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ISSUED BY: Executive Committee **REVISED:** 2010-Aug; 2011-Jul; 2012-Aug; 2013-Aug; 2014-Oct; 2015-Oct; 2016-Nov; 2018-Feb; 2019-Jan; 2019-July; 2019-Sept
OWNER: Occupational Health and Safety Department

Guidelines

The mission and values of Grey Bruce Health Services' Code of Conduct Program set a standard of respect for our employees and affiliates. Our employees have expressed a will to reaffirm these values and behaviours explicitly through our actions and conduct on an annual basis. There is no place for aggression or violence in our work environment. Grey Bruce Health Services considers the safety of our staff, physicians, volunteers, students, patients and visitors paramount.

The purpose of our Violence Prevention Program is to:

- Promote a work environment whereby every individual feels free from any kind of threatening or abusive behaviour.
- Link and add support to our Code of Conduct Program and enhance the standard of respectful behaviour as articulated in our corporate values.
- Create practical links to already existing policies and procedures.
- Complete a violence risk assessment of our hospitals at least annually, in collaboration with our Occupational Health & Safety committees. A following action plan will be developed based on these assessments.
- Ask employees questions related to their personal safety at work, in the employee satisfaction surveys completed every 2 years.

Policies That Support the Violence Prevention Program

POLICY NAME	POLICY MANUAL
Patient Alert Code	Administration
Trespassing	Administration
GBHS Security Program	Administration
Patient Visitor Searches	Administration
Management of Abusive Patient Visitor Behaviour	Administration
Code of Conduct	Administration
Adverse Event Reporting	Administration
Corporate Code White Policy	Contingency
Code Purple – Hostage Taking Situation	Contingency
Code Silver- Active Shooter	Contingency
Employee Assistance Program (EAP)	Human Resources
Work Refusal	Occupational Health and Safety
Isolated Worker	Occupational Health and Safety
Department Inspections	Occupational Health and Safety
Hazard Reporting by Employees	Occupational Health and Safety
Employee Health & Safety in the Client Home Environment	Occupational Health and Safety
Panic Alarms	Occupational Health and Safety
Video Surveillance	Administration

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Definitions

Workplace Violence

- The exercise of physical force by a person against a worker in a workplace that causes or could cause physical injury to a worker; and/or
- An attempt to exercise physical force against a worker in a workplace that could cause physical injury to the worker; and/or
- A statement or behaviour that it is reasonable for a worker to interpret as a threat to exercise physical force against the worker, in a workplace, that could cause physical injury to a worker.

Workplace Harassment means:

Engaging in a course of vexatious comment or conduct against a worker in a workplace that is known or ought reasonably to be known to be unwelcome or workplace sexual harassment.

Workplace sexual harassment means:

Engaging in a course of vexatious comment or conduct against a worker in a workplace because of sex, sexual orientation, gender identity or gender expression, where the course of comment or conduct is known or ought reasonably to be known to be unwelcome, or making a sexual solicitation or advance where the person making the solicitation or advance is in a position to confer, grant or deny a benefit or advancement to the worker and the person knows or ought reasonably to know that the solicitation or advance is unwelcome.

Domestic Violence:

Is a pattern of behaviour used by one person to gain power and control over another which whom he/she has or has had a relationship. This pattern of behaviour may include physical violence, sexual, emotional and psychological intimidation, verbal abuse, stalking and using electronic devices to harass and control.

Domestic violence becomes workplace violence when it enters the workplace.

Hostile Work Environment:

Any intentional non-physical action that can be considered intimidating, or harassing with the intent of creating an environment that has the purpose or effect of unreasonably interfering with an individual's performance or where behaviours create a hostile or threatening environment.

Safety Plan Framework:

GBHS has a safety plan framework which identifies 6 main categories related to maintaining a safe workplace with respect to violence (Fig. 1):

1. **Environment:** *Consideration of the landscape, structure and spaces of GBHS with respect to violence risk. This includes factors such as controlled access, lines of sight, camera surveillance.*
2. **Assessments:** *Violence risk assessments are performed at least annually in each department, and more often as necessary. Individual violence risk assessments may be performed and safety plans arranged after identification of a specific hazards or concern (ex. domestic breakdown with*

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criminal charges that may present workplace risk). Assessment of violence risk is encouraged at department huddles. Patient risk of violence is assessed and identified (flagging).

3. **Training:** Violence Prevention training is provided annually to all staff. Specific training is available to staff depending on type, location of work and specific needs (ex. Crisis Prevention Intervention Training, P.I.E.C.E.S. and Gentle Persuasion Approaches in dementia care, and debriefs).
4. **Redesign:** Reorganization of processes and/or construction of areas to reduce risk of violence. Examples include updates to in-patient psychiatry, development of locked observation rooms in emergency departments.
5. **Constant Observation:** Appropriate use of constant monitoring of patients when required to reduce risk of harm to self or others. May involve restraint usage.
6. **Security Resources:** Access to security resources at all sites to monitor violent patients, perform searches and provide a visible presence as preventative measures of violence prevention.



Figure 1: Safety Plan Framework

Indicators of the Violence Prevention Programs:

The following indicators will be reported quarterly to the Chief Human Resources Officer, as well as the Occupational Health & Safety Committees:

- Number of monthly violent incidents reported through employee incidents, with severity of incidents being recorded, reported to the Occupational Health & Safety committee.
- Number of Code White situations reported quarterly to the Code White committee.
- Number of Code of Conduct infractions reported to the Human Resource department.
- Number of violent incidents is reported as a Quality Improvement Plan indicator



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The number of lost time claims due to violence will be reported to the Ministry of Health and Long Term Care.

Responsibilities:

Employer:

- Ensure that measures and procedures identified in the Violence Prevention Program are carried out and that management is accountable for responding to and resolving complaints of violence.
- Ensure compliance by all persons who have a relationship with the organization, such as physicians, contractors, volunteers etc.
- Conduct regular risk assessments, in consultation with the Occupational Health & Safety committee.
- Establish control measures, in consultation with the Occupational Health & Safety committee.
- Establish and deliver training and education for all employees, in consultation with the Occupational Health & Safety committee.
- Integrate safe behaviour into day to day operations.
- Review all reports of violence or threats of violence in a prompt, objective and sensitive manner.

Human Resources and Occupational Health & Safety

- Champion the development and implementation of the Violence Prevention Program
- Lead employee related Code of Conduct and/or violence investigations.
- Review the Violence Prevention Program annually with all parties identified here.
- Make recommendations to the employer to develop, establish and provide training in violence prevention measures and procedures

Managers/Supervisors:

- Enforce policy and procedures and monitor worker compliance.
- Ensure monthly testing of alarm buzzers in their departments.
- Identify and alert staff to violent patients and hazardous situations.
- Investigate all workplace violence and contact the police department as required.
- Participate in investigations as required.
- Ensure that debriefing is offered for those either directly or indirectly involved in a violent situation.
- Track and analyze incidents for trending and prevention initiatives.
- Ensure there is a review at least annually of the workplace violence prevention program.
- Review at least annually the department-specific violence risk assessment.

Employees:

- Report all incidents or injuries of violence or threats of violence to their supervisor immediately and through the electronic incident reporting system.
- Participate in education and training programs to be able to respond appropriately to any incident of workplace violence.

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- Understand and comply with the Violence Prevention Program and all related procedures.
- Employees must complete an annual attestation indicating if they have had any criminal charge(s) and/or conviction(s) since the pre-hire criminal background check. There is an immediate mandatory reporting obligation of the employee to report to their Manager and Human Resources regarding any criminal charge(s) and/or conviction(s) that has occurred post hire. Participation in assessment of violence risk and/or safety plan development is expected for those instances that may require these measures to ensure safety of workers and others in the work environment.
- Participate in investigations as required.

Occupational Health and Safety Committee

- Be consulted with the development, establishment and implementation of the Violence Prevention Program.
- Be consulted and make recommendations to the employer to develop, establish and provide training in violence prevention measures and procedures.
- Take part in a review at least annually of the Violence Prevention Program.
- Participate in investigations as required.

Clients/Patients/Public

- Mutual respect & cooperation are essential in the delivery of quality health care.

Education and Training

General Orientation:

The Violence Prevention Program is discussed with new employees. All new employees are given, as part of their orientation package, information on domestic violence (Neighbours, Friends & Families brochures), as well as a brochure on the Violence Prevention Program.

Supervisor Health & Safety Training: All supervisors complete this training, which includes a module on GBHS's violence prevention program.



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Department Specific Orientation:

Personal safety issues and procedures will be reviewed at the departmental specific orientation with new employees. Alarm buzzer locations are identified to new employees.

Leadership Training:

Managers at GBHS have also attended Performance Development Training as well as additional in-services with respect to early recognition of conflict and conflict resolution skills. 'Crucial Conversations' is a component of GBHS competency training. This training provides the skills to remain engaged in



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conversations when emotions are strong, opposing opinions are present and the stakes are high. When effectively applied, the skills will enable the conversation to continue in a respectful and constructive manner.

Dementia Training:

This training teaches staff to recognize escalating patient aggression and appropriate interventions which would diffuse the situation. We have staff trained as qualified Trainers of the Gentle Persuasive Approach (GPA). All staff on our Psychogeriatric Unit has been trained in GPA. As well, each staff member receives an initial 12 hours of Non-Violent Crisis Intervention (CPI) training upon joining the psychogeriatric unit (if they have not acquired it on another Unit) and an annual 4 hours of recertification. GPA is also offered to any employee in the corporation through Organizational Development.

Non-Violent Crisis Intervention Training:

The Code White team, as well as the Mental Health staff in Owen Sound receives CPI Training, which includes personal safety techniques as well as safe, non-harmful physical restraint and control techniques (10 hour initial program).

At the rural hospitals (including Withdrawal Management), the clinical staff and the staff who respond to Code Whites receive Non-Violent Crisis Intervention Personal Protection training. This training consists of 6 hours of training, which focuses on early recognition of crisis situations, the potential for crisis situations and appropriate staff intervention and de-escalation techniques.

Supportive Policies/Programs/Information

Grey Bruce Health Services has established the following policies, programs and procedures to articulate its support of a respectful, non-violent environment:

Patient Bill of Rights and Responsibilities:

This document provides our patients and their families with a set of statements that they can expect from Grey Bruce Health Services employees. In turn, it also articulates those behaviours that we believe we have the right to expect from them as they interact with us in the provision of their healthcare. These are posted on our internet, in our handbook and in high traffic areas throughout the organization.

Security Program:

The policy describes those initiatives that we have taken to reduce risk within our environment. Security Worker staff and those with security responsibilities provide a variety of services focused on safeguarding and improving the physical security of patients, staff and visitors while protecting the rights of individuals and observing all applicable laws.

On-site security is available at the Owen Sound site, and community security firms are available upon request at the rural sites and Withdrawal Management. Security requests can be submitted via a Security Request Form on the DMS.

Domestic Violence:



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When the manager or co-workers are aware that domestic violence may occur in the workplace, every reasonable precaution in the circumstances is implemented to protect the employee at risk of physical injury. Each situation is dealt with individually, depending on the circumstances. The safety plan for the employee is documented by the employee's manager.

Work Refusal Policy:

The right to refuse is limited in certain situations. It does not apply:

- When a circumstance is inherent in the worker's work or is a normal condition of employment.
- The work refusal would directly endanger the life, health or safety of another person.

Employee Health & Safety in the Client's Home Environment Policy:

All Mental Health workers entering client homes will be required to complete the following:

- a) Code White training certificate and annual refresher thereafter
- b) WHMIS annual certificate
- c) Up-to-date immunization
- d) CPR training annually
- e) Assessment of Unsafe Conditions in the Home and Travel Safety Checklist

Process Alert Code Policy:

An Alert Code 2 designation on the patient's electronic record identifies those patients who have a history of violent behaviour. Staff need to constantly assess patients with this designation for increased levels of anxiety or agitation and use a team approach to ensure an environment that is safe for the individual, staff, and others.

Staff may place an immediate **temporary alert 2** on a patients' electronic record (alert code orderable via PowerOrder) which will appear on the current patient encounter). The temporary alert code will trigger an interdisciplinary team to determine if a **permanent alert code 2** is warranted (which would stay on the electronic record).

An Alert Code 5 designation identifies a person who has been the recipient of a "No Trespassing Letter". They have the right to be provided with medical care and to support a dependent family member in the receipt of care, but may not enter the premises for other reasons.

As well the Patient Alert Codes are transferred onto white boards in a number of locations in the corporation (ie Emergency depts.) to further support communication of this concern with the ancillary staff.

Notification to Ancillary Staff of Violent Patients:

When the nursing staff is aware of a violent patient, signage will be placed on the patient's room door. The signage will advise the other staff to "check in with nursing staff before entering patient room."

Code of Conduct Policy/Handbook:

There is a process to ensure that all people are treated with respect and dignity. In carrying out the responsibilities of their work, care and service providers are required to treat all contacts with courtesy



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and respect at all times. Contacts include patients/clients, visitors, employees (subordinates, peers and supervisors), medical staff, volunteers, students, and the public. GBHS will not tolerate misconduct/or harassment from or between all persons with employment, volunteer, or business relations at GBHS.

In alignment with the OHSA's Bill 132, workplace harassment, including workplace sexual harassment will not be tolerated in the workplace. The employer will conduct an appropriate investigation and ensure identifying information about any involved individuals will not be disclosed unless necessary for investigating, taking corrective action or by law. The worker who has allegedly experienced workplace harassment will be informed of the results of the investigation and of corrective action that has been or will be taken.

Corporate Values and Competencies – (CARE and LEAD):

Our values are expressed in our strategic plan promoting a respectful and team oriented workplace. Our competencies are CARE – Collaboration, Accountability, Respect, Excellence and LEAD – Lead by Example, Empower, Achieve Results and Develop Others. These competencies are linked to job qualifications and performance reviews.

Employee and Family Assistance Program:

An Employee and Family Assistance program (EAP) is available to all employees, physicians and their immediate families through the provision of professional and confidential counseling, coaching and information services.

Trespassing Policy:

Individuals who have compromised the safety of the environment for staff, patients, and visitors and who have no legitimate reason for being on the premises will be refused entry through the issuance of a "Notice Prohibiting Entry" for purposes other than medical treatment.

Patient/Visitor Searches:

Gives employees guidelines for searching a patient and/or their belongings.

Dealing with Abusive or Violent Behaviours by Patients of GBHS:

Gives direction to employees when dealing with patients who demonstrate abusive or violent behaviours.

Design/Furniture Arrangement of Offices:

Employees who are moving into a new office or would like a consultation of how to arrange office furniture to ensure personal safety should contact Human Resources or the Occupational Health and Safety Department.

Panic Alarms:

Are available in areas to reduce & prevent risks involved with employees working alone or are isolated.

Contingency Codes:

Code White- verbally or physically acting out situations



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Code Purple-hostage taking situations
Code Silver-active shooter situations

Incident Reporting:

Incident Reporting System:

Instances of violence must be reported immediately. Reports can be made in person, through the electronic incident reporting system or by telephone to their manager/supervisor. When reports are brought forward it is imperative that all parties involved maintain confidentiality in an attempt to protect the privacy of all individuals. However, confidentiality may be compromised in cases where it is perceived that imminent danger exists or in cases where it is required by law.

Code of Conduct Policy / Handbook- if you witness, or are subject to an act of misconduct, harassment, including sexual harassment, there is a complaint procedure to follow within the Code of Conduct Policy. The complainant bears no responsibility for any decision regarding corrective action. The action taken is the sole responsibility of the hospital. The procedure is outlined in the policy.

Hazard Reporting by Employees:

Identifies and addresses any hazards in a timely manner that are identified by employees.

Department Inspection Policy:

Identifies any health and safety concerns of the employees. Ensures that the alarm buzzers in the departments are tested on a monthly basis.

Hospital Committees that discuss Violent Situations Occurring at GBHS

- **Occupational Health & Safety committees** – monthly violent incidents are shared with the Occupational Health & Safety committees and discussion takes place regarding these incidents at Occupational Health & Safety Committee meetings.
- **Grey & Bruce Hospitals & Police Services** – meets twice annually to discuss joint issues and ensure health communication between organizations. The hospitals receive an annual report on community crime patterns, so that it can respond accordingly.
- **Code White Committee** - meets quarterly to direct and monitor the Code White activities and ensure a qualified Code White response.
- **Contingency Planning Committee** – oversees the Code White, Code Silver and Code Purple contingency plans, amongst others.



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Source References

OHSA Sec 25(2)(h), 32, 55.1

PSHSA-Safe Workplace Partnership

Neighbours, Friends & Families Program

GHBS Patient Rights & Responsibilities

Bill 132 amendments to the OHSA