

# Communication Plan for External Stakeholders

## Background

This tool was originally developed for hospitals as part of the Workplace Violence Prevention in Health Care Leadership Table. It has been adapted for long-term care homes to address the needs of the sector.

Long-term care homes are an environment where residents often feel vulnerable and anxious. This can include, for example, aging residents and their caregivers/care partners, individuals experiencing a physical or mental health crisis, those needing addiction support, and residents who have unmet needs they are unable to express. According to the Canadian Institute of Health Information (CIHI) (2015-16), fifty percent of residents with dementia in long-term care exhibit responsive behaviours. Some examples of responsive behaviours include: verbal or physical aggression (striking, self-harm), exit seeking, resistance to personal care, refusal to eat/take medication, etc. These behaviours may be due to a number of factors including an unmet need (e.g. pain, environment (hot/cold), feeling hemmed in, influences of other residents/staff and social history). Despite the fact that an aggressive action stemming from a responsive behaviour may be due to dementia or an unmet need, if it leads to an aggressive action against a worker in a workplace and meets the definition of workplace violence under the *Occupational Health and Safety Act*, (OHSA), it is considered workplace violence (herein referred to as workplace violence). Workplace violence in long-term care homes can originate from a number of sources, including from residents and their families and friends or other external people and/or from any employee associated or formerly associated with the workplace.

In order to prevent workplace violence, employers must implement workplace violence policies, measures, procedures and programs, conduct risk assessments and re-assessments for the risks of workplace violence, establish measures and procedures for: summoning immediate assistance when violence occurs or is likely to occur, reporting violent incidents and investigating incidents and complaints of violence, and providing information, education and training to workers so they may recognize and be protected from workplace violence. Employers, typically represented by senior management, hold the greatest responsibility with respect to worker health and safety within health care workplaces such as long term care homes.

## Communication and Knowledge Translation Plan for External Stakeholders

The list of priority external stakeholders begins with the highest levels of provincial oversight and follows through the various ministries, associations, organizations and unions. It includes all groups whose interactions with Ontario Long-Term Care Homes, can and should make a positive contribution to eliminating workplace violence. Each stakeholder has a role to play and can contribute through strategic messaging towards ensuring that Long-Term Care Homes become leaders in workplace violence prevention.

The priority external stakeholders and ideas for their key messages:

### A. Ministry of Health and Long-Term Care (MOHLTC)

- Messages that reinforce the link between worker and resident safety
- Reinforce the importance of Workplace Violence Prevention (WVP) and worker safety and the importance of prevention
- Zero tolerance messaging
- Messaging about CEO, Administrator and Board of Directors (BOD) role
- Prepare workplaces for work flowing from the leadership table and inform Long Term Care Homes of new developments

### B. Ministry of Labour (MOL)

- Messaging to ensure all workplace participants know of and comply with their responsibilities in the workplace as mandated in the *Occupational Health and Safety Act* (OHSA) and its regulations
- Messaging that employers have ultimate responsibility under the OHSA
- Messaging that MOL will, as part of its expectations of workplaces and in the healthcare sector plans, enforce the OHSA and its regulations
- Messaging about specific areas of compliance required (such as communicating legislative expectations to comply with the OHSA, standards for summoning immediate assistance in the healthcare sector plan, or to promote the Public Services Health & Safety Association (PSHSA) Violence, Aggression and Responsive Behaviour project (VARB) tools).

### C. Chief Prevention Officer (CPO), MOL

- Messaging to inform the system stakeholders about information and initiatives regarding WVP opportunities, e.g. Research Opportunities Program through the MOL

**D. Accrediting Bodies (i.e. Accreditation Canada, Commission on Accreditation of Rehabilitation Facilities Canada, etc.)**

- Timely and consistent messaging as necessary regarding changes to required organizational practices (ROP) and other accrediting bodies' requirements
- Messaging to reinforce the importance of the tests for compliance in the Accreditation ROP and Standards related to WVP

**E. Ontario Long Term Care Association (OLTCA) and AdvantAge Ontario**

- Messaging that everyone has a role to play in ensuring a healthy and safe workplace.

**F. Local Health Integration Networks (LHINs)**

- Messaging consistent with a zero tolerance approach for workplace violence (WV)
- Messaging to BODs to encourage uptake of WVP training
- Messaging as necessary to communicate changes in Quality Improvement Plans (QIPs) to Long Term Care Homes
- Messaging to reinforce WVP as a priority in organizations

**G. Ministry of Community Safety and Correctional Services (MCSCS)**

- Messaging to other agencies of potential resident risks and to be informed during transfers

**H. Police Services**

- Message that they will respond to situations in a way that takes into account preventive services (i.e. respond to violent events in health care settings when summoned and consider charges in accordance with their current practice, or make mandatory referral for families/residents to participate in programming)
- Message that they communicate risk as necessary with other agencies

**I. Professional Colleges such as College of Nurses Ontario (CNO), College of Physicians and Surgeons of Ontario (CPSO), Ontario Medical Association (OMA), Ontario College of Social Workers and Social Service Workers (OCSWSSW)**

- Messages regarding their role to ensure professional workplace standards

**J. The Professional Organizations - Nurse Practitioners' Association of Ontario (NPAO), Registered Practical Nurses' Association of Ontario (RPNAO), Registered Nurses' Association of Ontario (RNAO), Ontario Medical Association (OMA), Ontario Association of Social Workers (OASW)**

- Messages to encourage and remind health care workers (HCW) of their duty to report WPV
- Messages to ensure that health care workers are aware of their right to a violence and harassment free workplace

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- Messages to ensure that health care workers know that they have a right to receive training appropriate to their jobs and tasks and to receive training, and the information and instruction to work safely.
- Health care workers have rights under the *Occupational Health and Safety Act*, including the right to know, the right to participate, and the right to refuse unsafe work. In specified circumstances, the right to refuse unsafe work is limited for health care workers and persons employed in certain workplaces like long-term care homes.

### **K. Unions that represent workers in Long Term Care Homes (includes but not limited to Ontario Nurses' Association (ONA), Ontario Public Sector Employees Union (OPSEU), Service Employees International Union (SEIU), Canadian Union of Public Employees (CUPE), Unifor, Christian Labour Association of Canada (CLAC))**

- Messages to ensure that members know their rights and responsibilities under the OHSA
- Messaging that employers have ultimate responsibility under the OHSA
- Messages to reinforce, educate, promote JHSC/Health and Safety Representative (HSR) (in workplaces with 6-19 workers)
- Messages to encourage and remind members of their duty to report workplace violence

### **L. Health Quality Ontario (HQP)**

- Messaging as necessary to communicate changes to QIPs in Long Term Care Homes

### **M. Public Services Health & Safety Association**

- Tools to assist employers in development of their organization violence prevention programs
- Tools to assist employers to assess the risks of violence in their workplace

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