



Title:	Patient Behaviour Policy	Date of Issue: June 22, 2022
		Revision Date:
Approved By:	Board of Directors	Review Date: June 22, 2025

Intent

When working with patients there is the risk of being exposed to individuals who may easily become disgruntled and/or who may have violent tendencies. Patients can behave rudely, or become aggressive if they feel they have been wronged, ignored or dealt a “bad card”. Some patients maintain high and sometimes unrealistic expectations of a health provider’s ability to treat them.

When patients feel that their demands are not met or are delayed, these patients can demonstrate their frustration and anxiety through aggression. Although there are often times when patients may be calmed and the situation neutralized, this cannot always be accomplished.

As staff, you must develop your abilities to maintain professional composure, and diffuse an aggressive or potentially violent patient down to a calmer state. If a patient is overly aggressive, a reassuring, soothing, unassuming attitude and presence of mind will help to keep you and others safe.

Process

This policy will address the management of the aggressive patient at the Front Desk and or Side Reception as well as the patient who becomes aggressive once in the examination room. As a general rule, the following will help when managing an aggressive patient. You cannot predict which patient can become aggressive, but signs of agitation, angry voice tone, clenched fists and abrupt movements may be visible indicators that things are about to escalate.

In the event that a Marathon Family Health Team employee encounters a patient under the obvious influence of alcohol or drugs, or a hostile or violent patient, the employee is directed to follow the guidelines and procedures established within this policy.

Scope

This policy applies to all employees, health providers and contractors of the Marathon Family Health Team.

Zero Tolerance Policy

- Marathon Family Health Team has a zero tolerance policy for disruptive, violent or harassing behaviour of any kind.
- Disruptive behaviour can include physical (throwing things) or non-physical (loudness, staggering/stumbling, non-coherent) actions.
- Violent, threatening behaviour can include physical and non-physical actions.
- Employees who feel that they are being harassed by a patient should consult the Respect in the Workplace Policy to determine if the behaviour can be defined as harassment.



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- Employees should follow the guidelines as outlined within this policy, but be aware their safety is the most important factor, and that their discretion on how to handle such patients will be required and respected.

Guidelines for Managing Hostile or Disruptive Patients

Remember that the patient may be hostile or disruptive for a number of reasons and try not to take it personally. While we strive to offer patient services that will meet their needs, there are often internal forces that create anger or hostility in patients, and regardless of the actions that we take, we may be unable to resolve the situation to the satisfaction of the patient.

- Ask questions. You can regain control of a situation that is potentially volatile by distracting the patient. Ask the patient to tell you their side of the story. Make them feel they should be heard, but do not take sides. Do not make any comments that could be used against you or the Clinic later. Ask the patient, what do you need from me, what are your expectations or health concerns? Try to identify the cause of their aggression. Document the patient's concerns and your conversation with them carefully in the incident report.

Observe the Patient on Approach as they Report to Administration

Be observant, and pay close attention to your patients as they arrive at the facility. In the event that a patient is hostile or has the potential for escalating their situation, they may display the following visible characteristics:

- Physical cues like clenched fists, a red face, agitated behaviours, etc.;
- Not making sense and not listening to reason; and/or
- If they seem to be under the influence of a controlled substance (staggering, stumbling, slurring of words).

In the event that you notice a patient exhibiting behaviours associated with hostility/anger, prepare yourself for a potentially difficult situation, and remain composed and professional.

Some patients may have very quick mood changes that seem to escalate at an extremely rapid rate. Employees are encouraged to be prepared for this possibility with most patients, who have definitely reported to Reception in a hostile or agitated state.

Present yourself in a way that attempts to diffuse the situation before it escalates

If you are able to present yourself using the following techniques, you may be able to quickly diffuse a situation in the instance where a patient has presented to Reception in an agitated state and begins to get angry for whatever reason:

- Stay Calm. No matter how agitated the patient becomes, keep your inner core calm and collected. Stand up to bring yourself up to the same eye level as the patient. Do not show your own agitation or alarm. If a patient is being rude but not aggressive, remember that aggression



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can be only moments away. Maintain a calm, friendly, polite but firm attitude but do not come across as patronizing. Keep your voice at a conversational level – calm and evenly toned.

- Keep your body language neutral. Remember that 80% of human communication is non-verbal. Even if you do not give out verbal signs of your own agitation, the patient may be picking up on your fear, disgust and dislike. Work on your body language. Do not clench your fist, or thin your lips, narrow your eyes or hold your shoulders stiff.
- Maintain eye contact. Maintain eye contact and keep your gaze neutral so that the patient can see that even if he/she is being unreasonable, you are willing to give him/her a chance. Maintaining eye contact also indicates that you respect the patient's viewpoints and you are willing to reason with him/her. A patient demonstrates rude or aggressive behaviour mostly to be heard and have someone's attention focussed fully on them.
- Keep your physical distance. Stand up, maintain eye contact, but keep your distance at more than arm's length away from a potentially aggressive patient. Never turn your back on a potentially aggressive patient, always remain facing them, and always identify and position yourself in case you need to make a quick exit or escape away from the patient. Make sure you have identified an "escape route" and don't back yourself into a corner.
- Try not to say no to a violent patient. Never say no to the face of a violent or potentially violent person. For example, if the patient is demanding narcotics, or specific care, explain that you will need to speak to their doctor. Offer alternatives and keep the patient's options open. When completely negated, aggressive patients lose control.

Determine the Patients Needs

- Determine what the initial issue is/was, what was or can be done, and offer them a solution.
- Try to determine what they need, and what it is that they want to tell you. Sometimes a patient will simply want to vent their anger, and be heard; however, this type of behaviour is only tolerable up to a point. Any level of verbal abuse will not be tolerated.
- Demonstrate your empathy. Use logic and kindness to get the situation under control. Indicate through your words and your body language that you are trying to understand the root of the patient's anger. Do not brush off their anger or ignore them as this may lead to increased anger or a patient who becomes abusive.
- Explain in a strong, clear voice that you understand the issue and would like to help them resolve the issue now. Maintain professionalism at all times and do not engage in a heated argument with the patient as this will only make the situation worse and may put staff and other patients at risk.
- If the patient arrives at the clinic and is intoxicated or "high" but remaining NON-HOSTILE, be kind, professional, and courteous. A patient in this condition has to be individually evaluated by means of a patient encounter with a physician basically to determine the patient's ability to



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provide consent (Per CPSO guide). Staff may indicate to the patient that if they are beyond the ability to provide consent, their appointment may have to be rebooked, but staff are not automatically able to do that. It is a physician's responsibility to see the patient, determine the ability to consent, and if required, investigate the reason for the intoxication (Per CPSO guide).

Patient Behaviour Standards

At the Marathon Family Health Team we have standards and expectations for patient behaviour. Patients whose anger or hostility cannot be controlled are not welcome on the Marathon Family Health Team's premises.

Patients who are exhibiting the following behaviours, and do not respond to staff efforts to assist them in regaining control of themselves and their behaviour, will be asked to leave the premises:

- Excessive shouting
- Excessive swearing
- Behaviour indicative of someone under the influence of Alcohol and/or Drugs (staggering / loss of balance, loud / shouting voice, bursts of emotion or anger, slurring of words and not making sense, not listening to reason)
- Any verbally abusive remarks towards staff
- The repeating of behaviours which they have been asked not to perform, e.g. I have asked you to please not curse and yell at me, yet you continue to do so.

Patients who exhibit the above behaviours will also have strict conditions placed on their future use of the Marathon Family Health Team's services, when the patient has:

- Been asked to leave on more than three (3) occasions for violating any of the patient's behavioural standards outlined above.
- Display any kind of physical violence towards anyone on the Marathon Family Health Team's premises or towards any of our staff or other patients at any time.
- Uttered any kind of threat of physical violence.
- Caused wilful damage or destruction to Marathon Family Health Team property, or employee property.
- Been in possession of a weapon while on Marathon Family Health Team premises.
- Been associated with the use, possession, sale, manufacture or dispensation of any illegal drug, alcohol, or paraphernalia while on Marathon Family Health Team premises.

Strict conditions would include the patient being escorted by a police officer whenever they need to visit the Marathon Family Health Team or access on-site any of the Marathon Family Health Team programs and services.

Calling the Police

- If at any point the employee feels that their safety, the safety of the patient or the safety of others is in jeopardy the police must be called, regardless of the situation.



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- The police should also be called if a patient who has been asked to leave repeatedly or banned from the Marathon Family Health Team site re-enters, or if a patient will not leave after being asked.
- If you are not able to call the police with the patient present, ask them to leave the premises and at that point call the police immediately.
- If the patient refuses to leave the premises, the employee should leave the area and use the nearest safe phone to call police.

Police Calling Procedures

- In the event that the police must be called for excessive yet non-dangerous infractions the employee should have already asked the patient to leave on more than one occasion and also have warned the patient that if they do not leave the police will be called.
- If the patient appears as though they are not stable and may harm themselves or others the employee should call the police immediately, no warning is necessary.

Acknowledgement & Agreement

I, (Employee Name), acknowledge that I have read and understand the Patient Behaviour Policy of Marathon Family Health Team. Further, I agree to adhere to this Policy and will ensure that co-workers working alongside of me also adhere to these guiding principles.

_____ MPAG Employee

_____ MFHT Employee

Name:

Signature:

Date:

Witness:

Rev Date: June 22, 2022. J. Berube, MFHT ED Intent or Purpose