OREGON STATE HOSPITAL

PROCEDURES B: Workplace Violence Response Type II – Patient Response POINT PERSON: Director of Occupational Health & Safety APPROVED: Superintendent DATE: November 17, 2023 SELECT ONE: New policy attachment Existing policy attachment Reaffirmation of existing policy attachment Reaffirmation of existing policy attachment Major revision of existing policy attachment

Responsible Person/Group	Type II – Patient Response	
Staff	Incident occurring on OSH Campus or secure perimeter	
	Staff who are involved with or witness a workplace violence incident by a patient should:	
	a. Alert staff for immediate assistance,	
	 b. Alert Access Control by radio, PMT, or telephone to request immediate assistance, 	
	 Follow steps outlined in OSH Policy & Procedures, 6.003, "Seclusion and Restraints" and Safe Together training. 	
	Once the incident is contained and the patient and staff are safe, involved staff shall debrief before returning to their unit.	
	 If injured, complete an injury or illness report in Workday as outlined in OSH Policy & Procedure, 5.012, "Injury or Illness Reporting." 	
	 In all cases of Type II – WPV, Complete an incident report as outlined in OSH Policy & Procedure 1.003, "Incident Reporting." 	
	 Provide information to security or law enforcement if necessary, as outlined in OSH Policy & Procedure 8.019, "Staff Response to Alleged Criminal Acts or Contraband." 	
	Incident occurring off campus during a patient transport	
	or medical appointment.	
	6. Staff who were involved with or witnessed a workplace	

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violence incident by a patient must: a. Attempt to de-escalate incident and create distance from patient while maintaining line of sight. b. Contact Access Control by telephone to report the incident. c. Provide details about current location, patient information, d. Stay on the phone until otherwise directed by Security. 7. If the patient is attempting to leave the area, continue to follow as outlined in OSH Policy & Procedure, 8.018, "Unauthorized Leave", Procedure A. a. OSH staff are authorized to use physical Safe

- Containment procedures to intervene with the patient only as needed during situations of self-defense, defense of others, and life-saving interventions.
- 8. Once the incident is contained and the patient and staff are safe, involved staff shall debrief with Security before returning to their unit.
- If injured, complete an injury or illness report as outlined in OSH Policy & Procedure, 5.012, "Injury or Illness Reporting."
- 10. In all cases of Type II WPV Complete an incident report as outlined in OSH Policy & Procedure, 1.003, "Incident Reporting."
- 11. Provide information to security or law enforcement, if necessary, as outlined in OSH Policy & Procedure 8.019, "Staff Response to Alleged Criminal Acts and Contraband."

Immediate Supervisor or Manager

- 1. Verify staff have notified Access Control, relay information from staff to Access Control, if necessary.
- 2. If incident occurred during a patient transport, determine if assistance is required to bring patients back to campus or secure perimeter.
- If staff is injured and cannot complete an injury or illness report in Workday, submit a report on the staff's behalf as outlined in OSH Policy & Procedure, 5.012, "Injury or Illness Reporting."
- 4. If staff is unable to complete an incident report, submit a

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	report on the staff's behalf as outlined in OSH Policy & Procedure, 1.003, "Incident Reporting."	
	Provide staff with Employee Assistance Program (EAP) resources, upon request.	
Security Department	Incident occurring on OSH Campus or secure perimeter	
	Immediately respond to the workplace violence incident location, when responding:	
	a. Follow steps outlined in OSH Policy & Procedures, 6.003, "Seclusion and Restraints"; Safe Together training, and other relevant regulations that are safe, proportionate, and appropriate to the severity of a patient's behavior and level of dangerousness.	
	 b. Follow Security Department Protocols to assist staff with filling a police report, if necessary. 	
	Contact local emergency services if staff requests or needs medical attention.	
	 Complete a communication log and incident report as outlined in OSH Policy & Procedure, 1.003, "Incident Reporting." 	
	 Save video surveillance as outlined in OSH Policy & Procedure, 8.001, "Video Surveillance." 	
	Send a Critical Incident Notification as outlined in Security Department Protocols.	
	Incident occurring off campus during a patient transport	
or medical appointment.		
	 When notified by staff about an off-campus incident, stay on the line with staff to gather the following information: 	
	a. Patient name,	
	b. Current location and trip slip number,	
	c. Information of current situation.	
	Relay information to Security Management and staff's immediate manager or supervisor. Work to determine next steps, this may include but not is limited to:	
	 Send security staff to assist with escorting patient back to OSH campus. 	
	 b. Contact local law enforcement to respond and transport patient back to OSH. 	

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Safety Department	 Receive and process injury or illness report from Workday. Begin safety investigation and recordkeeping as outlined in
	Safety Department Protocols.
	3. Provide staff with EAP resources upon request.
	4. Follow up with injured staff about the incident.
	5. Collaborate and share findings with IRSI Department, if necessary.
	Provide safety investigation findings to Assault Mitigation Workgroup.
	7. Assist staff with return-to-work processes as outlined in OSH Policy, 5.011, "Return to Work of Staff Injured on the Job."
Incident Reporting and Systems Investigation (IRSI)	Receive and process OSH Incident Report as outlined by IRSI Department Protocols.
	2. Begin systems investigation based on severe injuries.
	3. Follow-up with injured staff about the incident.
	4. Collaborate and share findings with Safety Department, if necessary.
	Complete Healthcare Assault Log record-keeping requirements of event.
	6. Provide systems investigation findings to Assault Mitigation Workgroup.
Assault Mitigation Workgroup	Receive investigation findings from Safety Department or IRSI.
	Review investigation findings and provide immediate, corrective, or preventative recommendations to WVPSC.
Workplace Violence Prevention Sub- Committee (WVPSC)	Receive immediate, corrective, or preventative recommendations actions from the Assault Mitigation Workgroup.
	2. Review recommendations actions and approve, modify, or decline recommendations.
	Assign a sub-committee member to provide approved recommendations.
	Select a follow-up date for progress tracking and recordkeeping.
	 Sub-committee member will provide recommendation updates and close out the incident upon implementation in Safety's recordkeeping process.