

ASSAULT PREVENTION THROUGH USE OF RISK FOR VIOLENCE SCREENING TOOL

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Background

- Healthcare workers (HCWs) in Emergency Departments (EDs) experience a high rate of workplace violence (WPV) perpetrated by patients.
- Registered Nurses (RNs) are exposed to WPV at higher rates than other healthcare professionals.
- WPV has negative effects on the quality of life and retention of HCWs, and on the quality of medical care provided to patients.

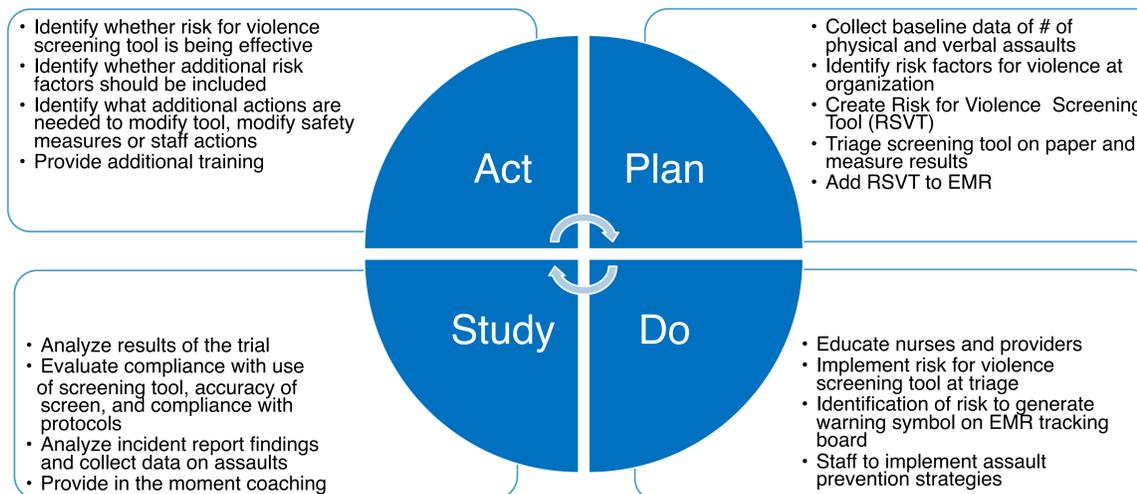
Purpose Statement

To implement and evaluate the effectiveness of a risk for violence screening tool (RVST) in an urban, academic trauma center emergency department to reduce assaults against staff through an alert system and focused assault prevention strategies.

Implementation

- Quality Improvement Project with pre- and post-comparison of data on physical assaults and behavioral events.
- A risk for violence screening tool was developed based on the facility, socioecological framework, and the literature-based risk factors for assaultive behaviors.
- All adult patients were screened for the risk for violence upon arrival and an EMR alert system warned HCWs to implement assault prevention strategies.

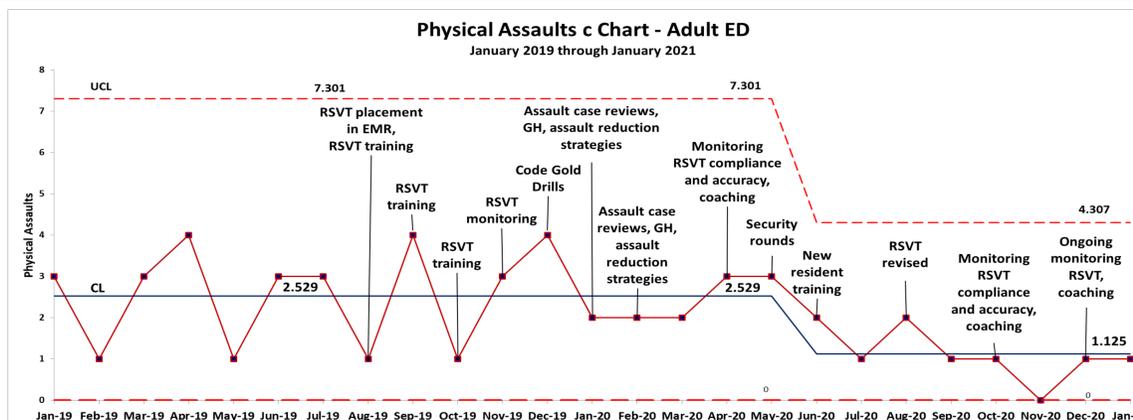
Plan-Do-Study-Act Framework



Socio-Ecological Framework



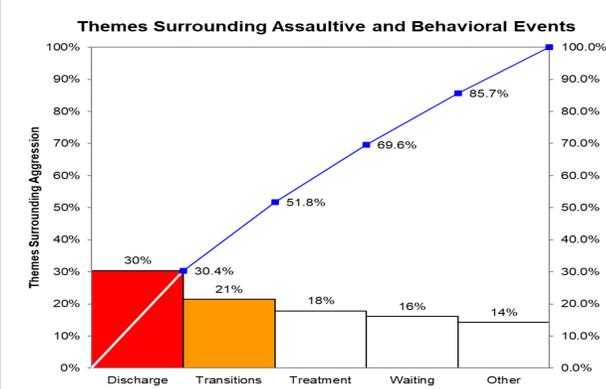
Results



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- Patient to staff physical assaults range decreased from 1 – 4 per month to 0 - 1 per month in the last 5 months of the project.
- Accuracy and compliance with risk for violence screening at triage of patients who were assaultive increased from 33% compliance and 0% accuracy to 94% compliance and 83% accuracy.
- Situational triggering event themes included: discharge (30%), waiting (16%), transition (21%), treatment (18%) and other (14%) emerged
- Pain levels of > 7 occurred in 62% of violent behaviors among adult patients

Situational Triggers



Conclusions

Risk for violence screening upon arrival, an alert system, and assault mitigation strategies reduce physical assaults and provide an opportunity for nurse leaders to promote ED workplace safety.