



MINISTRY OF HEALTH

POLICY COMMUNIQUÉ

COMMUNIQUÉ

TO: All Health Authorities

TRANSMITTAL DATE: October 24, 2012

COMMUNIQUÉ 2012-13
NUMBER:

CLIFF NUMBER: 944471

SUBJECT: Response to Visitors Who Pose a Risk to Health or Safety in Health Care Facilities

DETAILS: Requirement for all health care facilities to develop appropriate policies to address problematic behavior of visitors

EFFECTIVE DATE: Immediately

MINISTRY CONTACT: Executive Director, Hospital & Provincial Services Branch

Graham Whitmarsh
Deputy Minister
Ministry of Health

MINISTRY OF HEALTH POLICY

RESPONSE TO VISITORS WHO POSE A RISK TO HEALTH AND SAFETY IN HEALTH CARE FACILITIES

Rationale

The principles of person-centered care promote the inclusion of family and other visitors in health care facilities. It is recognized that most visitors treat others respectfully and that they add value and provide support to persons receiving care. However, on occasion situations arise where visitors to health care facilities behave in a way that presents a risk to health and safety.¹ For the protection of all parties, these situations must be addressed in an appropriate and timely manner. Health authorities are responsible for providing a safe and healthy environment for persons in care, as well as staff, physicians, visitors and volunteers. In particular, as employers health authorities are required by WorkSafe BC to provide a safe working environment. This provincial policy has been developed to promote safe and healthy health care environments, and to assist health authorities in managing these situations in a way which balances the rights and responsibilities of all parties, and which ensures a consistent approach across facilities.

Policy Objective

The objective of this policy is to ensure that:

- Persons in care are able to receive visitors of their choice to the greatest extent possible;
- Health care facilities provide a safe environment for persons receiving care, staff, and others;
- Health care facilities balance the rights of persons receiving care to have visitors with the rights of other persons in care, staff, and others in the facility to have a safe and respectful environment;
- Policies are in place which provide for a reasoned, progressive approach to address inappropriate behaviour by visitors, in compliance with other legislation (e.g. *Workers Compensation Act*, *Human Rights Code*, *Community Care and Assisted Living Act (CCALA)*, *Adult Guardianship Act*);
- In situations where visiting is denied or restricted due to behavior that is a risk to health and safety, measures are in place for reviewing the decision fairly, and persons restricted from visiting are notified of avenues for dispute resolution, reconsideration and appeal;
- All publicly funded health care facilities in BC adopt a consistent approach to managing visitor behavior that presents a risk to health and safety of the person in care, staff, visitors and volunteers.

Scope

This policy applies to all health care facilities that provide publicly funded health care services. This includes facilities providing acute and ambulatory care, residential and hospice palliative care, assisted living, adult day and respite services. In situations where health authority programs or services are provided through contracted facilities or contracted staff, health authorities are required to develop policies and procedures that meet the objectives described in this policy.

Policy

Patients and residents of health care facilities have a right to receive visitors, and to exclude visitors based on their own preferences, to the greatest extent possible. This is consistent with person-centered care, and is enshrined in the *Residents' Bill of Rights* and the *Patients' Bill of Rights* which apply to residential care facilities. However, to protect the health and safety of persons receiving care, it is the responsibility of the facility to comply with any existing court orders which restrict visiting.

¹ For the purposes of this policy, this includes attempted or actual use of any physical force so as to cause injury, threatening statements or behaviours, or any expression of hostile behaviour or threat directed towards others that hurts or causes harm through verbal, physical, psychological or sexual means. Behaviours also deemed unacceptable include, but are not limited to, using abusive and/or foul language, apparent alcohol and/or drug intoxication, and being disruptive or unresponsive to the direction of unit staff.

All visitors have a responsibility to treat others with respect, and to refrain from behavior that puts the health and safety of others at risk of harm. In situations where visitors engage in behaviour that puts others at risk of harm, facility management is responsible for taking appropriate action to reduce risk and to protect the health and safety of patients/residents, other visitors, volunteers and staff. It is recognized that family members and other visitors may be under considerable stress for a variety of reasons, and that a supportive and compassionate approach will be helpful in reducing anxiety.

Health authorities must ensure that all facilities included in the scope statement have policies and protocols consistent with this policy. This protocol should reflect the specific circumstances of the facility and the population it serves. At minimum, each protocol must include the following elements:

1. A statement that this policy is superseded by court orders, including custody orders and orders made under other enactments, relating to the specific patient or visitor.
2. A process or framework for assessing the risk of harm associated with each situation which will be used to mitigate risk and to form the basis of an appropriate response.
3. Clarification of what response is appropriate for emergency situations involving immediate risk of harm to persons receiving care, staff, physicians, and/or others in the facility.
4. For situations not involving an immediate risk of harm, details of a progressive problem-solving approach to be used, which is based on the least amount of intrusion to the visitor and person receiving care. Measures to consider, based on what is appropriate to the situation, may include:
 - Discussing with the visitor the standard of behavior expected and requesting their cooperation;
 - Providing verbal and/or written warnings that access may be limited or removed if their behaviour puts others at risk;
 - Requiring supervision for the visitor when visiting their family/friend;
 - Implementing alternative dispute resolution processes;
 - Placing time-limited restrictions on access to the facility; and
 - In extraordinary situations, where other problem solving solutions have not been successful, placing restrictions on access to the facility for indefinite time periods.
5. Information about the facility visiting policies, including clarification that restricting visitors' access to the facility is only to be used as a last resort. If restrictions are put in place, facilities must document the steps they have taken to resolve the issues, including progressive process used, including escalation to senior administration for approval before implementation.
6. A process for reconsideration or appeal of the visiting restriction, as well as a process for regular review of the decision to determine if ongoing restrictions continue to be necessary to protect health and safety.
7. Information about any external avenues of appeal that may be available, should a visitor who is subject to restrictions disagree with the decision of the facility.

References/Related Policies

- Policy Communiqué 2005-01: Prevention and Management of Aggression and Violence in the BC Health Care System
- Residential Care Regulation (for residential care facilities licensed under the *CCALA*) section 57 – Access to persons in care, Section 60 – Dispute Resolution)
- Residents' Bill of Rights (Residential Care facilities regulated under the *CCALA*)
- Patients' Bill of Rights (Residential Care Facilities regulated under the *Hospital Act*)

Review

This policy is subject to review by December 31, 2014.