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**MedNet21**  
Center for Continuing Medical Education

 **THE OHIO STATE UNIVERSITY**  
WEXNER MEDICAL CENTER

## **Agenda**

- National Significance
- Best Practices in Action
- OSUWMC Efforts
- Conclusions

## National Issue

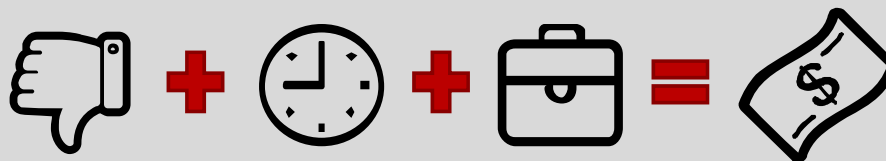
*Workplace Violence is Increasingly Prevalent in the Healthcare Industry*

- 80% of ED physicians and nurses report being victims of assault (NEJM)<sup>1</sup>
- Workplace violence is 4x more likely in healthcare settings (SIA/IAHSSF)<sup>2</sup>
- ~75% of workplace assaults occurred in healthcare and social service settings (OSHA)<sup>3</sup>
- Healthcare workers have a 20% higher chance of being a victim of workplace violence (NCVS)<sup>4</sup>
- The Joint Commission released a sentinel alert highlighting issue of increased workplace violence<sup>5</sup>



## What This Means for Your Hospital or Practice

*Workplace Violence Impacts More than Just Safety*



Higher levels of employee dissatisfaction and burnout

More time off work for employees

Higher turnover rate

**High costs to the health system**

## Legislation

### *U.S. Government Passed Legislation to Reduce Workplace Violence*

#### State Level<sup>3</sup>

- Regulations and penalties vary by state
- Examples:
  - **Washington – HB1931<sup>17</sup>** is legislation that requires hospitals to:
    - Have a committee to address workplace violence
    - Develop and implement a plan to address workplace violence
    - Provide violence prevention training
  - **Oregon – SB 823<sup>18</sup>** was passed by Oregon Senate in April to:
    - Make it illegal to retaliate against employees who report incidents of violence in good faith

## Legislation

### *U.S. Government Passed Legislation to Reduce Workplace Violence*

#### Federal Level<sup>4</sup>

- **H.R. 1309** - Passed in the house 11/21/2019
  - Healthcare employers must develop and implement a workplace violence program
  - *Latest Update: Received in the Senate and Read Twice and referred to the Committee on Health, Education, Labor, and Pensions*



## Hospital Workplace Safety

**Iahn Gonsenhauser, MD, MBA**  
*Chief Quality & Patient Safety Officer*  
*Assistant Professor – Clinical*  
*Division of Hospital Medicine*  
*The Ohio State University Wexner Medical Center*

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## Best Practices

*Roadmaps Exist to Mitigate Workplace Violence in Your Organization*

- Respected agencies and organizations have developed roadmaps and best practices to mitigate workplace violence in your organization



## Joint Commission Expectations

- The Joint commission does not currently have standards specific to workplace violence. However, several standards relate directly or indirectly to its prevention including:
  - A chapter in Environment of Care chapter of the Comprehensive Accreditation Manual for Hospitals (CAMH) requiring organizations to have processes for managing, evaluating, monitoring, analyzing and improving the safety and security of its environment
  - Clinical surveyors discuss workplace violence and other security-related issues during the building tour
  - Labeling workplace violence incidents as sentinel events



## Hospital Workplace Safety

**Michael Mandelkorn**  
*Director of Security*  
*The Ohio State University Wexner Medical Center*

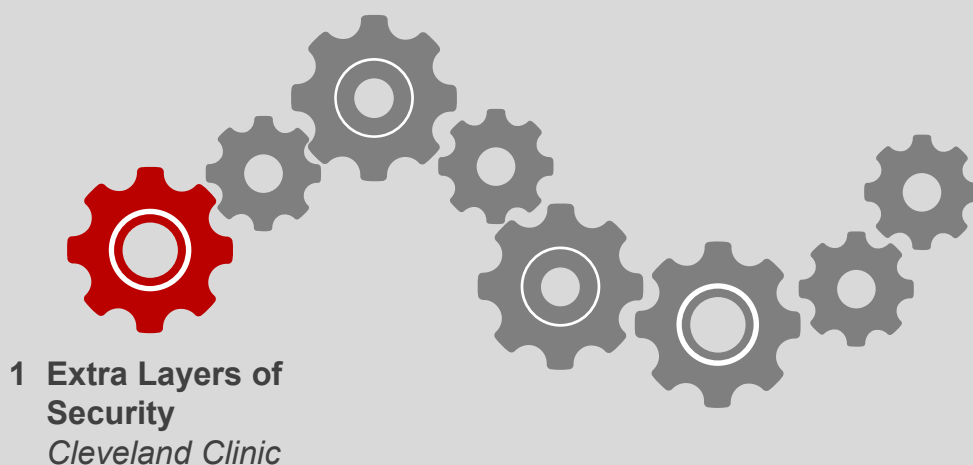
# Best Practices

*Roadmaps Exist to Mitigate Workplace Violence in Your Organization*



# Best Practices

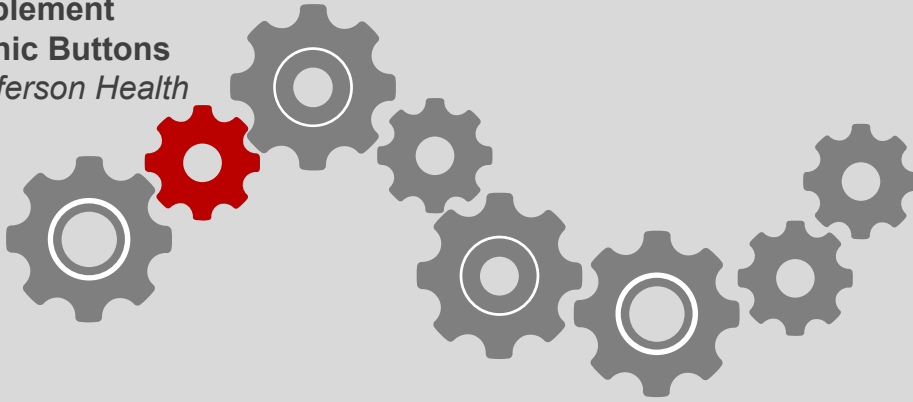
*Roadmaps Exist to Mitigate Workplace Violence in Your Organization*



## Best Practices

*Roadmaps Exist to Mitigate Workplace Violence in Your Organization*

- 2 Implement Panic Buttons**  
*Jefferson Health*



## Best Practices

*Roadmaps Exist to Mitigate Workplace Violence in Your Organization*

- 3 Threat Management Team**  
*University of Utah Medical Center*



## Best Practices

*Roadmaps Exist to Mitigate Workplace Violence in Your Organization*



## Best Practices

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## Best Practices

*Roadmaps Exist to Mitigate Workplace Violence in Your Organization*

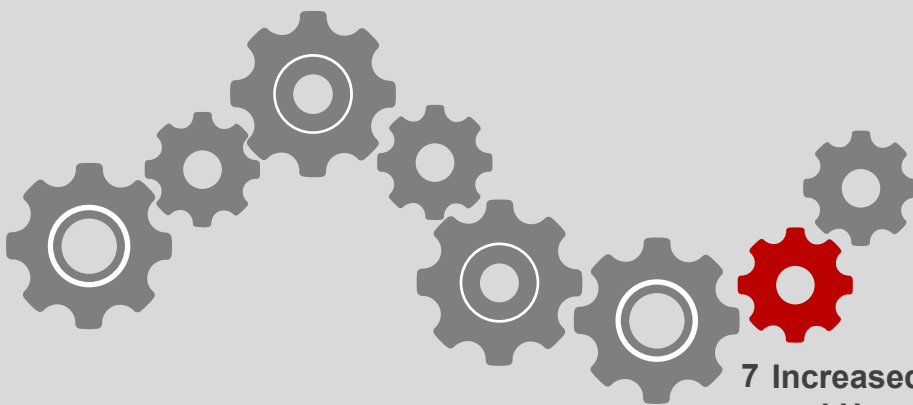


### 6 Training and Education

*Sanford Medical Center - Bismarck*

## Best Practices

*Roadmaps Exist to Mitigate Workplace Violence in Your Organization*



### 7 Increased Reporting and Use of Data

*Medical University of South Carolina & VCU Health System*

## Best Practices

*Roadmaps Exist to Mitigate Workplace Violence in Your Organization*



### 8 Signage and Environmental Assessment

*The Ohio State University Wexner Medical Center*



# OSUWMC Initiatives: Workplace Safety

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## Committee Structure



- Proactively addresses workplace safety initiatives and identifies tactics to ensure the safety and security of providers, staff and patients
- **Steering Committee:**
  - Consists of representatives from the highest level of leadership at OSUWMC
- **Work Group:**
  - Consists of representatives of multiple disciplines and care settings
- The Steering Committee and the Work Group work in tandem to accomplish Workplace Safety initiatives at The Ohio State University Wexner Medical Center

## Workplace Safety Assessment

- Oregon Association of Hospitals and Health Systems (OAHHS) developed a tool that is considered to be “best practice” when evaluating workplace safety

**The OAHHS analysis tool evaluates metrics in 9 key areas:**



- Results of the assessment guided the work of the committee throughout the year and has continued into 2020

## **The Ohio State University Wexner Medical Center: Established Workplace Safety Initiatives**

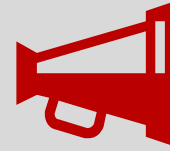
- Workplace Standards of Conduct policy (employee focused)
- Workplace safety CBL & video, departmental education, table-top exercises
- Security supervisors with tasers
- Crisis Assessment Team (CAT)
- Opioid contracts with patients
- Workplace civility group

## **Workplace Safety: Enhanced Practices**

- BERT team
- Disruptive Patient & Visitor Policy
- ID badge change
- Security changes
- Security officers body worn camera
- Patient Rights & Responsibilities
- Signage
- Faculty/Staff resource tool
- Visitor management assessment

# Signage

- “Our goal is to provide you with an exceptional healthcare experience. We will do our part. We need you to do your part. Please show respect to our staff. Threatening behavior will not be tolerated. Violent Behavior toward a healthcare worker or hospital security is considered a crime under Ohio law. ORC 2903.13.”
- Signage displayed in the emergency departments and in Medical Center lobby locations



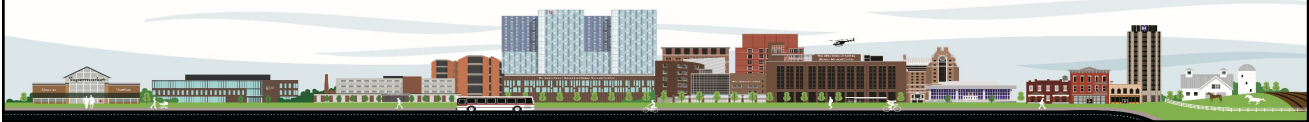
# Patient Rights & Responsibilities

*Be considerate to all members of the healthcare team, fellow patients, and visitors. Be thoughtful about your language, behavior, and conduct. Abusive or disrespectful behavior which threatens OSUWMC’s culture of safety could result in removal from the facility, dismissal from OSUWMC providers, a referral to OSUWMC security, and/or a referral to law enforcement.*

**Patient Rights and Responsibilities**

*I acknowledge that I have been offered a copy of the Patient Rights and Responsibilities and I agree to abide by the terms outlined in the Patient Rights and Responsibilities*

**General Consent**



# Faculty / Staff Resource Tool

## WORKPLACE SAFETY

Promoting a culture of safety and well-being for our faculty, staff, students, patients and visitors is a top priority for the Wexner Medical Center and a responsibility we all share.

### BEHAVIORS

The **ideal state** is focused around the **Buskirk Spirit**. As a diverse, talented team, we can make a difference when we're at our best. And that all begins with values and our culture-based, Buskirk Spirit.

Violent behaviors occur on a continuum from verbal abuse (threats to physical violence). Violent behaviors that might affect the hospital or that occur on hospital property will not be tolerated by Wexner Medical Center employees and staff contact and temporary employees, patients, visitors and volunteers.

### DE-ESCALATION STRATEGIES

- Stay calm
- Active listen
- Validate understanding
- Be respectful
- Be consistent
- Settle's solution
- Enforce limits
- Provide options
- Keep yourself safe

### CONTACTS

#### SECURITY

614-293-8500  
Off site, dial 9-1-1

#### BEHAVIORAL EMERGENCY RESPONSE TEAM

Available 24/7/365  
614-293-3034  
Pager: 614-303-4108 (please page first)  
Cisco: 614-293-9285

	DISRUPTIVE	THREATENING	AGGRESSIVE/VIOLENT
BEHAVIORS	<b>GENERAL</b> <ul style="list-style-type: none"> <li>Crude jokes</li> <li>Cultural bias</li> <li>Gossip / Rumors</li> <li>Insultive Actions</li> <li>Intentional Slights</li> <li>Rude Comments</li> </ul>	<b>VERBAL</b> <ul style="list-style-type: none"> <li>Blaming</li> <li>Disputed Priority</li> <li>Discriminatory Remarks</li> <li>Humiliation</li> <li>Yelling</li> </ul>	<b>PHYSICAL</b> <ul style="list-style-type: none"> <li>Abuse</li> <li>Harassment</li> <li>Inappropriate touching</li> <li>Intimidatory gestures</li> <li>Stalking</li> <li>Throwing objects</li> <li>Violent outbursts</li> </ul>
DE-ESCALATION	<ul style="list-style-type: none"> <li>Manage behavior</li> <li>Manage stressors</li> <li>Set expectations</li> <li>Offer resiliency resources</li> <li>De-escalation strategies</li> </ul>	<ul style="list-style-type: none"> <li>Mindful posture</li> <li>Provide direction and structure</li> <li>Set limits objectively</li> <li>Allow space</li> </ul>	<ul style="list-style-type: none"> <li>Request assistance</li> <li>Notify security – 88500</li> <li>Create distance</li> <li>Open path of egress</li> </ul>
PROHIBITS	<b>STATE</b> "Behavior is Unacceptable" <b>NOTIFY</b> Supervisor <ul style="list-style-type: none"> <li>Intervene at earliest sign of agitation</li> <li>State that behavior is not acceptable</li> </ul>	<b>ATTEMPT</b> To de-escalate/obtain assistance <b>NOTIFY</b> Supervisor/security/activate BERT <ul style="list-style-type: none"> <li>Be present/able, attempt to de-escalate, explain that behavior is not acceptable</li> <li>Notify security if intimidation, threats or disc intimidation remarks occur</li> <li>Notify direct supervisor and/or physician/provider</li> <li>Security may feel defer to home the area and revoke visitation privilege</li> <li>For patients, consult provider for relative of patient order if unable to de-escalate</li> </ul>	<b>REMOVE</b> Self/others <b>NOTIFY</b> Security <ul style="list-style-type: none"> <li>Call for help from co-workers</li> <li>Call security (88500)</li> <li>Self should remove themselves and others from immediate environment</li> <li>Evacuate to local police (911) at the discretion of the employee</li> <li>Send to ED/ER if injured</li> </ul>
NOTIFY	<ul style="list-style-type: none"> <li>Direct supervisor</li> </ul>	<ul style="list-style-type: none"> <li>Direct supervisor or ANS</li> <li>Director</li> <li>Security</li> </ul>	<ul style="list-style-type: none"> <li>Notify security manager, ANS, ADC, risk management, physician, critical events officer, Campus Police</li> </ul>
DOCUMENT	<ul style="list-style-type: none"> <li>Documentation in a note in HRIS</li> </ul>	<ul style="list-style-type: none"> <li>Documentation in a note in HRIS</li> <li>Report via IRIS if potential for patient harm</li> </ul>	<ul style="list-style-type: none"> <li>HRIS note</li> <li>Flag in HRIS</li> <li>Report via IRIS if potential for patient harm</li> </ul>
BENEFIT	<ul style="list-style-type: none"> <li>Offer impacted employees resources for psychological support</li> </ul>	<ul style="list-style-type: none"> <li>Formal debrief with the manager and others (as needed)</li> <li>Offer employee resources for psychological support</li> </ul>	<ul style="list-style-type: none"> <li>Immediate debrief with employee, employee involved, ADC, Critical Event Officer, security risk management and physician, offer psychological support resources and opportunity to file a police report, quality review</li> </ul>



## Current Initiatives



Evaluate, prioritize and implement recommendations for Visitor Management provided by consultant group



Evaluation of visitor management system vendors



Establish process for reporting, documentation and support for staff after an incident occurs



Developed weapon screening process at Emergency Department Ambulance Entrance



Enhanced Ohio State University Police Department presence in EDs



## Concluding Thoughts

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## Sources

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1. American Hospital Association. *Cost of community violence to hospitals and health systems, July 26, 2017*. Accessed February 5, 2020.
2. Liu W, Zhao S, Shi L, et al. Workplace violence, job satisfaction, burnout, perceived organizational support and their effects on turnover intention among Chinese nurses in tertiary hospitals: a cross-sectional study. *BMJ Open* 2018;8:e019525. doi:10.1136/bmjopen-2017-019525
3. Nursing World. <https://www.nursingworld.org/practice-policy/advocacy/state/workplace-violence2/>
4. <https://www.congress.gov/bills/116th-congress/house-bill/1309>
5. Cleveland source <https://www.congress.gov/congressional-report/116th-congress/house-report/296/1> Accessed September 2, 2020
6. Scripps Hospital San Diego source <https://www.advisory.com/daily-briefing/2019/12/09/workplace-violence>
7. Jefferson Health source <https://www.beckershospitalreview.com/quality/how-jefferson-health-is-promoting-nurse-safety-with-a-new-alert-system.html> Accessed September 2, 2020
8. University of Utah. <https://regulations.utah.edu/general/1-004.php> Accessed September 2, 2020
9. North Memorial Healthcare source <https://northmemorial.com/wp-content/uploads/2017/03/north-memorial-health-required-learning-2017.pdf> Accessed September 2, 2020
10. Memorial Hospital and Healthcare Center source. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6048890/> Accessed September 2, 2020
11. Medical University of South Carolina source. <https://web.musc.edu/about/news-center/2019/07/22/hospital-safe-zones-workplace-violence-initiative> Accessed September 2, 2020
12. Sanford Medical Center- Bismarck [https://www.sanfordhealth.org/-/media/org/files/careers/radiologic-technology-program/crime\\_awareness\\_and\\_campus\\_security.pdf?la=en&hash=4E87B3483AC34F2430FF1DF136BC9387A0C226F](https://www.sanfordhealth.org/-/media/org/files/careers/radiologic-technology-program/crime_awareness_and_campus_security.pdf?la=en&hash=4E87B3483AC34F2430FF1DF136BC9387A0C226F) Accessed September 2, 2020
13. Parkview Health source <https://www.pressganey.com/blog/how-parkview-behavioral-health-reduced-workplace-violence> Accessed September 2, 2020
14. VCU Health source <https://www.healthleadersmedia.com/clinical-care/reduce-your-workplace-violence-initiatives-vcu-health> Accessed September 2, 2020
15. Advisory Board. The Joint Commission just proposed 7 steps for hospitals to prevent workplace violence. Here's our take, April 27, 2018. Accessed February 5, 2020.
16. Becker's Hospital Review. Healthcare's epidemic of workplace violence: 5 top safety challenges and 6 best practices to minimize harm, January 3, 2020. Accessed February 5, 2020.
17. Washington State Hospital Association. Workplace Violence Prevention: <https://www.wsha.org/quality-safety/projects/worker-safety/#:~:text=in%202019%2C%20Washington's%20legislature%20enacted,The%20law%20requires%20hospitals%20to%3A&text=Provide%20violence%20prevention%20training>. Accessed September 2, 2020
18. ENA50. Oregon Enacts Workplace Violence Bill. <https://www.ena.org/press-room/2019/06/06/oregon-approves-workplace-violence-bill#:~:text=The%20bill%2C%20SB%20823%2C%20previously,23%2D4%20vote%20in%20April.&text=The%20bill%20will%20also%20make,the%20Oregon%20ENA%20State%20Council>. Accessed September 2, 2020
19. Joint Commission. Standards Related Information. <https://www.jointcommission.org/resources/patient-safety-topics/workplace-violence-prevention/standards-related-information/> Accessed September 2, 2020

