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**Violence Prevention in the Workplace**

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**1.0 Introduction**

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**1.1 Description**

Providence Health Care is committed to the prevention of workplace violence and to take all reasonable steps to ensure persons on Providence Health Care property are safe from acts of workplace violence while at PHC sites or during work-related activities.

**1.2 Scope**

This policy applies to all sites and facilities within Providence Health Care; all persons present on any PHC worksite.

**2.0 Policy**

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All persons associated with PHC are expected to conduct themselves in a civil, respectful, cooperative and non-discriminatory manner. Any threat or act of violence against persons on PHC property or against Staff in the course of their duties is unacceptable and measures will be taken to hold people accountable for these actions up to and including contacting police to press charges.

**2.1 Procedures**

All employees will wear PHC approved identification while on any PHC site and while conducting PHC business except in circumstances when wearing identification could increase the risk of harm to a person (e.g. ID tags should not be worn into a Quiet Room; a situation in which an individual's identity needs to be concealed due to safety concerns).

Patients with a history of violence should have an alert/visual identifier (e.g. purple dot, purple violence symbol, electronic alert). Any risk should be communicated widely and include information regarding underlying causes for the behaviour and mitigation/control strategies.

All incidents of violence will be reported. All Staff will report incidents that pose a risk to their personal safety by contacting the Workplace Health Call Centre. The Occupational Health and Safety Department will be informed of all reported incidents via email from the call centre.

All incidents of violence should be investigated. Any incident resulting in injury requiring medical treatment, time loss or any incident with the potential to cause serious injury must be investigated as outlined in the *Workplace Incident Investigation Policy and Procedure* (in process).

Any workplace where a risk of violence may arise is required by the Workers' Compensation Act, Occupational Health and Safety Regulation to have a violence risk assessment. The purpose of a violence risk assessment is to determine what factors in the workplace have the potential to place a worker at risk of injury due to violence. Violence risk assessments must be conducted by Supervisors/Leaders in conjunction with a worker and a Joint Occupational Health and Safety member and with support from Violence Prevention. If risks are identified, the Supervisor/Leader must implement policies, procedures and work arrangements to eliminate or minimize the risk to staff.

If any employee of PHC is made aware of any threat to the workplace, she\he shall notify Security immediately and contact Police (911) as necessary. Staff who receive a personal threat are encouraged to report the threat to Security and to consider if Police involvement is warranted.

Verbal violence related to an emotional crisis should be managed using verbal and non-verbal de-escalation strategies to defuse the situation.

All Staff must be aware of and follow the Code White procedure for their facility. In the event of a behavioural emergency, or in instances where the situation is escalating beyond the abilities of the staff present to manage safely, a Code White must be called. Any physical intervention used by trained Code White Responders for physically violent behaviour is non-punitive, is the least restrictive possible and is a last resort to safely controlling a physically acting out person until he/she re-gains control.

Any PHC employee who becomes aware of a person or persons in the possession of a weapon, or in the event of imminent danger will remove themselves and others (as possible) from danger and contact Security (where available) and/or Police (911) from a safe location. Staff are not required to continue to provide treatment under circumstances that present a danger or the perception of danger to themselves or others and should follow procedures outlined in the *PHC Weapons in the Workplace Policy*.

All employees are advised that all reports of staff possession of a weapon while on PHC property, regardless of intent of use, will be taken seriously and fully investigated.

Employees have the right to refuse unsafe work. Work refusal is a serious issue and is not a routine way of solving workplace concerns. If an employee has reasonable cause to believe a work process would create an undue hazard to the health and safety of any person, the employee must follow the process outlined in the *PHC Right to Refuse Unsafe Work Policy*. Any refusal of work must also be made in the context of professional practice standards, codes of conduct and ethics.

Every reasonable effort will be made to limit the occurrences of PHC staff working alone or in isolation. When this is not operationally possible, PHC is committed to doing a risk assessment and having procedures in place to secure the safety of all PHC staff in order to prevent incidents and to check the well-being of those who are required to work alone or in isolation as described in the *PHC Working Alone or in Isolation Policy*.

PHC is committed to making every effort to provide non-judgmental support and assistance to employees who are victim-survivors of domestic violence and also to offering assistance to

employees who are perpetrators of domestic violence. PHC will not tolerate behaviour that constitutes workplace domestic violence and employees found to have violated the *Domestic Violence Policy for Staff* will be subject to employment related consequences.

## 2.2 Roles and Responsibilities

### Senior Leadership Team

- Support and promote PHC's commitment to the prevention of violent behaviour and the PHC Violence Prevention Program
- Establish specific responsibility for the implementation and maintenance of the Violence Prevention Program
- Ensure all levels of leadership are accountable for occupational health and safety performance in their area of responsibility

### Supervisors/Leaders

- Support and promote PHC's commitment to violence prevention.
- Inform employees of the nature and extent of the risk(s) from violence in their workplace and act to remedy any hazard related to violence in the workplace.
- Inform all employees of the need to report workplace violence incidents
- Provide appropriate violence prevention instruction and training necessary to ensure the health and safety of workers to all staff.
- Ensure appropriate policies and procedures are established to eliminate or minimize violence.
- Monitor and ensure compliance with safe work practices with respect to the prevention of violence in the workplace program.
- Investigate reported incidents of violence in conjunction with Joint Occupational Health and Safety Committee members or worker representatives if no JOHSC exists.
- Ensure an up to date violence risk assessment has been completed, reviewed and recommendations have been implemented and evaluated as required by Worker's Compensation Act regulations.
- Ensure Staff receive training and education consistent with the recommendations of the risk assessment and incident investigations.
- Communicate staff incidents involving the police to the Manager of Safety, Occupational Health and Safety and Director, Risk Management and Patient Safety.
- Do a check-in with staff involved in a violent incident and ensure support and resources are offered as soon as possible.
- In the event a staff person wishes to involve the police following an incident of violence, assist by:
  1. Supporting the worker's right to file criminal charges
  2. If requested, contacting the law enforcement authority having jurisdiction and assist in scheduling an interview
  3. Notifying the Leader, Patient Relations and Director, Risk Management and Patient Safety and the Program Director or Leader of the unit, department or site
  4. Advising all employees of the support systems available to them (EFAP)

5. Maintaining contact with staff involved for the duration of the legal proceedings to ensure they receive all necessary support.

### **Employees**

- Report all incidents of violence or threats of violence, in which their personal health or safety was at risk or where an injury occurred in the course of their job duties. Students should inform their clinical instructor and preceptor. Other persons should report to their supervisor and as required by their work site.
- Take reasonable care to protect their health and safety and the safety of others in the work site.
- Follow safe work procedures and safety requirements as outlined in PHC policies and procedures.
- Use or wear any required personal protective equipment, devices or clothing.
- Cooperate with the site Joint Occupational Health and Safety Committee.

### **Joint Occupational Health and Safety Committees**

- Monitor the violence in the workplace program through review of statistical information relative to workplace risk assessment, training records and incident reports.
- Participate in annual program review.
- Participate as required in workplace inspections and investigations of incidents involving violence in the workplace.

### **Occupational Health and Safety**

- Coordinate and advise with the performance of risk assessment through analysis of patient/resident and employee incidents, site and employee surveys.
- Assist with the development of new or revised work procedures specific to the violence in the workplace program to ensure compliance with Worker's Compensation Act regulatory requirements.
- Evaluate the effectiveness of the Workplace Violence Prevention program in consultation with the various Joint Occupational Health and Safety Committees. Based on this evaluation make recommendations to Leaders.
- Provide expertise and assistance as required with workplace violence incident investigations and the development of violence prevention policies and procedures.
- Provide education and training in the prevention and management of violence.

## **2.3 Compliance**

On-going behavioural situations should be reported and discussed with the unit/department Leader/Supervisor and where appropriate, the health care team.

- a. Patients, residents, clients capable of understanding the consequences of their actions – PHC will use a progressive, problem-solving approach which, if other options are not successful, may include imposing restrictions up to and including discharge from the PHC program or service, if determined to be appropriate in the circumstances. This action will be carried out in collaboration with the health care team, representatives of the Ethics

Committee and members of the Senior Leadership Team including Risk Management and Patient Relations.

- b. Patients, residents and clients not capable of understanding the consequences of their actions will be assessed by the health care team and management strategies implemented and evaluated on an on-going basis. Where necessary, referral to facilities/programs that can provide appropriate control measures to address ongoing behavioural concerns will be made.
- c. Family Members/Visitors – a progressive, problem-solving process will be followed including the involvement of members of the Senior Leadership Team, Risk Management and Patient Relations.
- d. Staff – PHC has policies related to Workplace Conduct. Any employee subject to any form of violence from another employee should follow the procedures outlined in the *PHC Respect at Work Policy*.

### 3.0 References

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#### 3.1 Related Guidelines, Tools, and Forms

- Provincial Violence Prevention Curriculum, 2011
- WorkSafeBC Occupational Health and Safety Regulation (OHSR) Part 3, Division 3, Sections 115 - 117; Part 4: 4.24 – 4.26 (Workplace Conduct) and 4.27 – 4.31 (Violence in the Workplace)
- Occupational Health and Safety Association for Healthcare in BC - Preventing Violent and Aggressive Behaviour, 2005
- NCS6311 Managing Unsettled /Challenging Behaviour Least Restrain Approach /PHC Non Residential Site
- PHC Workplace Incident Investigations Policy and Procedure
- PHC Weapons in the Workplace
- PHC Emergency Response: Code White
- PHC Domestic Violence Policy for Staff
- PHC Managing Unsettled/Challenging Behaviours: Least Restraint Approach revised 2012

#### 3.2 Related Policies

- [CPL1700](#) Respect at Work Policy
- [CPT2800](#) Right to Refuse Unsafe Work
- [CPT1900](#) Working Alone or in Isolation

#### 3.3 Definitions

**Behavioural Emergency:** an acute situation where there is imminent danger of serious harm or death to self or others.

**Emotional Crisis:** a process during which a person's coping skills and abilities are significantly challenged by a combination of internal and external events

**Health Care Team:** clinical staff responsible for the care of the patient/resident/client

**Person(s):** includes all employees (excluded and unionized), students, medical staff, researchers, physicians, medical residents, fellows, volunteers, executives, contractors, and suppliers, employees of academic institutions, visitors, clients, patients, residents and families.

**Staff** means all employees (including management and leadership), Medical Staff Members (including physicians, midwives, dentists and Nurse Practitioners), residents, fellows and trainees, health care professionals, students, volunteers, contractors and other service providers.

### Typology of Workplace Violence Incidents

**Type 1 Criminal Intent** – Incidents committed by a perpetrator who has no relationship to the workplace and becomes violent towards a worker (OHSR 4.27 – 4.31)

**Type 2 Customer (Patient/Resident/Client/Family/Visitor)** – Incidents committed by an aggressor who has a relationship with the workplace as a patient, resident, client, family member or friend and becomes violent towards a worker (OHSR 4.27 – 4.31)

**Type 3 Worker to Worker** – Incidents in which a current or former employee acts in a violent manner towards another employee (OHSR 4.24 – 4.26)

**Type 4 Personal Relationship (Domestic Violence)** – Incidents that occur in the context of a personal or intimate relationship between the aggressor and the target (OHSR 4.27 – 4.31)

**Verbal and non-verbal de-escalation skills:** intervention skills used to de-escalate or defuse an emotional crisis. Skills include awareness of body language, personal space and stance, validation and active listening.

**Workplace Health Call Centre:** provincial call centre established for staff to report all workplace incidents including incidents of violence or “near misses” in which their personal health or safety was at risk or where an injury occurred in the course of their job duties.

**Workplace Violence:** includes any act in which a person is abused, threatened, intimidated or assaulted in his or her employment and includes any threatening statement or behaviour which gives a worker reasonable cause to believe he or she is at risk of injury. The term violence includes violence that is intentional and violence that is unintentional due to illness, injury or cognitive impairment (sometimes referred to as aggression).

### 3.4 Keywords

Violence; Threat; Incident; Workplace Safety