Minimizing the risks of health care workplace violence:
Defusing disruptive and threatening behavior
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Learning objectives

This session will provide you with the knowledge to:
1. List the incidence, types and causal factors of disruptive and threatening behaviors and how they can lead to health care workplace violence.
2. Identify the impact on patients, families and health care professionals.
3. Implement strategies for enhancing communication with patients, de-escalating anger, avoiding violence and incorporating best practices for a workplace violence prevention program.

Health Care Employees Bear Brunt of Workplace Assaults, Research Finds
By Dr. GRETCHEN WINTER • Apr 27, 2016, 4:40 PM EDT
Healthcare workplace violence

Workplace violence

Any act or threat of physical violence, harassment, intimidation, or other threatening disruptive behavior.

OSHA

Disruptive behavior

Undermines
Interferes
Disregards
Creates fear
Types of behavior

- Insidious incivility
- Anger and verbal abuse
- Physical abuse
- Active shooter

Most caused by patients

Threat assessment

- Direct
- Indirect
- Veiled
- Conditional

- Low level threats
- Medium level threats
- High level threats
Beware of labels

- Noncompliant
- Angry
- Demanding
- Complaining
- Needy
- Manipulative
- Inappropriate
- Drug seeker
- Alcoholic
- Psycho

Causal risk factors

Community
Person
Environment
High-risk setting
Organization

Community risk factors

- High concentrations of poverty
- Diminished economic opportunities
- Socially disorganized neighborhoods
- High levels of family disruption
- Low community participation
- Access to firearms
- Social and cultural norms
Personal risk factors

- History of violence or gang activity
- History of substance abuse
- Use of mind- and mood-altering medications and drugs
- Dementia
- History of behavioral health condition
- Pain
- Anger, high stress and frustration

Environmental risk factors

- Increasing depersonalization of care
- Insurance and economic factors
- Long waits
- Overcrowded, uncomfortable waiting areas
- Unrestricted movement of the public
- Isolated or solo work with clients
- Poorly lit areas

High-risk settings

- Inpatient and acute psychiatric services
- Geriatric and long-term care settings
- High-volume emergency departments
- Residential and day social services
Organizational factors

• Lack of a prevention program, policies, training
• High staff turnover
• Inadequate staffing
• Higher acuity patients
• Inadequate onsite security
• Lack of behavioral health professionals

Biggest risk factor

Culture of acceptance

“You know, we joke about how it’s not a normal day unless you’ve been verbally abused, spit on, or someone’s taken a swing at you. It’s just part of the job … you have to be tough.”
Impact on patients and families

- Loss of trust
- Fear of environment
- Increased LOS
- Reduced patient satisfaction
- Emotional trauma
- Physical trauma

Impact on organization

- Staff burnout, absenteeism and turnover
- Reduced patient satisfaction
- Damage to organization’s reputation
- Professional liability claims
- Worker’s compensation claims
- Negligent hiring claims
- Employment law claims
- Regulatory fines

Impact on health care professionals

- Loss of professional confidence
- Reduced job satisfaction
- Emotional trauma
- Burnout
- Lost wages
- Serious physical injury
- Physical disability
- Death
Inability to feel safe at work

“The first step in decreasing the risk of violence in the health care workplace is admitting that it can happen to you. There’s no survival value in denial.”

Steve Wilder, Security Consultant

Are you ready?

Do you have an emergency lockdown plan?

No 88.94%
Yes 11.06%
Reducing risk

Violence prevention program

Safe respectful culture

Tools, training and education

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1 VPP

Leadership commitment

• Acknowledge value of safe workplace
• Allocate authority and resources
• Support zero tolerance of disruptive, threatening or violent behavior
• Provide medical and psychological counseling programs
• Encourage reporting of incidents

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1 VPP

Violence prevention program

✓ Clear goals
✓ Leadership commitment
✓ Multidisciplinary team
✓ Employee participation
✓ Pre-employment screening
✓ Hazard assessments
✓ Hazard prevention
✓ Security measures
✓ Emergency response
✓ Code of behavior policy
✓ Education and training
✓ Record keeping
✓ Reporting system
✓ Community resources
✓ Regulatory compliance
✓ Program evaluation

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Code of behavior/disruptive behavior policy

- Zero tolerance
- Behavior expectations
  - For providers, employees, patients and family members
- Reporting process
- Supervisory responsibilities
- Investigation process
- Enforcement process
- HR involvement

Hazard assessments

- Worksite risk assessment
- Job hazard risk assessment
- Threat assessment

Resources

- AUA Workplace Violence Preparedness Toolkit
- ENA Workplace Violence Toolkit
- MHA Preventing Violence in Health Care Gap Analysis
- OSHA Workplace Analysis

Hazard prevention

- Engineering controls
- Work practice controls
Federal and state regulations

• Federal OSHA requirements
• State-mandated requirements
• Accreditation requirements - TJC

Promote a safe, respectful culture

• Zero tolerance for disruptive, threatening or violent behaviors
• Behavior and violence incident reporting process
• Zero tolerance for retaliation for reporting
• Culture assessment

Make health care professional well-being a priority

• Include in your mission statement
• Measure well-being and burnout
• Provide education and tools
• Encourage self-care
• Promote resiliency tools
• Provide debriefing and counseling
Enhance communication and collaboration among the health care team

- Communication tools (e.g., SBAR)
- Huddles and handoff communication
- Critical language policy
- Chain of command policy

Enhance communication with patients and families

- Clear, simple, understandable policies
- Communication trigger tools
- Shared decision-making model
- Behavioral health consultation
- Patient termination policy and procedure

Terminating the relationship

- Generally a last resort
- Care alternatives identified
- Beware in vulnerable patient situations
- Follow policy and procedure
- EMTALA overrides
- Written communication
- Documentation
Provide tools, training and education

- Policy and procedures
- Response drills
- Communication and teamwork skills - TeamSTEPPS
- Stress management
- Conflict management
- Progressive behavior control methods
- Recognizing and responding to impending violence

Skills for patient interactions

- Diversity and cultural competence
- Health literacy tools
- Shared decision-making model for treatment decisions
- Motivational interviewing
- Apology and communication processes when things go wrong
- De-escalation techniques

Be aware of warning signs

- Clenched jaw
- Balled fists
- Leaning into your space
- Escalating lies
- Verbal threats
tools and training

De-escalating disruptive behavior

- Talk in calm manner
- Be firm and direct but not angry or irritated
- Acknowledge feelings
- Don’t deflect or become defensive
- Don’t match threats
- Don’t give orders
- Avoid aggressive movement
- Don’t isolate yourself
- Be vigilant

3 tools and training

Empathy training

- Empathetics.com
- Based on the neurobiology and physiology of human interactions
- Improves interpersonal behavior
- Learn to manage difficult interactions
- Learn how to deliver bad news

Contact us

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