

## Appendix D-9: Point-of-Care Staff Work Practice Assessment (OSACH 2006)

- You consider the client's wishes and needs when establishing a client care plan.
- The client history includes the likelihood of a client exhibiting aggressive or violent behaviour.
- There is a process to tag or flag clients who are potentially aggressive and/or violent. It considers such factors as personality, medications, type or degree of illness and history. Patient confidentiality is balanced with employee safety.
- Your organization supports a flexible care plan designed to meet the needs of your clients.
- There are certain client care activities that must be performed at a specific time of day.
- There is a standard assessment conducted on a client that determines the likelihood of an aggressive response.
- You consider staff safety when designing a client care plan.
- You explain to a client what you are going to do and how you are going to do it each time you engage in a client care activity.
- The client is kept informed about treatment, procedures and care planning.
- The client's privacy and dignity are respected during care activities.
- Client assignments need to be completed by one person working in isolation. Can the job be done more safely with two people working together?
- Clients' scheduled appointments are kept promptly.
- Staff breaks are scheduled outside client meal times when client needs are high.
- All staff are educated in recognizing escalating behaviour and patterns of violence.
- All staff are educated in effective communication techniques.
- There is an effective emergency response mechanism that staff can readily access in an emergency situation (i.e., code white, panic button).
- There is a process for restricting visitors with a history of violence.
- Staff can review a client's profile before meeting with that client.
- Regular case management meetings are held with all staff who are directly or indirectly involved in the care of potentially violent patients or clients. Ways to deal with these patients or clients are discussed and client care plans updated to indicate factors that trigger violence and suggest controls.
- Potentially violent patients are segregated in more secure or restrictive settings, if possible.
- Staff who are more experienced or staff who have a demonstrated ability to handle potentially violent situations are assigned to high-risk areas or to high-risk clients.
- Before approaching a client, you make sure that the lighting is adequate.
- A comfortable temperature and low noise levels are maintained.
- If patients resist or become hostile during care, the care is stopped immediately.
- If you feel threatened in any way during client care, there is a process to request the presence of another staff member.
- There is a process to prohibit staff from working alone in emergency areas or walk-in clinics, especially at night or when assistance is unavailable.
- There are lock-up procedures for pharmaceuticals