

**IMMEDIATE REMOVAL PRIOR APPROVAL APPLICATION**

Further to the recent publication of the updated NHSE/I Guidance and Policy Manual in relation to Managing (non violent) inappropriate and unacceptable behaviours, including protecting against discrimination, harassment or victimisation and to assist with the increase in the immediate referrals process, practices are required to seek prior approval before submitting an immediate referral request to PCSE.

This will help to reduce the delay in any requests that do not meet the Immediate Removal criteria being refused by the Special Allocation Scheme provider.

Please submit to the ddicb.sasappeals@nhs.net

Do not include any patient identifiable information at this stage.

Please provide details on the reason for the immediate removal request.

Practice Code: …………………………………………………

Practice Name: ……………………………………………………………………………………………………….

Date and Time of Incident: ……………………………………………………………………………………………………………….

Location of Incident: …………………………………………………………………………………………………………………………

Police Incident Reference Number: ………………………………………………………………………………………………..

Reason for removal:

|  |
| --- |
| Non Physical Violence ie threats of violence / Physical Violence ie Assault, thrown objects or Aggravated Physical Violence eg use of weapons – see select the type of incident and provide full details of the incident in the box below |
|  |
| Vandalism to Premises / Vandalism to Vehicle – see select the type of incident and provide full details of the vandalism that occurred in the box below |
|  |

|  |
| --- |
| Details of previous warnings given to the patient ie dates of warning issued |
|  |

|  |  |
| --- | --- |
| Has the patient previously been given a Behaviour Contract | Yes / No |

Contact Name: …………………………………………………………………………………………………………..

Contact Email Address: ……………………………………………………………………………………………….

**FOR COMPLETION BY DERBY AND DERBYSHIRE ICB – SPECIAL ALLOCATION SCHEME TEAM:**

Approved/Rejected ………………………………………………………………………………….

Date: ………………………………………………………………………………………………………..