

Violence Prevention and Intervention Staff Education

HealthEast Care System

Preventing and Intervening in Violence

- Preventing violence and behaviors of concern is a multi-disciplinary collaboration
- Partnership between: Security, Emergency Preparedness, Risk Management/Legal, Human Resources, Employee Occupational Health, Nursing Leadership, Labor Leadership, Operational Leadership and:
- ***ALL employee partners***

Definitions of Workplace Violence

- Occupational Health and Safety Administration (OHSA): 4 Categories
- Definition based on the type of perpetrator and his/her relationship to the organization and victim(s)
- Violent acts including physical assaults and threats of assault

Definitions of Workplace Violence

- Category 1: Criminal intent; no legitimate relationship to the organization, enters to commit a crime
- Category 2: Customer, client, patient; persons who receive services from the organization
- Category 3: Co-worker; violence/threats by a current or former employees against an employee
- Category 4: Personal; current or former personally related or intimate person threatening, and/or assaulting staff

General Workplace Violence Prevention Efforts

- Education includes discussion of physical violence/assaults and threats of violence ***and other behaviors of concern*** that may be precursors
- Innuendos
- Intimidation / Bullying
- Harassment
- Stalking

Violence Prevention Efforts

- Contact Security for consults and security stand-bys for disruptive patients, family, and other visitors.
- Review the patient's care plan with clinical team when a threat or concern arises
- Security will communicate behavioral expectations for disruptive patients, family, and/or visitors.
- Behavioral contracts are a tool available to staff: Security will explain the expectations and get a signed acknowledgment of understanding.

Violence Prevention Efforts

- Code Green (Behavioral Emergency Response Team)
- Call a Code Green for any immediate behavioral emergency that you see (dial 21111 and communicate where you are and what the situation is).
- Call Security to respond to situations that are developing or may have the potential to escalate, no matter how small it may seem at the time.

Violence Prevention Strategies

- Individualized security plans for staff experience domestic violence issues, harassment, and stalking to include:
 - Referral to employee's local (their personal residence) police department, The policy department for the HealthEast site, and county attorney's office as appropriate
 - Order for Protection, Restraining Order
 - Escorts to and from vehicle
 - Personalized education and training
 - Unit security assessment
 - Home security assessment
 - ***Connect the staff member with personal/emotional support resources***

Prevention Strategy for Domestic Violence Protection

- “Seek and apply strategies that make you unavailable to your pursuer.” (Gavin de Becker)
- Hierarchy of Personal Safety
 - Avoidance (Not being there, or, access denied to pursuer)
 - Evasion/Escape (awareness, recognition, and getting away)
 - De-escalation and verbal distraction
 - Fast, efficient physical defensive tactics

Reporting

- As appropriate to the situation:
- Call Security via HealthEast Switchboard at 21111, or, your site Security contact number
- Talk to your leader(s)
- Talk to your Human Resources contact
- Prioritize your personal safety; you cannot care of anyone else or complete your job if you are not safe

Reporting Online

- Electronic Safety Event Reporting (RL Solutions) tool
- Safety report tool is on the HealthEast Infonet:
<http://infonet.healtheast.loc/RMProWeb/riskweb3.dll/FrmLogin>
- Software will forward the report for follow-up to appropriate staff or leader based on type of incident

Summary

- Our success as an organization will be based on open communication between staff, partnership between disciplines, and diligent investigation, response, documentation and tracking
- We need every employee to report concerns that they have and work with us to see the situation through to a safe conclusion.

Questions?

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