# POLICY STATEMENT



## Preventing Violence in Healthcare

Last updated: April 2016

#### **Doctors of BC Position**

Doctors of BC recognizes the importance of a safe workplace, free from violence.

To support safety of all health care providers, including physicians, Doctors of BC recommends stakeholders ensure there is meaningful physician input and involvement in the development, implementation, and assessment of initiatives aimed at preventing violence in healthcare.

Doctors of BC commits to working with government, Health Authorities, WorkSafeBC, other healthcare providers, and community partners to collectively address violence in healthcare, by:

- Supporting improved training and education on violence prevention tailored for physicians.
- Seeking opportunities to contribute physician perspectives in provincial violence prevention planning and policy making.
- Working with Health Authorities to enhance physician involvement in health and safety planning and the development of safety standards within healthcare facilities.

### **Workplace Violence in Healthcare**

In December 2014, an on duty physician was violently assaulted by a psychiatric patient at BC's Penticton Regional Hospital.(1)

This assault is illustrative of the risks faced by health care professionals on a daily basis in the workplace. Although the healthcare sub-sector is only 10% of the provincial workforce, 40% of all province-wide WorkSafeBC claims due to "violence" are from the healthcare sub-sector.(2) Finding an appropriate balance between violence prevention and patient/public accessibility is an ongoing challenge faced by medical providers.

One survey of family physicians in Canada found that nearly all (98%) have experienced some form of abuse in their careers with close to 40% of surveyed family physicians having experienced at least one incident of severe abuse (such as physical or sexual assault or stalking) at some point in their careers.(3)

In acute care hospitals, studies indicate that violence may be most prevalent in emergency, psychiatric, medical-surgical, and paediatric settings. In the community, violence may be the most likely to occur in long-term care, elder care, mental health and small/remote healthcare facilities.(4, 5) Although certain healthcare settings may be particularly vulnerable to violence, violent encounters can occur in all practice settings.

Research suggests that workplace violence decreases job satisfaction, increases absenteeism, and lowers the quality of patient care delivered by healthcare providers.(5)

### **Definition of "Violence"**

WorkSafeBC defines violence as "the attempted or actual exercise by a person, other than a worker, of any physical force so as to cause injury to a worker, and includes any threatening or behaviour which gives a worker reasonable cause to believe that he or she is at risk of injury."(6)

This policy statement focuses on violence perpetrated by patients (or others in the public) on healthcare professionals within healthcare settings, with particular emphasis on physicians.

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#### **Violence Prevention in BC Healthcare**

In Canada, the Royal College of Physicians and Surgeons of Canada requires all residency programs have in place policy, mechanisms and educational programs that promote resident safety.(7)

Four healthcare unions in BC<sup>1</sup> include employer commitments to eliminate, reduce and/or minimize threats to the safety of employees in their provincial collective bargaining agreements.

In BC, the Joint Provincial Occupational Health, Safety and Violence Prevention Committee (the "Violence Prevention Committee") is responsible for establishing strategy, targets, and priorities relating to violence prevention in healthcare.(8) Committee membership currently includes Health Authorities, employer associations and healthcare unions.

To advance education and training, the Provincial Violence Prevention Curriculum (the "Curriculum") is available to healthcare workers. The Curriculum consists of eight modules and trains staff to prevent and manage violent situations and mitigate the risk of injury in the healthcare workplace.(9)

In 2015, as part of the BC Ministry of Health's ("MoH") Violence Prevention Action Plan, the MoH and BC Nurses Union jointly committed to providing \$2 million to fund violence prevention actions at a number of priority healthcare sites in BC.(10)

## **Physician Advocacy & Involvement**

Active physician involvement and advocacy in violence prevention is needed to improve workplace safety for physicians.

Since the 1990s, Doctors of BC (formerly known as the BC Medical Association) has supported education programs to help physicians recognize and manage violent encounters. <sup>2</sup>(11) In 2000, Doctors of BC

brought forward a motion to the Canadian Medical Association to "encourage provincial and territorial governments to develop violence-prevention, including training programs and train the trainer programs, suitable to a wide variety of healthcare settings."(12)

Doctors of BC commits to advocating for consideration of physician concerns and perspectives on violence prevention through active engagement with relevant stakeholders, such as the Violence Prevention Committee, Health Authorities and WorkSafeBC.

One area of need is for enhanced training tailored for physicians that includes:

- Condensed and accessible programs
- Options for continuing medical education credits
- De-escalation techniques relevant for physicians
- Physical training on how to handle violent situations when they arise

Additionally, facility physicians must be included in hospital health and safety planning to ensure the physician experience is addressed in facility safety planning and programs.

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Doctors of BC commits to working with government, Health Authorities, WorkSafeBC, other healthcare providers and community partners to collectively address violence in healthcare.

promotion of education programs to help doctors manage violence in the workplace.

<sup>&</sup>lt;sup>1</sup> These unions are the BC Nurse's Union, Health Sciences Association of BC, Hospital Employees' Union and the Union of Psychiatric Nurses of BC.

<sup>&</sup>lt;sup>2</sup> In 1995, the BCMA formed a Committee on Violence which focused on issues related to violence in society including the

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