Code Orange Policy

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Document Type	Policy
Risk of non-compliance	may result in significant harm to the patient/DHB
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• Organisation(s)	Auckland District Health Board
• Directorate(s)	Auckland DHB wide
• Department(s)	All departments, services and units
• Used for which patients?	All patients and visitors
• Used by which staff?	All staff
• Excluded	
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Contents

1. Purpose of policy

The purpose of this document is to explain the process of a Code Orange and to define Auckland District Health Board's (Auckland DHB) expectations and management of situations where staff have identified that their safety or the safety of others (including the environment) is at risk.

Auckland DHB staff have the right to work in a safe and respectful environment without fear of violence, aggression, abuse or harassment from patients, visitors, and staff.

In accordance with the Code of Health and Disability Services Consumers' Rights, when physical restraint is utilised it should ensure the safety and dignity of the patient is maintained.

2. Scope

The scope of this policy applies in emergencies where the patient, a visitor, family member or other member of the public has not responded to de-escalation or other techniques. This includes where the safety of visitors, patients, staff, or the environment is threatened and emergency assistance must be activated as soon as possible.

The scope of a Code Orange includes Auckland City Hospital site (Grafton, including Starship and Te Whetu Tawera) and Greenlane Clinical Centre. Other sites are expected to have equivalent, locally developed and managed processes, which are referenced in the associated documents section of the policy. The Code Black incidents are outside the scope of this policy.

3. Policy statements

A Code Orange is the Auckland DHB emergency call for assistance to limit or eliminate a risk when staff feel concerned about their own safety, the safety of a patient, others or the environment, or when an incident is impeding or obstructing the provision of clinical care.

During a Code Orange, personal restraint may occur. This is a serious intervention that requires appropriate justification. Restraint must only be used to protect patients, visitors, staff and the environment from harm for the least amount of time in the least restrictive safe way possible following alternative interventions such as de-escalation strategies.

Each episode of restraint must be documented in the clinical record and on the incident management system (Datix).

4.   Definitions

Term	Definition
Code Orange	Refers to any situation in which a person feels threatened or intimidated by an individual's behaviour or is concerned about the safety of a patient, others, or the environment including, but not limited to, situations where patients, visitors and staff are perceived as: a. Aggressive, intoxicated or likely to self-harm. b. Unwelcome visitor. c. Manipulative, intimidating or displaying inappropriate behaviour. d. Refusing to respect the rights of others. e. Extremely distressed, confused or agitated. f. Displaying behaviours of concern with actual or potential to harm self or others. g. Obstructing or impeding the provision of clinical care.
Code Orange response team	Refers to a team of allocated staff that are responsible for responding to a Code Orange. The Code Orange team comprises of Clinical Nurse Managers, Liaison Psychiatry, Patient at Risk Team and Security. Other personnel maybe required at times. The Patient at Risk Team may not be immediately available to attend if attending another code. For a Code Orange at Auckland City Hospital (excluding Starship), the contact centre notify all the Clinical Nurse Mangers (Site, Medical, Surgical & Cardiac, Children's & Women's Health), Patient at Risk Team, Liaison Psychiatry team, and Security services. For a Code Orange at Starship, the contact centre notify all the Clinical Nurse Managers (Site, Medical, Surgical & Cardiac, Children's & Women's Health), Kai Tiaki (Māori Health Worker), Patient at Risk Team and Security Services. For a Code Orange at Greenlane Clinical Centre, the contact centre notify the Clinical Operations Coordinator/Clinical Nurse Manager, Security services, Clinical Charge Nurse and Health Care Assistants (located at Greenlane Clinical Centre).
Code Orange response team lead	The Clinical Nurse Manager is the team leader. All staff follow the direction of the team leader to ensure management of the situation is effectively co-ordinated. A Code Orange that occurs within mental health services will be led by the mental health clinical team.
CCTV	All aspects of the Closed Circuit Television (CCTV) System used by, for, or on behalf of the Auckland DHB for security purposes.
Injure	'To injure' means to cause actual bodily harm or psychological distress to a person, self, or physical damage to the environment.
Incident	An event where there is a credible imminent prospect of, or there has been a breach of security or imminent threat of harm, interference with or obstruction to the provision of clinical care.

Term	Definition
Visitor	Persons including patient visitors, whānau, business visitors and members of the public visiting Auckland DHB sites.
Staff	All employees, Auckland DHB contractors, external contractors, and members of partner organisations working on Auckland DHB premises including students and volunteers.
Huddle	A group discussion with all staff involved in a Code Orange following the event that includes a post event debrief, and a documented action plan which is communicated to staff.
Patient	Services in the Auckland DHB usually refer to patients, clients, or service users according to the type of service and refer to an individual receiving care or treatment from Auckland DHB provider services.
Restraint	Restraint is the use of any intervention by a service provider that limits a patient's normal freedom of movement. Restraints can be categorised as personal restraint, physical or mechanical restraint, environmental restraint or seclusion (see Associated documents).

5.   Principles

The key principles guiding the Auckland DHB response to a Code Orange are:

- **Respect:** All actions should demonstrate respect for the person and others during a Code Orange.
- **Dignity:** All actions should maintain the dignity and emotional safety of those involved and witnessing the event.
- **Engagement:** If possible, engage the patient and the visitor and obtain cultural advice to assist in calming and de-escalation of the situation.
- **Environment:** To limit people entering and exiting the immediate area in which the Code Orange is occurring, and attempt to restrict the movement of the person(s) causing the Code Orange.
- **Communication:** Ensure communication is effective between the Code Orange team and those in the immediate vicinity, with attempts to resolve the Code Orange as soon as it can be done safely and effectively. The Code Orange team when required will escalate to a Code Black, to Auckland DHB senior management or emergency services as soon as possible.
- **Documentation:** Staff act in accordance with associated policies and procedures (*Restraint Minimisation & Safe Practice* policy and *Workplace Violence and Aggression Management* guideline).
- **Safety:** Maintain clinical safety and care for patients during and following a Code Orange.

6.   Ethical and legal considerations

In the event of a restraint occurring during a Code Orange, the team must ensure dignity and respect are maintained, and the least restrictive restraint is applied for the shortest duration,

minimising any risk of harm. Any unauthorised restriction of a person's freedom of movement could be viewed as a false imprisonment and could result in an allegation of assault.

Auckland DHB is responsible for the provision of appropriate training to prepare clinical and security staff for the event of a Code Orange. Decisions made in response to a Code Orange will ultimately be made in situations with limited information and actual or potential hostile environments.

7. Cultural aspects

All staff need to understand Tikanga Best Practice and be culturally competent when attending a Code Orange. 'Tikanga Best Practice' is a policy founded on Māori concepts, views of health, tikanga (Māori values/practices) and Te Tiriti o Waitangi. Modules are available on Ko Awatea LEARN and may assist Code Orange staff more effectively with de-escalation and restraint management for Māori patients.

8. Staff training

To ensure all staff members understand the requirements of the Code Orange Response Team, mandatory training can be found on the Auckland DHB section of the Ko Awatea LEARN website and must be completed by all clinical staff and security staff. Modules include:

- Restraint Minimisation and Safe Practice.
- CALM Communications for Auckland DHB.
- Understanding Tikanga Recommended Best Practice.

Code Orange response staff must have completed the Code Orange Simulation Training, and both the foundation and advanced training course 'Management of Actual and Potential Aggression' (MAPA). Clinical staff are required to attend the advanced training course to understand the restraint being applied by security and to effectively lead a restraint episode, and at times, the clinical lead may need to assist with the restraint.

The Code Orange team will attend annual training courses on either the foundation and advanced MAPA refresher courses organised by the Head of Security Services along with regular refresher training workshops held at Auckland DHB throughout the year.

Only staff members trained in de-escalation and restraint may co-ordinate and manage a personal restraint event. Where physical/mechanical restraints are applied as part of a clinical procedure, staff members must have been trained in and competent with their safe application.

8.1 Staff safety

Auckland DHB is committed to taking all practicable steps to eliminate or reduce threats to personal safety of its employees caused by aggressive behaviour or overt actions of a patient, a visitor and other employees. Staff members' safety must be managed according to the *Workplace Violence and Aggression Management* guideline.

9.   Responsibilities

All staff members are fully conversant with their roles in the Code Orange team. The Clinical Nurse Manager is the team leader and is responsible for ensuring safety is maintained. For Code Orange events occurring in mental health units, the mental health clinical team will lead the response with support from the Code Orange response team.

The Clinical Nurse Manager (or mental health clinical lead) adheres to set roles and responsibilities, and the Code Orange team work under the instruction of the Clinical Nurse Manager to ensure a situation is effectively and safely coordinated.

9.1   Code Orange response team

The Code Orange response team is responsible for:

1. Responding to the Code Orange immediately as per response guidelines, standing operating procedure, and task cards.
2. Assisting with de-escalation.
3. Utilising calming and restraint techniques as per Auckland DHB policy if the Code Orange is potentially or actually hostile.
4. Complying with Code Orange response team lead directions who will decide how to manage the situation and instruct the team accordingly.
5. Debrief huddle following on Code Orange event.

9.2   Code Orange response team lead

The Code Orange response team lead is responsible for:

When attending a Code Orange, the team leader will receive a brief from the allocated nurse, and assess the safety of the situation.

In consultation with the Code Orange team, the team leader will ensure the safety of the patient, others, and environment is maintained by instructing the team of their responsibilities at the time:

1. The team leader will ensure the appropriate procedures for the current situation are followed by using de-escalation techniques prior to any restraint episode as an initial preventative measure.
2. Removing an aggressive patient or person to another area if safety can be maintained.
3. Evacuating the immediate area to ensure the safety of bystanders.
4. To provide emotional safety to people witnessing the event.
5. To allocate appropriate resourcing on the ward by ensuring the safety of others, staff, and patients.
6. To remain present throughout the event and evaluate when safety has being maintained for all involved in the Code Orange.
7. To inform senior management and emergency services as soon as possible when required.
8. To ensure if restraint is used it is the least restrictive and for the shortest duration possible.
9. To complete documentation of the Code Orange in the clinical notes if restraint has occurred. (see Documentation following a Code Orange).
10. Deciding when a Code Orange can be stood down and advising the Code Team and other parties that the Code has finished.

11. To ensure a post Code Orange huddle occurs with the involved staff including the medical team, and staff whom need emotional support to enable a debrief and reassessment of patients plan of care.
12. Complete an incident (Datix) report.

9.3 Security Services

Security Services are responsible for:

1. Meeting emergency services when they arrive onsite, escorting emergency services to the incident if they are not already there, and providing emergency services with any required resources.
2. Ensuring the Security Control Room is equipped with floor plans, relevant policies related to security services, operations, evacuation procedures, key contacts, and communication technologies so it is available for use as primary incident control point.
3. Ensuring a secondary Security Control Room location is available and resourced.
4. Operating resource and systems as directed. For example, dispatching personnel, initiating the lock down, using CCTV to monitor and track the person(s) for whom the Code Orange was called, using other access control measures such as parking services.
5. Remaining available to support emergency services and/or incident management team until the incident is resolved.
6. Acting on the advice and instruction of the Clinical Nurse Manager (or other clinical lead).
7. Performing safe, least restrictive restraint if required and when directed.

10. Documentation following a Code Orange

Following a Code Orange, it is a requirement that documentation must be completed by the clinical lead. The reporting and recording of personal and physical restraint should be routine practice. Every situation when a Code Orange occurs must be recorded on an Incident Reporting Form (IRF 1) located in Datix, recorded in the clinical notes, and Code Orange logbook.

10.1 Clinical Nurse Manager documentation

All personal and physical restraint and Code Orange episodes must be reported and recorded immediately in the patients' clinical notes.

When restraint has occurred documentation must be appropriate and accurate. Record the restraint event on the CR0142 Post Code Orange Review, include:

a. A detailed description of what happened and names of who was involved
b. Contributing factors and time of the incident
c. The type(s) of restraint used and the duration
d. Alternative strategies used prior to restraint episode
e. Management plan following restraint
f. Relevant information following post restraint huddle

10.2 Security staff documentation

The security staff document all Code Orange events in the Code Orange logbook located in the Security Control Room (SCR).

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When restraint has occurred documentation must be appropriate, accurate, recording of the restraint event should include:

1. Date, location and time of code
2. Police event, CCTV coverage, persons assaulted
3. Type of restraint or intervention used
4. Length of the physical intervention
5. Name of Clinical Nurse Manager present
6. Clinical staff are responsible for completing Datix entries following Code Orange. Security may complete Datix if directed.

11.   Legislation

- Health and Safety at Work Act 2015
- Health Information Privacy Code 1994 (revised 1998)
- Privacy Act 1993
- Trespass Act 1980
- Crimes Act 1961

Standards
- 8134.2:2008 Health and Disability Services (Restraint Minimisation and Safe Practice) Standards

12.   Associated documents

- Behaviours of Concern (BOC) - Patient Observation
- Security Closed Circuit Television (CCTV) System Policy
- Code Black - under consultation
- Emergency Management
- Employee Assistance Programme
- Restraint Minimisation & Safe Practice
- Resuscitation - Paediatric Emergency Response Teams
- Security ID Card Policy
- Security (Physical) Policy
- Trespass Notice - Auckland DHB
- Weapons Management in AED
- Workplace Violence and Aggression Management
- 91 Paging System - Rehab Plus
- Health & Safety Hazard Identification and Risk Assessment
- CR0142 Post Code Orange Review

13. Disclaimer

No guideline can cover all variations required for specific circumstances. It is the responsibility of the health care practitioners using this Auckland DHB guideline to adapt it for safe use within their own institution, recognise the need for specialist help, and call for it without delay, when an individual patient falls outside of the boundaries of this guideline.

14. Corrections and amendments

The next scheduled review of this document is as per the document classification table (page 1). However, if the reader notices any errors or believes that the document should be reviewed *before* the scheduled date, they should contact the owner or Document Control without delay.