



AV2500 – VIOLENCE PREVENTION PROGRAM

Interior Health would like to recognize and acknowledge the traditional, ancestral, and unceded territories of the Dākelh Dené, Ktunaxa, Nlaka'pamux, Secwépemc, St'át'imc, Syilx, and Tŝilhqot'in Nations, where we live, learn, collaborate and work together.

Interior Health recognizes that diversity in the workplace shapes values, attitudes, expectations, perception of self and others and in turn impacts behaviours in the workplace. The dimensions of a diverse workplace include the protected characteristics under the human rights code of: race, colour, ancestry, place of origin, political belief, religion, marital status, family status, physical disability, mental disability, sex, sexual orientation, gender identity or expression, age, criminal or summary conviction unrelated to employment.

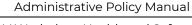
1.0 PURPOSE

To provide a safe environment for Workers, Clients, and the public; to ensure compliance with the WorkSafeBC (WSBC) Workers Compensation Act (WCA) and Occupational Health and Safety Regulation (OHSR) in relation to Violence prevention; and to ensure risk of Violence to Workers at all Interior Health (IH) workplaces is eliminated and, where elimination is not possible, mitigated.

2.0 **DEFINITIONS**

TERM	DEFINITION
Client	Any person in care or visiting IH facilities or programs.
Code Silver Response	A planned response when an individual or individuals are actively engaged in seriously harming, killing, or attempting to kill others with weapon(s), regardless of the type of weapon, and an enhanced police response is required.
Code White Response	An organized response to deal with a person's unresolved threatening, potentially violent behaviour; the level of response will vary depending on the situation. The purpose is to manage a potentially harmful situation in a safe manner.
Contractor	A person or company that undertakes a contract to provide materials or labour to perform a service or do a job.
Employee	A person currently employed by IH in a full-time, part-time and/or term-specific position.
Joint Occupational Health & Safety Committee (JOHSC)	An advisory group consisting of employer and Worker representatives working together to improve occupational health and safety in their Workplace. WorkSafeBC requires a JOHSC in Workplaces with 20 or more Employees. ⁵

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Point of Care Risk	Used to ensure that it is safe for a Worker to start or
Assessment	continue a task or interaction.
Violence	Incidents where persons are abused, threatened, or assaulted, either physically or psychologically in circumstances related to their work, involving a direct or indirect challenge to their safety, well-being, or health. The term Violence includes verbal and physical Violence, and covers both types of Violence that occur in healthcare: • Violence that is intentional • Violence that is not intentional due to a medical condition, often called aggression ³
Visitor	Any person visiting an Interior Health (IH) Workplace who is not a Worker or a Client.
Worker	A person employed by IH or a person under the day-to-day control of IH, whether paid or unpaid and includes staff; supervisors; managers; leaders; contractors; subcontractors; medical staff; service providers; volunteers; students or other parties actively engaged in undertaking activities for IH's benefit.
Worker Health and Safety Representative	Workplaces with more than nine (9) but fewer than 20 Employees are required to have a Worker Health and Safety Representative in place of a JOHSC. ⁵
Workplace	Refers to all IH owned or operated facilities/sites, as well as any off-site work as directed by the employer, and synonymous with the term 'Workplace' as defined by British Columbia's Worker's Compensation Act, Part 2: "Any place where a Worker is or is likely to be engaged in any work and includes any vessel, vehicle or mobile equipment used by a Worker in work."

3.0 POLICY

- 3.1 Violence Prevention Program (VPP) Overview
 - IH will develop, implement, monitor and evaluate initiatives through the establishment and maintenance of a VPP, as part of the IH Occupational Health and Safety (OHS) Program.
 - As outlined in <u>WSBC Occupational Health and Safety (OHS) Policy Item</u> <u>R4.29-2 (Workplace Violence Prevention Program)</u>, the IH VPP consists of the following elements:
 - Violence Risk Assessment
 - o Policies, Procedures, and Work Arrangements/Systems
 - Worker and Supervisor Training
 - o Incident Reporting and Investigation

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- Incident Follow-up
- o Program Review
- When a risk of Violence cannot be eliminated, any planned interventions/responses used will prioritize the health and safety of Workers to minimize their risk to the lowest extent practicable.

3.2 Supporting References

- The VPP applies to any instance where a person may be at risk of Violence in their employment.
- For situations involving Worker to Worker violent behaviour, additional requirements are outlined in the IH Workplace Environment Policy (<u>AU1000</u>).
- For situations involving targeted Violence, additional requirements are outlined in the Threat Management Policy (AV2510).
- For situations involving an active deadly threat, additional requirements are outlined in the Active Deadly Threat Response Policy (<u>AV2520</u>) and <u>iLearn Code Silver – Active Attacker training</u>. For situations involving aggressive or violent Clients, additional requirements are outlined in the IH Managing Disrespectful, Aggressive or Violent Behaviours of Clients Policy (<u>AV2900</u>).
- For situations that could have an effect on the psychological health of Employees additional information can be found in the Psychological Health and Safety in the Workplace Policy (<u>AV3000</u>).

4.0 PROCEDURES

- 4.1 Roles and Responsibilities
 - 4.1.1 Senior Administration (Senior Executive Team, Executive Directors, Directors)
 - Ensure the provision of a VPP including practice standards and procedures for preventing or managing violent behaviours.
 - Ensure that Workers are aware of VPP requirements.
 - Monitor implementation of and ensure compliance with the established Violence prevention policies, procedures, and program elements within IH.
 - Support implementation and sustainability of VPP initiatives, which includes designating responsibility and directing human and fiscal resources as required, to meet legislated requirements.

4.1.2 Managers/Supervisors

- Verify that site-specific VPP initiatives are implemented in areas of responsibility in consultation with site JOHSC or Worker Representative.
- Establish a consultation process with Employees and their representatives at the site JOHSC when developing or reviewing site or department specific VPP procedures.

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- Verify that identified risks of Violence and control methods are clearly communicated and understood by all Employees that may encounter Violence in the course of their work.
- Verify Workplace specific VPP procedures are developed and communicated to Employees, and that Employees understand the requirements (e.g., working alone or in isolation, Code White Response procedures, Code Silver Response procedures, etc.).
- Verify that a <u>Violence Risk Assessment</u> (VRA) is completed for the site or department. Also ensure the worksite VPP is reviewed annually at a minimum, including completion of a <u>VRA annual</u> <u>review</u>.
- Threats are addressed and controls enacted as determined by the investigation, in accordance with Threat Management Policy <u>AV2510</u>.
- Attend required <u>Violence Prevention training and education</u>.
- Verify Employees attend required VPP training and education.
- Verify Employees within area(s) of responsibility are familiar and comply with VPP procedures including, at a minimum, annual Code White drills as set out in the <u>Code White Response Plan</u> Procedural Guideline.
- Coordinate, conduct, or delegate Code White drills to ensure they are completed at least annually.
- Verify incidents of Violence (including attempted or actual threatening behaviours, abuse, physical force, harassment, and intimidation) are reported using the Provincial <u>Workplace Health</u> <u>Contact Centre</u> (1-866-922-9464).
- Ensure incidents of Violence are investigated using the <u>Web Incident Investigation Tool (IIT)</u>; corrective measures must be implemented without undue delay and communicated to all Employees as necessary.
- Verify Employees are aware of resources available to them after violent incidents and are advised to seek support from a physician. Additional resources may include but are not limited to <u>Crisis</u> <u>Support – Service Providers for Individuals</u>
- Verify Employees are aware of their <u>right to refuse unsafe work</u> if they do not have the information, training or resources to minimize risk of Violence.
- Offer and arrange/provide critical incident stress defusing and debriefing to Employees who have been witness or subject to a Workplace violent incident.

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4.1.3 Workers

- Act in a manner that fully respects the rights of others and contributes to de-escalating behaviours.
- Use <u>Point of Care Risk Assessment</u> to identify hazards and mitigate risks.
- Participate and comply with VPP initiatives, policies, procedures, and protocols. See **related policies and tools**.
- Attend prescribed VPP education and training programs as directed.
- Report any identified risks to managers/supervisors.
- Participate in the development of site/department specific action plans to minimize or eliminate the risk in their Workplace(s).
- Follow procedures for reporting and documenting violent incidents per <u>AV1100 – Employee Incident Reporting and</u> Investigation.
- 4.1.4 Joint Occupational Health & Safety Committee (JOHSC) and Worker Health and Safety Representatives
 - Consult with management and front-line staff in the development of site/department specific policies, procedures, and/or work arrangements.
 - Promote site-specific implementation of the VPP, including communication to front-line Employees.
 - Participate as indicated in risk assessments, incident investigations, and program reviews and make recommendations as required.
- 4.1.5 Workplace Health and Safety (WHS)
 - Provide a framework, tools, resources, and guidelines for the VPP in collaboration with the Regional Violence Prevention Advisory Committee (RVPAC).
 - Evaluate VPP annually in collaboration with stakeholders and provide updates and recommendations to the organization.
 - Provide statistical information on incidents of Violence as requested.
 - Consult and guide on assigned components of the VPP to achieve compliance with the standards set out in legislated requirements and policy.

4.1.6 Contractors

- Comply with all aspects of the organization's VPP in addition to any safety program requirements of the Contractor.
- Comply with all Occupational Health and Safety legislation and regulations.

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• Ensure the health and safety of their Workers as regulated by applicable acts, laws and safety regulations.

4.2 Violence Risk Assessment (VRA)

- VRAs will be carried out as per WSBC OHS Regulation and Policy 4.28.
- A VRA must be done at the start of operations and/or whenever there is a significant change in the nature of the business or the location of the Workplace (e.g., new buildings, significant renovations, changes in the care delivery model, changes in Client population, etc.).
- Risk of Violence must be taken into consideration during any planning/proposed changes to buildings, care delivery model, Client population, etc.
- Site/Department Managers are responsible for completing VRAs initially and reviewing annually thereafter.
- The purpose of the VRA is to identify factors in the Workplace that may place Workers at risk of harm due to Violence. Once risk factors are identified, they are assessed for the level of risk and an action plan developed to address those items as per the OHS Regulation (see <u>VRA Tutorial</u>).
- Refer to the <u>Site Manager's Guide to Conducting a Violence Risk</u>
 <u>Assessment</u> and <u>WSBC OHS Policy Item R4 4.28-1</u> for more information.

4.3 Assessment and Communication of Client Risk

- When a risk of violent behaviour is identified, the following is required:
 - a) Assessment of the Client and the level of risk.
 - b) Development of a behavioural or Client-specific care plan to manage the behaviours, which includes the Client as much as possible.
 - c) Review of the care plan.
- The identified risk of Violence, and associated controls, must be communicated to all Workers who are likely to encounter the Client in the course of their work.
- Refer to the Aggressive Alert Application Procedure.
- Refer to the <u>Long-Term Care Aggressive (AGG) Behaviour Toolkit</u> and/or the Acute & Community Toolkit if relevant to your Workplace.

4.4 Code White

- A <u>Code White Response Plan</u> is required in all Workplaces.
- Refer to <u>Code White Response Procedural Guidelines</u> to help develop, implement, and sustain a Code White Response Plan.

4.5 Code Silver

• A Code Silver Response Plan is required in all Workplaces.

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4.6 Working Alone or in Isolation

- Site specific processes and procedures must be developed, in consultation with Employees carrying out the work, at all sites where working alone or in isolation is required, as per <u>WSBC OHS Regulation 4.20 – 4.23</u> and <u>AV0200 – Working Alone or in Isolation policy</u>.
- Refer to the <u>Managers Guide to Working Alone or In Isolation</u> to help develop and implement working alone or in isolation procedures.

4.7 Policies, Procedures and Work Arrangement/Systems

- To address the varying nature of the work being carried out throughout Workplaces, site/department specific policies and procedures may be required to supplement the regional VPP policies and procedures.
- The site JOSHC and Employees should be consulted/engaged with when developing site/department specific policies, procedures, and/or work arrangements to eliminate or minimize risk of Violence to the lowest extent practicable.
- Workers must be instructed in the procedures specific to their area of work and written instructions provided in the form of policies, procedures, protocols and guidelines. These resources should be easily accessible and additional instruction/support provided as required.

4.8 Education and Training

- Refer to Manager's Guide to Violence Prevention Program Education.
- Employee Education and Training:
 - o All Employees must receive instruction in prevention strategies and behaviours appropriate to the level of risk in their work.
 - o All Employees must be educated in how to respond to violent behaviour that they may encounter in their Workplace, based on the level of risk and type of work.
 - All Employees who are required to complete the in-class Provincial Violence Prevention Curriculum (PVPC) training (i-Learn #807) must complete the PVPC refresher training program (i-Learn #1800) annually if continuing to work in High-Risk departments.
 - IH uses the PVPC and supports a practice of <u>least restraint</u>.
- New Employee Orientation all Employees will receive education and training on the IH VPP as part of the <u>Occupational Health and Safety</u> (OHS) Orientation before beginning assigned tasks. This includes:
 - o Information on the VPP;
 - Site/department/job-specific orientation to VPP (policies, procedures, and work arrangements);
 - o Information on the nature and extent of the risk of Violence that may be encountered and/or exposure in the course of work;
 - o Recognizing and reporting risk of Violence;
 - Site Specific AGG procedures;

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- Appropriate response to Violence, including how to summon and obtain assistance; and
- Procedures for reporting, investigating, and documenting violent incidents.
- Manager/Supervisor Training managers and supervisors are required to complete the same VPP education and training as the Employees they supervise, and all required training based on the level of risk and type of work. All managers/supervisors must also be trained to understand their responsibilities for ensuring the safety of their Employees and other Workers at the worksite (see i-Learn #974-976 and 1366, as applicable).

4.9 Incident Reporting and Investigation

- All violent incidents and near misses are to be reported to the Employee's manager/supervisor as soon as practicable after the incident, and to the Provincial Workplace Health Contact Centre (1-866-922-9464) in accordance with IH Policy AV1100 Employee Incident Reporting and Investigation.
- Employees must be provided time to report violent (or any) incidents while at work.
- Investigation will include review of existing VPP procedures and control measures, and adjustments/revisions made as required.
- Code White Responses must be tracked at all sites. The additional Code
 White report that can be used to support team response
 documentation during level 1, 2, or 3 type incidents is <u>Code White</u>
 Report Pages 1 and 2 (#822415).

4.10 Incident Follow-up

- Following an incident or hazard report, the manager/supervisor is required to initiate an investigation as outlined in <u>IH Policy AV1100</u>
 <u>Employee Incident Reporting and Investigation</u> and inform Employees of all supports for assistance (personal physician, <u>Employee and Family Assistance Program, Critical Incident Stress Debriefing</u>, etc.).
- Manager/supervisor must share results of incident investigations and any corrective actions with all Employees who may be impacted as appropriate.
- Manager, along with JOHSC/Worker Health and Safety Representative, must evaluate any corrective actions implemented after an incident investigation for effectiveness.

4.11 Program Review

- The VPP will be reviewed annually by WHS in collaboration with partners.
- Site specific VPP policies and procedures must be reviewed by the site leadership and JOHSC/Worker Health and Safety Representative as part of the VRA process:

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- Annually, including Employee feedback and JOHSC/Worker Health and Safety Representative input.
- When changes occur in the Workplace, such as when an aspect of the overall delivery of care changes, or when structural modifications are made to a building.
- As the result of recommendations from an investigation of a violent incident.

5.0 RELATED POLICIES AND TOOLS

- Policies
 - o AV0100 Occupational Health & Safety Program
 - o <u>AV3000 Psychological Health & Safety in the Workplace</u>
 - o <u>AV0200 Working Alone or In Isolation</u>
 - o <u>AK0400 Recognizing and Responding to Hazards, Near Misses and</u> Adverse Events
 - o AW0650 Prohibited Items
 - o <u>AU1000 Workplace Environment</u>
 - o <u>AV1100 Employee Incident Reporting and Investigation</u>
 - o AH2500 Least Restraint
 - o <u>AV2510 Threat Management The Assessment and Management of Targeted Violence</u>
 - o AV2520 Active Deadly Threat Response
 - o AV2900 Managing Disrespectful, Aggressive, or Violent Behaviours of Visitors
- Guidelines, Procedures and Protocols
 - o <u>Aggressive Alert Application Procedure</u>
 - Weapons in Long-Term Care Protocol
 - o <u>Manager's Guide to Violence Prevention Program Education</u>
 - o <u>Manager's Guide to Conducting a Violence Risk Assessment</u>
 - o <u>Manager's Guide to Incident Reporting and Investigation</u>
 - Manager's Guide to Accessing Employee and Family Assistance
 Program (EFAP) Services
 - o <u>Manager's Guide to Implementing Working Alone or In Isolation</u>
 Procedures
 - o Code White Procedural Guideline
 - o Code Silver Active Attacker Emergency Response Plan
 - o Occupational Health and Safety (OHS) Orientation
 - Staff Safety Guidelines for Interior Health Facility Design Projects
- InsideNet Pages:
 - Violence Prevention Program
 - o <u>Employee Psychological Health and Wellness</u>
 - o JOHSC
 - o WorkSafeBC High Risk Strategy
 - o Emergency Response & Planning: Site Emergency Response Plans

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6.0 REFERENCES

- 1. Provincial Code White Standard, 2021.
- 2. IH Prime Contractor Program
- 3. Provincial Violence Prevention Curriculum
- 4. WSBC, WCA Part 2, Division 4, <u>Section 21 30 General Duties of Employers</u>, <u>Workers and Others</u>
- 5. WSBC, WCA Part 2, Division 5, <u>Section 36 Duties and Functions of Joint</u>
 Committees
- 6. WSBC, OHSR Part 4, <u>4.27 4.31</u>: General Conditions, Violence in the Workplace
- 7. WSBC, OHS Policies, <u>Part 4.29 General Conditions, Violence in the Workplace, Workplace Violence Prevention Program</u>
- 8. Ministry of Health Policy Instrument May 2017, Health Authority Workforce Violence Prevention Policy Directive
- 9. Ministry of Health Policy Communique 2005-01, October 2005. Prevention and Management of Aggression and Violence in the BC Health Care System
- 10. Ministry of Health Policy Directive May 2017, Health Authority Workforce Violence Prevention Policy Directive

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