

St. Joseph's Manor

Code White

Violent Person

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Overview

St. Joseph's General Hospital Elliot Lake (SJGHEL) St. Joseph's Manor (SJM), is committed to a safe environment for patients/resident/clients, staff, physicians, volunteers, and visitors.

Code White is a security alert in response to a situation where any individual within SJM is behaving in a dangerous manner or in a potentially dangerous manner towards themselves, others, or property is being damaged. Code White indicates the behavior of an individual is escalating or is potentially escalating, beyond the abilities of staff to manage safely and that help is required. The Code White response procedure is to promote a coordinated response between staff at the scene and support staff or Police.

Non-Violent Crisis Intervention education will be provided to all staff to enhance knowledge, skills, and ability to safely manage and prevent aggressive/violent behaviour and/or Code White situations.

Code White (assistance is required) may be called when:

- the person is being, or is threatening verbal and/or physical abuse towards themselves, staff, residents or visitors,
- the person is damaging or threatening damage to property,
- the person is not responding to verbal de-escalation, negotiating, redirection, limit setting and problem-solving techniques by the staff,
- the person is exhibiting risk behavior and requires immediate intervention for their own safety, or.
- urgent assistance required for staff safety.

Initiating a Code White

Any staff member may identify a Code White situation. Notification of the Code White will occur in the following ways;

• by using the telephone paging system by dialing *75 from any SJM phone.

Call Police (911)

Have the Hospital Switchboard call 911 when:

- there is a real or perceived threat that one's safety is in danger:
- the staff, first responder and or Incident Manager determine the situation is beyond their abilities:
- a firearm, weapon and/or hostage is involved. NOTE: This would be Code Silver, or a Code Purple and a Code White will NOT BE initiated:
- When the aggressive behaviour occurs outside the limits of response established by the organization (e.g., off-site):
- When the aggressor is not a resident and threatens staff and resident safety and other means of intervention are not available.

Switchboard will provide the SJM entry code to the 911 Operator.

Ancillary Codes

Incident Manager will determine if either a Code Silver (Weapon) or a Code Purple (Hostage) should be initiated, thereby negating the Code White actions.

Who can initiate a Code White?

A code white can be initiated by any staff member or volunteer.

Responders

The Most Responsible Individual will be the Incident Manager (IM). Additional staff arriving on scene will assist as directed by the IM.

Incident Manager (IM) will:

- Remain with the resident at all times, maintaining their own safety.
- Insure that the Switchboard has called 911 (if required).
- Check the physical and psychological status of the individual in crisis.
- Determine intervention needed.
- Check the safety of the environment and remove any dangerous objects.
- Address what needs to occur to de-escalate the crisis.
- Alert other staff that assistance is required.
- If OPP has been called, brief upon arrival.
- Verbally communicate directly with the person to try and de-escalate behavior while being conscious to protect personal safety and to avoid injury if behavior escalates.
- Ensure the safety of other residents, visitors, and staff not involved by asking them to leave the scene immediately.
- Ensure personal safety by removing all personal items which could cause injury (e.g., pens, stethoscopes, name badges, watches, and eyeglasses).
- Use personal protection equipment (PPE) as appropriate.
- Reduce stimulation in the area by turning off radios, TVs and other sources of noise producing equipment.
- Reduce activity. Remain calm.
- Brief senior management on the situation.

Staff Member:

One staff member as determined and directed by the IM will:

- Contact Department Manager/ Manager on call (after hours and weekends);
- Contact Switchboard to ensure police have been called;
- Ensure police have been contacted;
- Have IT access video surveillance of area ready for police arrival;

Other Staff will:

- Remain where they are, if it is safe, and lock doors if possible.
- Ensure the safety of other residents, visitors, and staff not involved by asking them to leave the scene immediately.
- Reduce activity. Remain calm.
- Assist the Incident Manager as required.

Once Police Arrive on Scene:

- Incident Manager to brief Officer on situation, including;
 - o History of resident;
 - o Expected drugs or medication involved;
 - o Weapons;
 - o Assistance that SJM staff can provide;
- All staff to follow Officer's instructions and provide assistance as required.
- If EMS transfer is required, transfer documentation will be required.

Violent Aggression Assessment Checklist (VAAC)

The VAAC can be used by staff to assess the risk of violence or how aggressive the resident is or may become. To access the VAAC please see page 7 or click <u>here</u>.

This checklist will accompany the transfer documentation.

CODE WHITE PROCESS – SJM

A staff member identifies Code White situation and becomes Incident Manager.

Have Switchboard call 911.

Use overhead paging system *75 to announce "Code White" and include:

- Location
- Need for OPP

Staff Members on Scene of Incident:

- Contact Department Manager/ Manager on call
- Ensure police have been contacted.
- Announce three times "Code White All Clear" message when directed by the Incident Manager

Incident Manager:

- Remain with the resident
- Check the status of the individual in crisis.
- Determine intervention needed.
- Check the safety of the environment
- Alert other staff on the scene that assistance is required.
- Brief OPP.
- Verbally communicate directly with the person to try and deescalate behavior.
- Ensure the safety of other residents, visitors, and staff not involved
- Ensure personal safety by removing all personal items which could cause injury.
- Use PPE as appropriate.
- Reduce stimulation in the area
- Reduce activity. Remain calm.
- Brief senior management on the situation.

Other Staff:

- Remain where they are, if it is safe, and lock doors if possible.
- Ensure the safety of other residents, visitors, and staff not involved by asking them to leave the scene immediately.
- Reduce activity. Remain calm.
- Assist the Incident Manager as required.

DISCLAIMER

This is intended as a tool to provide a high-level overview. To ensure a coordinated and effective emergency response, refer to the SJGHEL Code Policy.

St. Joseph's Manor Elliot Lake Violent Aggression Assessment Checklist Patient's name: DOB: ___/___ DD/MM/YY Known history of violence Q No Q Yes If yes, please provide the date and a brief description of the last known incident. Date Description TYPE OF BEHAVIOUR EXHIBITED Yes / No **DESCRIPTORS** Easily annoyed or angered. Unable to tolerate the presence of Uncooperative Q No others. Willnot follow instructions. o Yes Verbal attacks, abuse, name calling, verbally neutral comments Verbal Abuse Q No uttered in asnarling, aggressive manner o Yes Overtly loud or noisy, i.e. slams doors, shouts out when talking, etc. Hostile/Attacking Objects Q No An attack directed at an object and NOT at an individual i.e. the Q Yes indiscriminatethrowing of of an object, banging or smashing windows, kicking, banging, head-banging, smashing of furniture A verbal outburst which is more than just a raised voice; and Threats Q No where there is definite intent to intimidate or threaten another Q Yes person. A definite intentto physically threaten another person, i.e. raising of arm/leg, aggressive stance, making a fist, etc. An application of force or attack directed at an individual, i.e. kick, Assaultive/Combative Q No punch, spit, grabbing of clothing, use of a weapon or weapon of o Yes opportunity. Known risk factors/triggers Mitigation strategies for known risk factors/triggers

BEHAVIOUR	Level of Risk	CURRENT RISK MITIGATIONSTRATEGIES/INTERVENTIONS
No observed behaviour	Low	
Uncooperative OR verbal abuse/aggression	Moderate	
One or more of the above shaded OR both non-shaded OR significant history of violence	High	

Print name:	

Edited from 'The Royal' Hospital's VAAC which is adapted from: Broset Violence Checklist (R. Almvik & P. Woods, 2000): Alert System risk Indicators (R. King et al., 2006), Correlates of accuracy in the assessment of Psychiatric Inpatients' risk of violence (D. McNeil & R. Binder, 1995) and Violence/Aggression Assessment Checklist (VAAC) PSHSA 2010. All rights reserved.

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