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Workplace Violence in the ICU:

it's Not "Part of the Job."

Erika Setliff, DNP, RN, CCRN, ACNS-BC

Disclosures

- I have no conflicts of interest related to this topic

Objectives

- Describe predisposing factors and early signs of escalating behavior
- Summarize best practices from professional organizations and literature on workplace violence prevention
- Identify one action for participants to take back to their primary setting to prevent workplace violence

Workplace Violence:

Violent acts (including physical assaults and threats of assaults) directed toward persons at work or on duty (CDC/NIOSH, 2002).

70-74% of workplace assaults occurred in healthcare and social service settings

Assaults comprise 10-11% of workplace injuries involving days away from work for healthcare workers (compared to 3% of injuries for private sector employees) (OSHA, 2016)

Workplace violence is vastly underreported, actual rates may be much higher

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Workplace Violence (WPV) In the News



CNN

November 2, 2017 ·

Alex Wubbles was forcibly arrested when she refused to let an officer draw blood from an unconscious patient.



CNN.COM

In death of Baton Rouge nurse, Lake Charles man arrested and booked on manslaughter

ADVOCATE STAFF REPORT APR 24, 2019 - 6:07 AM



Lynne Truxillo
Courtesy photo

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<https://www.wafb.com/2019/04/24/man-accused-attacking-brg-nurse-who-died-days-later-arrested-manslaughter/>
https://www.theadvocate.com/baton_rouge/news/crime_police/article_1bb5c528-6681-11e9-899d-db89b35989c2.html
<https://www.facebook.com/cnn/posts/alex-wubbles-was-forcibly-arrested-when-she-refused-to-let-an-officer-draw-blood/10157525101531509/>
<https://www.beckershospitalreview.com/quality/massachusetts-nurse-stabbed-by-former-patient-urges-hospital-safety-changes.html>



Massachusetts nurse stabbed by former patient urges hospital safety changes

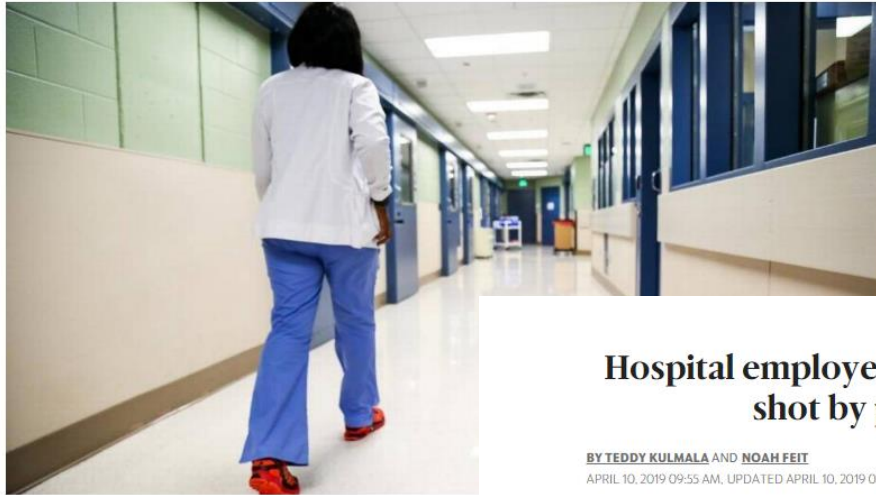
A nurse stabbed 11 times by a former patient at a Southbridge, Mass., hospital has traveled across the U.S. to speak before hospital CEOs and CNOs, demanding action on improving hospital safety, ABC-affiliate TV station WCVB reports.

CRIME & COURTS

'It happens every day': SC hospital shootings highlight violence against health care workers

BY TEDDY KULMALA

APRIL 12, 2019 05:00 AM, UPDATED APRIL 12, 2019 10:46 AM



A nurse walks the hallway of the hospital at Central Prison in Raleigh.

CRIME & COURTS

Hospital employee in critical condition after being shot by patient, SC officials say

BY TEDDY KULMALA AND NOAH FEIT

APRIL 10, 2019 09:55 AM, UPDATED APRIL 10, 2019 03:03 PM



Orangeburg Regional Medical Center GOOGLE MAPS

ORANGEBURG COUNTY, SC

Hospital patient arrested after assaulting nurses, staff members



September 3, 2015 at 3:21 PM EDT - Updated July 25 at 11:51 AM

CHARLESTON, SC (WCSC) - A hospital patient is behind bars after assaulting 14 nurses and staff members at Bon Secours St. Francis Hospital Tuesday, police say.

<https://www.thestate.com/news/local/crime/article229092504.html>
<https://www.thestate.com/news/local/crime/article229061389.html>
<https://www.live5news.com/story/29952154/hospital-patient-arrested-after-assaulting-nurses-staff-members/>



Charlotte Alerts
January 18, 2018 ·

HOSPITAL ROBBERY, 4 ROBBED, SUSPECT ARRESTED

Since when has going to the hospital been a risk for being robbed at gun-point?

Ervin Harris, 30, (Seen here) reportedly robbed four people inside of Carolinas Medical Center Main on Monday.

Ervin even put one of the female victims in a head lock.

It all started on MLK day at 6:44pm. Ervin aggressively approached two of the victims pushing them and then pulling out a gun on them. Ervin demanded cash.

Another victim was walking down the hallway and Ervin pointed a gun at and threatened to shoot.

Ervin was not done yet, he also grabbed a woman by the neck, threw her down, and put her in the head lock.

Once he obtained money and items from the victims he ran. But cops were already at the hospital for general security. When police approached Ervin he fought with them before being wrestled to the ground and arrested.

Officers found cocaine in Ervin's pocket and a loaded gun.



I remember thinking to myself, "This is the day I'm going to die" she said.

Confronting Violence in the Workplace

Tar Heel Nurse, 2019 Legislative Issue

Mission Hospital employees attacked, police say

Alexandria Bordas, Asheville Citizen Times

Published 9:31 a.m. ET June 25, 2018



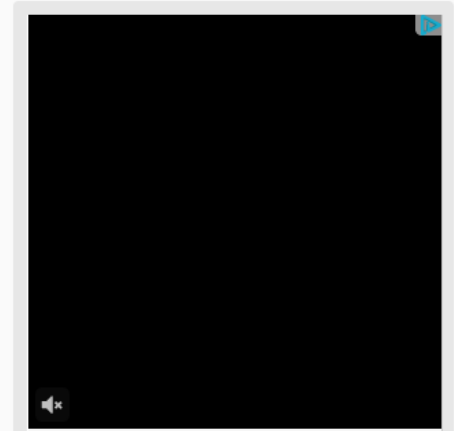
(Citizen-Times file photo)

CONNECT TWEET LINKEDIN COMMENT EMAIL MORE

ASHEVILLE - A patient being treated at Mission Hospital who physically attacked three employees in early June was arrested on Sunday, reported the police.

The 28-year-old Black Mountain resident, Caleb McCrae, punched and hit employees in the head and face, the warrant stated.

McCrae is being charged with three felony counts of assault and physical injury to an emergency person and is being held on a \$5,000 bond.



ORGANICVALLEY.COOP

Patient attacks 3 North Carolina hospital employees

Alyssa Rege - Wednesday, June 27th, 2018 [Print](#) | [Email](#)

[SHARE](#) [Tweet](#) [Share 0](#)

Police arrested a 28-year-old man June 24 who allegedly attacked three Asheville, N.C.-based Mission Health employees earlier this month, according to the [Citizen Times](#).

According to the police warrant, Caleb McCrae punched and hit three employees in the face and head in early June.

Mr. McCrae was charged with three felony counts of assault and physical injury to an emergency person. He is being held on \$5,000 bond.

<https://www.facebook.com/772276219531135/posts/1583507711741311?s=55701987&sfns=mo>

<https://www.beckershospitalreview.com/patient-flow/patient-attacks-3-north-carolina-hospital-employees.html>

<https://www.citizen-times.com/story/news/2018/06/25/mission-hospital-employees-assaulted-patient-warrant-states/729990002/>

A faint, light gray background image of a pair of scales of justice, centered behind the text.

Workplace Violence (WPV) In the Courts

Question: Is it a felony to assault a healthcare worker in your state?

- A. Yes
- B. No
- C. Unsure

WPV Legislation:
CVCSCCM Region

Assaulting A Healthcare Worker Is A Crime

**In North Carolina, It Is
A Felony To Assault A
Healthcare Worker**

N.C.G.S. 14-34.6

Workplace Violence (WPV) In the Courts

Is it a felony to assault a healthcare worker in your state?

State	Status
NC	Yes. HB 560; went into effect Dec 1, 2015.
SC	Not currently. SC H3483 (2017-2018) introduced Jan 2017
VA	No; Class 1 Misdemeanor. In 2017, penalties expanded from just emergency healthcare providers (HCPs) to all HCPs.
WV	Yes, felony for malicious or unlawful assault Misdemeanor for battery/ assault.

Types of WPV

(CDC/NIOSH 2016)

- **Type 1: Criminal Intent**
 - Perpetrator has no legitimate relationship to business or employees and a crime is typically committed in conjunction with the violence (robbery, trespassing, shoplifting).
 - Least common in health care settings
- **Type 2: Customer/Client**
 - Patients, family members, visitors
 - “Client on worker violence”
- **Type 3: Worker-on-Worker**
 - “Lateral violence”
 - Can be peer-to-peer or directed at someone “lower on the food chain” (Supervisor-supervisee; doctor-nurse)
- **Type 4: Personal Relationship**
 - Perpetrator has relationship to the worker outside of work that spills over to the work environment

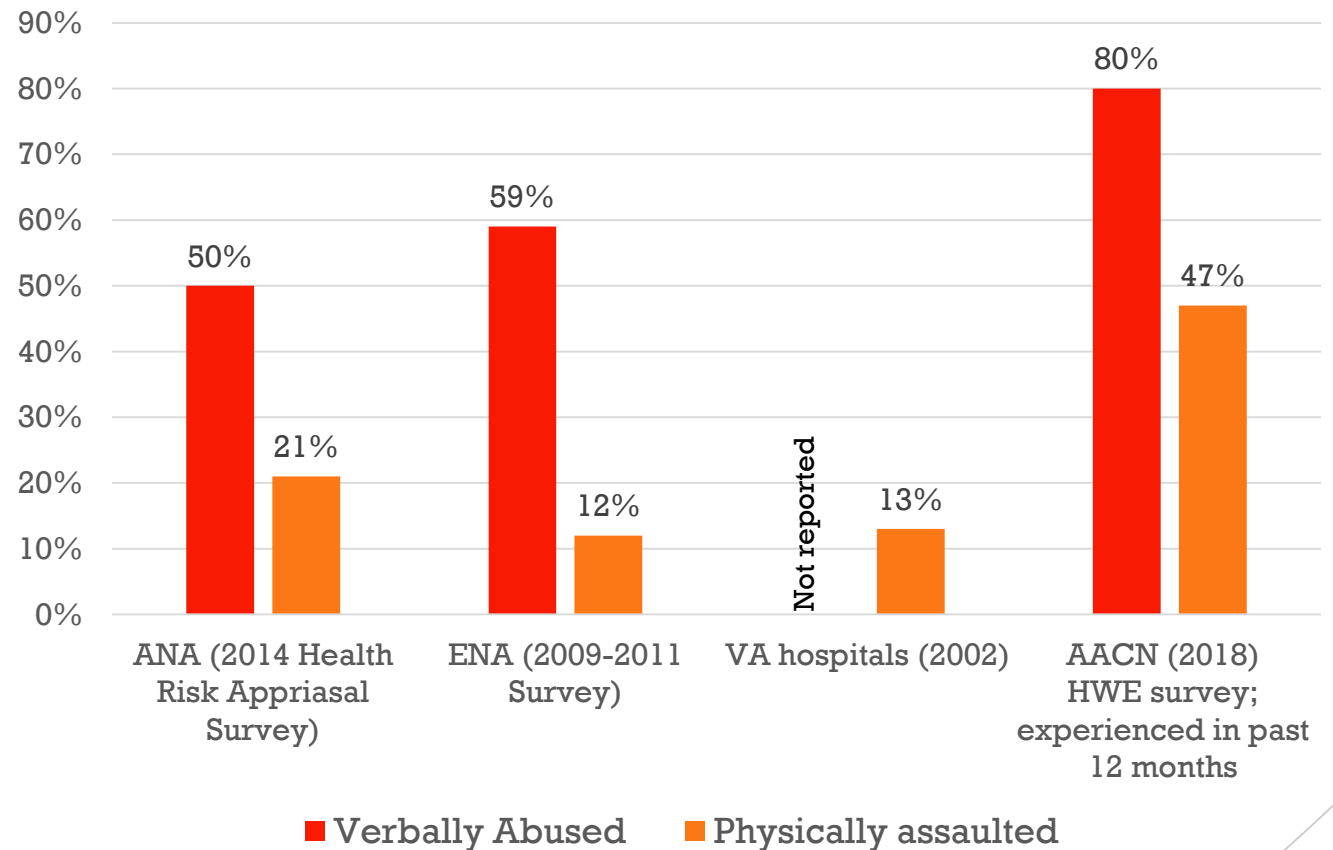
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WPV in Critical Care

WPV Variance Across Settings

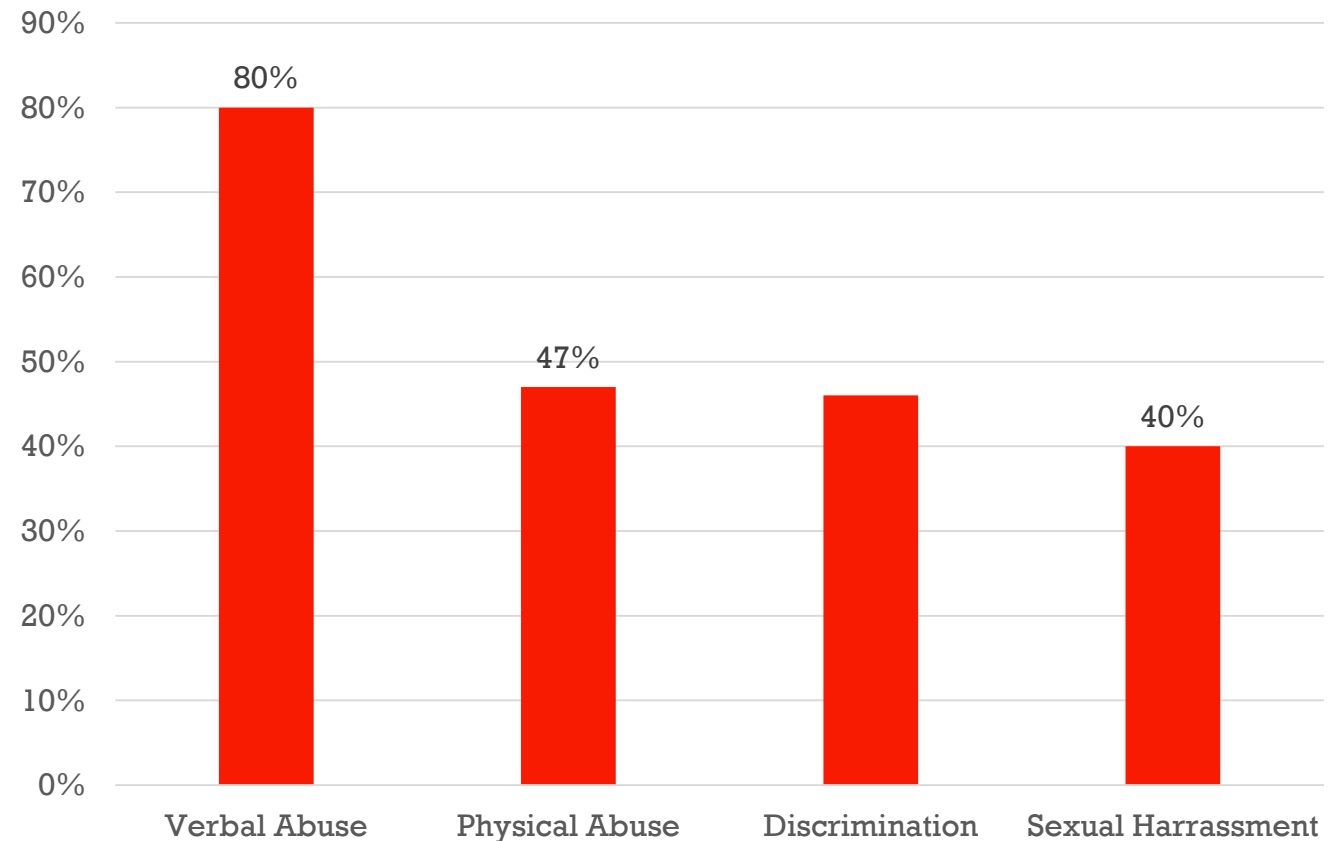
- How does Critical Care differ from other areas?

WPV Experience: Combination of data from
Various National Associations' Surveys



WPV Among Critical Care Nurses

WPV Experience: AACN HWE Survey (2018)

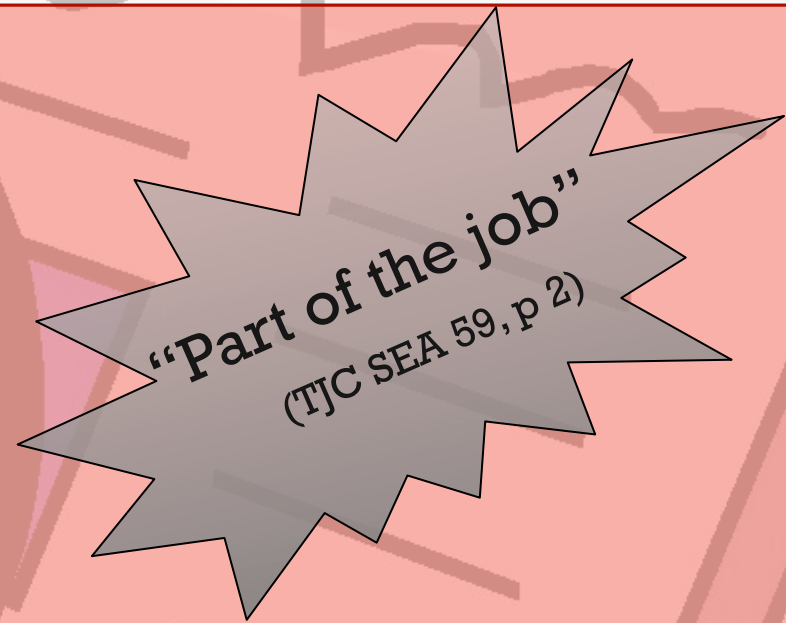


■ Experienced at least once in the prior 12 months

- The 6017 nurses who reported experiencing these abuses “frequently” reported a total of 198,340 incidences of abuse in the prior year (total survey n=8,080)

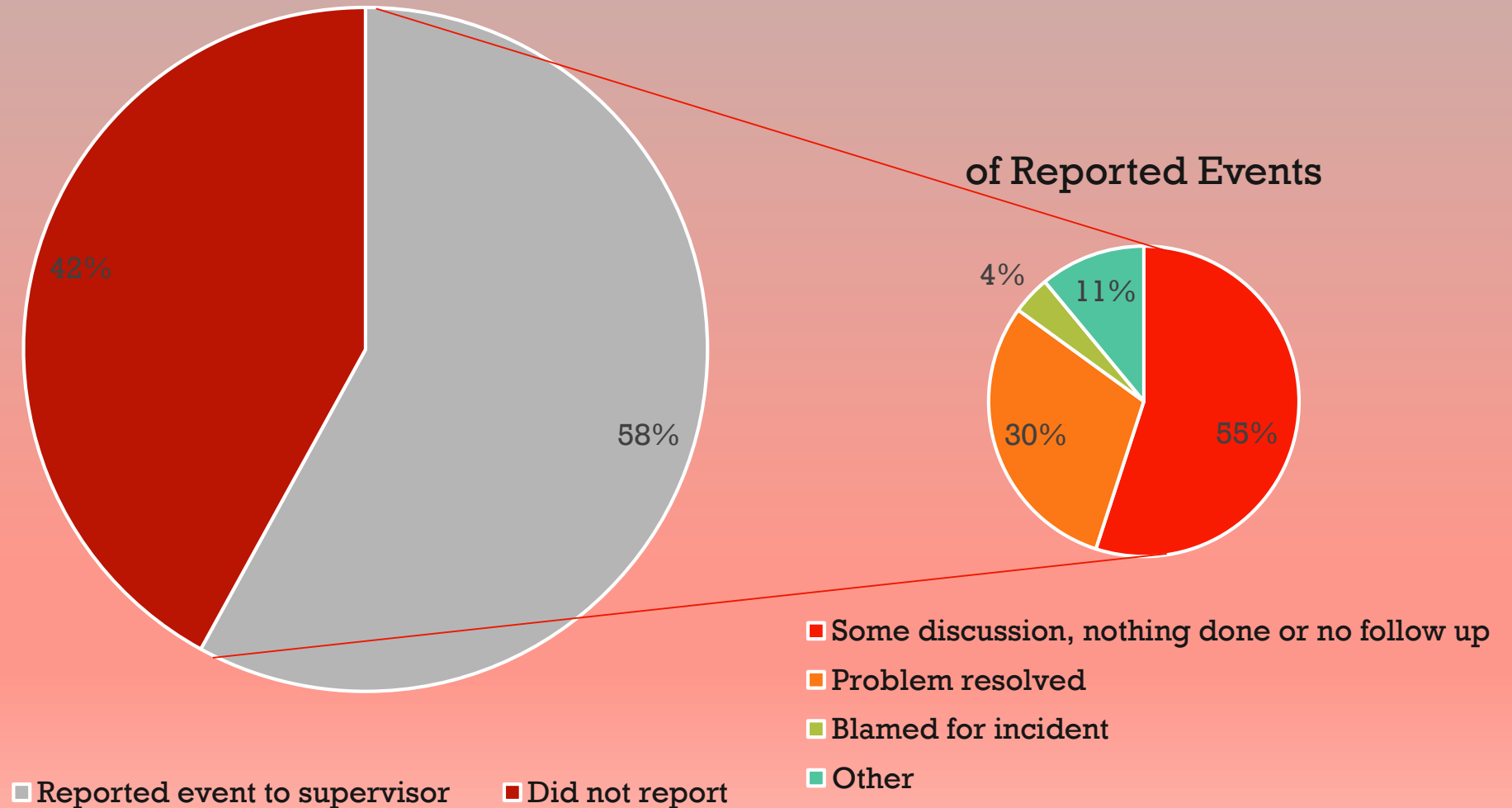
Underreporting:

- Described and verified across multiple settings
 - 30% of nurses report incidents of WPV
 - 26% ED physicians (TJC SEA 59, 2018)
 - Cultural acceptance of violence in ED (Wolf, Delao, Perhats, 2014)
- Themes from focus groups at NC Hospital (Blakely, Harding, & Stanberry, 2018)
 - Reporting long and cumbersome
 - “If reported all episodes would not have time to do my job”
 - Continued reporting with no action
 - “Nothing changes”
 - “Reporting for you to make a pretty graph doesn’t help me”



Reporting of Verbal abuse, physical abuse, discrimination, or sexual harassment

Data Source:
Critical Care Nurse
Work Environments
2018: Findings and
Implications
("HWE survey")
(Ulrich, et al, 2018)



Risk Factors for WPV (OSHA, 2016)

Also consider:

- Layout, design, visitor access,
- Conflict (real vs perceived) between Patient Satisfaction and interventions to improve safety

	YES	NO	Notes/Follow-up Action
Do employees have contact with the public?			
Do they exchange money with the public?			
Do they work alone?			
Do they work late at night or during early morning hours?			
Is the workplace often understaffed?			
Is the workplace located in an area with a high crime rate?			
Do employees enter areas with a high crime rate?			
Do they have a mobile workplace (patrol vehicle, work van, etc.)?			
Do they deliver passengers or goods?			
Do employees perform jobs that might put them in conflict with others?			
Do they ever perform duties that could upset people (deny benefits, confiscate property, terminate child custody, etc.)?			
Do they deal with people known or suspected of having a history of violence?			
Do any employees or supervisors have a history of assault, verbal abuse, harassment, or other threatening behavior?			
Other risk factors – please describe:			

ICU Specific Patient Risk Factors

- Substance abuse (Friedman, 2006)
- Delirium
- Stressors (personal, financial, waiting, family disputes)
- New diagnoses
- Lack of sleep
- Pain/discomfort
- Trauma
- Unmet expectations
- Perceived loss of independence or control
- Alterations in medications
 - Home meds not started
 - New medications

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Identifying Escalating Behavior

Concerning Patient or Visitor Behavior & Patient Risk Factors

Concerning Behavior

- Signs of drug or alcohol use
- Body language
- Verbal anger/frustration
- Blame
- Anger
- Staring
- Tone/volume of voice
- Anxiety
- Mumbling
- Pacing

Risk Factors: patient

- History of violence
- Altered mental status
- Influence of substances
- Psychiatric diagnoses
- Trauma (Especially head injuries)

Risk Assessment Tools

- Agitation: RASS
- Delirium: CAM-ICU, ICDSC
- Withdrawal
 - CIWA-Ar
 - COWS
 - Audit-C (risk)
 - PAWSS (risk)
- STAMP:
(Luck, et al, 2007)
 - Staring and Eye Contact
 - Tone and volume of voice
 - Anxiety
 - Mumbling
 - Pacing

- The Brøset Violence Checklist
© (BVC)

	Day	Evening	Night
Confused			
Irritable			
Boisterous			
Verbal threats			
Physical threats			
Attacking objects			
SUM			

- ABRAT:
 - Assesses a variety of factors(confusion, cognitive impairment, anxiety, agitation, shouting/demanding, history of aggression, threats to leave, physically aggressive, staring, mumbling)

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Facility Assessment

Assess Facility and Unit Policies and Structure

- Policies around “Trespassing” an aggressive visitor
- How to “flag” an aggressive patient
 - Does your EMR have a mechanism?
 - How does a teammate do this
- Does your unit “lock” if a patient is known to be associated with gang activity or other public risk?
- Availability and accessibility of panic alarms
 - Personal or on unit?
- How is security allowed to intervene in dangerous situations?
- What avenues does a teammate have if they feel concerned about a patient?
- Behavior contracts
- “Zero Tolerance” policy
- Full names on badges?
- Who comprises response team
- CCTV and other surveillance in high risk areas
- Protected staff areas

Zero Tolerance and Broken Windows

(Kelling & Wilson, 1982)

“...Apathy toward assaults such as verbal abuse creates an environment conducive to more serious, physical crimes”

TJC-SEA 59

AACN HWE Survey (2018)

- Only 62% of respondents indicated their organization had a zero-tolerance policy against physical abuse of staff
- Participants who reported presence of zero-tolerance policies against physical and verbal abuse reported far fewer negative incidents than those without such policies ($P < 0.05$)
- Tolerance of physical abuse ($r = -0.30$) and verbal abuse ($r = -0.41$) were associated with satisfaction with current job ($n = 8080$)
 - Values of Spearman correlation coefficient (r) range from +1.00 to -1.00.
 - All correlations are significant at the 0.01 level (2-tailed)

Other Facility and Unit Assessments

- Focus groups
 - Key component of Blakely, et al., 2018 at NC Hospital
- “Sticky note” exercise
- OSHA Assessment tools
- ENA Survey
- Describe and categorize the problem; Break into themes and form an action plan

Response Teams “BERT” or “SAFE” Team



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Education

Education on WPV

- **Annual Education**
 - Reporting mechanisms
 - Definitions and standards
 - De-escalation techniques
 - Warning signs of aggressive behavior
 - Patient and visitor risk factors for aggressive behavior
 - Resources and tools available
 - Personal Safety
 - Facility policies around WPV
- **Educational Considerations**
 - Administration training
 - Prevention
 - Support for teammates who experience a WPV event
 - Meaningful follow-up
 - Class vs online modules
 - Think through all teammates with potential to be impacted by WPV
 - Management of substance withdrawal, scoring tools
 - Delirium assessment and prevention

Facility Ongoing Efforts

- Tracking and monitoring of events
 - May need to get creative and think “outside the box” for tracking
 - Simple reporting sheet
 - Teammate huddles to capture snapshots of day-to-day reality
 - Formal reporting- simplify as able
- Establish strong policies
- Evaluate and optimize response teams
- Engage a variety of Champions
- Zero tolerance policies
- Partner with law-enforcement to ensure responding officers are educated about state legislation
- Post-event follow up, review, and key learnings
- Continuous process improvement

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Identify One Action You Plan to
Take Back to Your Facility

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Questions?

Erika.Setliff@atriumhealth.org

Thank You!

Resources

- **ANA resources**
 - <https://www.nursingworld.org/practice-policy/advocacy/state/workplace-violence2/>
- **CDC/NIOSH Training Course**
 - <https://www.cdc.gov/niosh/topics/violence/>
- **ENA Resources**
 - <https://www.ena.org/practice-resources/workplace-violence>
- **OSHA Guidelines for Preventing Workplace Violence**
 - <https://www.osha.gov/Publications/osa3148.pdf>
- **The Joint Commission Sentinel Alert, Issue 59**
 - https://www.jointcommission.org/assets/1/18/SEA_59_Workplace_violence_4_13_18_FINAL.pdf