Violence in the Healthcare Setting Policy

I. PURPOSE

Healthcare professionals are increasingly becoming targets for workplace violence. It can affect and involve employees, patients, contractors, and other visitors. Physician Partners of America (PPOA) is committed to maintaining a safe and secure work environment. The purpose of this policy is to review types of threats, triggers, prevention strategies, and to set guidelines for addressing and responding to aggression, and violence within the healthcare setting.

II. SCOPE

This policy applies to all PPOA Workforce Members, their affiliates, and business associates. This policy also applies to all PPOA patients and visitors while they are on PPOA premises.

III. DEFINITIONS

A. Debriefing – The process of gathering information and analyzing an event or situation after it has occurred.

B. Defuse/De-escalation – A method to prevent potential violence using purposeful actions, verbal communications, and body language to calm a potentially dangerous situation.

C. Workforce Members – Employees, volunteers, trainees, and other persons whose conduct, in the performance of work for a covered entity or business associate, is under the direct control of such covered entity or business associate, whether they are paid by the covered entity or business associate.

D. Workplace Violence – Any act or threat of physical violence, harassment, intimidation, or other threatening behavior that occurs at the work site.

IV. POLICY

The majority of PPOA's Workforce Members work in a healthcare setting that deals with the public and are therefore more at risk of becoming a victim of aggressive or violent behavior. People who have the most direct contact with patients and work with volatile people are at higher risk. This type of behavior may occur at any PPOA location and in any room accessed by patients and visitors (e.g., waiting rooms, exam rooms, etc.). Violence and aggression in the healthcare setting can also have negative organizational outcomes such as low worker morale, increased stress, increased turnover, reduced trust in coworkers, and a hostile working environment.

Any act or threat of physical violence, harassment, intimidation, or other threatening behavior will not be tolerated at any PPOA facility or by any Workforce Member, patient, or visitor. PPOA will maintain a policy for recognizing and preventing potential threats. This policy will include the responsibilities of each Workforce Member if an act of violence or aggression were to occur.

V. PROCEDURE

A. Recognizing a Threat

A threat may be real or implied and hostile incidents can take on many forms. Aggressive and/or violent behavior is usually acted out physically. An individual displaying this type of behavior may throw objects, hit someone or something, or commit some other physical act.

i) <u>Types of Threats</u>

Some types of threats include, but are not limited to:

a) Telephone calls,
b) Physical altercations,
c) Vandalism,
d) Face-to-face conversations,
e) Following and/or stalking,
f) Assault,
g) Expressions of intent to cause harm,
h) Threatening body language,
i) Bullying,
j) Verbal threats, and
k) Written threats

ii) Signs of a Threat

Some distinct characteristics which may signal potential violence (usually present more than one sign at the same time) include, but are not limited to:

Verbal Cues

- Raised voice/yelling,
- Swearing,
- Threatening tone of voice,
- Talking to oneself,
- Not giving information when asked, and
- Mumbling, and
- Verbally expressing anger and frustration

Non-Verbal Cues

- Physical appearance (neglected hygiene or clothing),
- Arms folded tight against chest,
- Clenched fists or wringing hands,
- Heavy breathing,
- Pacing or agitation,
- General restlessness,
- Expressing delusional thoughts,
- A terrified look (signifying fear or high anxiety),
- Acting confused,
- A fixed stare,
- Aggressive or threatening posture,
- Throwing objects,
- Sudden change in behavior,
- Signs of drug or alcohol use, and
- Presence of a weapon

iii) Potential Triggers

Certain situations may trigger aggressive or violent behavior, such as:

a) Bad or difficult prognosis,
b) High treatment costs
c) Treatment consequences,
d) Cancelations,
e) Treatment complications,
f) Denial of service,
g) They feel they don't have a choice or have lost control of the situation,
h) Long waits, and
i) Patients under the influence of drugs or alcohol

These situations often take place during times of high activity or stress, such as:

a) Breaks,
b) Shift changes,
c) Visiting hours,

d) Patient lifting, moving, and transportation,
e) Any situation that may cause confusion, increased background noises, or crowding, and
f) When understaffed

B. Prevention Strategies

It is essential to always be aware of your environment and evaluate each situation for potential problematic behavior when you enter a room or begin to relate to a patient.

i) <u>Some common prevention strategies include, but are not limited to:</u>
   a) Know the exits and location of phones;
   b) Train staff on policies and crises prevention;
   c) Ensure corridors, rooms, parking lots and other areas are well lit;
   d) Do not work or leave building alone at night;
   e) Maintain an adequate amount of staff;
   f) Immediately report any suspicious activity or persons to your supervisor;
   g) Minimize patient wait time;
   h) Escort patients to rooms and to the exit;
   i) Question unknown people that are in clinical areas;
   j) Ask for I.D. from all visitors who are not patients;
   k) Keep applicable doors locked;
   l) Keep medications our of sight and locked away;
   m) Don't isolate yourself with a potentially violent person ;
   n) Keep an open path for exiting - don't let them stand between you and the door; and/or
   o) Keep at least one arms length away (if possible).

ii) <u>Control your own responses and maintain behavior to help Defuse a situation, such as:</u>
   a) Being aware of the way you express yourself, how you phrase your explanations;
   b) Being aware of your own feelings, responses, instincts and sensitivities;
   c) Being aware of how fatigued you are - diminishes alertness and ability to respond and may increase agitation;
   d) Avoid any behavior that may be interpreted as aggressive (e.g., moving rapidly, getting too close, speaking loudly, etc.);
   e) Acknowledge the problem and the person's feelings;
   f) Stay calm and control yourself
   g) Don't match aggression with aggression;
   h) Don't give orders;
   i) Lower pitch and loudness of voice;
   j) Speak with confidence;
   k) Use positive language;
   l) Actively listen to the patient; and/or
   m) Provide the patient with choices.

C. Weapons

Please refer to PPOA's "Weapons Policy" for more information. Weapons may be involved and may appear in many different forms such as:

- Firearms,
- Knives,
- Stun guns,
- Bow and arrows or other archery type of devices,

- Sling shots,
- Any other object capable of firing a projectile,
- Martial arts weapons, and
- Blackjack or a club/night stick

D. If an Incident Occurs

Incidents may still occur despite preventative measures. Workforce Members in healthcare settings need to be prepared to deal with these situations should an incident occur. Management and worker participation and commitment are essential elements to help prevent workplace incidents.

Protecting the personal health and safety of yourself and those around you is a priority, so take action in any situation where you do not feel safe, or someone is in physical danger or needs medical attention. **If you have been physically threatened or harmed or believe another person's safety is at risk, contact law enforcement immediately.**

i) Defusing/De-escalation

Apply the above-mentioned prevention strategies in section B(ii) to help De-escalate an incident if it occurs. It is important to know your limits and vulnerabilities and know when to seek help if you are unable to defuse the situation. If you feel the individual or situation is escalating and violence may occur, quickly remove yourself from the situation and get help.

ii) Responsibilities

a) **Staff:**

- If unable to Defuse the situation and there is a potential for violence, get help from supervisor or call 911 (if necessary);
- Employees who believe they are being subject to or have experienced threats, harassment, aggressive/violent or inappropriate behavior must report the incident management;
- Employees who have been subject to threats or aggressive/violent behavior while off duty should report such incidents to management if there is a possibility it could intrude into the workplace;
- Report to management if the "Violence in the Healthcare Setting Poster" needs to be replaced.

b) Managers/Supervisors:

- Respond immediately and Defuse the situation
- If unable to Defuse the situation and there is a potential for violence, call 911 (if necessary);
- Submit a detailed incident report to the Compliance Department;
- Disseminate and train on this policy;
- Help ensure compliance with this policy;
- Submit reports to required state, federal, or licensing agencies as necessary (if applicable).
- Ensure our "Violence in a Healthcare Setting Poster" is maintained in waiting areas and are viewable by all patients. Contact the Compliance Department if poster needs to be replaced.

c) Compliance Department:

- Conduct an investigation of the incident and take appropriate action as needed;
- Review and maintain the "Violence in the Healthcare Setting Policy";
- If appropriate, make contact with the local law enforcement agency and coordinate with proper legal counsel and courts as required;
- Maintain an incident log;

- Conduct a periodic workplace assessment to identify issues and methods for reducing the likelihood of an incident occurring;
- Ensure workplace violence is part of the compliance educational program.

d) Human Resources:

- Provide direction in any disciplinary action taken on staff members in violation of this policy;
- Emotionally support Workforce Members who have been involved in a violent incident;

E. Post-Incident Support

i) Debriefing

A Debriefing is conducted after an incident has occurred and is a way for employees to comment on the event, ask questions, and offer suggestions. Information gathered during a Debriefing is vital to understanding what went wrong, identifying what went right, and brainstorming ways to improve future outcomes.

ii) Employee Assistance Program (EAP)

PPOA employees have access to the company's EAP. This program is through our health insurance carrier, Cigna and includes licensed clinicians that can help employees learn how to manage stress, address depression or anxiety, cope, and adjust to life changes. In addition, it contains a variety of resources and useful information.

F. Enforcement

Workforce Members that do not adhere to this policy or engage in activities prohibited by this policy are subject to disciplinary action up to and including termination of employment or contractual agreement.

Workforce Members have the right to refuse work or service if they have reason to believe that they are in danger. Patients who exhibit violent behavior are subject to consequences that may include,

- Asked to leave facility or physical removal from facility;
- Discontinuation of treatment;
- Involvement of law enforcement;
- Legal action