

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 Tsilhqot'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 in compliance with the WorkSafeBC (WSBC) Workers Compensation Act (WCA) and Occupational Health and Safety Regulation (OHSR).

2.0 DEFINITIONS

TERM	DEFINITION
<i>Client</i>	<i>Any person in care or attending IH facilities or programs.</i>
<i>Code Silver Response</i>	<i>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.</i>
<i>Code White Response</i>	<i>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.</i>
<i>Contractor</i>	<i>A person or company that undertakes a contract to provide materials or labour to perform a service or do a job.</i>
<i>Employee</i>	<i>A person currently employed by IH in a full-time, part-time, and/or term-specific position.</i>
<i>Joint Occupational Health & Safety Committee (JOHSC)</i>	<i>An advisory group consisting of employer and Worker representatives working together to improve occupational health and safety in their Workplace. WSBC requires a JOHSC in Workplaces with 20 or more Employees.⁵</i>
<i>Point of Care Risk Assessment</i>	<i>An in-the-moment assessment completed by all health care workers before performing any tasks to confirm that it is safe to interact with or provide care to the person at</i>

Policy Sponsor: VP, Human Resources & Professional Practice	1 of 10
Policy Steward: Corporate Director, Workplace Health & Safety	
Date Approved: October 2003	Date(s) Reviewed-r/Revised-R: August 2025 (R)
<i>This is an Interior Health CONTROLLED document. A copy of this document in paper form is not controlled and should be checked against the electronic file version to ensure accuracy.</i>	

AV2500 – VIOLENCE PREVENTION PROGRAM

	<i>this time and focuses on observations of the person, environment, task and the worker.</i>
<i>Violence</i>	<i>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:</i> <ul style="list-style-type: none"> <i>Violence that is intentional</i> <i>Violence that is not intentional due to a medical condition, often called aggression³</i>
<i>Violence Risk Assessment</i>	<i>A step-by-step process intended to review a work site to identify potentially hazardous conditions and situations that could affect the well-being or safety of Workers or any person.</i>
<i>Visitor</i>	<i>Any person visiting an Interior Health (IH) Workplace who is not a Worker or a Client.</i>
<i>Worker</i>	<i>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.</i>
<i>Worker Health and Safety Representative</i>	<i>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</i>
<i>Workplace</i>	<i>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."</i>

3.0 POLICY

3.1 Violence Prevention Program (VPP) Overview

- IH develops, implements, monitors and evaluates initiatives through the VPP, as part of the IH Occupational Health and Safety (OHS) Program.
- As outlined in [WSBC Occupational Health and Safety \(OHS\) Policy Item R4.29-2 \(Workplace Violence Prevention Program\)](#), the IH VPP consists of the following elements:

Policy Sponsor: VP, Human Resources & Professional Practice	2 of 10
Policy Steward: Corporate Director, Workplace Health & Safety	
Date Approved: October 2003	Date(s) Reviewed-r/Revised-R: August 2025 (R)
<i>This is an Interior Health CONTROLLED document. A copy of this document in paper form is not controlled and should be checked against the electronic file version to ensure accuracy.</i>	

AV2500 – VIOLENCE PREVENTION PROGRAM

- 3.1.1.1 Violence Risk Assessment
- 3.1.1.2 Response Procedures, and Work Arrangements/Systems
- 3.1.1.3 Worker and Supervisor Training
- 3.1.1.4 Incident Reporting and Investigation
- 3.1.1.5 Incident Follow-up
- 3.1.1.6 Program Review

- When a risk of Violence cannot be eliminated, planned interventions/responses must 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 the following situations, additional requirements are outlined in other IH policies.
 - Worker to Worker violent behaviour, see IH Workplace Environment Policy ([AU1000](#)).
 - Targeted Violence, including Domestic Violence, see Threat Management Policy ([AV2510](#)).
 - Active deadly threat, see Active Deadly Threat Response Policy ([AV2520](#)) and [iLearn Code Silver – Active Attacker training](#).
 - Aggressive or violent Visitors, see IH Managing Disrespectful, Aggressive or Violent Behaviours of Visitors Policy ([AV2900](#)).
 - Effects on psychological health and safety of Employees, see Psychological Health and Safety in the Workplace Policy ([AV3000](#)).
 - Facility restricted access to mitigate harms to patients, Staff, Visitors, property, see Restricted Access Policy ([AV2530](#)).

3.3 Violence Risk Assessment

- The purpose of the Violence Risk Assessment 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 [Violence Risk Assessment Tutorial](#)).
- Carry out a Violence Risk Assessment as per WSBC [OHS Regulation and Policy 4.28](#). Refer to the [Site Manager's Guide to Conducting a Violence Risk Assessment](#) and [WSBC OHS Policy Item R4.28-1](#) for more information.
- A Violence Risk Assessment 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.

3.5 Assessment and Communication of Risk regarding Client

Policy Sponsor: VP, Human Resources & Professional Practice	3 of 10
Policy Steward: Corporate Director, Workplace Health & Safety	
Date Approved: October 2003	Date(s) Reviewed-r/Revised-R: August 2025 (R)
<i>This is an Interior Health CONTROLLED document. A copy of this document in paper form is not controlled and should be checked against the electronic file version to ensure accuracy.</i>	



AV2500 – VIOLENCE PREVENTION PROGRAM

- When a risk of violent behaviour is identified, the following is required:
 - a) Assess Client and the level of risk.
 - b) Develop a behavioural or Client-specific care plan to manage risk. Include the Client in the development as much as possible.
 - c) Review care plan and update as needed.
- Communicate the identified risk of Violence, and associated controls, to all Workers likely to encounter the Client in the course of their work. This may include non-clinical staff such as environmental services, dietary staff, lab, or maintenance workers.
- Refer to the [Aggressive Alert Application Procedure](#).
- Refer to the [Long-Term Care Aggressive \(AGG\) Behaviour Toolkit](#) and/or the [Acute & Community Toolkit](#) if relevant to your Workplace.

3.6 Code White

- A [Code White Response Plan](#) is required in all Workplaces.
- Refer to [Code White Response Procedural Guidelines](#) to help develop, implement, and maintain a Code White Response Plan.

3.7 Code Silver

- A [Code Silver Response Plan](#) is required in all Workplaces.
 - [Code Silver FAQ](#).
 - IH Code Silver template.

3.8 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 [WSBC OHS Regulation 4.20.1 – 4.23](#) and [AV0200 – Working Alone or in Isolation policy](#).
- Refer to the [Managers Guide to Working Alone or In Isolation](#) to help develop and implement working alone or in isolation procedures.

3.9 Site-Specific Direction

- 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 JOSH and Employees should be consulted/engaged 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.

3.10 Education and Training

Policy Sponsor: VP, Human Resources & Professional Practice	4 of 10
Policy Steward: Corporate Director, Workplace Health & Safety	
Date Approved: October 2003	Date(s) Reviewed-r/Revised-R: August 2025 (R)
<i>This is an Interior Health CONTROLLED document. A copy of this document in paper form is not controlled and should be checked against the electronic file version to ensure accuracy.</i>	

AV2500 – VIOLENCE PREVENTION PROGRAM

- Employee Education and Training:
 - All Employees must receive instruction in prevention strategies and behaviours appropriate to the level of risk in their work.
 - 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 [least restraint](#).
- New Employee Orientation – all Employees will receive education and training on the IH VPP as part of the [Occupational Health and Safety \(OHS\) Orientation](#) before beginning assigned tasks. This includes:
 - Information on the VPP;
 - Site/department/job-specific orientation to VPP (policies, procedures, and work arrangements);
 - Information on the nature and extent of the risk of Violence that may be encountered and/or exposure in the course of work;
 - Recognizing and reporting risk of Violence;
 - Site Specific AGG procedures;
 - 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 require 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 [#4195](#) and [#1366](#), as applicable).
- Refer to [Manager's Guide to Violence Prevention Program Education](#).

3.11 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 with time to report violent (or any) incidents while at work.
- Investigation includes review of existing VPP procedures and control measures, and adjustments/revisions made as required.
- Track all Code White response at sites. Use level [One](#), [Two](#), or [Three](#) Code White report types depending on the situation.

Policy Sponsor: VP, Human Resources & Professional Practice	5 of 10
Policy Steward: Corporate Director, Workplace Health & Safety	
Date Approved: October 2003	Date(s) Reviewed-r/Revised-R: August 2025 (R)
<i>This is an Interior Health CONTROLLED document. A copy of this document in paper form is not controlled and should be checked against the electronic file version to ensure accuracy.</i>	

AV2500 – VIOLENCE PREVENTION PROGRAM

3.12 Incident Follow-up

- Following an incident or hazard report, the manager/supervisor is required to initiate an investigation as soon as possible, as outlined in [IH Policy AV1100 Employee Incident Reporting and Investigation](#) and inform Employees of all supports for assistance (personal physician, [Employee and Family Assistance Program](#), [Critical Incident Stress Management](#), etc.).
- Manager/supervisor must share results of incident investigations and any corrective actions with all Employees who may be impacted as appropriate, including those outside originating departments such as environmental services, lab, dietary etc.
- Manager, along with JOHSC/Worker Health and Safety Representative, must evaluate any corrective actions implemented after an incident investigation for effectiveness.

3.13 Program Review

- The VPP is reviewed annually by WHS in collaboration with partners that use the Violence Risk Assessment Annual Review.
- Site specific VPP policies and procedures must be reviewed by the site leadership and JOHSC/Worker Health and Safety Representative as part of the Violence Risk Assessment process:
 - 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.

4.0 PROCEDURES

4.1 Roles and Responsibilities

4.1.1 Senior Management

- Verify the provision of a VPP including practice standards and procedures for preventing or managing violent behaviours.
- Verify that Workers are aware of VPP requirements.
- Monitor implementation of and confirm 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.

Policy Sponsor: VP, Human Resources & Professional Practice	6 of 10
Policy Steward: Corporate Director, Workplace Health & Safety	
Date Approved: October 2003	Date(s) Reviewed-r/Revised-R: August 2025 (R)
<i>This is an Interior Health CONTROLLED document. A copy of this document in paper form is not controlled and should be checked against the electronic file version to ensure accuracy.</i>	

AV2500 – VIOLENCE PREVENTION PROGRAM

- Establish a consultation process with Employees and their representatives at the site JOHSC when developing or reviewing site or department specific VPP procedures.
- 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 [Violence Risk Assessment](#) is completed for the site or department. Also confirm the worksite [Violence Risk Assessment annual review](#) is completed annually at a minimum, or with significant changes to building, scope of service or clientele.
- Threats are addressed and controls enacted as determined by incident investigations, in accordance with the Threat Management Policy [AV2510](#).
- Attend required [Violence Prevention training and education](#).
- 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 [Code White Response Plan Procedural Guideline](#).
- Coordinate, conduct, or delegate Code White and Code Silver drills to confirm 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 [Workplace Health Contact Centre](#) (1-866-922-9464).
- Verify incidents of Violence are investigated using the [Web Incident Investigation Tool \(IIT\)](#); 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 [Crisis Support – Service Providers for Individuals](#)
- Verify Employees are aware of their [right to refuse unsafe work](#) if they do not have the information, training or resources to minimize risk of Violence.
- Offer and arrange/provide critical incident stress debriefing to Employees who have been witness or subject to a Workplace violent incident.

Policy Sponsor: VP, Human Resources & Professional Practice	7 of 10
Policy Steward: Corporate Director, Workplace Health & Safety	
Date Approved: October 2003	Date(s) Reviewed-r/Revised-R: August 2025 (R)
<i>This is an Interior Health CONTROLLED document. A copy of this document in paper form is not controlled and should be checked against the electronic file version to ensure accuracy.</i>	

AV2500 – VIOLENCE PREVENTION PROGRAM

4.1.3 Workers

- Act in a manner that fully respects the rights of others and contributes to de-escalating behaviours.
- Use [Point of Care Risk Assessment](#) 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 [AV1100 – Employee Incident Reporting and 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 partners 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.

5.0 RELATED TOOLS AND POLICIES

4.1 Policies

Policy Sponsor: VP, Human Resources & Professional Practice	8 of 10
Policy Steward: Corporate Director, Workplace Health & Safety	
Date Approved: October 2003	Date(s) Reviewed-r/Revised-R: August 2025 (R)
<i>This is an Interior Health CONTROLLED document. A copy of this document in paper form is not controlled and should be checked against the electronic file version to ensure accuracy.</i>	



AV2500 – VIOLENCE PREVENTION PROGRAM

- [AV0100 – Occupational Health & Safety Program](#)
- [AV3000 – Psychological Health & Safety in the Workplace](#)
- [AV0200 – Working Alone or In Isolation](#)
- [AK0400 – Recognizing and Responding to Hazards, Near Misses and Adverse Events](#)
- [AW0650 – Prohibited Items](#)
- [AU1000 – Workplace Environment](#)
- [AV1100 – Employee Incident Reporting and Investigation](#)
- [AH2500 – Least Restraint](#)
- [AV2510 – Threat Management – The Assessment and Management of Targeted Violence](#)
- [AV2520 – Active Deadly Threat Response](#)
- [AV2530 – Restricted Access](#)
- [AV2900 – Managing Disrespectful, Aggressive, or Violent Behaviours of Visitors](#)

4.2 Guidelines, Procedures and Protocols

- [Aggressive Alert Application Procedure](#)
- [Code White Procedural Guideline](#)
- [Code Silver – Active Attacker Emergency Response Plan](#)
- [Guide to EFAP Resources for Leaders](#)
- [Weapons in Long-Term Care Protocol](#)
- [Manager's Guide to Violence Prevention Program Education](#)
- [Manager's Guide to Conducting a Violence Risk Assessment](#)
- [Manager's Guide to Incident Reporting and Investigation](#)
- [Manager's Guide to Implementing Working Alone or In Isolation Procedures](#)
- [Occupational Health and Safety \(OHS\) Orientation](#)
- [Staff Safety Guidelines for Interior Health Facility Design Projects](#)

4.3 InsideNet Pages

- [Violence Prevention Program](#)
- [Employee Psychological Health and Wellness](#)
- [JOHSC](#)
- [Protection Services](#)
- [Emergency Response & Planning: Site Emergency Response Plans](#)

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, [Section 21 - 30 General Duties of Employers, Workers and Others](#)
5. WSBC, WCA Part 2, Division 5, [Section 36 Duties and Functions of Joint Committees](#)

Policy Sponsor: VP, Human Resources & Professional Practice	9 of 10
Policy Steward: Corporate Director, Workplace Health & Safety	
Date Approved: October 2003	Date(s) Reviewed-r/Revised-R: August 2025 (R)
<i>This is an Interior Health CONTROLLED document. A copy of this document in paper form is not controlled and should be checked against the electronic file version to ensure accuracy.</i>	



AV2500 – VIOLENCE PREVENTION PROGRAM

6. WSBC, OHSR Part 4, [4.27 - 4.31: General Conditions, Violence in the Workplace](#)
7. WSBC, OHS Policies, [Part 4.29 - General Conditions, Violence in the Workplace, Workplace Violence Prevention Program](#)
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

Policy Sponsor: VP, Human Resources & Professional Practice		10 of 10
Policy Steward: Corporate Director, Workplace Health & Safety		
Date Approved: October 2003	Date(s) Reviewed-r/Revised-R: August 2025 (R)	
<i>This is an Interior Health CONTROLLED document. A copy of this document in paper form is not controlled and should be checked against the electronic file version to ensure accuracy.</i>		