



POLICY AND PROCEDURE

CHAPTER:
POLICY NO:

SUBJECT: CODE GRAY

PURPOSE:

To provide an appropriate response to situations involving an aggressive, hostile, combative or potentially combative persons.

POLICY:

Aggressive, combative or abusive behavior can be displayed by anyone: a patient or a patient's family member; staff or a member of the staff's family; acquaintances of patients and staff; vendors and contractors; or the general public. Aggressive, combative or abusive behavior may quickly escalate into a more violent episode.

- A. Staff will take responsible and proactive measures to ensure the safety and security of all persons on hospital property by effectively responding to an event and minimizing the number of assault victims and their potential injuries.
- B. When staff is concerned about their own safety and the safety of others due to abusive or assaultive behavior, they should initiate a Code Gray.
- C. Any assault or battery that results in an injury to a staff member or patient must be reported to law enforcement within 72 hours.
- D. Each department with a specific role in a Code Gray is to develop an emergency-specific plan.
- E. Any Code Gray response should be in accordance with this procedure and those developed by each department.

PROCEDURE:

A. Prevention & Education

1. A written policy makes clear the facility's commitment to promote workplace safety, prohibit threats and violence of any kind, require immediate reporting of any incident that causes a concern for safety, and require discipline of offenders.
2. Recognizing early warning signs:

No single sign alone should cause concern, but a combination of any of the following signs should be cause for concern and action.

- Direct or verbal threats of harm.
- Intimidation of others by words and or actions.
- Refusal to follow policies.
- Carrying a concealed weapon or flashing a weapon to test reactions.

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- Hypersensitivity or extreme suspiciousness.
 - Extreme moral righteousness.
 - Inability to take criticism regarding job performance.
 - Holding a grudge, especially against a supervisor.
 - Often verbalizing hopes that something will happen to the other person against whom the individual has the grudge.
 - Expression of extreme desperation over recent problems.
 - Intentional disregard for the safety of others.
 - Destruction of property.
3. Management of aggressive behavior training (MOAB). Only trained and certified personnel should be assigned to respond to minimize potential acts of aggressive behavior or violence.
- B. Response (Code Gray)
1. Any staff member confronted with or witnessing a combative situation should initiate a Code Gray.
 - a. Verbal Abuse – Personnel should provide assistance to the victim(s).
 - Assist in attempts to verbally de-escalate the assailant.
 - Call in a second person to take over.
 - Add distance/barriers between victim and assailant.
 - b. Physical Battery – Prepare to provide assistance to the victim(s) by:
 - Protecting self and others by assisting victim to stop/deflect blows by the assailant.
 - Creating a diversion by putting distance/barrier between victim and assailant.
 - Getting medical assistance if needed.
 - c. Assault with a weapon – Refer to Code Silver: Person with a weapon /hostage situation policy.
 2. Any employee who hears the request to initiate a Code Gray should immediately call security at extension 14446 give location and nature of incident. Weekdays 8:00 am to 11:30 pm security will contact the on-site sheriff for assistance, the sheriff deputy and security will both respond. All other times security will respond and if necessary contact the Sheriff's office at 661-945-8466 for further assistance.
 3. If area is equipped with a Panic Button, activating it replaces all other actions required in Paragraph 2 above.
 4. All staff not involved in the incident will stay clear of the area
- C. Documentation of the incident should follow the facility's policy and procedure for documentation of such an event. Any assault or battery that results in an injury to a staff member or patient must be reported to law enforcement within 72 hours.
- D. Management conducts a root cause analysis or similar review of the incident to identify areas for improvement and then implement those improvements.
- E. Training and Education

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Staff members and other personnel regularly assigned to departments with a known risk for violent behaviors from patients or others should, as appropriate to their job responsibilities and relative risk of violence, receive education and training on a continuing basis relating to at least the following:

- i. General safety measures.
- ii. Personal safety measures.
- iii. The assault cycle.
- iv. Aggression and violence predicting factors.
- v. Obtaining patient history from a patient with violent behavior.
- vi. Characteristics of aggressive and violent patients and victims.
- vii. Verbal and physical maneuvers to diffuse and avoid violent behavior.
- viii. Strategies to avoid physical harm.
- ix. Restraining techniques.
- x. Appropriate use of medications as chemical restraints.
- xi. Any resources available to employees for coping with incidents of violence, including, but not limited to, critical stress debriefing and/or employee assistance programs.

I. REFERENCES

California Code of Regulations, Title 22, §70743, §70746.

California Health and Safety Code, Chapter 2, Article 1, § 1257.7, § 1257.8, <http://leginfo.ca.gov>.

The Hospital Incident Command System (HICS) Guidebook, www.emsa.ca.gov/HICS.

The Joint Commission, www.jcrinc.com/Joint-Commission-Requirements.

Effective Date:				
Approved by Chief Executive Officer:			Date:	
Approved by Chief Medical Officer:			Date:	
Approved by Chief Nursing Officer:			Date:	
Revised Date:				