Common Definitions

Recommendation 18 from Phase 1 indicated that in order to facilitate future discussions, clear definitions should be agreed to for the terms Root Cause, Root Cause Analysis, Flagging, and Use of Force.

Root Cause (Other Terms Are Basic, Latent, Distal)

- Causes related to the systems and processes that lead to the unsafe acts or unsafe conditions.
- Involve past decisions (either strategic, design or planning) that create a situation where errors happen (Ahluwalia & Marriott 2005). This is the earliest point at which an intervention could have prevented the incident.
- Are present at the time of the incident, present for some time before the incident and remain after the incident, and therefore have the power to contribute to future incidents.
- Systemic causes that need full attention during an investigation, since they affect
 the entire system, and correcting these causes will theoretically prevent a number of
 future incidents.

Root Cause Analysis

- Involves those who are the most familiar with the situation
- Continually probe deeper by asking questions (ie why) at each level of cause and effect without blame
- Identifies changes that need to be made to systems involving stakeholders
- Is impartial, in order to make clear the need to be aware of and sensitive to potential conflicts of interest (Hoffman et al. 2003)

Flagging

- A standardized method of communicating safety-related concerns to workers.
- Unlike code-white protocols that notify workers of violent situations, flagging draws attention to the potential of violence.
- It involves exchanges of information that consist of visual and / or electronic cues easily recognizable by the healthcare team.
- While traditionally used to protect patients from risks such as severe allergic reactions, infection or falls, flagging is now also used to alert healthcare staff to the risk of violent, aggressive or responsive behaviour, and to signal that additional care is required (Kling, Yassi, Smailes, Lovato, & Koehoorn, 2011)

Use of Force

Use of force is defined as any force beyond a guiding touch.

Acknowledgements

PSHSA acknowledges and appreciates the time and expertise of the many healthcare workers, organizations, frontline staff and labour unions that participated in the guidance and development of this resource. This document has been endorsed by the PSHSA Violence, Aggression and Responsive Behaviour (VARB) Steering Committee and was developed by the (Long term Care/ Hospital/ Home Care) Research and Development Group under Phase Two of the Workplace Violence Prevention in Healthcare Leadership Table (Leadership Table). Reporting to the Leadership Table Secretariat, the Research and Development Groups were established to develop products aiming to strengthen workplace violence prevention activities.

The information contained in this document is as accurate, complete and current as possible at the time of publication. This resource is copyrighted by the Public Services Health & Safety Association (PSHSA). The content of this document, in whole or in part, may be reproduced without permission for non-commercial use only and provided that appropriate credit is given to PSHSA.