Staying Safe:
Reducing Assaults & Staff Injuries

Diane E. Allen, MN, RN-BC, NEA-BC
Kathleen Cummings, BSN, RN-BC

Presenters Have No Conflicts of Interest to Disclose

Objectives
Describe strategies used to engage staff in discussions about assaults

Recognize how staff culture can impact the response to patient behaviors

Identify three strategies that have helped staff avoid the use of physical interventions and reduce staff injuries
Make it Safe to Talk

Who Was Assaulted?

- NURSE: 24%
- Mental Health Worker: 70%
- MD: 1%
- OT: 4%
Does Gender Matter?

FEMALE 47%  
MALE 53%

Assaults by Day of Week

Which Shift Do You Think Experienced More Assaults?

Days?  Evenings?  Nights?
Assaults by Shift

- Day Shift 57%
- Evening Shift 34%
- Night Shift 9%

Differences Between Shifts

- Structure
- Expectations
- Rules
- Enforcement
- Tolerance

- Presence of Supervisors, MD’s, Clinicians
- Audience factors
- Laid Back Attitude

Assaults to Staff

- Without Provocation Warning 22%
- During ADL care 6%
- While on Observation Level 7%
- In or Enroute to Time Out 12%
- Response to Direction or Redirection 14%
- During Restrictive Physical Interventions 30%
True or False?

Staff will get hurt if we don't use Seclusion or Restraint

False

Injuries to staff actually decrease when Seclusion/Restraint use decreases

(Alemari et al., 1998)

Scope of Authority and Accountability of Mental Health Workers

Which of the following are included in your job description?

A. Bodyguard
B. Amateur Wrestler
C. Superhero
Evaluate Rules

Things We Do at New Hampshire Hospital to Stay Safe

- Patient Affirming Culture
- Respectful Interactions
- Clinical Handoff Communications
- Emergency Medication

Things We Could Do Better to Stay Safe

- Avoid Power Struggles
- Plan for Bad News
- Share Critical Information
- Never Intervene Alone
- Get Help & Have a Plan
Avoid Power Struggles

Plan for Bad News

Share Critical Information
When to Physically Intervene?

GET HELP

What Happens When We Physically Intervene?
What's the Worst Thing That Can Happen?

Staying Safe

Charge Nurse Responsibility
Engage all clinical resources
Recognize ineffectiveness of efforts
Request assistance and transfer responsibility to Campus Police
Provide support to Campus Police
Transition from Clinical to Police Intervention

ANY Weapon
Serious Life Safety Concern
Too Big, Too Strong
Too Violent

Staying Safe Message

Avoid physical intervention until a minimum of five staff is available

Staff Injuries from Assaults FY 2007 - 2012

Staying Safe Program

**Staying Safe Program Outcomes**

<table>
<thead>
<tr>
<th>Program Message</th>
<th>Measured Outcomes</th>
<th>Supporting Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Be respectful</td>
<td>Number of Assaults to staff</td>
<td>Reported Number of Assaults</td>
</tr>
<tr>
<td>Avoid power struggles</td>
<td>decreased 64%</td>
<td>FY 2007: 357</td>
</tr>
<tr>
<td>Plan for bad news</td>
<td></td>
<td>FY 2012: 122</td>
</tr>
<tr>
<td>Evaluate unit rules</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Getting hurt is not an expected is part of the Job</td>
<td>Staff injuries related to</td>
<td>Reported number of staff injuries</td>
</tr>
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<td></td>
<td>assaults decreased 63%</td>
<td>FY 2007: 56</td>
</tr>
<tr>
<td></td>
<td></td>
<td>FY 2012: 21</td>
</tr>
<tr>
<td>Get help from at least five people before physically</td>
<td>Calls for help (Code Gray)</td>
<td>Number of “Code Grays”</td>
</tr>
<tr>
<td>intervening with a patient</td>
<td>increased 21%</td>
<td>FY 2007: 344</td>
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<td>FY 2012: 415</td>
</tr>
</tbody>
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**Key Points**

- Organize focus groups
- Make it safe to talk
- Present the facts
- Ask staff what they think
- Listen and take notes
- Make recommended changes
- Reinforce the message
- Do it again

**Questions**
References


• Altemari, D. et al. (1998). Deadly Restraints. The Hartford Courant

