

Behavioural Safety Program: VAST Frequently Asked Questions Acute Care & Addiction and Mental Health

1. What is the Behavioural Safety Program (BSP)?

The Behavioral Safety Program (BSP) is Alberta Health Services' (AHS) clinical practice standard for identifying and communicating the safety risk and safe care strategies for patients who may display harassing or violent behaviors. This program is being adopted by Covenant Health.

The BSP uses evidence-based tools to identify patients who may have a potential of aggressive or violent behaviours. These tools assist the care provider identify patient experience factors (including high level triggers and calming interventions) and the safe care strategies that will be used to provide safe care.

Depending on the screening tool outcome, a behavioural safety plan may be required. This helps health care providers understand why a patient may become upset and how to deliver care safely and does not change patient care. Patients with an active plan should be cared for without stigma or labels.

2. How will I know when there is a risk of aggression or violence?

When there is a risk of aggression or violence a visual indicator of a purple circle with a white center is used. The purple circle will be posted outside of the patient's care area (door, curtain) to alert workers that there is a risk and a behavioural safety plan is in place. The alert acts as a 'stop and consider' for all workers.

Not all team members will see the patient's storyboard in Connect Care (ex. Nutrition Food, Linen and Environmental Services, Facilities Maintenance and Engineering), therefore the purple circle is used to communicate the risk.

Behavioural safety alerts are communicated three ways:

- Purple circle visual indicator
- Connect Care Storyboard Alert
- Rover devices

3. What do I do when I see a purple circle?

When you see the purple circle, speak with the bedside nurse or charge nurse before interacting with the patient or going into their care space. Make sure you are familiar with the behavioural safety plan and any steps you need to take to keep yourself and the patient safe.

4. Why is Covenant Health implementing this program?

Covenant Health is responsible for providing our teams with a safe work environment and providing our patients with safe care. Safety is always a priority and accepting workplace harassment and violence is never part of the job.

Covenant Health has a legislated responsibly to work together with workers and leaders to identify, assess, and control workplace hazards, including harassment and violence.

All workers who interact with patients, including those that do not access patient care records, must be made aware of the potential risks and how to work safely.

5. How are patients screened for aggression or violence?

Standardized screening tools are used to identify patients who may display unsafe behaviors. The screening tools are used in the following areas:

• Violence Aggression Screening Tool (VAST) - all acute care areas





• Dynamic Appraisal of Situational Aggression (DASA) - Addiction and Mental Health (AMH)

The screening tools must be completed by a regulated health care professional or health care aide (under the supervision of regulated health care professional). It includes known recent history, risk indicators, patient experience and safety planning.

Based on the risk rating level: low, moderate, or high, there are suggested safe care strategies. When the score is moderate or high, an alert is applied and a behavioural safety plan is developed.

6. What is the difference between the VAST and the DASA?

The VAST is a standardized screening tool used with the BSP and in Connect Care to activate the Storyboard Alert: Behavioural Safety. The VAST is evidence-based, reflects Covenant Health values and the principles of patient and family centred care, and is appropriate for acute care settings (except for AMH). The VAST screens for observable behaviours that are particular to the individual and to a particular time.

The Dynamic Appraisal of Situational Aggression (DASA) is a clinical assessment tool used by Addiction and Mental Health Inpatient programs instead of the VAST. The DASA was designed for unique and complex inpatient environments factoring in responsive behaviors to patient restrictions, more expectations and interactions with others (staff, co-patients, family and visitors).

Connect Care has approved the DASA Version 1 for use by Addiction and Mental Health Inpatient programs only. The DASA and VAST follow similar BSP workflows in Connect Care and both activate the Storyboard Alert: Behavioural Safety.

7. Will every patient be screened? How often?

All patients will be screened on first encounter/admission.

- Acute care settings, including AMH, should rescreen at least every 24 hours, or sooner if there is a noticeable change in behaviour, change in situation, or upon request from the patient/family.
- Community care should rescreen on every encounter.

8. Can we screen only those patients who are being aggressive?

No. By only screening when there is a behaviour demonstrated, teams lose the opportunity to prevent patient to worker aggression or violence through collaborative discussion and planning.

9. Are there situations when a patient could be exempt from the BSP?

There may be times during care when a patient has expected and explained aggressive or violent behaviors (such as child birth). In these instances connect with your manager for further direction.

10. How long does the alert stay active?

The alert is only removed after:

- 3 consecutive low VAST scores (24 hours apart over 3 days) or
- 7 consecutive low DASA scores (24 hours apart, over 7 days).

When patients are discharged with an active alert, the next provider looking at the Storyboard Alert: Behavioural Safety will be prompted to continue with the rescreening sequence.

The alert is not intended to be permanent on a patient chart, however the behavioural safety plan stays on the chart in case of future behaviours.

11. What is a behavioural safety plan and when is it created?

A behavioural safety plan is a patient-specific plan that addresses behavioural safety concerns so that care



can be provided safely. A plan is be made whenever the VAST/DASA score is moderate or high.

Behavioural safety plans include identified risks, triggers and the strategies that will be used to keep everyone safe. These can include ways to help the patient feel calm and comfortable while receiving care, supports for medically explained behaviours, and worker safety measures.

12. Who is involved in creating the behavioural safety plan?

Behavioural safety plans should be developed by the bedside nurse with input from the patient or family whenever possible. A brochure on behavioural safety plans and a script resource for discussing the program with patients, family and visitors can be downloaded from <u>CompassionNet</u>.

The plan and safe care strategies should be reviewed with the entire health care team during rounds, huddles, and/or shift changes.

13. How will the BSP be communicated with patients, families and visitors?

Information about the program should be communicated using patient and family centred care, informing and involving the patient and family as soon as it is safe to do so.

Patients and/or family members should be informed of the risk status, alert and the behavioural safety plan. They should be encouraged to contribute to the development of the safety plan whenever possible. For more information refer to the script on how to have positive conversations with patients, families and visitors, "Speaking with Patient, Families & Visitors", on <u>CompassionNet</u>.

14. What about the patient's rights to privacy?

It is important to achieve a balance between patient and worker safety. Share the least amount of information necessary pertaining to the patient's health and use discrete communication mechanisms, such as the visual indicators (i.e., purple circles).

15. How does the behavioural safety alert impact stigma and unconscious bias?

The BSP helps health care providers understand why a patient may become upset and how to deliver care safely. The BSP does not change patient care. The behavioural safety alert acts as a 'stop and consider' for the health care team. Patients with an active behavioural safety alert should be cared for without stigma or labels.

Reducing stigma and unconscious bias begins with awareness. Unconscious biases can include a safety bias where we are more sensitive to threats (whether perceived or real) than rewards. The <u>Diversity & Inclusion</u> team offers resources to support understanding about our own biases, the impact they have on our interactions and the strategies to overcome them.

16. What happens if a patient or their family does not agree with a plan being put in place?

Covenant Health has a responsibility to notify workers of their hazards, including aggression and violence, and mitigation strategies. If the patient and/or family is not in agreement with the plan, continue with implementation without the patient/family input and notify the AHN/charge nurse/team lead/manager.

17. What is required for reporting and documentation?

Document all VAST/DASA scores, safe care strategies and outcomes, and any communication with patients and families in the patient's health record. Update the behavioural safety plan as necessary.



18. How do I report incidents involving worker safety? Patient safety?

Under Alberta Occupational Health and Safety Legislation and Covenant Health policy, all incidents of harassment, aggression and violence to workers must be reported by calling the OHS&W Reporting and Information Line at 780-342-8070 or 1-855-342-8070.

For patient safety complete reporting in the Report & Learning System (RLS).

Managers/supervisors are responsible for investigating incidents, determining corrective actions and following up with and supporting impacted workers.

19. Where can I find more information?

Resources are available on the Behavioural Safety Program page on CompassionNet.

Training is available through CLiC.

Acute Care Areas (except Addiction & Mental Health Inpatient units)

- Behavioural Safety Program Clinical
- Behavioural Safety Program Non- Clinical
- Behavioural Safety Program Physician

Addiction & Mental Health Inpatient units

- Behavioural Safety Program Addiction and Mental Health Inpatient
- Behavioural Safety Program Non- Clinical
- Behavioural Safety Program Physician