Workplace Violence Prevention in Health Care

Layers of Complexity

Presenter

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	Describe	Describe general requirements of a healthcare workplace violence prevention program.
Objectives	ldentify	Identify opportunities for implementation.
	Describe	Describe the shift to patient and family

Workplace violence prevention Google healthcare worker violence prevention: 22,100,000 results in 0.37 seconds

We know...

American Nurses Association reports 2 nurses per hour are assaulted in the acute care setting [End Nurse Abuse*American Nurses Association (nursingworld.org)]

Most (if not all) organizations have some type of workplace violence page and action

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Standard EC.02.01.01: The hospital manages safety and security risks.

EP17: The hospital conducts an annual worksite analysis related to its workplace violence prevention program. The hospital takes actions to mitigate or resolve the workplace violence safety and security risks based upon findings from the analysis.

Standard EC.04.01.01: The hospital collects information to monitor conditions in the environment.

EP 1: The hospital establishes a process(es) for continually monitoring, internally reporting, and investigating the following:

Injuries to patients or others within the hospital's facilities

Occupational illnesses and staff injuries

Incidents of damage to its property or the property of others

Safety and security incidents involving patients, staff, or others within its facilities, including those related to workplace violence

Hazardous materials and waste spills and exposures

Fire safety management problems, deficiencies, and failures - Medical or laboratory equipment management problems, failures, and use errors - Utility systems management problems, failures, or use errors.

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Standard HR.01.05.03: Staff participate in ongoing education and training. EP 29:

- As part of its workplace violence prevention program, the hospital provides training, education, and resources (at time of hire, annually, and whenever changes occur regarding the workplace violence prevention program) to leadership, staff, and licensed practitioners.
- The hospital determines what aspects of training are appropriate for individuals based on their roles and responsibilities.
- The training, education, and resources address prevention, recognition, response, and reporting of workplace violence as follows:
 - What constitutes workplace violence
 - Education on the **roles and responsibilities** of leadership, clinical staff, security personnel, and external law enforcement
 - Training in de-escalation, nonphysical intervention skills, physical intervention techniques, and response to emergency incidents
 - The **reporting process** for workplace violence incidents

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Leadership Standard LD.03.01.01: Leaders create and maintain a culture of safety and quality throughout the hospital.

- EP 9: The hospital has a workplace violence prevention program led by a designated individual and developed by a multidisciplinary team that includes the following:
 - Policies and procedures to prevent and respond to workplace violence
 - A process to report incidents in order to analyze incidents and trends
 - A process for follow up and support to victims and witnesses affected by workplace violence, including trauma and psychological counseling, if necessary
 - Reporting of workplace violence incidents to the **governing body**

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Nurse & Patient Safety Act

Preparedness and Incident Response Action Plan



Evaluate risk factors



Review workplace violence incidents

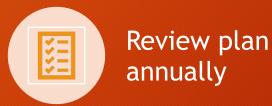


Report workplace violence

8



Education





Requests for additional staffing

Credit for slide: Workplace Violence Prevention Council, Allina Health

Layers of complexities



With patients and families

Health care teams

Health care systems

Reimbursement



What do we do?



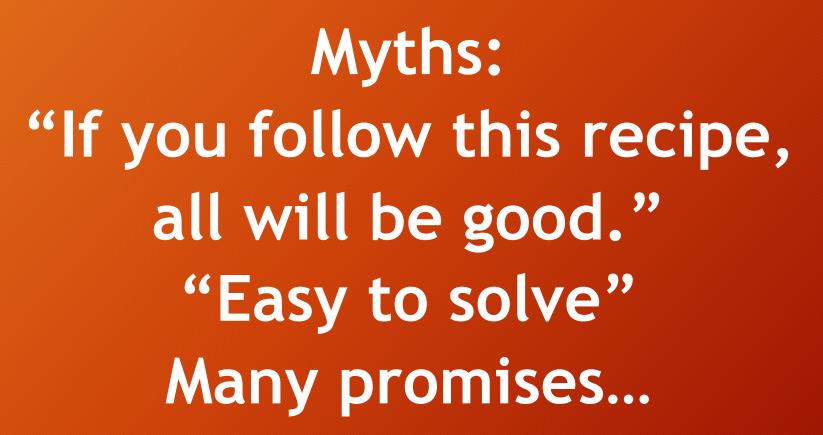
Hit the easy button!



Hit the easy button!

We would if there was one.





Promises made, and usually broken

Programs come to you and make promises
They will make sure you meet the requirements for The Joint Commission and all the other groups telling you what you need to do
Does this work?

Evidence - Cochrane Review

- "Education and training programs did not reduce the number of reports of aggressive behavior toward healthcare workers (five studies), possibly because these programs made healthcare workers more likely to report incidents.
- An education and training program <u>might improve healthcare workers' knowledge of</u> <u>aggressive behavior in the workplace in the short term</u> (one study), but we are <u>uncertain whether this would be a long-term effect</u> (one study).
- Education programs might improve healthcare workers' attitudes toward aggressive behavior in the short term (five studies), although these reports varied depending on the type and length of the program provided.
- Education programs <u>might not affect</u> healthcare workers' skills in dealing with aggressive behavior (two studies) and might not affect whether unwanted or negative personal effects were noted after healthcare workers experienced aggressive behavior (one study)."
- Final words Studies not reliable. More studies needed.

GeorionS, HillsDJ, RossHM, PichJ, HillAT, DalsbøTK, RiahiS, Martínez-JarretaB, GuayS. Education and training for preventing and minimizing workplace aggression directed toward healthcare workers. *Cochrane Database of Systematic Reviews* 2020, Issue 9. Art. No.: CD011860. DOI: 10.1002/14651858.CD011860.pub2

Reviewing events - general themes



Literature has shifted

From "command and control and rules" to engagement. <u>Not</u> Patient and Family engagement with the care team... It is health care worker engagement with the patient and family...

What does that mean?

We need to assure engagement of all levels of the health care team in supporting patients and families

→Complex care plans
 →Care conferences / team conferences
 →Assuring the team is consistent with the plan

What does that mean?

Universal precautions? Situational awareness - space, tone, knowing when to disengage and get help Narrating care - ask permission to touch, show respect, introduce and explain

Possible strategies

Verbal De-escalation Strategies			
 DON'T: Challenge psychotic thinking Argue Threaten Intensely question Use sarcasm/humor 	 Derescalation strategies DO: Verbalize actions beforehand Initiate active listening-try to be aware of what may worsen the person's fear and aggression Take a break as appropriate Comply with reasonable request Listen patiently and paraphrase concerns Problem-solve. Offer solutions instead of trying to take control. 		
	 Problem-solve. Oner solutions instead of trying to take control. Review Safety Plan Ask how you can help Affirm the person's positive qualities Offer the person a face-saving way out 		

Key takeaways:

Hard work, takes time, build the program, be prepared for unexpected issues cropping up

Discussion

