

Management of Assaultive Behavior

Workplace Violence in the Hospital

What is workplace violence?

Definitions

- **Workplace** is any place where an employee performs job duties.
- **Violence** is any act that causes physical or emotional harm, and includes the threat of being harmed.
- **Workplace violence** is any act or threat that causes physical or emotional harm in a place where an employee performs job duties.

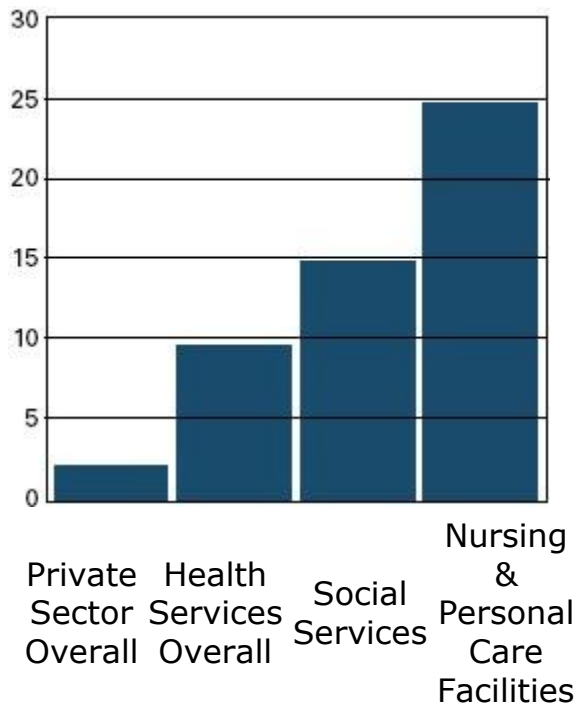
Examples of violence that could occur in a hospital

- An employee who is a victim of domestic violence may be stalked and/or assaulted by a partner in the workplace.
- Gang members may attempt to continue violent acts inside the hospital.
- Substance abusers may be violent if they are reacting to drugs or if they are trying to obtain drugs.
- Family members may become violent when treatment that goes against their religious beliefs is ordered (by court) for a child.
- Medical conditions, such as Alzheimer's, sometimes result in violence.

Facts

Nonfatal assaults and violent acts by industry, 2000

Incidence rate per 10,000 FTEs



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Source: U.S. Department of Labor, Bureau of Labor Statistics. (2001). Survey of Occupational Injuries and Illnesses, 2000.

- 85% of non-fatal workplace injuries occurred in healthcare facilities. (Occupational Safety and Health Administration, OSHA)
- One million healthcare workers are injured in violent incidents every year.

A nationwide survey of emergency nurses between May 2009 and February 2010 found that in hospitals:

- 97.1% of physical violence was perpetrated by patients and their relatives.
- 80.6% of physical violence occurred in patients' rooms; 23.2% in corridors, hallways, stairs and elevators; and 14.7% at nurses' stations.
- 38.2% of physical violence against emergency nurses occurred while they were triaging patients, 33.8% while restraining or subduing patients, and 30.9% while they were performing invasive procedures.
- 15% of male nurses reported having been victims of physical violence compared with 10.3% of female nurses.
- 13.4% of violent acts occurred in large urban areas compared with 8.3% in rural areas.

Risk factors

Your facility has policies for handling violence in the workplace. Do you know what the policies are? Are you aware of risk factors associated with employment in the healthcare field?

Many factors contribute to the risk of violence in a hospital.

- Hospitals are open 24 hours a day.
- Employees and patients enter and leave at all times of the day and night.
- There is no way of knowing a person's purpose for being in the hospital.
- There are usually fewer working staff visible or available during times of increased activity, such as meal times and visiting hours.
- At certain hours, especially at night, there are only small numbers of staff working in isolated areas of the building.
- There are a lot of people who are under emotional stress as a result of their illness and/or a long wait to be treated.
- Patients and staff bring money and valuables into the hospital.
- Hospitals are known to have a large supply of drugs, which attracts substance abusers.
- Many hospitals have poorly lighted parking areas.
- Gang members and other violent individuals are treated in the emergency room for injuries sustained in gang violence.
- Weapons, especially handguns, are brought into hospitals by gang members and by other patients who carry weapons for self-defense.

Prevention of Violent Incidents

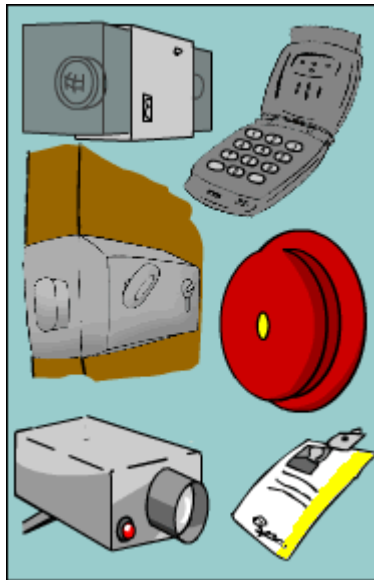
Types and effectiveness of security

Your facility has security devices you should use and security practices you should follow to help reduce the risk of violence.

Security devices include entrance controls, lighting, surveillance equipment, motion detectors, and other equipment used to monitor traffic in and around the hospital. Be aware of these devices in your facility and learn how to use them correctly. For example, a door may be designed to limit access to a particular area. If you prop that door open, you will be providing an opportunity for an unauthorized person to enter and violence to occur.

Security policies and procedures of your facility are in place for your safety. Keep safety in mind and develop security practices that will help you to reduce the risk of violence. For example, identification (ID) badges may be required for entry to a particular lab. Do not hold the door open to allow someone to enter with you, and question any person who does not have an ID badge, even if that person is wearing the proper uniform or lab coat.

Security personnel and equipment



Security equipment may include bright lighting, cell phones, automatic locks, alarms, video cameras, and ID badges

Your facility has security personnel, equipment, and devices intended to reduce violence in the workplace. Do you know what they are? Do you know where they are? Do you know how to use them?

Physical security measures at your facility could include:

- **Security personnel** at entrances, to patrol inside and outside buildings, to monitor sensitive areas, and to provide escorts to and from parking lots
- **Access controls** such as ID badges, key codes, and automatic door locks (after hours, people are normally escorted by security personnel) to restricted-access areas such as the pharmacy, laboratories, obstetrics, and pediatrics
- **Security equipment** such as effective lighting (in isolated areas, parking garages and lots, doorways, hallways, and stairways), alarms and emergency call buttons, video cameras (their presence alone is a deterrent), metal detectors, bullet-proof windows, cellular phones, and curved mirrors in hallways (for visibility around corners)
- **Structural planning** such as safe rooms (containing at least **two exits**) and minimal furniture and objects that could be used as weapons in counselling rooms.

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Be sure you know about the physical security that are available at your facility. Determine where they are located and learn how to use them properly.

Security practices

Your facility has security policies and procedures intended to reduce violence in the workplace. Do you know what they are? Do you use security practices to help prevent workplace violence?

Security practices at your facility could include:

- **Access control policies** such as using ID badges for entry, questioning anyone without ID badges, and signing-in all visitors
- **Awareness issues** such as being especially sensitive to patients and families during stressful situations, keeping people informed during long waits to reduce stress and frustration, monitoring gang activity and reporting interference with duties, and developing awareness of items that could be used as weapons (pens, syringes, lamps, books, IV poles, etc.)
- **Sensitivity issues** such as separating persons angry with each other and keeping patients in states of psychiatric crises separated from other patients
- **Personal practices** including wearing minimal jewelry (so it cannot be grabbed), wearing hair short or close to the head (so it cannot be grabbed), avoiding stairways at night or when fewer staff are around, using a buddy system to avoid being alone in areas of potential risk, and withholding personal information (concerning yourself or others) from patients and their families, such as address, phone number, names of family members, etc.
- **Hospital policies** including prosecuting to the full extent of the law for acts of violence, reporting all threats and incidents to supervisors for investigation, providing security and/or escorts when travelling to and from parking areas (especially at night), and using code words to alert others of a problem or when discussing sensitive topics such as drugs or money.

Be sure you know the security policies and procedures of your facility. Use security practices properly to help prevent violence in your workplace.

Diffusion of Violent Incidents

Signs of anger

Violent incidents are often the result of someone's anger.

Anger is a normal, healthy, human emotion. It is a warning sign that something is wrong. Anger varies from mild irritation to intense rage and may result in violence. It may be triggered by the action of a single person or event or it can be caused by stress and worrying too much. When people feel threatened or weak, they react with anger because it makes them feel strong and in control.

Everyone gets angry at one time or another. When anger gets out of control, it can lead to problems at work, in personal relationships, and in the quality of a person's life. Anger is a learned behavior. If people have seen their parents use anger to resolve an issue, they are likely to use the same approach.



A red face, clenched fists, and swearing are signs that indicate a person is angry.

When people get angry, their heart rate, blood pressure, and adrenaline levels rise. These signs are not visible, but there are other signs that will help you recognize that a person is angry or getting angry.

Signs of anger include:

- Reddening of the face
- Staring eyes
- Rapid breathing
- Shouting (although some people may become quieter)
- Clenching fists
- Swearing
- Pacing
- Challenging behavior.

Causes of anger

Anger can lead to loss of control, which may result in violence. Understanding the causes of anger will prepare you to respond to anger and diffuse a potentially violent incident before it happens.

Causes of violence include:

- Stress
- Frustration
- Feeling that no one is listening
- Feeling of being powerless.

Stress

Hospitals are stressful places for patients, visitors, and staff. Stress associated with pain and anxiety may lead patients or their family members to become angry. Staff may become angry because of the stress of dealing with irrational behavior by patients.

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Frustration

Patients recovering from illness or injury often become frustrated with the progress of their recuperation. They may direct their frustration at healthcare workers.

Feeling that no one is listening

Long waits in emergency rooms can cause patients and their family members to become angry, frustrated, and hostile. It is natural for ill or injured patients to want to be seen as soon as possible. When they perceive they are not getting the attention they should, they think that staff are not interested in their problem. This perception can lead to a build-up of anger.

Feeling of being powerless

Family members who are not allowed into the treatment room and are not kept informed of the condition of the patient may feel powerless. This feeling could lead to anger and violence. For example, they may try to force their way into the treatment room.

Responding to anger

When you notice that someone is angry or getting angry you want to keep the situation from escalating and resulting in harm to people and property.

Follow these steps as you try to calm a person down:

1. Take the person out of the public area.
2. Allow the person to talk about the problem.
3. Listen to what happened.
4. Identify with the person's feelings.
5. Get help.

Take the person out of the public area

Take the angry person out of the public area but avoid isolating yourself. If you go to another room, never let the other person come between you and the exit.

Allow the person to talk

Allow the person to talk about the problem and encourage him or her to say more. Hear the person out and do not try to give any explanation at this point. When people are angry they are unable to reason and will not understand or focus on the explanations. Once they have said everything they want to say, they may be able to listen to you.

You CAN say:

- "This has upset you."
- "Sounds like things are not going as you planned."
- "You felt like no one was listening to you."
- "And then?"
- "Go on ... tell me what happened."

You MUST NOT say:

- "You are wrong."
- "That could not have happened."
- "Just calm down!"
- "Relax ... don't get upset!"

Listen to what happened

Your goal is to listen to what happened, without interrupting, so the person knows that

someone is paying attention. It does not matter right now whether the person is right or wrong. This is what he or she thinks happened and it is real to him or her.

Identify with the person's feelings

It is OK to identify with the person's feelings by saying something like, "When you had to wait so long, you felt that you were being forgotten." Once the person is calmer, you may be able to deal with the situation and offer an explanation. If an error has been made, your focus should be on how to correct it.

Get help

If you feel uncomfortable dealing with a situation or if it gets out of hand, call for help or let someone else handle the incident.

Response to Violent Incidents

Get help!

When you are confronted by someone who is threatening you, do not try to be a hero. Get help! Your life is priceless.

If you see a co-worker being threatened by another employee, a patient, or a visitor ask them if they need help if the need is not obvious. Then get help!

Your facility may have codes to help you and your co-workers in this type of situation. Examples of codes include:

- Code alert that can be broadcast to get help to your area
- Code word(s) such as, "I need Dr. Armstrong."
- Facility alarm codes that you can use to call your supervisor

DO NOT use force in this type of situation especially if you have not been trained how to do so properly. Special programs are used by employees in psychiatric medicine for "taking down" a violent person. If these programs are not used correctly, serious and fatal injuries can occur.

Protect yourself!

What you should do when a person is angry and out of control depends on the situation and the circumstances.



If you feel that a person is getting out of control and may attack you, take the following precautions to protect yourself:

- Don't try to be a hero. ... Get out!
- Loosen or take off items of clothing such as a scarf or necktie that the angry person could grab.
- Remove high heels if you feel you may need to run.
- Move to a place where the furniture in the room is not blocking the exit or the pathway to the door.
- Stay at least six to seven feet away from the angry person.
- If the person comes toward you, hold your arms up with the palms facing outward.
- Trust your instinct; get out if you feel it is necessary.

After the violent incident

Once the violent incident is over, there are three areas of concern:

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1. Medical help
2. Emotional help
3. Debriefing

Medical help

If you have been injured, you will need immediate medical attention.

Emotional help

Even if you have not been physically injured, you have been through a crisis situation and need time to recover. Your facility will have resources available to you to help you through this time. It is normal to need some additional help and counselling. Take advantage of help that is available. If you were not the person involved, be supportive to any co-workers who were involved. Emotional recovery may take some time. Do not make unrealistic expectations for yourself.

Debriefing

Your facility will have some specific debriefing procedures once the incident is over. This debriefing typically involves everyone who was involved in the incident. It gives everyone the opportunity to discuss exactly what occurred. The information from the briefing can help prepare you for dealing with future situations.

End of Management of Assaultive Behavior Lesson