

DEARNESS HOME POLICIES AND PROCEDURES

MANUAL: Emergency Management Plan	INDEX NO: EMP10-001		
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SUBJECT: Code White – Violent Outburst Emergency Response Plan	Implemented M / D / Y 07 01 22	Reviewed M / D / Y	Revised M / D / Y
APPROVED BY:			
DOCUMENT APPLIES TO: All Staff			
<i>A printed copy of this document may not reflect the current policy. Refer to the electronic version located in the Emergency Management Plan on Surge Learning.</i>			

POLICY

To ensure the safety and security of residents, staff and visitors a LTCH will follow the Code White Violent Outburst Emergency Response Plan procedures located below and in Appendix 'B' if a LTCH experiences a violent outburst.

DESCRIPTION

A violent outburst is a violent expression of feeling and/or an outburst of anger.

COMMON LAW DUTY – s.39, FIXING LONG TERM CARE ACT (FLTCA), 2021

Common law duty

39 (1) Nothing in this Act affects the common law duty of a caregiver to restrain or confine a person when immediate action is necessary to prevent serious bodily harm to the person or to others.

Restraining by physical device under common law duty

39 (2) If a resident is being restrained by a physical device pursuant to the common law duty referred to in subsection (1), the licensee shall ensure that the device is used in accordance with any requirements provided for in the regulations and that any other requirements provided for in the regulations are satisfied.

Restraining by administration of drug, etc., under common law duty

39 (3) A resident may not be restrained by the administration of a drug pursuant to the common law duty referred to in subsection (1) unless the administration of the drug is ordered by a physician or other person provided for in the regulations.

Same

39 (4) If a resident is being restrained by the administration of a drug pursuant to the common law duty referred to in subsection (1), the licensee shall ensure that the drug is used in accordance with any requirements provided for in the regulations and that any other requirements provided for in the regulations are satisfied.

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PURPOSE

1. To provide a standard response for staff to obtain assistance in managing episodes involving a violent person.
2. To preserve the safety of staff, residents and visitors.
3. To communicate an episode of violence to other staff members working in the building.
4. To assist the person displaying violence to regain control over their behaviour.
5. To ensure a debrief occurs following every activation of the plan and to evaluate areas for improvement.

VIOLENT OUTBURST -RESIDENT

1. A crisis response may be necessary when a resident displays a substantial loss of control and responsive behavior is imminent or has erupted. The behaviors may include a resident who is verbally and /or physically threatening towards self, residents, staff, family, volunteers and /or visitors **and** :
 - a) The resident is not responding to verbal de-escalation techniques, negotiating, redirection, limit setting and problem solving techniques by the staff.
 - b) A resident may require an emergency restraint (chemical, physical, environmental) and is or is anticipated to be resistive to the restraining procedure.
 - c) Immediate assistance is required.
2. Where any of the above occurs, a staff member shall not approach the resident alone to provide any type of personal care.
3. If a staff member is being confronted or harmed by a resident they should:
 - a) Attempt all previously taught gentle persuasive approach (GPA) techniques.
 - b) If the behavior of the resident is escalating keep the resident in full view but do not approach.
 - c) Do not turn your back to the resident. Speak in a calm, reassuring and quiet voice.

VIOLENT OUTBURST –NON RESIDENT

If the emergency involves a non-resident (other staff member, family member, visitor, trespasser etc.) staff should;

1. Notify others of the emergency by:
 - a. Using the CODE WHITE whistle
 - b. Announcing the CODE WHITE over the phone/PA system
 - c. Calling 911

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2. Not approach or confront the person
3. Remove others from immediate danger
4. Wait in a safe location for emergency crews

EMERGENCY CONTACTS

Where possible, the SDM should be called to see if the individual(s) can assist in de-escalation of situation

The Chief Warden will assess the situation and call 911 if a response is required by Niagara Regional Police (NRP)

If NRP are called the Chief Warden shall provide the police with relevant health information to ensure safety and to address the situation.

RESTRAINTS

The Charge Nurse may contact the physician for an immediate order for a chemical restraint and a possible Form 1 situation and/or implement Emergency Situation *under “Common Law Duty” FLTCA s.39 (as noted above)*, initiating emergency physical restraints

Implement 1:1 staffing for resident and monitor effect of restraint (every 15 minutes) if applied.

DOCUMENTATION

All real and simulated emergency events shall be documented on the Emergency Drill Report located in Appendix ‘A’.

All formal activations of Emergency Response Plans shall include a formal debrief and review of the response plans within 30 days of the conclusion of the emergency. This debrief shall be documented separately from the original emergency response.

Completed Emergency Drill Reports shall be logged in the Testing of Emergency Plans binder for a period of 2 years.

REPORTING

Every licensee of a LTCH shall ensure that the Director is informed in as much detail as is possible under the following timelines and in the associated circumstances;

1. The incident must be documented in progress notes identifying any precipitating factors prior to the incident, the type of behavior exhibited, a summary of the crisis situation, a listing of staff responding to the Code White and the outcome.
2. If the resident has negative outcomes or is transferred to hospital the Critical Incident Form must be completed and submitted to the Director of Care.

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3. An Employee Incident Report must be completed if any injuries were incurred and submitted to the employee's respective manager.
4. Immediately after the Code White has been declared 'All Clear' the Chief Warden will meet with the respondents to the violent outburst to debrief and complete the Code White Violent Outburst Responsive Behaviour Debrief Tool located in Appendix 'A'.

Report Submission

Where a licensee is required to make a report immediately as identified above and it is after normal business hours, the licensee shall make the report using the Ministry's method for after-hours emergency contact. Contact information can be found in Appendix 'C' Communication Plan – Call in List