



Long Term Care & Services for Seniors

Code White (Violent Person)



Regional Municipality of Durham
 Social Services Department
 Long Term Care (LTC) and Services for Seniors

Title: Code White	
Section/Manual: Emergency Manual	
Reviewed:	
Revised: June 2022	
Peer Group Approval:	Date:
Also reviewed by: (other peer group)	
Senior Leadership Approval: <i>Laura MacDermaid</i>	Date: June 16, 2022

1. Policy

- 1.1 The Homes are committed to providing an atmosphere free of violence and the threat of violence for all residents, staff, visitors, and volunteers to the fullest extent possible in the context of the environment of the long-term care home (LTCH) and within the resources available.
- 1.2 This plan will be reviewed on an annual basis or within 30 days after a white has been declared. This emergency plan must be posted in an easily accessible location within the home.
- 1.3 This emergency plan must be shared with residents and family councils annually or when any changes are made.
- 1.4 This plan is exercised on an annual basis. Records must be kept of any exercise, as well as an evaluation of the exercise.

2. Definitions

2.1 Violent Behaviour

- A. Acts of violence such as but not limited to choking, punching, hitting, pushing, biting, spitting, pinching, groping, kicking, shouting, swearing, verbal threats, using objects as a weapon, sexual assault, shaking fists, and threatening to assault.

3. Communication

- 3.1 Emergency plans will be posted in the homes and on the Long-Term Care and Services for Seniors website. There will be regular consultation with Residents and Family Councils as

well as our internal and external stakeholders when reviewing and evaluating emergency plans.

- 3.2 There will be an internal and external stakeholder list which is located in the first section of the emergency manual.

4. Purpose

- 4.1 Early recognition and intervention in potentially violent situations is best practice in crisis prevention; this includes making safe attempts to de-escalate the situation and regain control to minimize risk of injury to residents, staff, volunteers, and visitors in the event of rapidly escalating violence.
- 4.2 **At any time** - If the resident is at risk of harm to self or others or there is a visible weapon or perceived threat to others, call 911.

5. Procedure

5.1 Code White: Violent or Aggressive Resident on Resident Home Area (RHA).

- A. Any staff member who witnesses a violent behavior as defined above can call a code white using the paging/phone system or have a designate do it.
- B. Direct staff to announce Code White/ RHA/ Location 3 times on phone/paging system using the following extensions

Hillsdale Terraces	Ext *007 wait for tone
Lakeview Manor	# 42, then 00 wait for 2 beeps and make announcement.
Fairview Lodge	Ext 6003
Hillsdale Estates	Ext 6444 (wait for the tone)

C. Registered Staff will:

- (1) Direct staff to remove the residents from the situation/source of aggravation.
- (2) Direct all staff on the RHA to remove the other residents from the immediate area of risk.
- (3) Emergency Coordinator (EC) will arrive to the scene and act as a safety officer, and if needed assume leadership and direction in the absence of Registered Staff.
- (4) Emergency Assistant (EA) will arrive at the location and convene at elevator lobby on the floor and be in contact via phone with EC and direct staff as needed.
- (5) All responding staff from each RHA will take direction from EC and EA.
- (6) **At any point** - If the resident is at risk of harm to self or others, call 911 and have the physician complete a Form 1/42
- (7) If the resident is still upset/aggressive/uncooperative, call a family member to talk to the resident on the phone or request they visit ASAP to calm down the resident (if family is supportive and calming to the resident).
- (8) Segregate the resident with supervision. Assign a specific staff member to stay near the resident.

- (9) Give PRN order medication if ordered when it is safe to do so and/or place a call to the physician/Registered Nurse (RN) for an order and obtain further instruction re IM medication, if necessary, to control the behaviour. Also refer to INTERD-03-04-01 Minimizing Restraints– Procedure for the use of chemical restraints in an emergency.
- (10) Keep the substitute decision maker (SDM) informed of the resident's condition and treatment.
- (11) When the situation is under control, RN/designate will announce "Code White All Clear" 3 times (x3).
- (12) Document incident in resident health record and if required, complete a Ministry of Long-Term Care (MLTC) Critical incident report. Refer to ADM-01-07-16 Mandatory and Critical Incident Reporting.
- (13) Ensure the RHA Resident Care Coordinator (RCC)/on call manager is informed immediately.
- (14) RCC or on call manager will notify Director of Care (DOC)/Administrator/designate.
- (15) If situation warrants, the Director of LTC and Services for Seniors will be notified.

5.2 Code White: In Another Area of the Home

- A. If a crisis occurs at a location other than on a RHA, the person observing the aggressive person will page or designate a staff to page "Code White-Location" 3 times (x3).
- B. The Emergency Coordinator (EC) and Emergency Assistant (EA) must respond and come to the location immediately.
- C. EC or EA will call RN from RHA where resident resides to come to the location to assist with the situation if applicable.
- D. Designated staff will attend as applicable.
- E. The EC or EA are to request assistance from staff as needed. The safety of other residents will be maintained.

5.3 Code White: Violent or Aggressive Staff/Visitor/ Volunteer

- A. If a crisis occurs with a violent or aggressive staff/visitor/volunteer, the person observing the violent person will page or designate a staff to page "Code White-Location" 3 times (x3).
- B. The EC and EA must respond and come to the location immediately

Hillsdale Estates	RN on Honey Harbour/Strawberry Fields (x 6418)
Hillsdale Terraces	RN on Vineyard View (x 5066)
Fairview Lodge	RN on Cullen Garden/Ashburn Way (x 5961)
Lakeview Manor	RN on Beaver River (x 5366)

- C. Try to diffuse the situation with the aggressive person if possible.
- D. Remove the residents, staff, and volunteers from area.
- E. If the situation cannot be deescalated, call 911
- F. When situation is under control, RN/designate will announce "Code White All Clear" 3 times.
- G. Notify the Administrator / designate who will advise Director of LTC & Services for Seniors as required.
- H. Complete a universal incident report and begin investigation as necessary.

- I. Reestablish an atmosphere of calm and control.
- J. Debrief with staff/visitors.
- K. Notify the MLTC/Ministry of Labour, Immigration, Training and Skills Development (MLTSD) if the incident meets the definition of a critical incident.
- L. See ADM-01-07-13 Reporting to the Ministry of Labour, ADM-01-07-16 Critical Incident reporting to Ministry of Long-Term Care.

6. Specific Duties of Other Staff

6.1 Administrator/designate:

- A. Follow appropriate emergency code procedures until “Code White All Clear” is announced.
- B. Assist in the removing residents, visitors, and volunteers from the code white area.
- C. Ensure there is process in place to debrief with staff involved, discuss the circumstances which lead to the incident, and document safety precautions and corrective action to put in place to prevent re-occurrence.
- D. Notify the Director of LTC and Services for Seniors if applicable

6.2 All Staff:

- A. If you are working in Code White location: Assist with removing residents, visitors, and volunteers to a safe location.
- B. If you are not in the Code White location, remain on your RHA until assistance is required.
- C. Specific staff will respond to a code white as pre-determined within the home emergency committees.

7. Summary and Debriefing – Evacuation Plan (see Appendix 1 – Post emergency debrief checklist)

7.1 All departments will be responsible for:

- A. Participating in debriefing to evaluate the emergency and in the post, review providing reports and recommendations.
- B. Formally submitting an evaluation of the emergency within 30 days of the emergency being declared over.
- C. Assisting in creating revisions and implementation of adjustments to the plan
- D. In-servicing any modifications with staff in their respective departments.

8. Education and Training

8.1 General Orientation – New Staff

- A. Education and training on the Emergency Plans, including Code White-Violent Person, are provided through the Divisional Orientation. The Prevention and Management of Workplace Violence, including the flagging policy for high-risk behaviours, is also reviewed with new staff at Departmental Orientation.

8.2 Annual and Ongoing – All Staff

- A. Education is provided on the Code White-Violent Person Emergency Plan on an annual basis through e-learning platform.

9. References

- A. Fixing Long Term Care Act, 2022 (FLTCA) OReg 246/22 s 268
- B. INTERD-03-09-01 Responsive Behaviours
- C. ADM-01-07-16 Mandatory and Critical Incident Reporting
- D. ADM-01-07-13 Incident Reporting Ministry of Labour
- E. INTERD-03-04-01 Minimizing Restraints
- F. Corporate Workplace Violence Prevention Policy and Program

10. Attachments/Appendices

- A. Appendix 1 Code White- Procedure Checklist and Post Incident Debrief

Appendix 1 - Code White- Procedure Checklist and Post Incident Debrief

Date: _____

Completed By: _____

Incident: _____

Procedure Checklist		
Checklist	Yes/No	Comment
Registered staff called code white		
EC arrives on scene		
Emergency staff arrive on scene		
Residents removed from area		
EC notify 911 if applicable		
Family notified		
Reports completed		
Post Incident Debrief		
Reports:	Yes/No	Comment
Has a formal debrief occurred with staff/residents/families?		
Has there been a formal report completed and sent to the Director?		
Was the Code White process followed?		
Was Admin/Designate informed?		
Were there any injuries?		
Was first aid needed?		
Was the Residents family notified?		
Was the physician notified?		
Was a CI submitted (if applicable)?		
Was the incident documented in the resident (s) care plan?		
Is there a change needed for the care plan?		
Universal incident report completed		

Was there a staff injury?		
If yes, was an incident report filed and if applicable was MOL contacted?		
Environmental Services		
Was any equipment, supplies used during the emergency from the department?		
Any loss of equipment?		
Any repairs required?		
Nursing Department		
Was any equipment, supplies used during the emergency from the department?		
Any loss of equipment?		
Any repairs required?		
Process Review		
Processes which went well.		
Gaps in process		
Improvement suggestions		
Any Suggested revisions to the code		

Sign off _____ Date _____