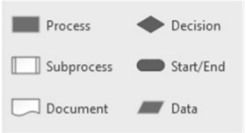
Flowchart for the Primary Care and Chronic Disease High Risk Behaviour (Flag) Alert Procedure



OBSERVATION
Any staff member observes a high risk behaviour event from a patient.

VIOLENCE ASSESSMENT TOOL (VAT)
Patient behaviour is assessed and scored on a VAT as soon as possible after the incident.

PATIENT SAFETY INCIDENT (PSMS)
'Patient Safety Incident' is to be entered and recorded in the Provincial Safety Management System (PSMS) in a timely manner following the incident.

STAFF INVOLVED?
Was the patient behaviour directed towards a staff member?

yes →

STAFF SAFETY INCIDENT (PSMS)
'Staff Event' is also to be entered and recorded in the PSMS in a timely manner following the incident if the behaviour was directed towards a staff member.

no ↓

VAT SUBMISSION
VAT is completed by the staff who observed the high risk behaviour and then submitted to the Clinical Lead / Manager.

VAT ASSESSMENT
VAT is to be assessed by the Clinical Lead / Manager based on the VAT total behaviour score and with input of the involved staff in order to determine level or risk for the Risk Reduction Plan.

SUICIDALITY?
Did the patient express or imply possible suicidality?

yes →

COLLABORATION WITH MH&A
If potential suicidality was present, a clinician or staff member from Collaborative Mental Health should be involved immediately and will assist in the risk determination and developing an appropriate Risk Reduction Plan.

no ↓

RISK DETERMINATION?
Total VAT behaviour score applied to the VAT Risk Rating Scale to determine level of risk.

low →

LOW / MODERATE (SIMPLE) RISK REDUCTION PLAN
A 'simple' Risk Reduction Plan is formulated. A simple Risk Reduction Plan will automatically expire after 1 week.
No patient notification is required for simple Risk Reduction Plans.

high →

HIGH / VERY HIGH (DETAILED) RISK REDUCTION PLAN
A 'detailed' Risk Reduction Plan is formulated and patient is notified of the plan with their provider (if it can be done safely). A 'pop-up' note is added to CHR for all users accessing the file until removed. Clinical Lead / Manager approval required to activate and/or discontinue a detailed Risk Reduction Plan.

COMMUNICATING RISK REDUCTION PLANS
VATs and Risk Reduction Plans are scanned and entered into CHR. **All Risk Reduction Plans are to be communicated only to staff who are likely to have contact. All detailed Risk Reduction Plans should be reviewed monthly.**