS) Process - Flow Chart

INCIDENT TAKES PLACE AT THE PRACTICE
IMMEDIATE MANAGEMENT OF SITUATION
INCLUDING CALLING POLICE IF NECESSARY*

PRACTICE TO ASSESS BEST OPTION /NEXT STEPS

IMMEDIATE REMOVAL FROM PRACTICE:
Request made by phone/email to PCSE
immediately (within 24 hrs where possible)
**Patient Removal Request form to be
submitted** (Police must have been called
and incident number given)
Email: pcse.patientremovals@nhs.net
Phone: **0333 014 2884**

PRACTICE to:

Submit (**anonymised**) PCSE report to ICB
wylcb-leeds.primarycare@nhs.net and
RECORD INCIDENT ON DATIX, ALONG WITH
LESSONS LEARNED

**8 DAY REMOVAL
PROCESS**
(IF THIS IS A
REPEAT OF
PREVIOUS
BEHAVIOUR AND
WARNING
LETTER ALREADY
ISSUED)

**DEVELOPS
BEHAVIOUR
MANAGEMENT
PLAN**
(TO REMAIN ON
PRACTICE LIST,
CONSIDER
SENDING A
WARNING

PRACTICE

- Inform patient in writing of request for removal (unless this would cause patient harm or risk to the practice)

PCSE

- Remove patient and informs the ICB
- Allocates patient to SAS provider
- Informs patient in writing of removal & allocation to SAS, including details of how to contact the SAS team

After 7 days, ICB and PCSE to liaise to ensure Police incident number has been received. If not, ICB to request from **practice** and inform PCSE

SAS provider responsibilities:

SAS Provider to undertake risk assessment and regular monitoring of patient with the intention to support the patients transition back into mainstream primary care

SAS provider to inform PCSE when patient is discharged from SAS scheme and can return to mainstream general practice

***PRACTICE** to obtain incident number for incidents reported to Police. If appropriate, inform:
- CQC and any other relevant body e.g.
- Local Authority if concern for welfare of others because of incident

Key Contacts and information

PCSE

Email: pcse.patientremovals@nhs.net

Phone: 0333 014 2884

Contact details: <https://pcse.england.nhs.uk/contact-us/>

Patient Removal Request form:

<https://www.england.nhs.uk/publication/primary-medical-care-policy-and-guidance-manual-working-with-primary-care-support-england-pcse-annexes/>

SAS Risk Assessment form:

<https://www.england.nhs.uk/publication/pgm-appendix-5-risk-assessment-approach/>

Primary Medical Care Policy and Guidance Manual (PGM) (v4)

<https://www.england.nhs.uk/publication/primary-medical-care-policy-and-guidance-manual-pgm/>

Template warning letter

[appendix-1-template-warning-letter.docx \(live.com\)](#)

Leeds GP Practices – Template Acceptable Behaviour Agreement and Guidance Notes



ACCEPTABLE%20BEH
AVIOUR%20AGREEM



Acceptable%20Behav
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Template Good Behaviour guidance agreement

[appendix-2-template-good-behaviour-guidance-agreement.docx \(live.com\)](#)

NHS ICB in Leeds, Primary Care Team

Email: wycb-leeds.primarycare@nhs.net

Special Allocation Scheme Provider

Email: leedsbradford.safehaven@nhs.net

Telephone: 01274 751 950

Telephone opening hours: 10am-6pm Monday to Friday