

County of San Bernardino Department of Behavioral Health

Assaultive Behavior Plan (ABP) Procedure

Effective 07/18/11
Approved 07/18/11



Allan Rawland, Director

Purpose To provide DBH staff with a protocol for responding to assaultive behavior.

ABP Protocol The ABP general protocol is described in the table immediately below. Each component of the ABP protocol is described in successive blocks below.

| Step | Action |
|------|--|
| 1 | Assaultive behavior is witnessed, which is the trigger to begin the protocol. |
| 2 | <p>The witnessing staff member takes the following actions:</p> <ul style="list-style-type: none"> • Makes or requests another staff member to make the appropriate color code announcement, as defined in policy, over the facility Public Address (PA) system, if one is available. For example, Staff announcing the Color Code alert will slowly repeat the color code twice, followed by the location, as follows; staff would speak into the PA system, "Code Blue, Code Blue in the (name of facility room or area)". <p>Note: Color Code Grey may have the word "all," or a clinic, program or department name added to the verbal alert when a response from the entire building is not needed, as defined in policy. The person making the alert will speak into the PA system, "Code Grey, Code Grey in (name of facility room or area)-"all" when all DBH staff are being summoned. Or, "Code Grey, Code Grey in (name of facility room or area)-"Agewise," when only Agewise responders are needed.</p> <ul style="list-style-type: none"> • Notifies or requests another staff member to immediately notify local law enforcement as appropriate • Advises another staff member to immediately notify the Clinic Supervisor (CS), Program Manager (PM), or most senior staff member on site • Immediately applies Non-Violent or Acute Crisis Intervention procedures and techniques, as trained <p>Note: These actions may overlap and rapidly occur.</p> |
| 3 | <p>The CS, PM or designee will immediately determine:</p> <ul style="list-style-type: none"> • If local law enforcement has been notified as appropriate |

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Assaultive Behavior Plan (ABP) Procedure, Continued

ABP Protocol
(continued)

| Step | Action |
|-------------|---|
| 3 cont'd | <ul style="list-style-type: none"> • If an Emergency Action Plan (EAP), as defined in policy, evacuation needs to occur, either to a safe haven room, as defined in policy, or out of the building • Determine if the first responding clinic staff member is successfully de-escalating the client and is capable of completing the de-escalation • Decide to replace or support the first responding clinic staff member with another staff member if the first responder is not successfully de-escalating the client • Direct other staff to call local law enforcement, among other actions, in accordance with the above referenced procedures • Advise other responding staff not able to directly participate in resolving the incident to return to their respective duties |
| 4 | The CS, PM, Location Safety Coordinator (LSC) or designee will confirm the EAP is followed for evacuation, either to a safe haven room or out of the building, including accounting for all staff, clients and visitors in the facility during the incident. |
| 5 | The CS, PM, LSC or designee will notify everyone when the building may be occupied again, or the safe haven room may be exited, including unlocking therapy rooms. |
| 6 | The CS, PM, LSC or designee will ensure Immediate Post-Incident Responses are made for appropriate medical and psychological injuries, as described in the Threats and Assault on DBH Staff Procedure . |
| 7 | Appropriate Post-Incident Reporting Requirements will be followed as described in the Threats and Assault on DBH Staff Procedure . These requirements include reporting by: <ul style="list-style-type: none"> • Employees directly involved in the incident • The Supervisor • The Office of Compliance • Management • Executive Management • The Director's Office |
| 8 | The PM will consult with the appropriate Deputy Director to determine if a Post-Incident de-briefing is to be held, and conduct it within seventy-two (72) hours of the incident, in conformance with procedures in the DBH Emergency Action Plan . |

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Assaultive Behavior Plan (ABP) Procedure, Continued

ABP Protocol
(continued)

| Step | Action |
|------|--|
| 9 | <p>Appropriate Incident Follow-Through and Investigation will be made as described in the Threats and Assault on DBH Staff Procedure. These requirements include action from:</p> <ul style="list-style-type: none"> • The Human Resource Office • The Supervisor • Management • Executive Management • Director's Office |

ABP Readiness

- CSs and PMs will ensure staff is prepared to follow the ABP by:
- Ensuring staff are trained to:
 - Understand the location and use of the safe haven room(s)
 - Recognize assaultive behavior when it occurs
 - Understand and can carry out their respective roles in the ABP
 - Ensuring staff participate in practice evacuation drills, as described in the facility EAP, according to assigned EAP responsibilities
 - Conduct practice evacuation drills at least once a month, in conjunction with the LSC
 - Debrief and report results of practice drills according to EAP requirements
 - Ensuring the EAP is reviewed at least annually, as described in EAP requirements
 - Ensuring incidents have been reported to the Disaster/Safety Unit at least quarterly

Reference

Welfare and Institutions Code, Section 77117(b)

Related Policy and Procedure

- County of San Bernardino Policy 09-08: [Violence and Threats in the Workplace – Zero Tolerance](#)
DBH Standard Practice Manual
- SFT7005: [Bomb Threat Procedure](#)
 - SFT7006: [Earthquake Procedure](#)
 - SFT7007: [Disaster and Mass Casualty](#)
 - SFT7009: [Assaultive Behavior Plan Policy](#)
 - SFT7010: [Possession of a Weapon Policy](#)
 - SFT7010-1: [Possession of a Weapon Procedure](#)
 - SFT7015: [Threats and Assault on DBH Staff Policy](#)
 - SFT7016: [Special Incident Reporting Procedure – Client Related](#)
 - SFT7022: [Emergency Action Plan Policy](#)