Workplace Violence Awareness

Mon Health
Vandalia Health

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Objectives

- Define the four types of workplace violence and risk factors for each type
- Describe the warning signs of escalating behavior
- Describe prevention strategies for the organization

Workplace Violence in Healthcare

- “In the second quarter of 2022, an analysis of Press Ganey’s National Database of Nursing Quality Indicators showed that on average, two nurses were assaulted every hour. That translates to about 57 assaults per day…”

- – Becker’s Hospital Review, September 2022

Workplace Violence Definitions

- **The National Institute for Occupational Safety and Health (NIOSH)**: " … any physical assault, threatening behavior, or verbal abuse occurring in the work setting" (NIOSH, 1996).

- **The World Health Organization (WHO) and the International Council of Nurses (ICN):** " … incidents where staff are abused, threatened or assaulted in circumstances related to their work, including commuting to and from work, involving an explicit or implicit challenge to their safety, well-being or health" (ILO, ICN, WHO, & PSI, 2002).

- **The Occupational Safety and Health Administration (OSHA)** defines workplace violence as “any act or threat of physical violence, harassment, intimidation, or other threatening disruptive behavior that occurs at the work site. It ranges from threats and verbal abuse to physical assaults and even homicide. It can affect and involve employees, clients, customers and visitors” (OSHA, 2022).

Four Types of Workplace Violence

- Type 1: Criminal Intent
  - The perpetrator has no legitimate relationship to the business or its employees and is usually committing a crime in conjunction with the violence (robbery, shoplifting, trespassing).
- Type 2: Customer/Client **Most Common**
  - The customer/client relationship includes patients, family members, and visitors towards staff.
- Type 3: Worker-on-Worker
  - Violence between coworkers is commonly referred to as lateral or horizontal violence. It includes bullying, and frequently manifests as verbal and emotional abuse that is unfair, offensive, vindictive, and/or humiliating though it can range all the way to homicide.
- Type 4: Personal Relationship
  - The perpetrator has a relationship to the nurse outside of the work that spills over to the work environment.

Policies related to Workplace Violence

Mon Health Marion Neighborhood Hospital	Mon Health Medical Center	Mon Health Preston Memorial Hospital	Mon Health Stonewall Jackson Memorial Hospital
Workplace Violence/Security Assistance	Workplace Violence/Security Assistance	Workplace Violence/Security Assistance	Workplace Violence/Security Assistance
Combative Patient Assessment and Safety	Combative Patient Assessment and Safety	Combative Patient Assessment and Safety	Combative Patient Assessment and Safety
Violence Prevention Plan	Violence Prevention Plan	Workplace Violence	Violence Prevention Plan
Restraint/Seclusion	Restraint/Seclusion Control of a Violent Patient – Use of Physical Restraints (Security policy)	Use of Patient Restraints and Seclusion	Use of Patient Restraints and/or Seclusion

No Tolerance for Workplace Violence

- Mon Health has a no tolerance for workplace violence policy.
- Violence, threats, harassment, intimidations, & other disruptive behavior in the workplace will not be tolerated.
- The pictured signs are currently displayed in waiting rooms, elevators, on websites, and on screensavers across Mon Health. Please use this as a reference, when needed, in describing our “no tolerance” policy.

Dressing for Safety

- Staff
- **Dress for safety by removing anything from your person that can be used as a weapon if grabbed by someone.**
  - Long hair should be tucked away so that it can't be grabbed;
  - Jewelry - avoid earrings or necklaces which can be pulled;
  - Overly tight clothing can restrict movement;
  - Overly loose clothing, or scarves can be caught;
  - Stethoscopes, glasses, or name tags dangling from cords or chains
- Patient
- **Ensure the patient dons a gown when they arrive to their room.**
  - This can help prevent a patient from reaching for something in his or her pockets that could be used as a weapon.

Room Assessment

- Always be aware of your surroundings!

Consider removal of the items below that are not in use (list is including, but not limited to):

- ☑ Bedside tables (or position to opposite side of the door)
- ☑ Computer on wheels (position not in path of exit)
- ☑ Unnecessary medical equipment/not in use, i.e.:
  - ☑ Venodynes or Sequential Compression Devices (SCDs)
  - ☑ IV Pump and pole
  - ☑ Tubing
  - ☑ Fall alarm
- ☑ Other items (clipboards, pens, telephone, supply carts)
- ☑ Excess furniture (i.e., chairs)

Clinical Risk Factors for Violence

- Under the influence of drugs or alcohol
- In pain
- History of violence
- Cognitive impairment
- In the criminal justice system
- Angry about clinical relationships
- Certain psychiatric diagnoses and/or medical diagnoses

Be Aware of Your Work Environment

- Note exits and emergency phone numbers if you change work areas.
- Confusion, background noises, and crowding can increase stress levels.
- Mealtimes, shift changes, and while transporting patients are all times of increased disruptive behaviors.

Be Attuned to Patient Behaviors

- VERBAL CUES
  - Speaking loudly or yelling
  - Swearing
  - Threatening tone of voice
- NON-VERBAL OR BEHAVIORAL CUES
  - Physical appearance (clothing and hygiene neglected)
  - Arms held tight across chest
  - Clenched fists
  - Heavy breathing
  - Pacing or agitation
  - A terrified look signifying fear and high anxiety
  - A fixed stare
  - Aggressive or threatening posture
  - Thrown objects
  - Sudden changes in behavior
  - Indications of drunkenness or substance abuse

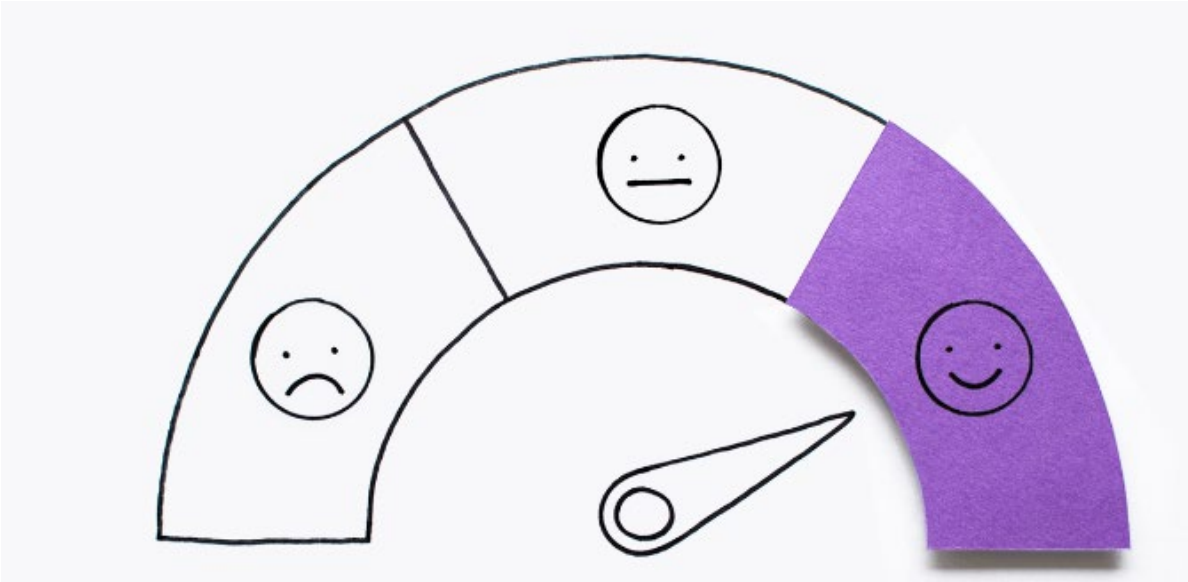
More cues exhibited indicates a greater risk of violence.

Tactics to Protect Yourself

- Work in pairs
- Increase space between you & the patient
- Position yourself to have an escape route (ensure no barriers)
- Be aware of your surroundings
- Be attuned to your own responses

De-Escalation Techniques

- Keep voice low
- Express empathy
- Keep hands low and in sight
- Building rapport
- Respect personal space
- Ignore challenging questions
- Set boundaries



When a patient has acted combative or violent

Place

- In the hospital & ambulatory setting, place the combative/violent behavior indicator on the door frame of the patient room to alert co-workers. (Pictured to the right)

Call

- Follow internal procedure for communicating, “Security Alert + Security Assistance + Location”. At MHMNH and off-site settings, alert 9-1-1 for an active event.

Utilize

- Utilize Duress Alarms or Panic Alarms, where available.

Utilize

- Utilize the Keyboard Alert System notification, where available, to alert Security or 9-1-1, as appropriate. (Depends on location setup).

Have

- Have co-workers “Watch Your Back” when you enter the room.

Hospital: Call Security

Off-site: Call 9-1-1

Post Event Actions - Patient

As circumstances warrant:

- Relocate the patient to a room near the nursing station
- Move the patient to a room visible by security cameras
- Limit visitation
- Consider patient supports that will help de-escalate behavior
- Ask for restraints or assign a sitter
- Increase Security rounding
- Notify security if a combative patient wants to leave AMA
- Do not put yourself in harm's way to stop them
- If contraband is suspected, notify security for handling of substances

Post Event Actions - Employee

- Seek medical attention, as needed
- Debrief with team involved
- Complete an incident report & chart alert on history of combativeness
- Attempt to keep the injured employee & assailant separated, if possible.

Employee supports:

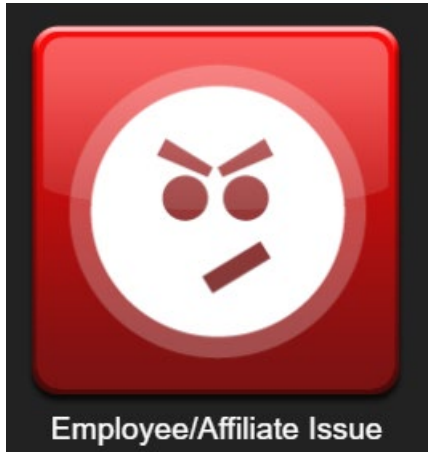
- Guidance from Legal if staff member wants to press charges
- Employee Assistance Program or other counseling
- Employee care packages

Employee Support

- Free, confidential counseling via EAP, available 24/7 for any employee
  - In person visits as well as telephone visits available
  - Contact HR or Employee Health for resources
- Expanded mental health services (all Tier 1) for employees on Mon Health insurance.
- Critical Incident Support Team
  - Representatives throughout Mon Health System are being professionally trained as critical incident responders
  - Will respond to provide emotional and wellness support for employees following critical incidents
- Employee Health available to assist with any employee injuries, help navigate Workers' Compensation process

Occurrence Reporting

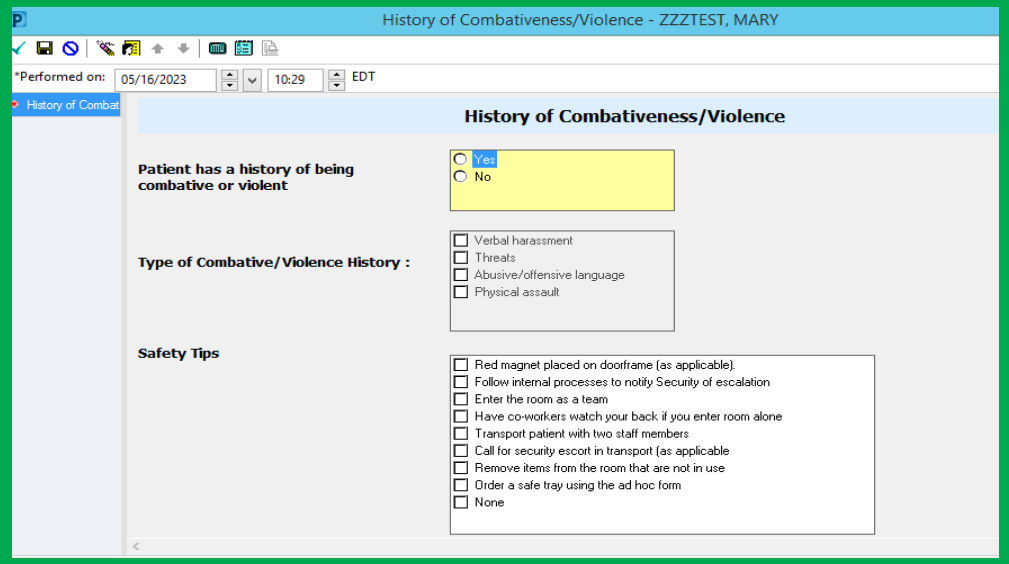
- Placed incident reporting icons on main screens for ease of reporting.



- Reduced required fields in the initial incident report if the information can be acquired later.

MHMC and Marion Risk for Violence Alert

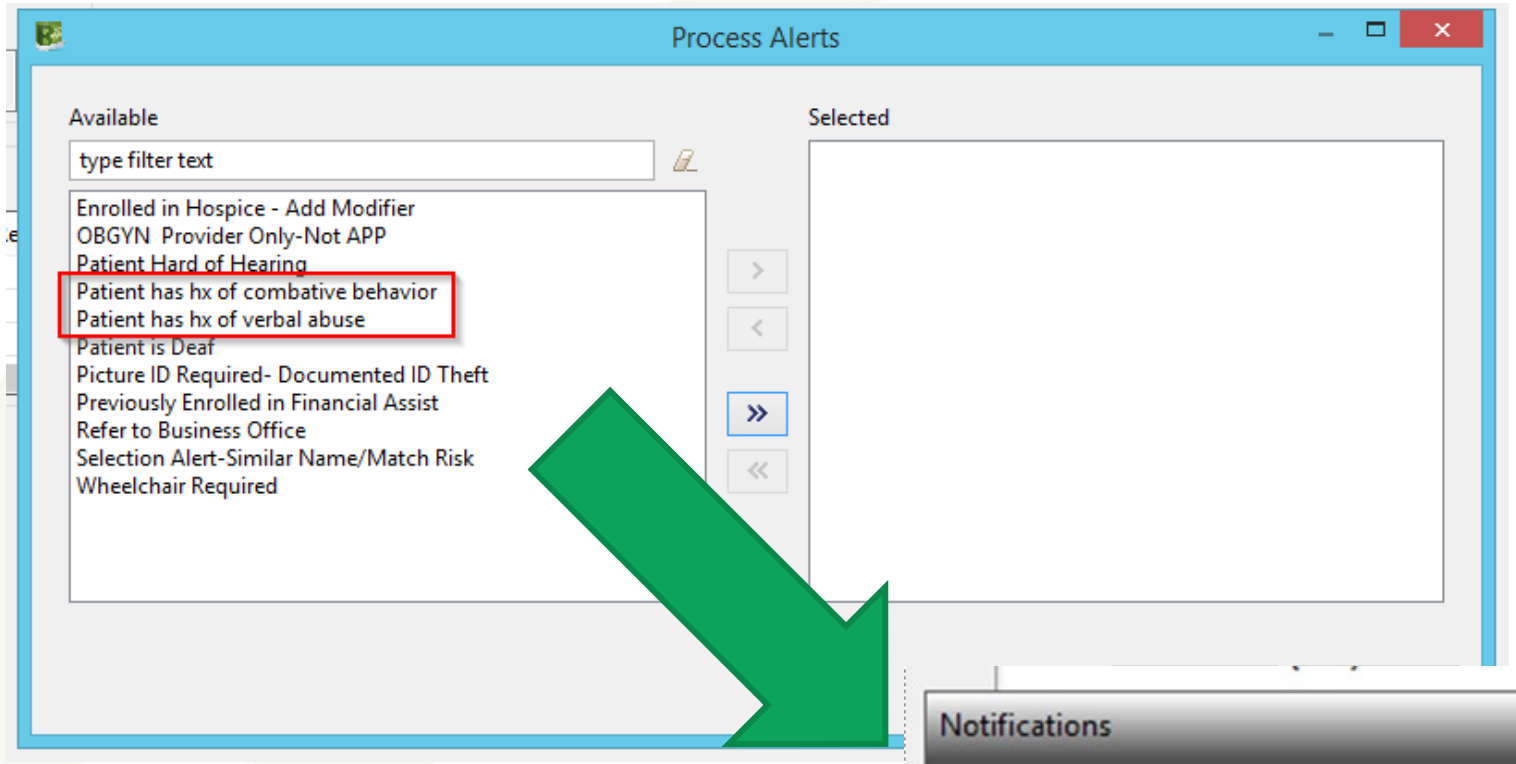
Following the event, document in the designated ad hoc form of the chart to indicate patient's combative behavior to alert others. <u>This results in a pop up.</u>

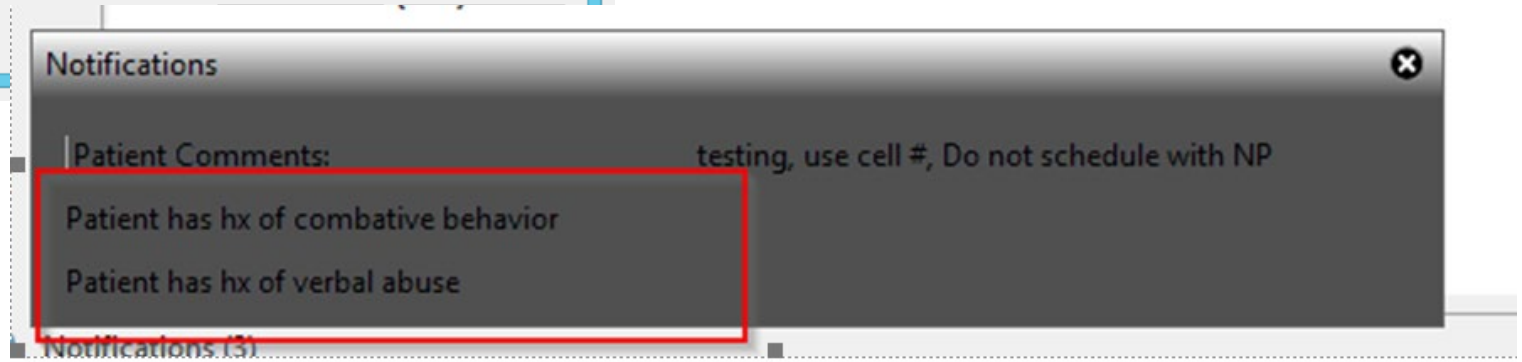


Updating the "Safety Tips" each visit will override the Pop Up alert from the previous visit. Update as new info needs to be shared.

POP UP

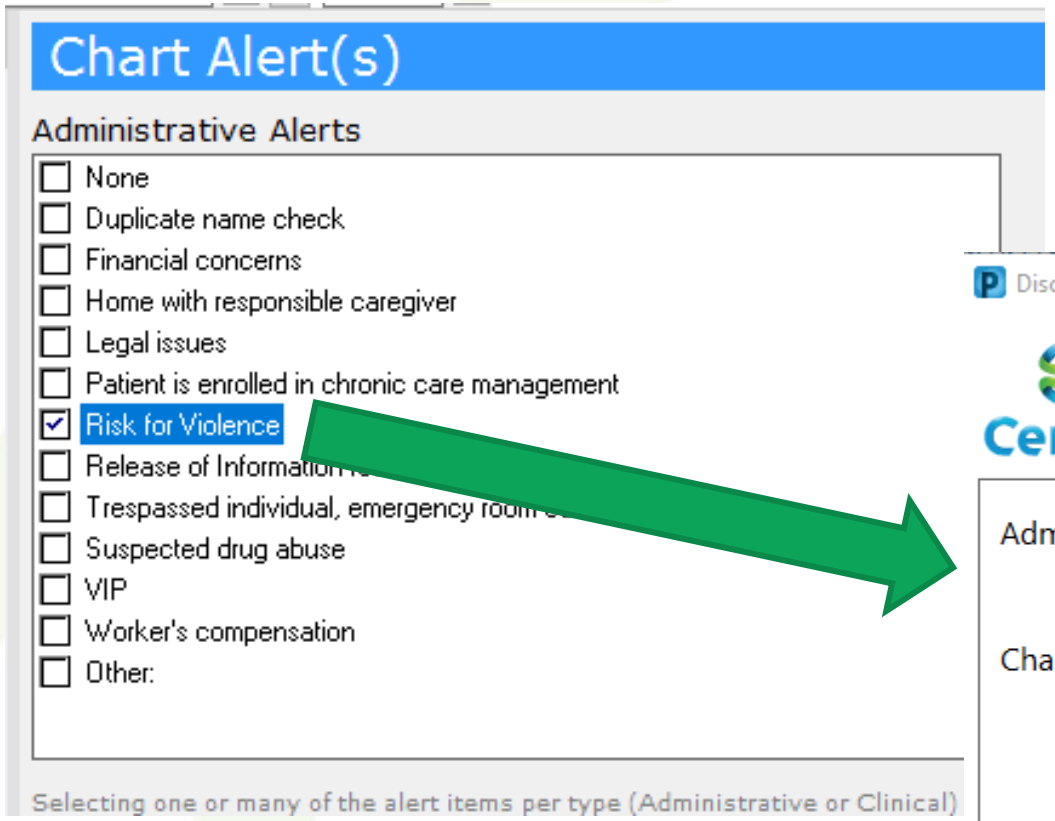
Rev Cycle Alert - Ambulatory Clinics (MHMC)





- Alert is separate from the combative/violent alert in the Cerner Powerchart
- If an alert is in Rev Cycle, it should also be in Powerchart and vice versa.

SJMH Risk for Violence Alert



PMH EDIE Alert

- PMH utilizes EDIE alerts for combative or violent behavior.
- Alert your manager/supervisor, Case Management, or Director or Nursing of a patient's combative or violent behavior.
- The manager/supervisor will enter a security alert in the EDIE system.

Combative/Violent Behavior Indicator

- Place this magnet indicator on the door frame of the patient room to alert co-workers.

- Re-assess if a patient has had a history of combative or violent behavior. Update documentation as indicated.

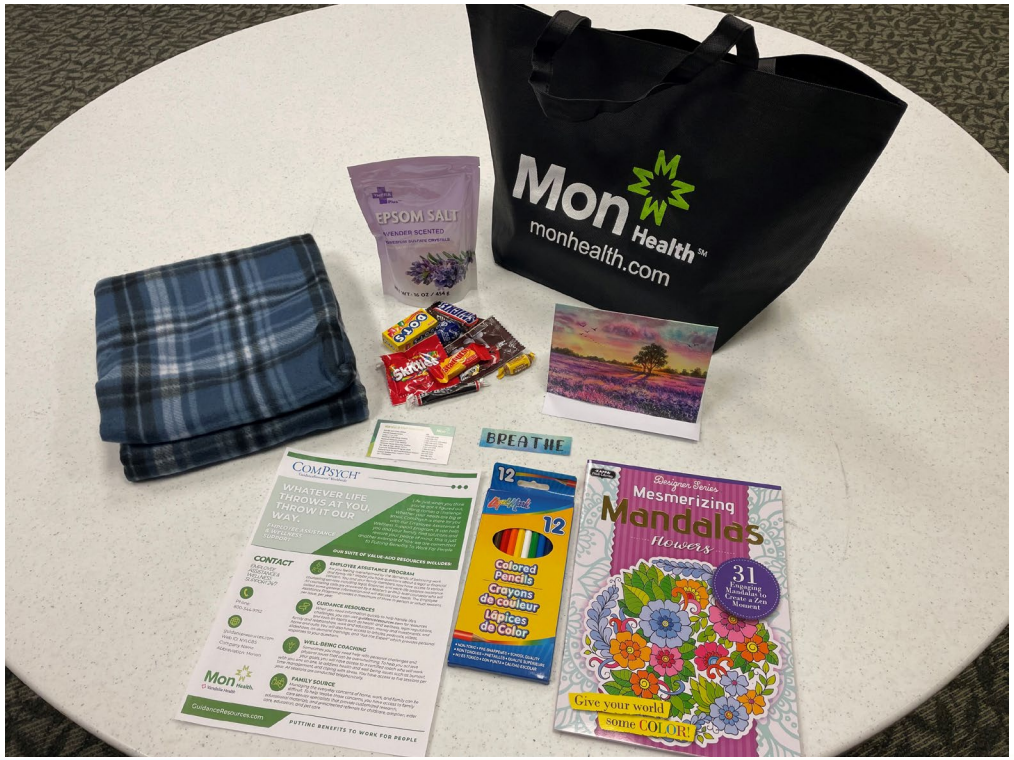
Workplace Violence Taskforce

- Please join the Workplace Violence Taskforce!
- This group meets quarterly with the purpose to review trends, current best practices, and develop initiatives to support staff!
- Interested? Please reach out to: MHS.RiskManagement@vandaliahealth.org
- See actions that have been implemented from the Taskforce on the next slides.

Care Packages

The Care Package is for a staff member involved in a workplace violence event. It includes information on employee support activities at Mon Health, along with various comfort items. Included in each Care Package are:

- EAP Information
- Care Card
- Personal Note (to be written by leader)
- Fleece Blanket
- Lavender Scented Relaxation Items
- Coloring Book/Pencils
- Stress/Sensory Strips



Workplace Violence Scavenger Hunt Tool For Identifying Resources in Your Department

Workplace Violence Scavenger Hunt

Welcome to a scavenger hunt around workplace violence resources. This is intended to identify tools in your department that iterate our no tolerance for violence policy, but also pinpoint communication tools available during and following an incident. You may need to ask your leader or preceptor for answers to some of these questions if you are unfamiliar. Upon completion, please return this form to your leader or preceptor to verify the answers and clarify any questions you have about workplace violence resources.

1

WHERE IS YOUR "NO TOLERANCE FOR WORKPLACE VIOLENCE" SIGN LOCATED?

You can use this sign as a resource if a patient or visitor begins to act combatively or violently. For example,

"We are here to help you and your family member. However, we want for you to be aware these are our requirements for any patient or visitor."

2

ASK YOUR LEADER: DO YOU HAVE ACCESS TO THE KEYBOARD ALERT SYSTEM OR PANIC BUTTON IN YOUR WORK AREA? Y / N

- If yes, where is it located?
- How do you activate it?
- Who does this alert?

3

- What is the facility contact number for all emergencies?
- What is the Security Department's direct phone number (as applicable by site)?
- Where can you find the Plain Language Alert Quick Reference Cards?

4

- As applicable, where is your department radio located to reach Security?
- How do you operate it to contact Security?

5

WHERE ARE YOUR RED MAGNETS WITH GREEN MON STARS KEPT IN THE DEPARTMENT?

- What is the purpose of these magnets?

6

IDENTIFY ITEMS TO REMOVE FROM THE PATIENT ROOM THAT ARE NOT IN USE IF A PATIENT HAS ACTED COMBATIVELY OR HAS A HISTORY OF ACTING COMBATIVELY.

WHERE CAN YOU FIND THIS LISTING?

A. Quick reference cling in the department
B. Combative Patient Assessment and Safety Policy
C. Both

7

WHAT IS YOUR CHAIN OF COMMAND DURING A WORKPLACE VIOLENCE INCIDENT?

8

DRESS FOR SAFETY TIPS:

STAFF

- Dress for safety by removing anything from your person that can be used as a weapon if grabbed by someone.
  - Long hair should be tucked away so that it can't be grabbed;
  - Jewelry – avoid earrings or necklaces which can be pulled;
  - Overly tight clothing can restrict movement;
  - Overly loose clothing, or scarves can be caught;
  - Glasses, keys, or name tags dangling from cord or chains can be hazardous.

PATIENT

- Ensure the patient dons a gown when they arrive to their room.
- This can help prevent a patient from reaching for something in his or her pockets that could be used as a weapon.

WHICH IMAGE DISPLAYS APPROPRIATE DRESS ATTIRE FOR DEALING WITH A COMBATIVE PATIENT?

9

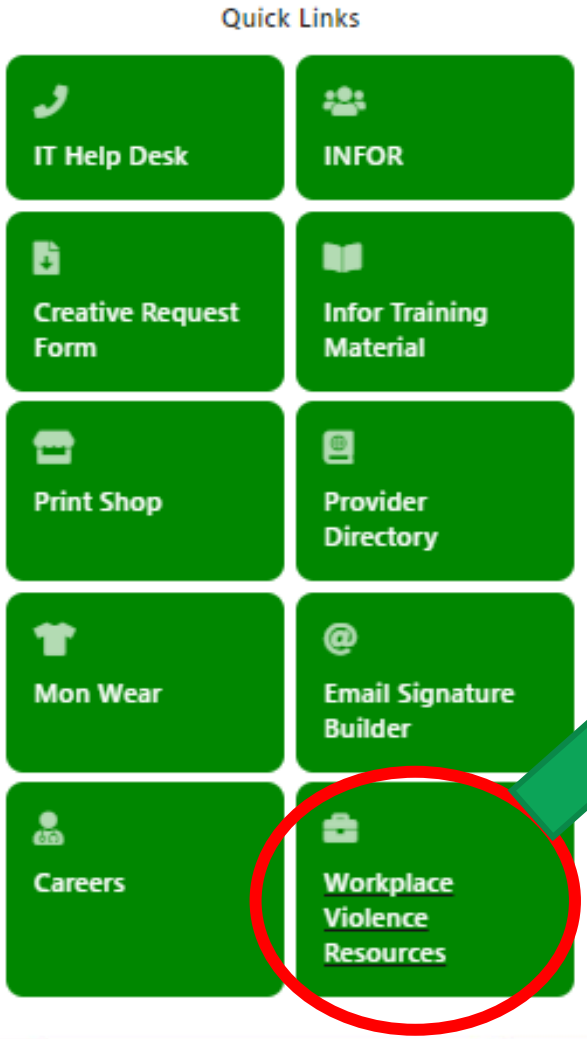
FOLLOWING AN EVENT:

- Where would you seek treatment if injured during an event?
- Where do you report a combative/violent event?
- How do you communicate with peers regarding a patient's combative or violent behavior?

A. Shift Safety Huddles
B. Chart Alerts
C. Use of the red magnet
D. All the above

- As applicable, how do you document to create a chart alert for a patient who has acted combatively or violently in Cerner Millenium?
- Who would you reach out to following an event if you need support?

OneMon Workplace Violence Resources Page



Combative Patient Assessment and Safety/Workplace Violence

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- Workplace Violence Scavenger Hunt Tool
- Patient Conduct Video
- Workplace Violence Taskforce Meetings
- Red Magnet Indicator
- Policies
- General steps for an active event include below:
- Chart Alert
- Process for Pressing Charges | Employee Rights
- Phone Aggression Reference Card:

Click here to open the Care Package Request Form

Workplace Violence Scavenger Hunt Tool

Phone Aggression & Pressing Charges References

PHONE AGGRESSION RESPONSE

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COMPLAINT/LOW AGGRESSION

BEHAVIORS
Expressing Frustration with Service
Firm, but not Elevated, Voice
Sounding Exasperated
Providing Experience Details
Wanting to "Speak to Manager"

RESPONSES
H: Listen to Their Story
E: Validate Their Feelings
A: Sincerely Apologize
R: Ask About Expectations
T: Show Gratitude

SCRIPTING IDEAS
"I appreciate your feedback"
"I am here to help"
"I hear you... I understand you"
"I am sorry this happened to you"
"What outcome would you like..."
"I can escalate this to [leader]..."
"Thank you for bringing this to..."

REMEMBER "HEART"
HEAR
EMPATHIZE
APOLOGIZE
RESPOND
THANK

ESCALATING AGGRESSION

BEHAVIORS
Raising Voice or Pitch
Talking Very Fast, Rapid Complaints
Interrupting, Talking Over You
Making Unreasonable Demands
Sighing, Frustrated Tones

RESPONSES
Be Calm, Deep Breath
Attempt to De-Escalate
Try to Slow Them Down
Loop in Additional Help
No Impossible Promises
Do Not Point Blame

SCRIPTING IDEAS
"I am taking notes, please bear with me"
"Can you please provide more details about what happened so we can improve our process?"
"We are committed to providing the best care for you"
"Please allow me to place you on hold to contact [leader] who may be able to help us out with this."

THREATENING & AGGRESSIVE

BEHAVIORS
Using Offensive Language
Speaking Loudly, Getting Louder
Making Threats to You
Making Threats to Organization
Verbal Harassment, Name Calling
Making Personal Comments

RESPONSES
Issue Warning
Redirect Aggression
No Tolerance
Escalate to Supervisor
End Conversation (if need)

SCRIPTING IDEAS
"I would like to keep this conversation productive..."
"We have a policy of no tolerance for aggressive behavior, please refrain from [aggressive behavior]..."
"I want to help, but will end the call if you continue to [aggressive behavior]"
"This conversation is no longer productive; I need to end this call; I will escalate your issue; Thank you"

If attempts at de-escalation are not successful or you feel the conversation is no longer productive, advise the caller you will escalate their issue but will end the call, as we have a ***No Tolerance Policy for Aggressive Behavior.***

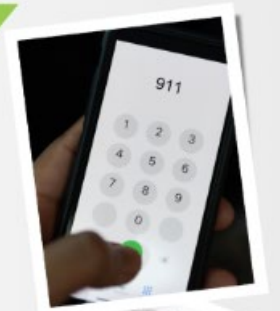
Remember to file an Incident Report for Combative/Violent Behavior

REFERENCE POINTS FOR PRESSING CHARGES FOLLOWING A WORKPLACE VIOLENCE EVENT

Violence is *not* part of the job.

Mon Health fully supports employees pressing charges against violators of our no tolerance for violence policy.

PROCESS FOR PRESSING CHARGES



Call 911
Call 911 and request law enforcement if not already present.

Statement of Incident
Provide the law enforcement officer with your information and a statement of what happened.

Contact Security or Risk
If law enforcement will not file a report, call the Security Director (as applicable) or Risk Management during the next normal business day.

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Phone Stickers

Mon Health Medical Center
Emergency Ext. 1234 for page
Security Ext. 6664 or 6665 OR
(304) 285-6664 or (304) 285-6665
Radio Security, if available
Utilize Keyboard Alert System

Mon Health Marion | Call 9-1-1
Overhead page through phones at *751 OR Utilize Keyboard Alert System

Mon Health Preston Memorial
Emergency Ext. 6300 for page
Utilize Keyboard Alert System
Maintenance/Security Ext. 5320
Call 9-1-1

Mon Health Stonewall Jackson
Maintenance/Security 304-517-1525
Utilize Panic Button, if available
Call 9-1-1
Emergency paging, dial “0” or “46”

Wearable Duress Buttons

- An electronic device that shall be attached to a staff member's badge that may be activated by the user when security assistance is needed
- Pressing the button TWICE transmits an alert
- The alert will notify Security personnel and select staff
- Location and Staff Member Identity is sent with the alert
- Where applicable, camera feeds in the area of the alert will activate on Security monitors inside Security Operation Centers
- Batteries can last up to 6 months before needing charged, charge cables are provided to all staff along with the device. A red LED will continually flash when the battery life is < 15%.