



**POLICY/PROCEDURE**

<b>CATEGORY:</b>	Occupational Health & Safety	<b>PAGE NUMBER:</b>	1 of 5
<b>SUBJECT:</b>	Zero Tolerance Policy/ Procedure	<b>DISTRIBUTION:</b>	Hospital Wide Manuals
<b>CURRENT EFFECTIVE DATE:</b>	March 2014	<b>NEXT REVIEW DATE:</b>	March 2017

Stanton Territorial Health Authority (STHA) staff has a right to work in a safe environment. STHA does not condone any behaviour which may cause physical or emotional harm to staff.

STHA believes in the prevention of abuse and promotes an abusive/violence free environment in which all people respect one another and work together to achieve common goals. Any act of abuse/violence committed by or against any staff member is unacceptable and will not be tolerated.

STHA is committed to:

1. Developing and maintaining a reporting and documenting process for such incidents of abuse/violence.
2. Investigating reported incidents of abuse/violence in a prompt, objective and sensitive manner.
3. Taking necessary corrective action.
4. Providing appropriate support to staff.

This policy/procedure describes defusing a potentially volatile occurrence. Hospital and medical staff may find themselves in a situation in which a hostile individual(s) may become violent. Staff will not take undue risk in managing potential or actual violent situations.

STHA provides Non-Violent Crisis Intervention (NCI) Training. It is desirable to use non violent crisis intervention to defuse an event before it escalates. STHA recognizes that there are occasions when non-violent crisis interventions do not produce desirable results.

**SPECIAL POINTS:**

All incidents of abuse toward staff are to be reported in the electronic incident reporting system, Risk Monitor Pro (RMPRO™)

See the "Code White Procedure" in the RED Code Binder located in all Departments.

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**DEFINITIONS:**

**Physical Abuse:** includes, but is not limited to, inappropriate physical contact such as striking, pinching, kicking, shoving, bumping, spitting and/or throwing objects.

**Staff:** includes employees, medical staff, contractors, consultants, students, volunteers, and other individuals affiliated with STHA.

**Verbal Abuse:** includes, but is not limited to, inappropriate comments and shouting, belittling and or cultural/racial background comments, the use of obscene language, gestures and/or threats.

**Violence:** Refers to any conduct directed toward a staff member that hurts or causes harm through verbal, physical, sexual or psychological means.

**Workplace Violence:** Any incidence where an employee is abused, threatened, intimidated or assaulted during the course of his/her employment.

**PRO-ACTIVE RESPONSES:**

The following procedure outlines the initial steps for staff to take to address an individual's abusive behaviour:

**1. Listen Attentively:**

- Listen attentively until the individual has expressed their concerns. This may go on in a disorganized, emotional or unclear manner until the individual unburdens themselves.
- Do not attempt to interrupt or ignore as this may increase frustration in the individual.
- Refrain from taking a defensive stance.
- Stay calm. Avoid criticizing or judging, as this puts the other person on the defensive.
- Allow a comfortable distance between yourself and the individual.

**2. Empathize:**

- Show genuine concern by being supportive and non-judgmental.
  - Attempt to relieve the individual's anxiety by expressing statements such as, "Yes, I can see how this has upset you".
  - Avoid comments such as "Calm down" or "What are you so upset about?"
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**3. Avoid Justifications:**

- Avoid lengthy explanations of the individual's allegations.
- Avoid appealing for understanding from the individual regarding the circumstances which brought about the outburst.

**4. Gather Information:**

- Clarify by gently asking appropriate questions to have a clear picture of the situation without giving the impression of an interrogation.
- Review the facts, sum up the understanding of the problem, "Let's see if I understand what happened".
- Paraphrase what has been communicated to confirm and acknowledge what the individual has stated.
- Centre the individual's attention on options to remedy the problem.

**5. Take Action:**

- Agree on the course of action and identify both your own and the individual's responsibilities.
- Assist the individual with the implementation of the course of action if required.
- In cases where abusive behaviour continues and the patient's mental or physical condition is not a significant contributor to the abusive behavior, staff are encourage to contact their Clinical Coordinator/Supervisor or Patient Care Coordinator (PCC) to request the speak with the patient/family/visitor. Should the abusive behavior continue and be unresolved, the Manager of the Unit/Department will speak with the patient. If the Manager requires assistance, he/she can see direction from their Director.

**6. Report the situation:**

- Report the situation using the patient and staff electronic incident reporting system, Risk Monitor (RMPRO™).
- Report personal threats to the manager or designate to discuss the option of contacting the RCMP to lodge a complaint.

**7. Proceed to Reactive Response:**

If the above steps are not effective or if the situation is escalating proceed to the "Reactive Response".

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**REACTIVE RESPONSE:**

The following procedure outlines the steps to take when the proactive steps have not been effective. There are occasions when the potential for violence exists or actually occurs.

**1. Ensure Safety:**

- a. Secure safety immediately. This may mean removing yourself from the area by going to the closest secure area.
- b. Call a CODE WHITE, by paging overhead according to the Code White procedure. See the "Code White Procedure" in the RED Code Binder located in all Departments. The Manager of the Unit/Department and the PCC shall respond to the Code White.
- c. If the situation warrants additional response, call RCMP dispatch at 669-1111 and inform them of your need for immediate assistance. Be clear in identifying your location.
- d. Allow the Code White team or RCMP to handle the violent person. You have the right to file a complaint with the RCMP against the violent person.
- e. **Prior to the end of your shift**, submit an incident report using the Risk Monitor Pro system. The type of incident is to be recorded as "safety/security".

**2. Assess safety to return to work:**

- a. Once the situation is over, the manager/designate, will assess if the staff member(s) are able to resume duties and whether there is a need for a critical incident stress debriefing. If a critical incident stress debriefing is required, the manager/designate will arrange.
- b. In the event that staff is physically injured, they will be referred to the Emergency Department. WSCC forms must be completed and submitted to the staff member's manager/designate.
- c. Should the staff member feel they cannot continue their duties for that shift then they should be replaced.

**3. Assaulted/battered employees:**

- a. Following an assault, the employee must notify his/her immediate manager/designate.
- b. The manager/designate should encourage the employee to access the Employee & Family Assistance Program (EFAP) and discuss the employee's desire to report the incident to the RCMP.

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**4. Clinical Coordinator/Supervisor/Manager Follow up:**

- a. For incidents that are submitted in Risk Monitor Pro, ensure follow up is completed in the follow up section.
- b. Once the above review is started, record all follow up done directly into Risk Monitor Pro for that incident. The Clinical Coordinator/Supervisor will conduct the follow up directly with the employee. Once all follow up is completed, the Manager will indicate this by selecting "Manager's Review Complete".


**5. Occupational Health & Safety Coordinator:**

- a. The Occupational Health & Safety Coordinator will review incidents of violence that are submitted in Risk Monitor Pro. The Occupational Health & Safety Coordinator will provide any additional suggestions/recommendations to the Manager.
- b. The Quality & Risk Management Coordinator will keep statistics on all incidents that are reported. These statistics will be part of the STHA Quarterly Report. The report will be provided to the Quality & Risk Management Committee, Occupational Health & Safety Committee, STHA Managers and the Public Administrator.

**REFERENCES:**

1. Accreditation Canada, *Required Organizational Practices Handbook, 2014*, retrieved from <http://www.accreditation.ca/publications-menu> on 20 February 2014
2. College of Nurses of Ontario. *Abuse of Nurses: A Guide to Prevention and Management*. September 1999.
3. Elliott, Pamela. P., *Violence in Health Care: What Nurse Managers Need to Know*. *Nursing Management*. December 1997.
4. Grant, Anne E. & Ashman, Aileen. A., *"A Nurse's Practical Guide to the Law."* Aurora Professional Press, Aurora Ontario. 1997.
5. Royal Alexandra Hospital: *Abusive Behaviour Towards Staff: Policy and Procedure*
6. U.S. Department of Labor, *"Guidelines for Preventing Workplace Violence for Health Care and Social Services Workers*. 1998.

Reviewed and approved by:



MAR 6 2014

Chairperson of CPAC (signed and date)

Reviewed and approved by:



MAR 6 2014  
March 14, 2014

Chief Executive Officer (signed and date)