

### **RECOMMENDATION #20**

## **CREATION OF CONSISTENT COMMUNICATION PROTOCOLS BETWEEN EXTERNAL CARE ENVIRONMENTS**

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### **OPPORTUNITY**

At present there are inconsistent protocols to address and/or document the potential for patient triggers, responsive behaviour, and/or interventions when patients are transferred to different care environments or institutions (e.g. From Long-Term Care Homes to Hospitals, etc.). The result is that the receiving health care institution is not prepared to receive the patient, and, may inadvertently cause responsive behaviours in the patient.

An opportunity exists to increase worker safety through the creation of standardized communication protocol.

### **RECOMMENDED SOLUTION AND INTENDED OUTCOME**

A consistent approach to patient transfers to and from external health care institutions (eg: Long Term Care Homes to Hospital to, etc.) will limit the risk of violence to healthcare workers and patients.

The Ministry of Health and Long-Term Care (MOHLTC) together with the Local Health Integration Networks (LHINs), other healthcare delivery agencies, and the Public Services Health and Safety Association (PSHSA) should create and communicate a requirement for healthcare workplaces to implement clear and consistent patient transfer policies, guidelines, and protocols to ensure that the receiving health care institution is aware of and prepared to receive any patients with a history, or potential for causing violence along with any triggers, and interventions that the employer is aware of.

This protocol needs to be developed to ensure that the information communicated between institutions does not discriminate against patients, or cause additional barriers to access an alternate level of care.

### **RECOMMENDED IMPLEMENTATION**

#### **SHORT**

1. The MOHLTC works with the LHINs, other health care agencies, and PSHSA to develop standardized protocols.
2. Compliance requirements with the new directive will need to be determined.

## Workplace Violence Prevention in Health Care Leadership Table

### **MEDIUM**

1. Standard protocols are implemented.
2. Compliance is monitored.

### **LONG**

1. Evaluation of the new protocols is presented to the MOHLTC.