



Paramedic Chiefs
of Canada

Chefs Paramédics
du Canada

Developing a National Paramedic Workplace Violence Prevention Framework

We're taking a virtual role call today for those on the WebEx.
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This session will be recorded, and a
link sent out to attendees.

Facilitators:



Paramedic Chiefs
of Canada

Chefs Paramédics
du Canada



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Paramedic Chiefs
of Canada

Chefs Paramédics
du Canada

Guest Speaker:



Steve Sutton

**Manager – Provincial Air Ambulance Operations
& Inter Facility Patient Transfer Strategy
Alberta Health Services**

steve.sutton@albertahealthservices.ca

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Save the Date for Upcoming Webinar

Thursday, January 21 – 10:30am PT (1:30pm ET)

“Revolutionizing EMS: New Models of Care to Address Changing Health Care Needs in the Age of COVID”

Speaker: Matthew Crossman

[Sign up for information and notifications @ www.firstwatch.net/hi](http://www.firstwatch.net/hi)

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- All attendees are automatically muted by WebEx, but **we recommend muting your phone on your end**, as sometimes we unmute everyone on the WebEx side to anyone who wants to speak, and if you have background noise it will limit everyone's ability to share.

Thank You!

Asking Questions



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Cisco WebEx Training Center - How to ask a question using the WebEx system

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Quick Start Session Info Questions

01: Questions/Comments?

Click the hand icon to virtually "raise" your hand and ask a question.

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Participants

Speaking:

Panelist: 1

Katelyn Gilligan (Host, me)

Attendee: 0

Chat

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FIRST WATCH



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Partners and Inquiry Team

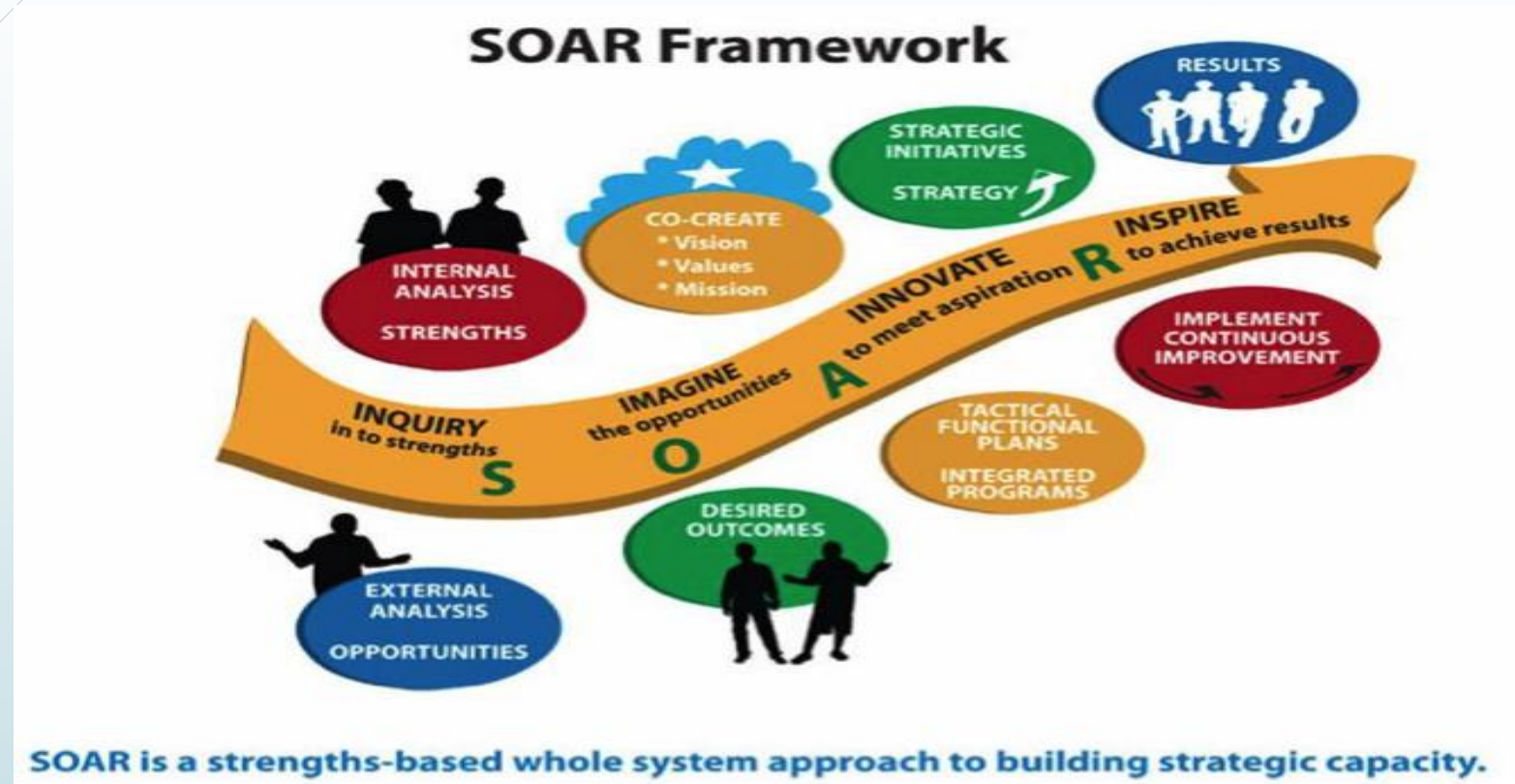
- Kelly Nash, Paramedic Chiefs of Canada
- Darren Sandbeck, Alberta Health Services Emergency Medical Services
- Andrew Gleeson, Ottawa Paramedic Service
- Shane Inkster, Alberta Health Services Emergency Medical Services
- Lyle Karasiuk, Parkland Ambulance Care Ltd.
- Meghan Colvin, Island EMS



Honoring Ethics Standards

- ▶ Royal Roads University Research Ethics Board
- ▶ Health Research Ethics Board of Alberta
- ▶ AHS EMS Research Committee

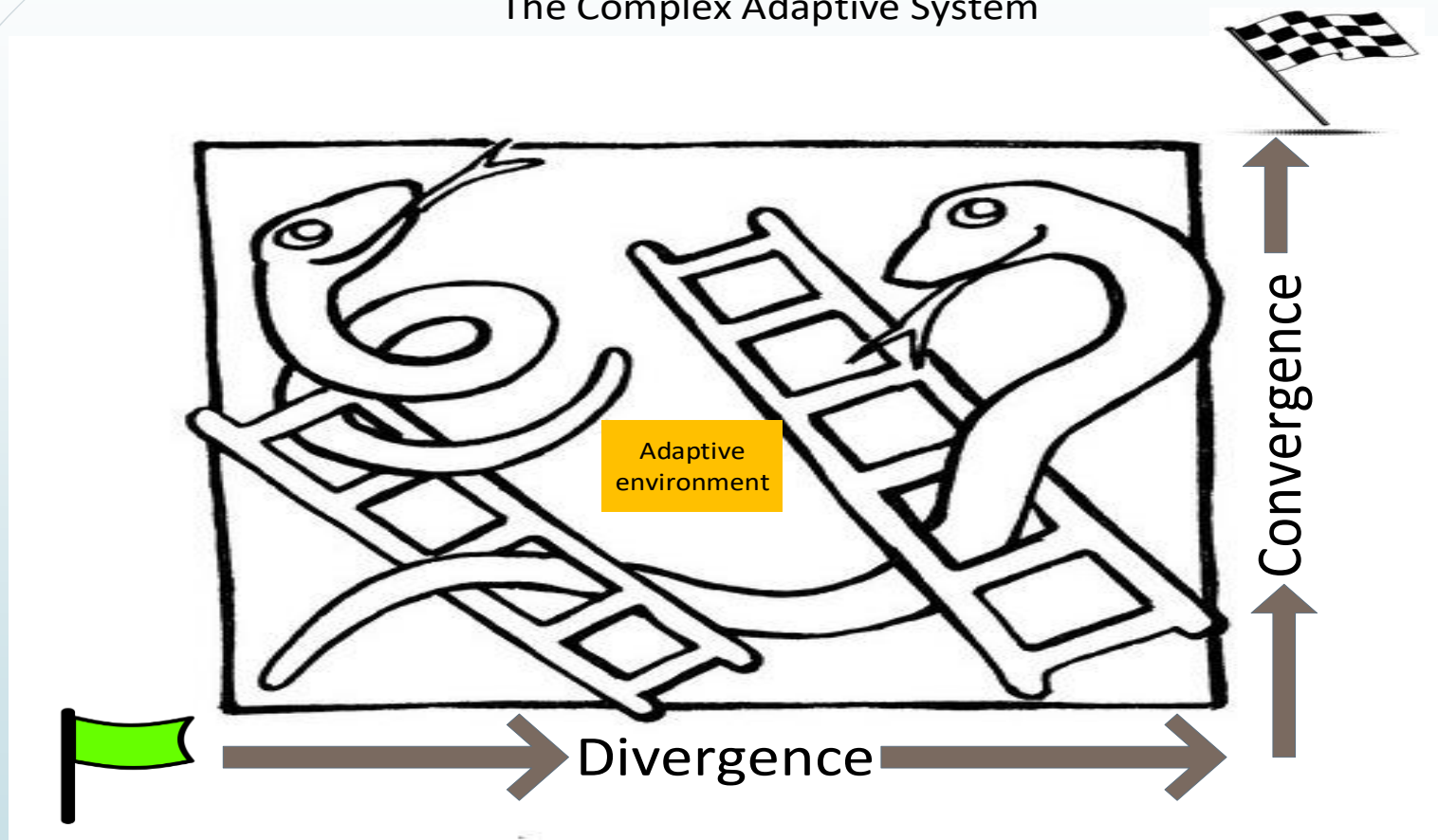
Methodology




“The key data collection innovation of appreciative inquiry is the collection of people’s stories of something at it’s best” (Bushe, 2005, p.1)

Methodology


The Complex Adaptive System



The Essence of Participatory Action Research



How might Paramedics experiences of workplace violence contribute to the foundation of a National Paramedic Workplace Violence Prevention Framework?

- 
- How might we inform a WVPF that promotes a culture where Paramedics report workplace violence when it occurs?
 - How might we incorporate workplace violence prevention education into a WVPF?
 - How might a WVPF incorporate the competency of self-awareness to mitigate violence in the Paramedic workplace?



Approach and Vision

- Used a strategic planning process guided by Bryson's (2018) 10 step strategic planning process
- Used a high level logic model to guide activities and outputs
- Validated methods and approach with inquiry team
- Collectively established our strategic vision:
- *A violence free workplace is unlikely; a safer workplace, however, is achievable. Paramedics must be prepared to confidently both mitigate and deal with it when it occurs. Organizations must take meaningful steps to give Paramedics the tools they need to support this vision. Zero tolerance must mean zero tolerance where applicable.*
- Developed and tested draft questionnaire to guide Interactive Design Sessions
- Used CNA workplace violence definitions to create dialogue

VISION



Method-Interactive Design Sessions

- Six IDS with 51 participants across all Canadian provinces and territories.
- Participant demographic across all practice areas and leadership.
- Delivery method – Multi-mode through Skype and Mentimeter
- 21 quantitative and qualitative questions
- Dialogue was encouraged but not mandatory
- 12 hours of recorded audio, 340 pages of transcribed audio, Mentimeter data
- Member checks



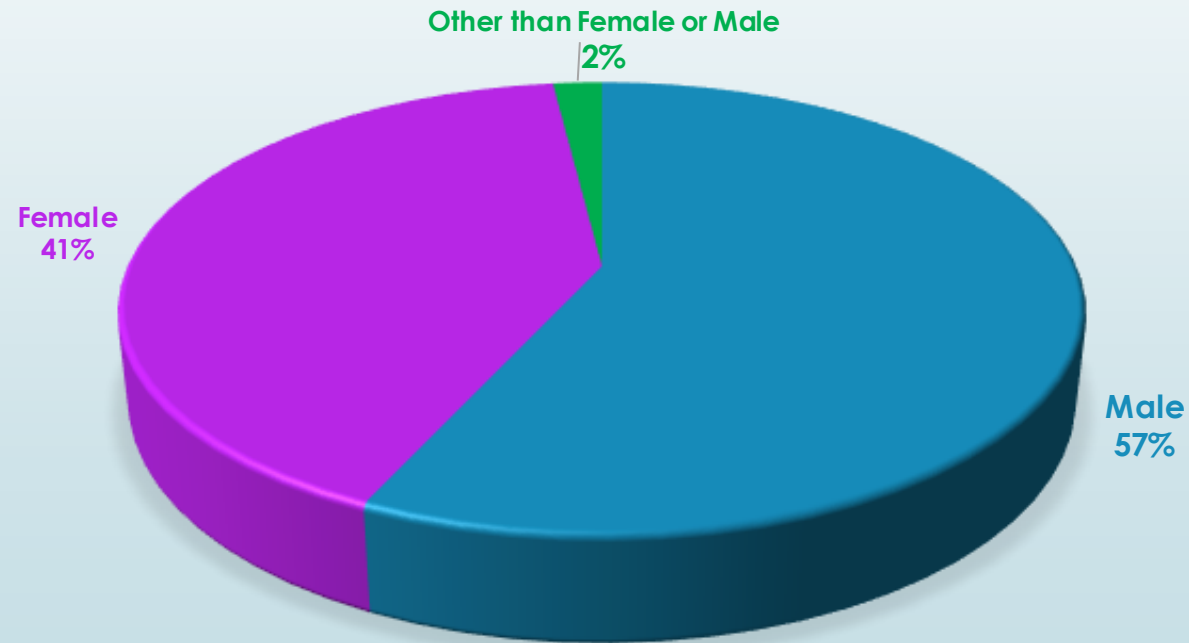
Knowledge Translation

- Comprehensive Literature Review
- Key Words in Context (KWIC) (Ryan & Bernard, 2003)
- Identify a structure of themes, subthemes, categories, and subcategories
- Basic coding structure (Nowell, Norris, White, & Moules, 2017)
- Applied same approach to IDS data analysis
- Cross referenced with NVivo
- Narrowed focus from 203 to 65 themes, subthemes, categories, subcategories

Participant Demographics

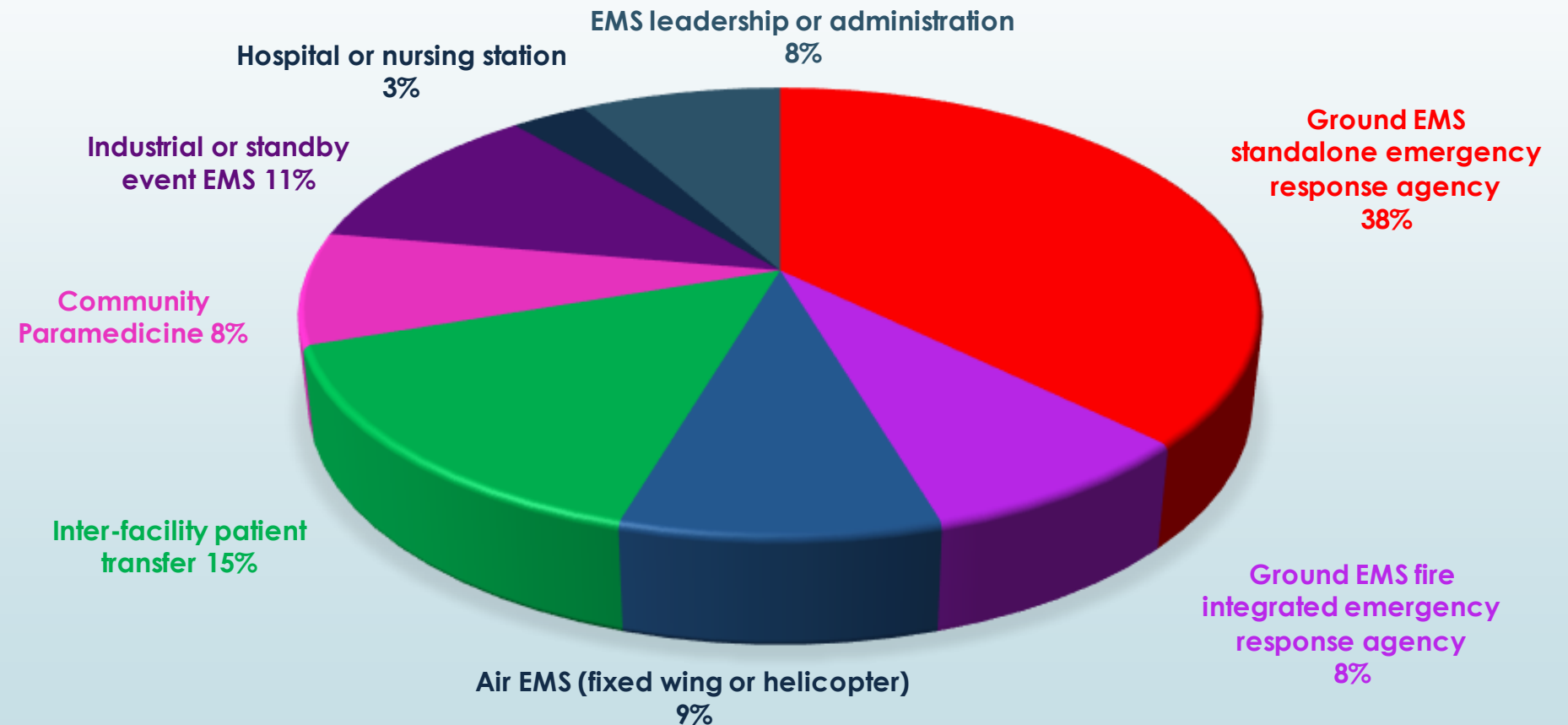
- All participants currently registered practitioners within their respective provinces

QUESTION 2: WHAT GENDER DO YOU IDENTIFY WITH?



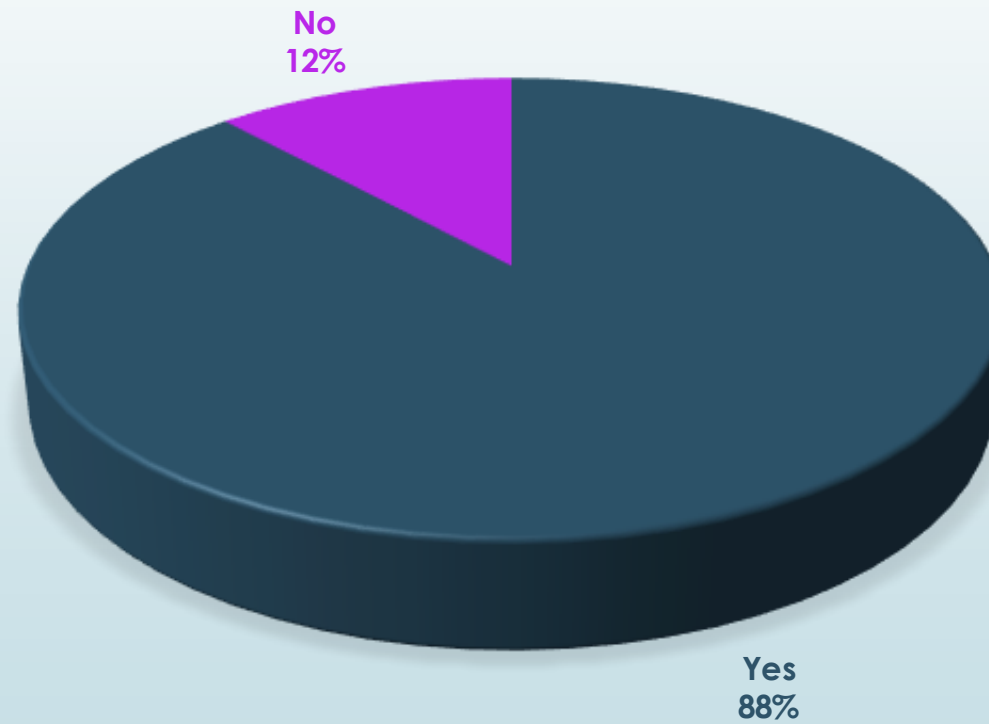
Participant Demographics

QUESTION 3: WHICH OF THE FOLLOWING AREAS BEST REPRESENT WHERE YOU PREDOMINANTLY PRACTICE?



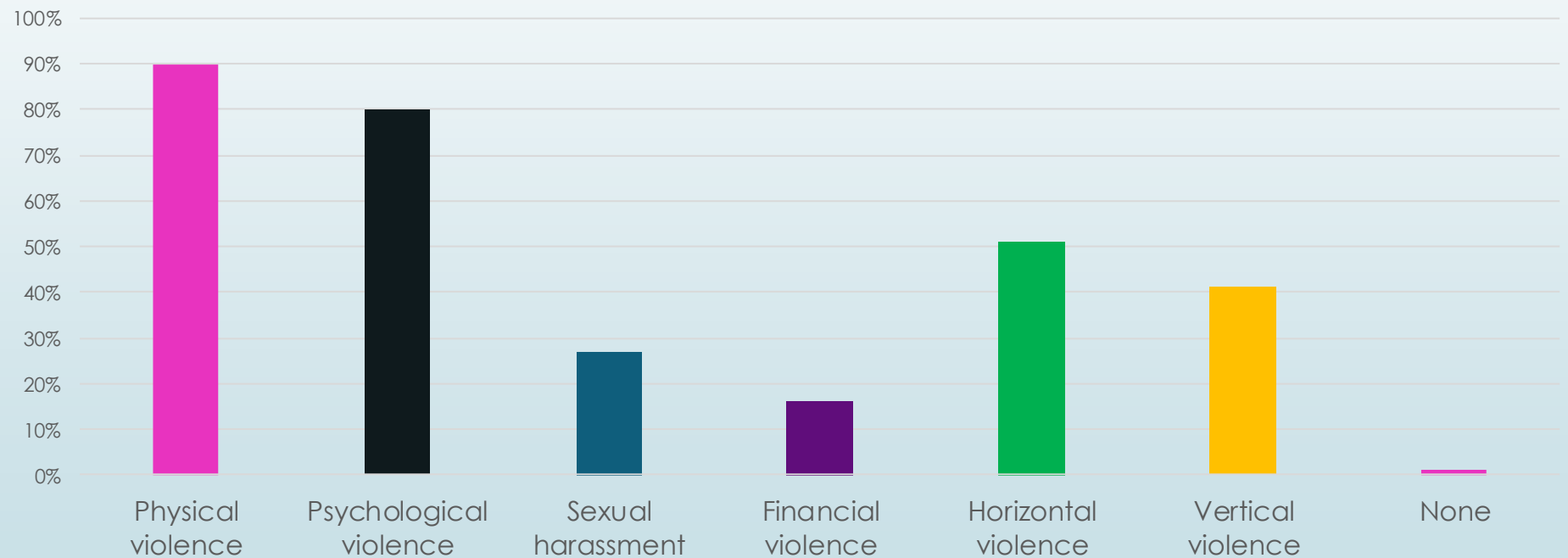
Participant Demographics

QUESTION 5: HAVE YOU EXPERIENCED WORKPLACE VIOLENCE IN THE LAST 12 MONTHS?



Participant Demographics

Question 6: If you have experienced workplace violence in the past 12 months, what type as per the definitions provided? Check all that apply.



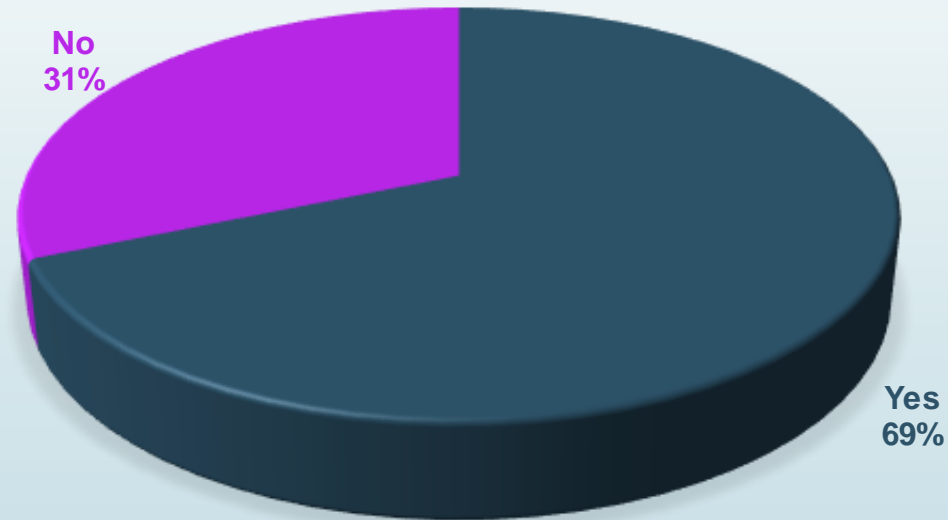


Findings - Common Agenda

- Broken Windows Theory (Wilson & Kelling, 2003)
- Solutions for WVP are socially bound to cultural constructs and as such, must be equally adaptive to address such complexity
- Paramedics self-manage - a hallmark of professionalism and autonomy
- Empower a positive organizational tone by making workplace violence prevention a priority
- Develop pathways to improve interdisciplinary awareness and collaboration for workplace violence prevention
- Promote public awareness strategies and build upon existing successes in this area

Findings - Standard Surveillance, Reporting, & Communication

**QUESTION 12: HAVE YOU EVER USED WORKPLACE VIOLENCE REPORTING MECHANISMS TO
REPORT WORKPLACE VIOLENCE BEFORE?**





Findings - Standard Surveillance, Reporting, & Communication

- 90% of participants are aware of workplace violence reporting mechanisms
- 69% of participants have used workplace violence reporting mechanisms
- Barriers – previous experience, victim blaming, labelling, business
- Expectations – accessibility, confidential, acknowledgement, support, feedback/feedforward
- Outcomes – just, meaningful, resources, consequences where appropriate
- Develop a national Paramedic workplace violence set of definitions



Findings – Supportive Structures

- Education - personal education, crisis intervention education, and supporting entities education
- Develop a workplace violence prevention education model that is Paramedic specific with particular focus on mental wellness strategies, de-escalation, and trauma informed care that is shared with Medical Director leadership and across Emergency Medical Services jurisdictions.
- Safety Plans – 14% of participants were unaware of safety plans in their workplace
- Medical Control Protocols - Promote research on best practices regarding chemical and physical restraint for Advanced Care Paramedics and Primary Care Paramedics.



Findings - Organizational Support

- Local strategies
- Provincial and national institutions or organizations - Paramedic educational institutions, national bodies such as PCC and PAC, and labour unions are well positioned institutions to advocate for WVP in the Paramedic workplace.
- Engage Paramedic Association of Canada to assist in developing more robust core competencies on workplace violence prevention within the National Occupational Competency Profiles.
- Advocate and lobby for changes to the Criminal Code of Canada to give Paramedics greater protection regarding workplace violence
- Develop and sustain a national Paramedic coalition on workplace violence prevention

No.	Strategic Issues Agenda	Links to Core Component:
1	Empower a positive organizational tone by making workplace violence prevention a priority.	Common Agenda
2	Develop pathways to improve interdisciplinary awareness and collaboration for workplace violence prevention.	Common Agenda
3	Promote public awareness strategies and build upon existing successes in this area.	Common Agenda
4	Develop a national Paramedic workplace violence set of definitions.	Standard Surveillance, Reporting, and Communication
5	Develop a workplace violence prevention education model that is Paramedic specific with particular focus on mental wellness strategies, de-escalation, and trauma informed care that is shared with Medical Director leadership and across Emergency Medical Services jurisdictions.	Supportive Structures
6	Promote research on best practices regarding chemical and physical restraint for Advanced Care Paramedics and Primary Care Paramedics.	Supportive Structures
7	Engage Paramedic Association of Canada to assist in developing more robust core competencies on workplace violence prevention within the National Occupational Competency Profiles.	Organizational Support
8	Advocate and lobby for changes to the Criminal Code of Canada to give Paramedics greater protection regarding workplace violence.	Organizational Support
9	Develop and sustain a national Paramedic coalition on workplace violence prevention.	Organizational Support and Common Agenda

NATIONAL PARAMEDIC WORKPLACE VIOLENCE PREVENTION FRAMEWORK

Common Agenda

- Positive organizational tone
- Make workplace violence prevention a priority
- Interdisciplinary awareness and collaboration
- Public awareness

Standard Surveillance, Reporting, and Communication

- National Paramedic workplace violence definitions

Supportive Structures

- Workplace violence prevention education model
- Mental wellness strategies, de-escalation, and trauma informed care
- Research best practices

Organizational Support

- Workplace violence prevention - National Occupational Competency Profiles
- Advocate and lobby for changes to Criminal Code of Canada



National Paramedic Coalition on Workplace Violence Prevention

A violence free workplace is unlikely; a safer workplace, however, is achievable. Paramedics must be prepared to confidently both mitigate and deal with it when it occurs. Organizations must take meaningful steps to give Paramedics the tools they need to support this vision. Zero tolerance must mean zero tolerance where applicable

For the Paramedic Chiefs of Canada Position Statement for Violence against Paramedics in Canada, visit our site!

<https://www.paramedicchiefs.ca/zero-tolerance/>

Thank-you !



For further dialogue or questions, please contact Steve Sutton at steve.sutton@ahs.ca or text 587-597-5560.



References

- Bushe, G. R. (2001). Five theories of change embedded in appreciative inquiry. *Appreciative inquiry: An emerging direction for organization development*, 17, 117-127.
- Bryson, J.M. (2018). *Strategic planning for public and nonprofit organizations: A guide to strengthening and sustaining organizational achievement*. (5th ed.). San Francisco, CA: John Wiley & Sons.
- Nowell, L. S., Norris, J. M., White, D. E., & Moules, N. J. (2017). [Thematic analysis: Striving to meet trustworthiness criteria](#). *International Journal of Qualitative Methods*, 16, 1-13. doi: 10.1177/1609406917733847
- Ryan, G. W., & Bernard H. R. (2003). [Techniques to identify themes in qualitative data](#). Retrieved from http://www.analytictech.com/mb870/readings/ryan-bernard_techniques_to_identify_themes_in.htm
- Wilson, J. Q., & Kelling, G. L. (2003). Broken Windows: The police and neighborhood safety. *Criminological Perspectives: Essential Readings*, 400.



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Q&A and Thank You

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Health Intelligence Resource

www.firstwatch.net/hi