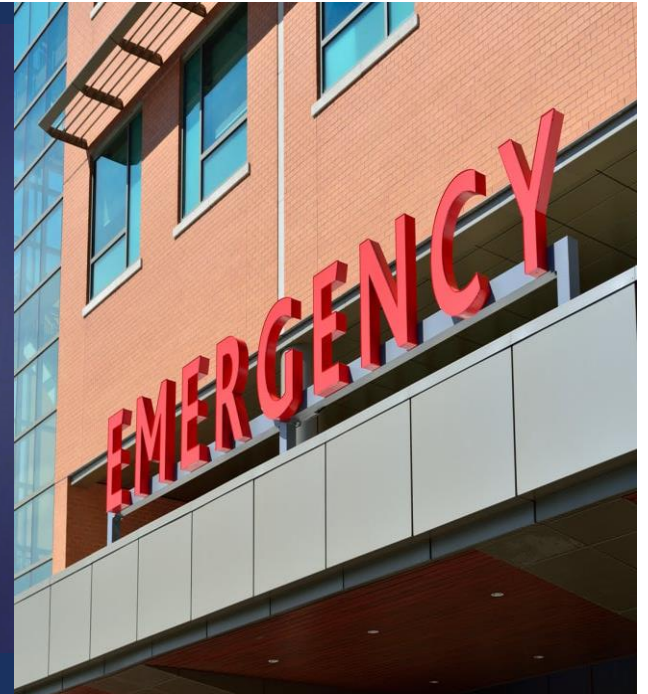


WORKPLACE VIOLENCE: AN OUNCE OF PREVENTION

Gloria Brigham, EdD, MN, RN

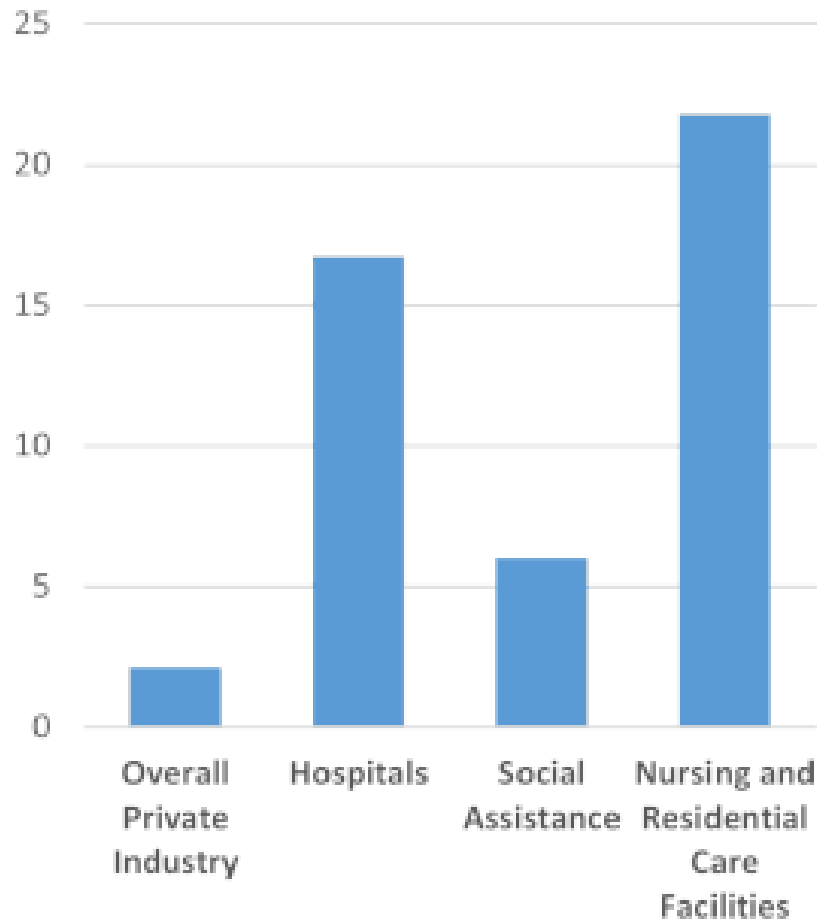


OUTCOME

Learners:

Adopt one strategy to increase personal safety and prevent violence in the professional practice environment

Incidence rates for nonfatal assaults and violent acts by industry, 2020
Incidence rate per 10,000 full-time workers



**BUREAU OF
LABOR STATISTICS
U.S. DEPARTMENT
OF LABOR**

¹U.S. Bureau of Labor Statistics. (2021)

PRESS GANEY'S REPORT

- More than two nurses were assaulted every hour between April 1 and June 30, 2022.
- Approximately 57 occurrences per day and over 1,700 assaults per month.
- Patients cause the highest number of assaults.

2023 NNU SURVEY

WORKPLACE VIOLENCE IN HEALTHCARE

- 79.5% from hospital settings (726).
- 82.6% experienced \geq one type of WPV in 2023.
 - 67.8% verbally threatened.
 - 38.7% physically threatened.
 - >30% physically harmed
- 60% report anxiety, fear, \uparrow vigilance due to WPV.
- 33.4% report physical symptoms.

WA LABOR AND INDUSTRIES ACCIDENT CLAIMS DATA

“ASSAULTS AND VIOLENT ACTS BY PERSON(S) CATEGORY

Job Classes	2021 Incurred Cost Total	2021 Accident Claims Total	2022 Incurred Cost Total	2022 Accident Claims Total
Registered Nurse	\$4,049,326	153	\$3,765,195	160
Psychiatric Technician	\$3,210,501	182	\$1,946,666	128
Personal/Home Care Aides	\$3,114,645	321	\$3,063,501	297
Nurses Aides/Orderlies	\$2,892,394	285	\$2,188,552	199
Counselors, all others	\$2,176,033	90	\$2,949,602	106
Security Guards	\$2,112,539	166	\$3,004,849	203
Police/Sheriff Patrol	\$1,994,270	130	\$1,831,948	127
Correctional Officers	\$1,970,860	59	\$1,015,710	104
Retail Salesperson	\$1,693,387	20	\$804,184	47
First Line Supervisors/ Managers	\$1,494,907	59	\$691,182	68
Licensed Practical Nurses	\$1,474,580	39	\$856,839	31

⁴Department of Labor and Industries (2022)

What else?

Washington state is one of eight states to require employers to implement a workplace violence prevention plan.

⁵ANA, (2021)

RCW 9A.36.031 - assault of a nurse, physician, or health care provider who is performing nursing or other health care duties (at the time of the assault) is a class C felony.



WASHINGTON
STATE





You can't go back and change the beginning, but you can
START WHERE YOU ARE and change the ending.

C.S. Lewis

WORKPLACE SAFETY:
HI HO, HI HO 🎵
OFF TO WORK I GO!



Parking

Walking

Surroundings

Security


Surveillance

PERSONAL ALARM WITH FLASHLIGHT




**SELF-SAFETY
FOR LESS THAN
THE COST OF
LUNCH**





DO YOU FEEL SAFE GOING TO AND LEAVING
FROM YOUR CLINICAL SITE(S)?



I WOULD FEEL SAFER TO/FROM MY CLINICAL LOCATIONS IF:

- a) Security was visible
- b) Lighting was improved
- c) Landscape had fewer areas that might be used to hide
- d) Cameras were installed
- e) Panic buttons were available
- f) Other

WORKPLACE SAFETY:

♪ WHOLE SELF IN
WHOLE SELF OUT

ENTERING/EXITING
THE BUILDING



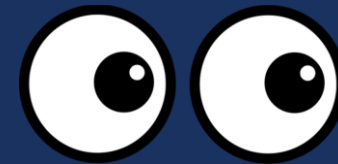
Entrance/Exit Security

Lock/Unlock Schedule

Access Authorization

Secluded areas

Surveillance




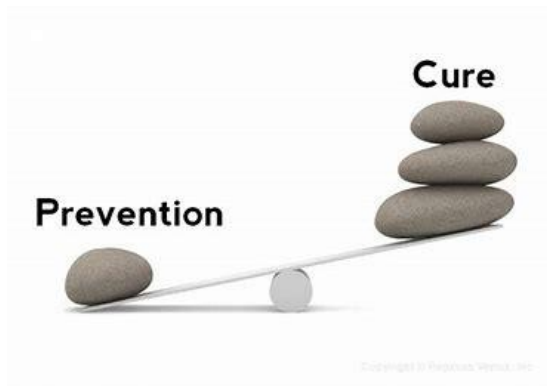
WORKPLACE SAFETY: EARLY IDENTIFICATION OF RISK

BE AWARE

BE PREPARED



WORKPLACE SAFETY:
HOME, HOME 
ON THE “WARD”



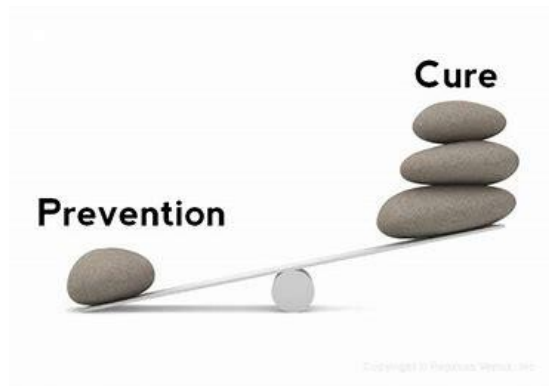
Predict and Prepare

- **WPV Risk Factors**
- STAMP
- Workplace Safety
- Self-Safety

WPV RISK FACTORS: PREDICT/PREPARE

- Working with individuals who:
 - Have a history of violence
 - Are delirious/under the influence
- Lifting, moving, transporting patients
- Working alone
- Limited vision/escape routes
- Lack of emergency communications
- Understaffing, (esp. meal times/visit hours)
- Inadequate security personnel
- Long wait times
- Overcrowded waiting rooms
- Overt anger/agitation

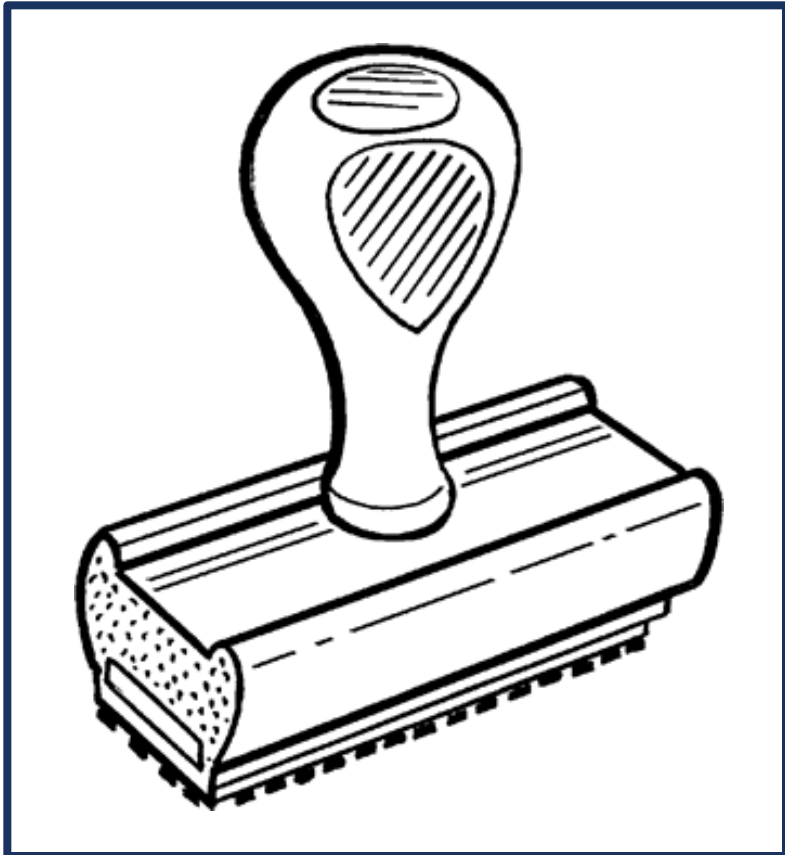
WORKPLACE SAFETY:
HOME, HOME 
ON THE RANGE



Predict and Prepare

- WPV Risk Factors
- **STAMP**
- Workplace Safety
- Self-Safety

WORKPLACE SAFETY: PREDICT/PREPARE



STAMP

(Validated tool in ED; useful in all healthcare areas)

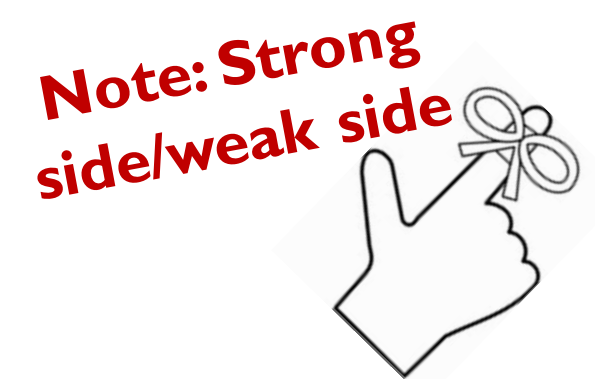
S = Staring

T = Tone and Volume of Voice

A = Anxiety

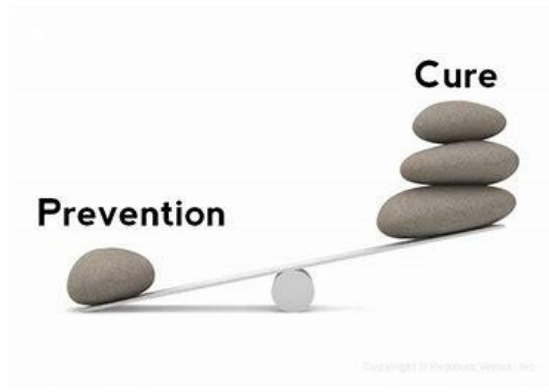
M = Mumbling

P = Pacing



⁷The Joint Commission Quick Safety Issue 47 (2019)

WORKPLACE SAFETY:
HOME, HOME 
ON THE RANGE



Predict and Prepare

- WPV Risk Factors
- STAMP
- **Workplace Safety**
- **Self-Safety**

WORKPLACE SAFETY: SELF SAFETY THROUGH COMMUNICATION

DO

- Project calmness
- Empathetically listen
- Focus attention on the person
- Maintain relaxed yet attentive posture
- Acknowledge the person's feelings
- Move to a quieter area
- Create a delay to provide time to calm
- Accept criticism positively
- Use repeat back
- Position for a clear exit

AVOID

- Hostility, apathy, condescension
- Posing in a challenging stance
- Making sudden movements
- Challenging, threatening or daring
- Criticizing or act impatiently
- Attempting to bargain with a threat
- Making light of the situation
- Making false statement or promises
- Using technical language
- Invading personal space

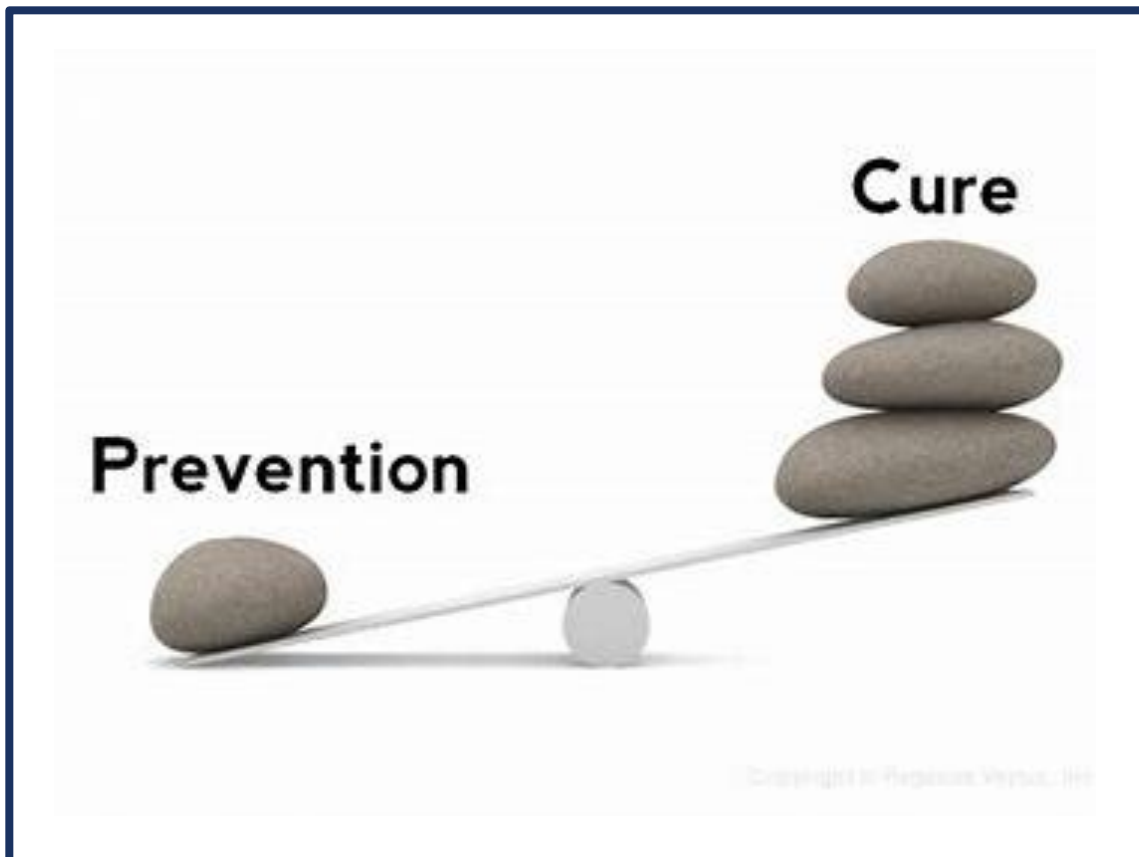
WORKPLACE SAFETY: FACILITY INTERVENTIONS

ZERO TOLERANCE FOR VIOLENCE



- EMR flag for violence history
- Wand for safety
- Emergency call buttons/alarms
- Address WPV in huddles/report
- Use buddy/trained sitter/security
- Secure furniture/equipment
- Create a safe room
- Adhere to visitation policy

WORKPLACE SAFETY: SELF-SAFETY INTERVENTIONS



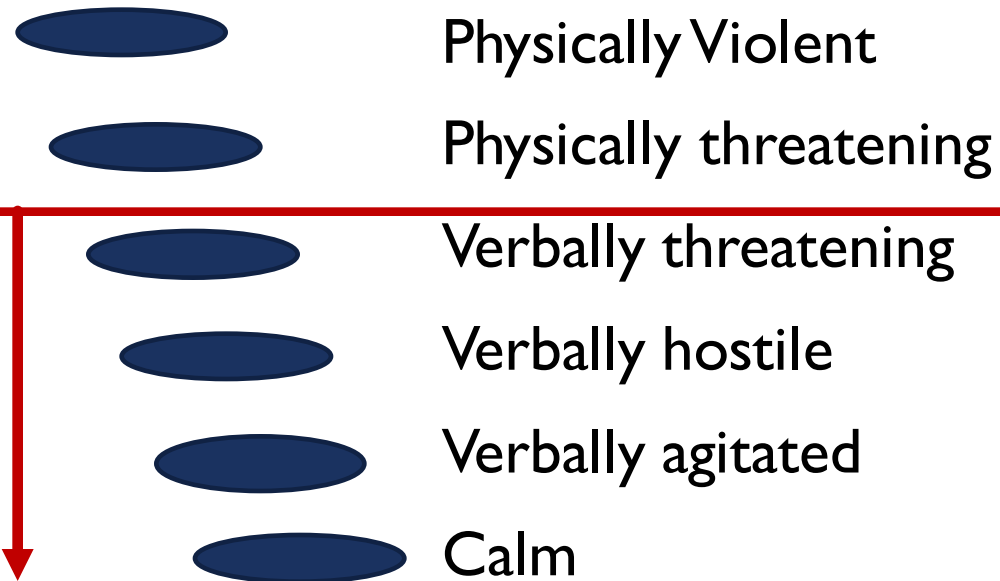
- Survey the scene
- Remove unsecured objects
- Safe body position
- Exit access
- Body space awareness
- De-escalate long waits
- Empathetic communication



OSHA (2015). Workplace Violence in Healthcare
WA State Department of L & I (n.d.). Workplace Violence

WORKPLACE SAFETY: SELF-SAFETY INTERVENTIONS

Steps of Escalating Violence



Call for help early!

- Eye contact
- Increase distance
- Defensive stance
- Avoid cornering
- De-escalate



Adapted from Sorenson and Wilder Associates (2012)

WORKPLACE SAFETY: CAUTION DURING TRANSITION



“Care transitions between hospital units are vulnerable to safety threats due to failures in communication and interunit differences in management and culture.”

⁷The Joint Commission Journal on Quality and Patient Safety (2019)

ONE PERSONAL STRATEGY

Identify one practice that you will adopt to improve your personal safety or safety in your professional practice environment.

WORKPLACE VIOLENCE: SUMMARY



- Self safety “doorway” assessment
- Scan your environment
- Be mindful of moving to/from the building
- Identify safe entry/exit
- Be alert to environment and patient in your work area
- Implement self safety practices
- Collaborate on opportunities to improve safety around high risk patient care

QUESTIONS



REFERENCES

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- ⁷The Joint Commission (2019). Quick safety issue 47: De-escalation in health care. Retrieved from https://www.jointcommission.org/assets/1/23/QS_Deescalation_1_28_18_FINAL.pdf