

VALLEYCARE
OLIVE VIEW-UCLA MEDICAL CENTER/HEALTH CENTERS
POLICY & PROCEDURE

NUMBER: 4813
VERSION: 1

SUBJECT/TITLE: **COMBATIVE OR DISRUPTIVE PERSON RESPONSE - CODE GRAY**

POLICY: In the event of aggressive, combative, violent, or abusive behavior that is displayed by a visitor, workforce member, patient, or other individual, staff will call x111 and inform the Operator a “Code Gray” is occurring, the location, and a brief description of the disruption. The Operator will immediately contact Sheriff Dispatch at x3409 and announce overhead “Code Gray” and the location three times.

Any assault or battery that results in an injury to a workforce member, patient, or visitor must be reported immediately to the Sheriff and a Security Incident Report (Attachment II) must be completed and submitted.

Code Gray is to be used in the non-clinical management of disruptive behavior and is distinct from the “Code Green – Mental Health Response”.

[Code Green is a response to violent behavior related to the clinical management of a patient in any patient care area (e.g., psychiatric emergency room, emergency room, outpatient clinic, or other nursing unit). The Code Green manages violent or self-destructive behavior that jeopardizes the physical safety of a patient, workforce member, other individual in the course of the provision of patient care.]

PURPOSE: To ensure an appropriate response to situations involving a physically or verbally aggressive or combative individual.

DEPARTMENTS: **ALL**

DEFINITIONS:

- PROCEDURE:**
- I. Code Gray Response
 - A. Any member of the workforce that is confronted with or witnesses a combative situation should initiate a Code Gray.
 - 1. Verbal abuse – workforce members should provide assistance to the victim(s).
 - a. Assist in attempts to verbally de-escalate the assailant
 - b. Call in a second person to take over

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- c. Add distance/barriers between the victim and the assailant
 2. Physical battery or assault with a weapon – prepare to provide assistance to the victim(s) by:
 - a. Protecting self and others by assisting the victim to stop/deflect blows by the assailant
 - b. Creating a diversion by putting distance/barrier between the victim and the assailant
 - c. Obtaining medical assistance, if needed
 3. Active shooter or hostage situation – immediately contact Operator at x111 or Sheriff Dispatch at 818-364-3409 (x3409) and institute “Code Silver” for management of a person with a weapon or a hostage situation; and initiate “Code Silver” procedure (See ValleyCare Policy and Procedure “Management of a Person with a Weapon and/or a Hostage Situation – Code Silver”).
- B. Workforce members should be alert to the early warning signs of violent behavior, such as:
 1. Direct or verbal threats of harm
 2. Intimidation of others by words or actions
 3. Refusing to follow policies
 4. Carrying a concealed weapon or flashing a weapon to test reactions
 5. Hypersensitivity or extreme suspiciousness
 6. Extreme moral righteousness
 7. Inability to take criticism regarding job performance
 8. Holding a grudge, especially against a supervisor and/or frequently verbalizing hopes that something will happen to that individual
 9. Expression of extreme desperation over recent problems
 10. Intentional disregard for the safety of others
 11. Destruction of property
- C. In the event an individual refuses to leave a secure area (e.g., the clinic exam room or emergency room treatment areas) after being requested to do so, workforce members may contact the Sheriff Dispatch and invoke the “Section 602” letter (Attachment I), which prohibits trespassing or obstructing the carrying out of business in a public agency.

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- D. Any workforce member who hears the request to initiate the Code Gray should call x111 and inform the Operator a “Code Gray” is occurring and the location. The Operator will immediately contact Sheriff Dispatch at x3409 and announce overhead “Code Gray” and the location three times.
- E. The Code Gray response will be managed by the Sheriff, which will respond and assume responsibility for the situation.
- F. When the incident has been resolved, Sheriff Dispatch will contact the Operator to clear the Code Gray.
- G. A Security Incident Report is to be completed by the Supervisor/Manager and submitted as indicated on the form (Attachment II).

If the disturbance occurs in a clinical treatment area (e.g., outpatient clinic, Emergency Room, inpatient unit) and involves a patient, it should be documented in the patient’s medical record.

II. Education and Training

- A. Workforce members in high risk areas, such as the Emergency Room, Psychiatric Emergency Room, and Inpatient Psychiatric Units, will receive education and training on a continuing basis, as appropriate to their job responsibilities and the relative risk to violence that includes the following:
 - 1. General safety measures
 - 2. Personal safety measures
 - 3. The assault cycle
 - 4. Aggression and violence predicting factors
 - 5. Obtaining patient history from an individual with violent behavior
 - 6. Characteristics of aggressive and violent patients and victims
 - 7. Verbal and physical maneuvers to diffuse and avoid violent behavior
 - 8. Strategies to avoid physical harm
 - 9. Any resources available for coping with incidents of violence, such as critical stress debriefing or employee assistance programs

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| References: California Code of Regulations, Title 22, §70743 and §70746 California Health and Safety Code, Chapter 2, Article I, §1257.7 and §1257.8 Hospital Incident Command System (HICS) Guidebook, www.emsa.ca.gov/HICS The Joint Commission, EC 02.01.01 | |
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