

# **Hôtel-Dieu Grace Hospital**

## **WORKPLACE VIOLENCE PREVENTION PROGRAM**

### **Student/ Volunteer Package**

August 2008



# INTRODUCTION

Many workplaces are at risk for workplace violence and, unfortunately, a Hospital environment is not immune. The likelihood of reducing or eliminating the possibility of workplace violence is accomplished through the implementation of an effective prevention program. Hotel Dieu Grace Hospital has developed a Workplace Violence Prevention Program that demonstrates its commitment to preventing workplace violence, and ensuring a safe and healthful work environment for all members of the Hospital community.

This Student/ Volunteer package has been developed as an educational tool so that you are well informed in order to respond appropriately and safely in the event of a threat or incident of workplace violence.

The Student/ Volunteer Package is a self study program that is divided into five parts.

In Part 1 you'll find the Code of Conduct which sets out our Covenant, the six Principles of Conduct derived from the Covenant as well as an explanation of the Code.

Part 2 provides the basic elements of our violence prevention program and includes Definitions and Roles and Responsibilities.

Part 3 provides an overview of our Chart Flagging and Alert Signs for identifying patients that have a potential for Acting Out Behaviour (AOB).

Part 4 contains a sample concern report form. The actual report form is available from your Department Supervisor or Manager.

Part 5 contains a De-escalation component which provides valuable information on recognizing escalating levels of behaviour and successful verbal resolution strategies.

Finally on page there is a "Statement of Commitment" form which must be signed, removed from the package, and returned to the Hospital.

Your involvement is critical to the successful implementation and management of our workplace violence program. We look forward to your participation and cooperation with this program. Should you require any additional clarification please do not hesitate to contact your Department Supervisor, Manager or Human Resources.



# **Hôtel-Dieu Grace Hospital**

## **WORKPLACE VIOLENCE PREVENTION PROGRAM**

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## **PREAMBLE**

Hotel-Dieu Grace Hospital is committed to providing a safe, healthy and supportive working environment for our employees, physicians, volunteers, students and contract workers. Violent behaviour can have devastating effects on the quality of life for our employees, physicians, volunteers, students and contract workers; and on our ability to provide exceptional care to our patients.

Hotel-Dieu Grace Hospital is committed to the prevention of workplace violence. The purpose of this program is to first define the principles of conduct that are expected from those working for the Hospital, our patients, and visitors. Secondly, this program is intended to define the behaviour that constitutes workplace violence, and to set out the processes for reporting and resolving incidents of workplace violence. Hotel-Dieu Grace Hospital is committed to providing a working environment free of violence by ensuring that all workplace parties are familiar with the definitions of workplace violence and their individual responsibilities for prevention and corrective action. Thirdly, this program sets out the response system for supporting and assisting our workplace parties in response to an incident of workplace violence.

Hotel-Dieu Grace Hospital is committed to an ongoing review of our workplace violence program through risk assessment, incident reporting and statistical analysis.

## **ACKNOWLEDGEMENTS**

This program was developed in conjunction with the Workplace Violence Prevention experts from Warren Shepell and the Ontario Safety Association for Community and Healthcare. Many thanks to our Workplace Violence Prevention Committee for their hours of work and input in creating this living program.



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# Hôtel-Dieu Grace Hospital

## CODE OF CONDUCT

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### A. THE CODE OF CONDUCT

The mission and values of Hotel-Dieu Grace Hospital set standards of respect for the individual. Members of the Hospital family have expressed a will to reaffirm these values and behaviours explicitly. The Hospital Administration has requested clear guidelines on which to base its operations.

*The mission of Hotel-Dieu Grace has been expressed and clarified in word and in deed by the codes of conduct and behaviours of our staff. In keeping with the living nature of this mission, the following Covenant has been developed as a further affirmation of those codes and behaviours, and as a guide to the mutual relationships that characterize the Hotel-Dieu Grace Hospital family. The concept of Covenant emphasizes that this is a commitment that flows not just one way but among many people.*

#### **COVENANT**

**We commit to treating patients and staff in a dignified manner that conveys respect for the abilities of each other and a willingness to work as a team of equally valued partners. We promote an atmosphere of collegiality, cooperation and professionalism. We demonstrate empathy, compassion and respect in our interactions with others and are always polite and courteous. We consistently adhere to all the rules and regulations of our hospital.**

**We wish to be held accountable for our commitment and we expect the same dedication from all members of our hospital community.**

***Principles of Conduct*** we derive from the Covenant:

- 1. Dignity**
- 2. Reliability**
- 3. Fairness**
- 4. Trust**
- 5. Professionalism**
- 6. Accountability**



## 1. DIGNITY PRINCIPLE

**Respect the dignity of all people. Protect the health, safety, privacy, and human rights of others; refrain from coercion, harassment, and violence; and adopt practices that enhance human development in the workplace.**

### Key Concepts:

<b>Respect for the Individual</b>	Respect the dignity and human rights of others; Adopt work practices that respect employees' dignity and human rights; Prevent harassment in the workplace.
<b>Health and Safety</b>	Provide a safe, secure and healthy workplace; Protect employees from avoidable injury and illness in the workplace; Prevent violence in the workplace.
<b>Privacy &amp; Confidentiality</b>	Respect the patient's privacy and personal information; Respect the privacy of colleagues.

## 2. RELIABILITY PRINCIPLE

**Reliability Principle: Honour commitments. Be faithful to your word and follow through on promises, agreements and other voluntary undertakings. Exhibit behaviour and conduct that is consistent with the Covenant.**

### Key Concepts:

<b>Common Ground</b>	Honour the Covenant and expect the same of your colleagues.
<b>Commitment</b>	Honour your promises, agreements and obligations.

## 3. FAIRNESS PRINCIPLE

**Deal with all parties fairly and equitably, and practice nondiscrimination in our interaction with others.**

### Key Concepts:

<b>Teamwork</b>	Work as a team of equally valued partners considering the unique abilities of one another;
<b>Fair Treatment</b>	Behave in a manner that is just and equitable to all parties; Practice non-discrimination, and create an environment free from favouritism and bias.
<b>Fair Competition</b>	Engage in free and fair competition with suppliers as set out in the [Business Code of Conduct Policy].
<b>Fair Process</b>	Do not retaliate against others who report violations of the law, the Code, or Hospital Policy.

#### 4. TRUST PRINCIPLE

**Act in good faith with care, candor, and loyalty in fulfilling your obligations.**

**Key Concepts:**

**Loyalty**

Promote the Hospital's interests in diligent and professional manner;  
Use position and Hospital resources only for Hospital purposes (not for personal gain);  
Safeguard the Hospital's resources and ensure their prudent and effective use;  
Disclose potential conflicts between personal and Hospital interests.

**Patient Care**

Advocate for the safety and well-being of our patients.

#### 5. PROFESSIONALISM PRINCIPLE

**We will govern ourselves with collegiality, cooperation and professionalism, and comply with applicable laws, regulations and policies.**

**Key Concepts:**

**Competence**

Ensure valid registration, re-certification and credentialing to continue professional practice;

**Learning & development**

Assist each other in developing skills and knowledge;  
Create employment opportunities that enhance human development;  
Duty to seek out education and information when required.

**Conduct**

Uphold a character of high-esteem and mutual respect in our interactions with others

#### 6. ACCOUNTABILITY PRINCIPLE

**Make moral and rational decisions and be answerable for our behaviour and conduct. We will not condone bad behaviour or turn a blind eye to inappropriate conduct.**

**Key Concepts:**

**Responsibility**

Dedication to the Code is a collective and ongoing responsibility for which we are answerable.  
Participate as a member of the team, seeking input from others when necessary.  
Know and apply the Code, legislation, and policies where applicable.

**Reporting**

Report violations of the Code or illegal acts to the appropriate authority.

## B. ABOUT THE CODE

### 1. What is the Code?

- The Hotel-Dieu Grace Hospital Code of Conduct (Code) sets out the covenant, six principles, and the key concepts that govern our behaviour, in addition to applicable laws and regulations, and Hospital policies.
- The Code describes the minimum standards of behaviour and conduct expected from all members at all times. **Compliance with the Code is mandatory.** It is a living document, and will grow and change with our organization.
- The Code reinforces Hotel-Dieu Grace Hospital's commitment to a safe, secure and healthy work environment in which people are respected and valued as equal team members.

### 2. Who does the Code of Conduct apply to?

The Code applies to all members of the Hotel-Dieu Grace Hospital organization, including staff and physicians, volunteers, students and contract employees

### 3. What are my responsibilities?

- Understand and apply the Code in your daily work interaction;
- Rely on our internal sense of what is right and consider the impact of our decisions on others;
- Assume responsibility for our own actions;
- Seek assistance if you are confused (i.e. peers, supervisors/coordinators, Human Resources, Risk Management/Legal, Mission Services and our Employee Assistance Program).
- Report illegal acts or violations of the Code to management.

### 4. What are Management's Responsibilities?

In addition to complying with the "**Principles of Conduct**", individuals in management positions have a special duty to assist others in making difficult decisions and in providing direction in reporting violations of the Code or a disregard of the law. They must:

- Ensure all of their reports have access to the online Code document and reporting form or a paper copy, if required;
- Set an example by complying with the Code at all times;
- Ensure that all of their reports comply with the annual review process for the Code;
- Create and maintain a work environment that encourages collegiality, cooperation, and professionalism;
- Promote open communication in which issues may be raised for discussion without fear of retaliation.

## **C. COMPLIANCE WITH THE CODE**

### **1. Concern Report Form (Schedule A)**

- All members of Hotel-Dieu Grace Hospital have the right to bring illegal acts or violations of the Code forward without fear of adverse consequences.
- It is expected that individuals will bring issues forward in a sincere and responsible fashion.
- A false or frivolous report with no merit may result in disciplinary action.
- All reports will be handled in the strictest confidence.
- No one will be penalized for initiating inquiries in good faith regarding unethical behaviour, or for seeking advice on how to handle alleged violations of health care legislation or the Code.
- Retaliation for reports made in good faith will not be tolerated.
- The Code and Concern Report Form are available on the Hospital's internal website.
- All Concern Report Forms will be submitted to the supervisor/coordinator of the department or unit where the violation or unacceptable behaviour has occurred. If the conduct being reported involved the supervisor/coordinator, the form shall be submitted directly to Human Resources.
- All alleged violations will be investigated in a timely manner. Members of Hotel-Dieu Grace Hospital have a duty to participate in investigations regarding the Code. Failure or refusal to participate or to provide full and truthful disclosure may result in disciplinary action.

### **2. Penalties for Violation**

Violations of the Code may warrant progressive discipline up to and including dismissal/revocation of privileges. Inappropriate behaviour will be tracked and monitored by the Human Resources department. Staff and physicians, volunteers, students and/or contract employees who cannot practice and uphold the "Principles of Conduct" will no longer be part of the Hotel-Dieu Grace Hospital team.

## **WORKPLACE VIOLENCE PREVENTION POLICY AND PROCEDURE HOTEL DIEU GRACE HOSPITAL**

### **A. INTRODUCTION**

The mission and values of Hotel-Dieu Grace Hospital set standards of respect for the individual. Members of the Hospital family have expressed a will to reaffirm these values and behaviours explicitly through our actions and conduct. There is no place for aggression or violence in our work environment, and Hotel-Dieu Grace Hospital considers the safety of our staff, physicians, volunteers, contract employees, students, patients and visitors paramount.

Hotel-Dieu Grace Hospital has a zero tolerance approach to workplace violence. Zero tolerance means that every reported action of abusive/aggressive or threatening behavior will be tracked and resolved based on the individual facts. Individual cases may require different resolutions. Although measures will be put in place to assist parties in conflict resolution, where appropriate, disciplinary action will be taken, up to and including termination of employment, revocation of physician's privileges or termination of volunteer/student/contract agreements.

### **DECLARATION**

It is our firm expectation:

- That everyone including staff, physicians, volunteers, students, contractors, patients and their families, and visitors to Hotel-Dieu Grace Hospital (hereafter HDGH) will be treated and will treat others with dignity and respect ;
- That by individual efforts and through the consistent application of (this) Policy and Procedure, HDGH will have a safe and healthy environment.

### **B. POLICY**

HDGH is committed to creating and maintaining an environment that is healthy, and where the dignity and worth of all employees is respected.

Accordingly:

- HDGH does not tolerate workplace violence;
- HDGH does not tolerate abusive or aggressive behaviour of any kind;
- HDGH will take all reasonable steps to prevent and eliminate abusive and aggressive behaviour;
- HDGH will deal effectively with each and every incident of abuse and aggression that threatens the safety of anyone at HDGH;
- In the event of a substantiated claim of abusive or aggressive behaviour, HDGH will implement corrective measures where appropriate, up to and including termination of employment, termination of volunteer status, or loss of privileges with the possibility of police involvement and criminal charges being laid.

## **C. SCOPE**

This Policy applies to all HDGH staff and physicians, volunteers, students, contract employees, patients and their family members, visitors, and to any person working on behalf of HDGH.

## **D. PURPOSE**

The purpose of the Policy is:

- To promote a work environment whereby every individual feels free from any kind of threatening or abusive behaviour;
- To link and add credence to our Code of Conduct and enhance the standard of respectful behaviour to all members of HDGH;
- To create practical links to already existing policies and procedures;
- To provide staff and physicians, volunteers, students and contract employees with effective tools and strategies to be used within HDGH to prevent and respond to incidents of abuse and aggression in the workplace;
- To make available information regarding ways to identify those who potentially may be abusive or aggressive, especially with regard to the signals that may predict an incident of abusive and aggressive behaviour and therefore prevent these from occurring;
- To implement and exceed provision made for all Canadians in all existing and applicable legislation regarding the creation of safe environments for employees, including:
  - Criminal Code of Canada
  - Occupational Health and Safety Act
    - Duties of Employers
    - Due Diligence
    - Duties of Supervisors
    - Duties of Workers
  - Ontario Health Care and Residential Facilities Regulation
    - Safe work practices & conditions
    - Equipment & procedures
    - Training
    - Ontario Human Rights Code
  - Workplace Safety & Insurance Act
  - Regulated Health Professionals Act
  - Compensation for Victims of Crime Act

To this end we will:

- Raise awareness at HDGH regarding the prevention of abusive and aggressive behaviour at work;
- Establish a comprehensive reporting and tracking mechanism to document and investigate incidents that threaten the safety of our staff and wellness of our environment;

- Educate and/or train everyone who works at HDGH in the prevention and elimination of abusive and aggressive behaviour;
- Educate patients/visitors to HDGH about our “violence-free” work environment;
- Provide the necessary physical and emotional support to those who perceive they have been victims of aggression/violence at work.

## **E. DEFINITIONS**

### **1. Workplace Violence**

**Workplace Violence is any abusive or aggressive behaviour that can include “physical assault” on a person or on property, “behaviour considered to be threatening”, or “abuse in a verbal manner” that occurs in a work-related setting.**

It is important to note that in many circumstances there is a progression in the way that abusive behaviour can escalate to aggression (and even to violence). In our desire to eliminate abusive and aggressive behaviour from our HDGH workplace, we are careful to acknowledge that not every single act of abuse will lead to an act of violence, but that the possibility of progression from one to another exists if left unchallenged. The progression can be from the verbal to the actual physical, notwithstanding that there are occasions when physical abuse may come suddenly and spontaneously.

HDGH regards abusive and aggressive behaviour as the following:

There is abusive and aggressive behaviour when an individual or group of individuals compromises the physical and psychological safety of an individual or group of individuals by their extreme behaviour that strays from expected behaviour at work, whether intentionally or un-intentionally.

### **Classification of Violence in the Workplace**

To help distinguish the sources of workplace violence we use these four categories:

- |          |  |
|----------|--|
| Type I   | (Criminal Intent) Committed by a perpetrator who has no relationship to the workplace  |
| Type II  | (Client) the perpetrator is a client at the workplace who becomes violent towards a worker or another client   |
| Type III | (Worker to worker) the perpetrator is an employee or past employee of the workplace  |
| Type IV  | (Personal relationship) the perpetrator usually has a relationship with an employee e.g. Domestic violence. Please refer to Hotel-Dieu Grace Hospital’s policy entitled “Intimate Partner (Domestic) Violence Policy and Guidelines” |

Examples of workplace violence that any reasonable person ought to be aware of can include, but is not limited to, the following:

**a. Verbal abuse and threatening behaviour (also known as psychological abuse)**

- Shouting
- Condescending language
- Swearing
- Bullying or any other behaviour meant to intimidate, belittle or demean another
- Mobbing, by a group of individuals towards one or more members of HDGH
- Making racial slurs or comments
- Obscene or threatening phone calls at work or home
- Any behaviour meant to offend, humiliate or embarrass
- Veiled threats or open threats
- Gestures with the hands or other parts of the body that indicate harm
- Stalking
- Display or use of any kind weapon, including a gun, baseball bat, knife, surgical instrument, etc., or any other object that could be interpreted as being dangerous.
- Leering or staring

**b. Physical abuse and threatening behaviour**

- Slapping
- Shoving and pushing
- Pinching
- Hair pulling
- Punching
- Hitting
- Throwing an object at a person
- Kicking
- Scratching
- Tugging at clothes
- Biting
- Shooting and stabbing
- Suicide/ attempted suicide
- Mobbing

**c. Damage to employees' personal property or to HDGH property**

- Throwing of any object
- Vandalism to employee's car
- Deliberately kicking or punching fixtures and fittings
- Banging or throwing equipment
- Interfering with HDGH vehicles or causing damage to employee vehicles at work

## 2. Workplace

**Workplace is defined as: any location where any employee of HDGH is carrying out any work-related function.**

Examples of Possible “Workplaces” for HDGH employees:

- Renal Satellite Clinic on McDougall
- Janette Avenue Information Services Site
- Mental Health – Windsor Regional Campus
- Base Hospital
- Cafeteria
- HDGH sponsored conference or training site
- Employee-accompanied patient transport
- Parking facilities
- Any location an employee is required to be during the course of their employment duties

## 3. Staff and Physicians

**Staff includes all employees, permanent, temporary and casual. Employees may be located in any department, division or site of HDGH, and may be serving the organization in any capacity. Any physician granted privileges of any kind with HDGH. Although not strictly defined as “employees” of the HDGH, physicians will also be held accountable to this policy in the course of their activities within HDGH. This group also includes residents, and other physician groups in training.**

## 4. Volunteers

**Volunteers include all those who give their time freely to the organization in service to the patients and staff of HDGH ; and includes all Members of the Hospital and Foundation Boards.**

## 5. Contract Employees

**Contract Employees includes any person paid for work by HDGH or working for a company hired to perform a contract for HDGH.**

## 6. Students

**Students include any university and other students who spend part of their academic course time within the HDGH community.**

## F. ROLES AND RESPONSIBILITIES

### 1. The CEO, Vice Presidents and Chief of Staff

The CEO, together with the Senior Management Team, has the responsibility for the present and future direction of strategy and planning for HDGH, and have responsibility for the health, safety and well being of staff. Therefore, it is the responsibility of this group to implement the following:

- Model the substance and intent of the HDGH Policy and Procedure for Workplace Violence Prevention, and demonstrate in their words and actions as leaders of HDGH, commitment to intolerance of abuse and aggression of any kind within the organization;
- Accept responsibility for the provision of a comprehensive communication plan to HDGH regarding the implementation of the Policy and Procedure for Workplace Violence Prevention;
- Do whatever they can as the visible leaders of the organization to mitigate any risk or hazard threatening the safety and/or wellness of the HDGH environment;
- Provide comprehensive support for those who experience abuse or aggression at work;
- Provide the resources to educate and inform all HDGH people regarding abuse and aggression at work;
- Obligation to attend the proper **mandatory** training regarding Workplace Violence;
- Sign a Statement of Commitment to the Prevention of Violence in the Workplace Form (**Schedule B**);
- Accept responsibility for the provision of resources to train those in positions of leadership and to attend training themselves in the following topics:
  - How to recognize abuse and aggression;
  - Raising awareness regarding workplace violence and aggression;
  - How to mitigate the risk of abuse and aggression at work;
  - Responding fairly and with equanimity to complaints of abuse and aggression;
  - Fact-finding and Investigating;
  - Supportive measures for victims of abuse and aggression;
  - Track and measure the impact of abuse and aggression in the workplace and develop plans to remedy breaches of this Policy.
  - Any other training necessary to further the prevention of Workplace Violence i.e. Domestic Violence Awareness

### 2. Safe Workplace Advocate

- To further its desire to maintain a safe workplace and to have expeditious procedures to deal with workplace violence, including harassment, the Hospital employs a full-time Safe Workplace Advocate. The Safe Workplace Advocate's role, duties and responsibilities shall include but not be limited to the following:
- Promote and monitor the Workplace Violence Prevention program in accordance with its terms and provisions.
- Be available to consult with and provide supportive assistance to staff, including those seeking to access the Program using the Concern Report Form.
- Be a member of the Workplace Violence Prevention Committee.
- Responsible for timely (as soon as possible and in any event not later than 7 days) notification through the Hospital's Human Resources Department to ONA, OPSEU or the CAW of a Concern Report Form dealing with violence involving any member of the ONA, OPSEU or CAW as the case may be.

- Facilitate the education and training of staff, including physicians, regarding the Program and supporting management leaders and physician leaders in addressing incidents reported under this Program.
- The position reports directly to the Vice President of Corporate Services.

### 3. Supervisors and Managers, Directors and Department Chiefs:

Those who are in positions of responsibility for the health, safety and well being of staff of HDGH must demonstrate in their attitudes and behaviour the highest regard for the respect and dignity of all under their charge. Therefore, all supervisors/managers, directors and department chiefs must:

- Complete a concern report for any acts of violence that they witness or are reported verbally to them.
- Manage situations where a verbal report of violence is made, but the person making the report has the expectation that the report not be acted upon. In this instance it should be made clear that the report must be acted upon.
- Model the substance and intent of the HDGH Policy and Procedure for Workplace Violence Prevention, and demonstrate in their words and actions as leaders of HDGH, commitment to intolerance of abuse and aggression of any kind within the organization;
- Work collaboratively with union representation and others involved who share joint responsibility to resolve issues with regard to abusive, aggressive or violent behaviour at HDGH;
- Attend appropriate **mandatory** training regarding Workplace Violence;
- Sign a Statement of Commitment to the Prevention of Violence in the Workplace Form (**Schedule B**);
- Assess the likely risks to the particular unit of the organization under his/her responsibility for exposure to abuse or aggression;
- Take all reports of threats of abusive/aggressive behaviour seriously;
- Be able to identify the early warning signs of the potentially problematic situation or individual and use preventative measures to avoid escalation of abusive and aggressive behaviour;
- After receiving a Concern Report Form, meet with the two individuals involved, within three business days, and attempt to come to a satisfactory resolution for all parties
- At the time a Concern Report Form is filed, send a copy of the Concern Report Form and/or Resolution Tracking Forms to Human Resources and the Safe Workplace Advocate;
- In cases where no resolution is attained, consult with Human Resources and/or the Safe Workplace Advocate immediately;
- Educate and train all direct staff in safe working practices regarding the creation of respectful work environments;
- Introduce, manage and maintain written reporting procedures, documentation processes, tracking mechanisms as required by this policy so that HDGH tracks and measures the impact to the organization of both the Policy and breaches of the Policy.

### 4. Patients, Family Members, Volunteers, Students, and other Visitors to the HDGH

Patients, family members, volunteers and other visitors to the HDGH can expect to be treated with dignity and respect at all times. They should not be expected to find an

abusive or aggressive environment when they come to use the services of HDGH, or are visiting the organization for any reason.

It is also the expectation that patients, family members, volunteers, and visitors will treat the HDGH staff with the same respect and dignity, and that they do not exercise abusive or aggressive behaviour towards members of the HDGH staff. To this end, HDGH is committed to the following:

- Developing a written communication for patients, family members and visitors outlining acceptable conduct that is expected for all people within the confines of HDGH;
- Signage throughout HDGH that sets out explicitly that HDGH is a violence-free work environment;
- Ensuring with this communication that all patients, family members and visitors are made aware of their rights to seek recourse for perceived breaches of this Policy;
- Informing with this same communication of the consequences for them for breaches of this Policy.

## **5. Staff and Physicians**

Every individual staff and physician contributes to the creation of a safe and healthy work environment by demonstrating respectful and appropriate conduct at work.

All staff and physicians must accept as a personal responsibility their own role in eliminating the use of abuse and aggression in the day-to-day activities of their own work unit. Therefore, employees/physicians must:

- Understand and follow this policy and procedure;
- Attend or participate in appropriate training regarding Workplace Violence
- Uphold the Code of Conduct and its Principles;
- Promote respectful interactions at work;
- Reduce workplace violence through challenging unacceptable behaviour;
- Complete the Concern Report Form and submit to the appropriate individual for any conduct that causes an individual concern;
- In the case of employees, attend mandatory training and ask questions about anything you don't understand. New employees will receive this training during their initial orientation. Existing employees will be scheduled for the training by their manager. Failure to attend will have disciplinary consequences, up to and including termination of employment.
- In the case of physicians, any physician seeking or granted medical privileges at the Hospital will receive adequate and appropriate training and information on prevention of workplace violence and the Program. New physicians will receive their training during initial orientation. Physicians with existing privileges who have not received the training will receive the training prior to the renewal or extension of their current privileges. Training is compulsory for all physicians and granting privileges will be conditional on completing the training.
- Sign a Statement of Commitment to the Prevention of Violence in the Workplace Form (**Schedule B**);

## 6. Obligation to Report

An obligation to report is expected from the staff/physician who witnesses an incident and is not the direct victim. Silence in the face of abusive behaviour does not allow for the promotion of a safer environment, and so every employee/physician who witnesses abusive behaviour is expected to report such behaviour.

No staff/physician who in good faith registers a complaint of abuse or reports an incident of aggressive behaviour will suffer any recrimination for doing so. However, false and malicious accusations of abusive or aggressive behaviour will face consequential corrective and remedial action.

All complaints and reports of abusive or aggressive behaviour will be treated seriously, will be investigated thoroughly and fairly, and will be dealt with accordingly.

Any staff/physician who is the victim of violence or Acting Out Behaviour may at their option contact the police directly.

Anyone who witnesses violence or Acting Out Behaviour may, whether a staff, physician or manager, contact the police directly.

## **CHART FLAGGING AND ALERT SIGNS: IDENTIFYING PATIENTS HAVING THE POTENTIAL FOR ACTING OUT BEHAVIOUR**

### **INITIAL PATIENT ASSESSMENT**

Upon presentation to the Emergency Room, or Admission to Hospital, the nurse will do a "Clinical Violence Risk Assessment", noting whether there have been any past Actual incidents of Acting Out Behavior (AOB). In addition, evaluate whether there is potential for Acting Out Behavior (AOB) by watching for clinical diagnoses associated with patient behavior:

- Affective disorders (bipolar/mania)
- Paranoid delusions or psychoses
- Chemical abuse/dependency
- Dementia from any cause
- Impulse control disorders
- Personality disorders

Once the Clinical Violence Risk Assessment has been completed, it must be marked on the Patient Profile History.

If there have been any past actual acts of Acting Out Behavior (AOB) or a potential for Acting Out Behavior (AOB) is identified, the patient shall be considered prone to Acting Out Behavior (AOB) and the procedure set out below shall be followed.

### **ON-GOING PATIENT ASSESSMENT**

The most useful criteria in indicating a potential for immediate Acting Out Behavior (AOB) have been changes in the patient's autonomic nervous system. Sweating, flushed face, changes in the size of the pupil's of the eye, muscle tension are included in the 12 subtle cues used by nurses. Other behaviours that can signal whether a patient's behaviour is escalating toward violence are as follows:

- Rapid, loud, or profane speech
- Sudden change in the patient's level of consciousness such as increased disorientation and confusion
- Clenched fists, gritted teeth, reddened face, widened eyes, flaring nostrils, rapid breathing
- Motor agitation, such as agitated pacing and inability to remain still
- Hallucinations, which can be auditory or visual and may be benign or command-orientated
- Sudden change in or extremes of affect (exhilaration, grandiosity)
- Sudden lack of affect in someone who was previously very agitated and threatening, which may indicate that he's made a decision to take violent action
- Use of alcohol or drugs.

If you note any of these risk factors, you may be in a crisis situation and will need to proceed with de-escalation, avail yourself to HDGH resources and information (see attached) including "Code White" and 911 to the Windsor Police Department.

All patients who have required de-escalation, Code White or 911 response will be identified as being prone to violence and the procedure set out below shall be followed.

### **PROCEDURE FOR PATIENTS PRONE TO ACTING OUT BEHAVIOUR (AOB)**

If you have identified that the patient is prone to Acting Out Behavior (AOB):

1. Notify Admitting to flag the chart according to HDGH's policy;
2. Place An AOB alert sticker on the spine of the patient's chart and Kardex;
3. Place an AOB alert sign in the patient's chart holder outside of the patient's room.
4. Pick up new patient armbands containing the "AOB" mark from Admitting and ensure that the new armband is placed on the patient.

This will alert all hospital staff to the potential risk for Acting Out Behavior (AOB).

The AOB alert sticker and chart sign will bear the following symbol:

**This will alert all hospital staff to the potential risk for violence.**





# SCHEDULE A CONCERN REPORT FORM

As an equal and valued partner of our Health Care Team,  
**I HAVE A CONCERN ABOUT:**

- Behaviour/Conduct     
  Health & Safety     
  Security     
  Abusive Aggressive or Threatening Behaviour

**SECTION 1 OF THE REPORT CAN BE COMPLETED BY ANY EMPLOYEE/PHYSICIAN MEMBER IDENTIFYING A CONCERN AND BE SUBMITTED TO HIS/HER SUPERVISOR/DEPARTMENT CHIEF**

Note: If the employee/staff member does not feel comfortable filling out the form and giving it to their supervisor, you may contact Human Resources (see over), a member of the Joint Health & Safety Committee or a union representative if applicable.

Description of concern (location, date, person(s) involved, source(s) or cause(s) of concern, etc.)

Reported by: \_\_\_\_\_ Department: \_\_\_\_\_  
(employee/ physician name)

Reported to: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION 2 THE SUPERVISOR/DEPARTMENT CHIEF MUST COMPLETE THIS SECTION WITHIN 3 WORKING DAYS AND FORWARD TO THE EMPLOYEE/PHYSICIAN MEMBER NAMED ABOVE.**

Proposed Corrective Action to be Taken to Resolve Concern

Supervisor/Department Date:  
Chief Name: \_\_\_\_\_

**SECTION 3 IF THE EMPLOYEE/PHYSICIAN AGREES WITH THE CORRECTIVE ACTION TAKEN BY THE SUPERVISOR/DEPARTMENT CHIEF, PLEASE SIGN AND DATE THIS FORM BELOW AND TURN OVER TO YOUR SUPERVISOR TO FORWARD TO HUMAN RESOURCES FOR TRACKING PURPOSES.**

Employee/Physician Date:  
Name: \_\_\_\_\_

**SECTION 4 IF THE EMPLOYEE/PHYSICIAN DOES NOT AGREE WITH THE PROPOSED CORRECTIVE ACTION TO BE TAKEN, SIGN AND DATE THIS FORM BELOW AND TURN IT OVER TO YOUR HUMAN RESOURCES CONTACT PERSON AND A MEMBER OF THE JOINT OCCUPATIONAL HEALTH AND SAFETY COMMITTEE FOR FURTHER ACTION.**

Employee/Physician Date:  
Name: \_\_\_\_\_

- Note: 1. In the case of a WSIB Injury an Employee Incident Report Form must be completed.  
2. In the event of violent behaviour the supervisor must complete the Supervisory Investigation Tool.

White Copy – Human Resources      Yellow Copy – Employee      Pink Copy - Supervisor

## Hotel-Dieu Grace Hospital

### Student/Volunteer De-escalation Self-Study Program

**Workplace Violence is any abusive or aggressive behaviour that can include “physical assault” on a person or on property, “behaviour considered to be threatening”, or “abuse in a verbal manner” that occurs in a work-related setting”.**

#### **General Objective**

To provide participants with the knowledge, skills, and strategies to effectively defuse a potentially explosive situation while maintaining safety and security for everyone.

#### **Specific Objectives**

By the reading the following material, the participant will have reviewed:

- levels of escalating behaviour
- how to recognize escalating levels of behaviour
- non-verbal, par verbal communication
- successful verbal resolution strategies
- how to prevent verbal aggression from becoming physical
- how best to deal with fear and anxiety

**Aggression can be physical or verbal and is often a response to fear, anger or powerlessness. It may be a form of coping.**

#### **Defusing Anger, Frustration, and Conflict**

- There is a need to effectively defuse the anger of a patient, family, visitor or colleague in a calm and professional manner.
- Not every threat of violence can be predicted or prevented.

#### **Why Increased Risk in Hospitals?**

- Accessible, open environment
- High stress circumstances
- Wide range of clientele
- Prolonged waiting times; overcrowding
- Gaps in communication
- Alcohol and drug impairment decreasing impulse control

#### **Displaced Anger**

- Anger is a response to feeling threatened, scared or hurt.
- People displace their anger on a “safe target”.
- People are upset that they are in the “patient” role and displace their anger on those who are providing their care and healing.

**When Patients, Families, Visitors are hostile to staff, they are communicating:**

- Vulnerability
- Overload of emotional stress
- Fear
- Feelings of helplessness
- Powerlessness

**Behaviour escalates through a series of levels. Recognizing the levels and learning appropriate responses for each of them is important in de-escalation.**

#### **ESCALATION STAGES OF ACTING OUT BEHAVIOUR**

1. Initial tension/frustration
2. Verbal Attack
3. Loss of Control
4. Recovery after Outburst

## **Escalation Development - 1st level**

### **ESCALATION STAGE #1**

#### **# 1. Initial tension & frustration**

- anxious
- high levels of emotion
- still rational
- still in control of behaviour

Be aware of the anxiety level. Note when situation first escalates by:

- louder voice
- fidgeting, pacing
- build up of energy

### **STAFF RESPONSE / INTERVENTIONS**

#### **#1. Supportive**

- be non judgmental
- be empathetic
- listen
- observe
- acknowledge
- avoid arguing or defending previous action

#### **Note**

Perception is reality and feelings are facts. If an individual thinks a situation/event is stressful – **it is**

## **NON-VERBAL COMMUNICATION**

Non-verbal communication refers to all the ways we communicate apart from words such as:

- personal space
- body language
- facial expressions
- gestures
- tone of voice

#### **Nonverbal Communication Tip:**

Exercise control over your facial expressions by controlling your thoughts...  
Be aware of the power of a look.

## Personal Space/Territory (Proxemics)

**Proxemics** is the personal territory that we carry with us, the "bubble" of space that we keep between ourselves and the person ahead of us in a line.

The four areas of personal territory are:

- **Public space** ranges from 12 to 25 feet.
- **Social space** ranges from 4 to 10 feet.
- **Personal space** ranges from 2 to 4 feet and is used among friends and family..
- **Intimate space** ranges out to one foot and involves a high probability of touching. We reserve it for whispering and embracing.



The **size** of a person's personal space may vary depending on many factors.

### Some Factors affecting Personal Space:

- Gender
- Appearance
- Culture
- Previous experience
- Body size
- Age
- Emotional state
- Environment
- Situation

Personal space directly relates to how we understand the meaning of messages from others.

For example, a person expressing anger is perceived as less threatening the further away that person is. However, if the person is close, the expression of anger becomes more threatening.

### NOTE:

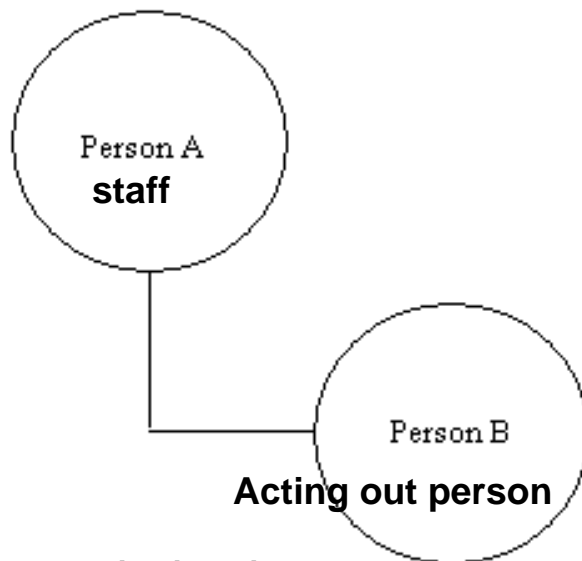
Entering into someone's personal space without their permission may escalate their behaviour.

## AVOIDING THE FATAL FUNNEL



### L-Shaped Stance

- Demonstrates respect
  - Decreases confrontation
  - Not invading the personal space of others
1. Stand at an angle to the person rather than face to face, slightly outside their personal space (usually around 3 feet or so).
  2. Your shoulders should be about at a 90 degree angle to the person you are talking to.
  3. Keep your arms relaxed, hands visible and stand with your feet slightly parted.



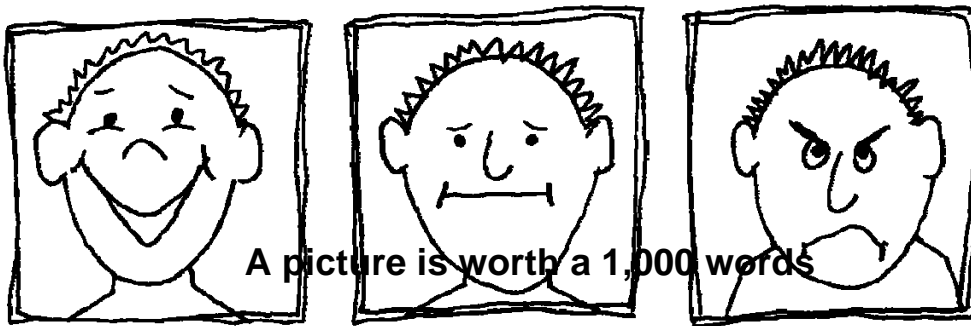
### Non verbal Communication Tip

Allow the person you are talking with to dictate the amount of space between you.

### Body Language (Kinesics)

Gestures, postures and facial expressions, hands, speed you move give non-verbal cues which can support, emphasize or contradict what we are trying to convey..

**Facial expressions** are the most powerful type of nonverbal communication. Our facial expressions communicate our emotion, even when we are unsure of what we are feeling.



## Matching words and body language - Congruence

- Denotes trustworthiness
- Shows others that we care
- Shows we are in control

## Incongruence

- Interpreted as being untrustworthy or inauthentic

## PARA-VERBAL COMMUNICATION

Para-verbal communication refers to **how we say something, not what we say.**

A sentence can have entirely different meanings depending on:

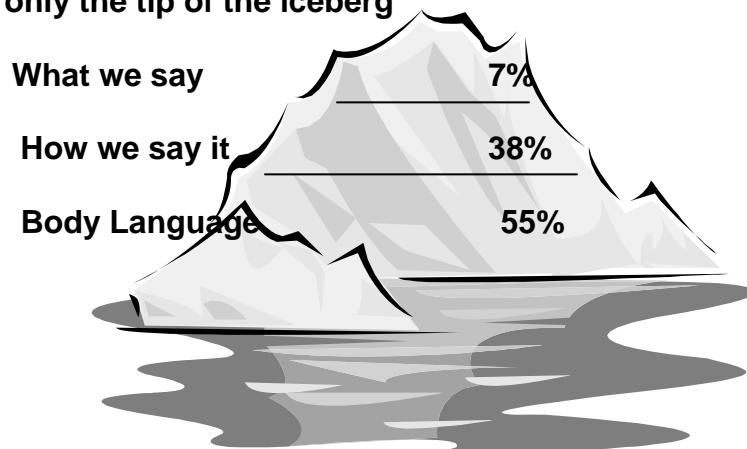
- tone of voice – avoid sounding condescending or sarcastic
- volume - speaking loudly can escalate behaviour
- emphasis on words.



Some points to remember about **our** para-verbal communication:

- When we are angry or excited, our speech tends to become more rapid and higher pitched.
- When we are bored or feeling down, our speech tends to slow and take on a monotone quality.
- When we are feeling defensive, our speech is often abrupt.

## The words we say are only the tip of the iceberg



WHAT WORKS	WHAT DOESN'T
"Tell me more about..."	"You shouldn't feel that way"
"I'm not sure I understand...tell me again"	"Why are you..."
"Have you thought about..."	"I know just how you feel..."
"You're saying _____...have I got that right?"	"Don't worry...it'll be o.k."
"How are you feeling about that?"	"You always (never) do..."
"I sense that you're really angry..."	"Well, if I were you, I'd..."
	"That's nothing...you should hear what happened to me..."
	"Yes...but..."

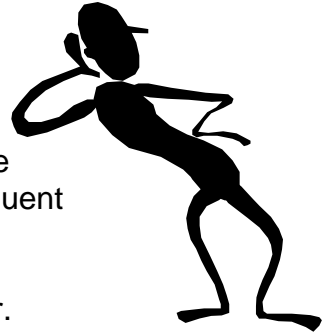
## ACTIVE LISTENING

By listening effectively, one can often effectively diffuse an angry or threatening situation **Three Main Listening Skills:**

**Attending:** Giving your total attention to another person.

**Following:** Making sure you're engaged by using eye contact, un-intrusive gestures (such as nodding of your head, saying okay or asking very infrequent questions).

**Reflecting:** Paraphrasing, reflect back the feelings of the person you hear.



## Escalation Development - 2nd Level

### ESCALATION STAGE #2 /INTERVENTIONS

1. Initial tension/frustration

#### #2. Verbal Attack

- irrational thoughts
- beginning to lose control
- belligerent
- button pushing

Physical cues – louder, agitated verbalizations

### STAFF RESPONSE

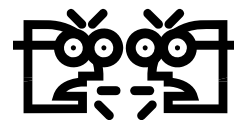
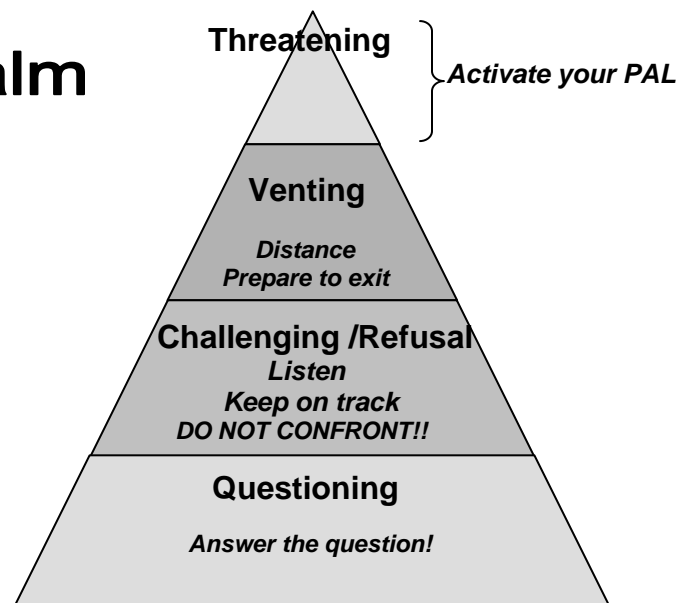
1. Supportive

#### #2. Directive

- calm body language
- non-threatening tone of voice
- SET LIMITS of acceptable behaviour e.g. "please lower your voice"
- Reduce stimulation from setting...e.g. bring from waiting room to exam room.
- Communicate information about any delays etc.
- Give some choices.

### STAGES OF VERBAL ATTACK

**Stay Calm**

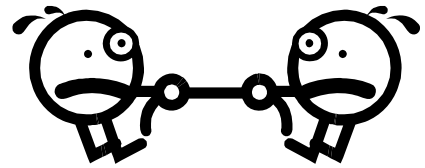


## Defusing Techniques

- Give an upset patient, family, visitor, colleague plenty of personal space.
- Allow a frustrated person some time to vent.
- Ignore personal verbal “attacks”.
- Limit stimulation and traffic area.
- Staff need to remain professional and in control.
- It is not personal.
- Use calm voice...simple statements. The person can't process as well as normal.
- Help individual get in control. “I want to hear what you have to say but I can't do it when you are screaming”. “I want to help you but I need you to...”

## AVOIDING POWER STRUGGLES

- Treat people with dignity and respect
- Provide as many options as possible
- Voice requests in a non-threatening way
- Ask yourself “Is this the best time?” and “Am I asking this in the best way?”
- Explain the “why”



# Escalation Development - 3rd Level

## ESCALATION STAGE #3

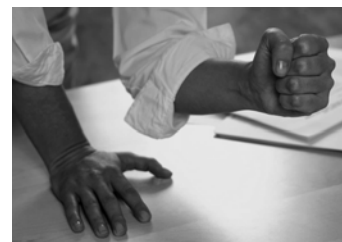
1. Initial tension/frustration
  2. Verbal Attack
  - #3. Loss of Control**
- Total loss of control which may result in physically acting out

## STAFF RESPONSE/INTERVENTIONS

1. Supportive
  2. Directive
  - #3. Activate your PAL if not already activated in verbal attack stage.**
- Ensure safe environment for other clients (and staff).
  - Respect personal space.
  - Prepare to exit area

## CUES THAT PHYSICAL AGGRESSION MAY BE IMMINENT

- rapid breathing
- teeth grinding
- dilated pupils
- flaring nostrils
- choppy speech
- clenched fists
- bobbing and dipping movements of the body.



DO'S	DON'TS
Stay in an open, public area.	Touch the person
Ask for more space if you feel your personal space is being violated.	Try to physically restrain
Take signs of agitation seriously.	Hesitate to ask for help.
	Ignore warning signs that a person is about to explode

### Tips: Staff Protection

Don't wear hanging jewelry.

- Don't divulge personal information about yourself.
- Don't wear items around your neck
- Remove things from around your neck when possible.
- Ties, stethoscopes, jewelry, and name badges can be used as a noose. Always use a "break away" lanyard
- Position yourself between the acting out person and the exit.
- Isolate the person who is agitated if possible.

**Do not lose your inward peace for anything whatsoever, even if your whole world seems upset.**

**-Saint Francis de Sales (1567-1622)**

## Escalation Development - 4th Level

### ESCALATION STAGE #4

1. Initial tension/frustration
2. Verbal Attack
3. Loss of Control

#### #4. Recovery after Outburst

- Individuals fear that after "losing control" they will be rejected.
- Reduction in level of tension
- Energy level lower than usual
- Struggle to regain composure

### STAFF RESPONSE/INTERVENTIONS

1. Supportive
2. Directive
3. Activate PAL

#### #4. Reconnect

- Allow person to stabilize
- They need to explain their feelings, and come to some closure regarding the incident.

## **Crisis Prevention Do's and Don'ts – A Summary**

### **Do**

- Respect personal space
- Remain calm
- Set limits
- Listen carefully
- Be aware of your para-verbals and non-verbals
- Be aware of your environment and exit route
- Seek assistance if crisis is escalating

### **Don't**

- Be challenging or confrontational
- Overact or be judgmental
- Get in a power struggle
- Handle escalating situations alone

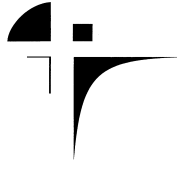
## **“Universal Behavioral Precautions”**

There is the potential for any person to become verbally or physically assaultive under extreme distress.

**STAFF COMMITMENT TO THE PREVENTION OF VIOLENCE IN THE  
WORKPLACE FORM**

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**Hôtel-Dieu Grace Hospital  
WINDSOR, ONTARIO**

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**COVENANT**

**We commit to treating patients and staff in a dignified manner that conveys respect for the abilities of each other and a willingness to work as a team of equally valued partners. We promote an atmosphere of collegiality, cooperation and professionalism. We demonstrate empathy, compassion and respect in our interactions with others and are always polite and courteous. We consistently adhere to all the rules and regulations of our hospital.**

**We wish to be held accountable for our commitment and we expect the same dedication from all members of our hospital community.**

**Statement of Commitment**

I, the undersigned, have been made aware of the Code of Conduct, the Covenant and the Workplace Violence Prevention Policy of the Hotel-Dieu Grace Hospital.

I commit myself to adhere to these policies as now published. I understand that failure to comply with either or both of these policies may lead to the termination of my placement at Hotel-Dieu Grace Hospital.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signed

This Commitment shall be signed by every student or volunteer at the time of placement.