AV2500 – Violence Prevention Program

1.0 PURPOSE

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

2.0 DEFINITIONS

TERM	DEFINITION
Client	Patients, residents, and other persons receiving services or care in Interior Health (IH) work places or programs.
Code White Response	An emergency response to a violent incident in a healthcare workplace.
Contractor	A person or company that undertakes a contract to provide materials or labour to perform a service or do a job.
Employee	A worker employed directly by IH. Includes union and excluded employees.
Joint Occupational Health & Safety Committees (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 place in workplaces with 20 or more employees.[4]
Worker Health and Safety Representative	Workplaces with more than 9 but fewer than 20 employees are required to have a Worker Health and Safety Representative in place of a JOHSC.[4]
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 IH workplace who is not a worker or a client.
Worker	Refers to all IH employees (contract and non-contract), physicians, students, volunteers, and/or contractors who perform work for compensation (monetary or non-monetary).

TERM	DEFINITION
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

- Interior Health (IH) is committed to providing a safe environment for workers, clients and the public. IH will support this commitment by developing, implementing, monitoring and evaluating initiatives in support of this policy via the establishment and maintenance of a VPP, as part of the IH Occupational Health and Safety (OHS) Program.
- As outlined in the WSBC Occupational Health and Safety (OHS) Policy Item R4.29-2 (Workplace Violence Prevention Program), the IH VPP consists of the following elements:
  1. Roles and Responsibilities
  2. Violence Risk Assessments
  3. Policies, Procedures, and Work Arrangements/Systems
  4. Worker and Manager/Supervisor Training
  5. Incident Reporting and Investigation
  6. Incident follow-up
  7. 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   Scope

- 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 (AU1000).
- 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 (AV2520).

- For situations involving aggressive or violent visitors, additional requirements are outlined in the IH Managing Disrespectful, Aggressive or Violent Behaviours of Visitors Policy (AV2900).
- 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 (AV3000).

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 policies, practice standards, and procedures for preventing or managing violent behaviours.
- Ensure that directors, managers, supervisors, physicians, volunteers, and contractors, employees and students 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
- Ensure 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 procedures.
- Ensure that identified risks of violence are clearly communicated and understood by all employees that may be encountered in the course of their work.
- Ensure that workplace specific VPP procedures are developed and communicated to employees as required, and that employees understand the requirements (e.g. working alone or in isolation, code white response procedures, etc.).
- Ensure that a Violence Risk Assessment (VRA) is completed for the site or department. Also ensure the worksite VPP is reviewed annually at a minimum, including completion of a VRA annual review.
- Ensure threats are addressed and controls enacted as determined by the investigation, in accordance with the Threat Management Policy – AV2510.

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- Attend required Violence Prevention training and education.
- Ensure employees attend required VPP training and education.
- Ensure employees within area(s) of responsibility comply with VPP procedures including, at a minimum, annual code white drills as set out in the Code White Response Plan Procedural Guideline.
- Ensure 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).
- Ensure 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.
- Provide additional VPP training to employees as appropriate.
- Ensure employees are aware of resources available to them after violent incidents (e.g. personal physician, Critical Incident Stress Debriefing, Employee and Family Assistance Program).
- Ensure 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 defusing and debriefing to employees who have been witness or subject to a workplace violent incident.

4.1.3   Employees

- Act in a manner which fully respects the rights of others.
- 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).
- Seek first aid if injured because of a violent (or any) incident.
- Report any threat, act, or near miss (potentially violent situation) to the immediate supervisor and to the Provincial Workplace Health Contact Centre (1-866-922-9464).

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.

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- 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).
- Evaluation VPP annually in collaboration with stakeholders and provide updates and recommendations to the organization.
- Provide statistical information on incidents of violence as requested.

4.1.6 Employee Relations Advisor
- Consult, coordinate and guide on assigned components of the VPP to achieve compliance with the standards set out in legislated requirements and policy.
- Provide leadership to site/facility management, employees and union personnel for workplace health and safety programs, planning, implementation, and evaluation.
- Advocate and promote various health and safety programs to achieve compliance with legislation and policy, such as the VPP.
- Consult with the Workplace Health and Safety department for advice and recommendations and refer same to site management for implementation and follow-up.

4.1.7 Contractors
- Comply with all aspects of the organizations VPP in addition to any safety program requirements of the contractor.
- Comply with all Occupational Health and Safety legislation and regulations.
- 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.
- VRAs must be reviewed annually.
- 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.
- Refer to the Site Manager's Guide to Conducting a Violence Risk Assessment and WSBC OHS Policy Item R4 4.28-1 for more information.

4.3   Assessment and Communication of Client Risk
- When a risk of violent behaviour is identified, the following is required:
    - Assessment of the client and the level of risk.
    - Development of a behavioural or patient-specific care plan to manage the behaviours.
    - 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 Long-Term Care Aggressive (AGG) Behaviour Toolkit and/or the Acute & Community Toolkit if relevant to your workplace.

4.4   Code White
- A Code White Response Plan is required in all workplaces.
- Refer to Code White Response Procedural Guidelines to help develop, implement, and sustain a Code White Response Plan.

4.5   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 – 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.

4.6   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.

4.7   Education and Training

- Refer to Manager's Guide to Violence Prevention Program Education.
- 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 have completed the in-class Provincial Violence Prevention Curriculum (PVPC) training (i-Learn #807) must complete the PVPC refresher training program (i-Learn #1800) annually.
    - 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;
    - 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).

4.8 Incident Reporting and Investigations
- 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.
- For sites with a Code White Level 3 response (also known as an Advance Team Response) plan, there is the additional code white report that can be used to support team response documentation: Code White Report Pages 1 and 2 (#822415).

4.9 Incident Follow-up
- Following an incident or hazard report, the manager/supervisor is required to initiate an investigation 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 Debriefing, 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 review any corrective actions implemented after an incident investigation for effectiveness

4.10 Program Review
- The VPP will be reviewed annually by WHS in collaboration with stakeholders.
- Site specific VPP policies and procedures must be reviewed by the site leadership and JOHSC/Worker Health and Safety Representative:
  - 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:
  - AV0100 – Occupational Health & Safety Program
  - AV3000 – Psychological Health & Safety in the Workplace
  - AV0200 – Working Alone or In Isolation
  - AK0400 – Incident Management
  - AW0650 – Prohibited Items
  - AU1000 – Workplace Environment

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Interior Health

Administrative Policy Manual
Code: AV Workplace Health & Safety

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- o AV1100 – Employee Incident Reporting and Investigation
- o AH2500 – Least Restraint
- o AV2510 – Threat Management – The Assessment and Management of Targeted Violence
- o AV2520 – Active Deadly Threat Response
- o AV2900 – Managing Disrespectful, Aggressive, or Violent Behaviours of Visitors
- Guidelines, Procedures, & Protocols
  - o Aggressive Alert Application Procedure
  - o Weapons in Long-Term Care Protocol
  - o Manager's Guide to Violence Prevention Program Education
  - o Manager's Guide to Conducting a Violence Risk Assessment
  - o Manager's Guide to Incident Reporting and Investigation
  - o Manager's Guide to Accessing Employee and Family Assistance Program (EFAP) Services
  - o Manager's Guide to Implementing Working Alone or In Isolation Procedures
  - o Code White Procedural Guideline
  - o Occupational Health and Safety (OHS) Orientation
  - o Staff Safety Guidelines for Interior Health Facility Design Projects
- InsideNet Pages:
  - o Violence Prevention Program
  - o Employee Psychological Health and Wellness
  - o JOHSC
  - o WorkSafeBC High Risk Strategy
  - o 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
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