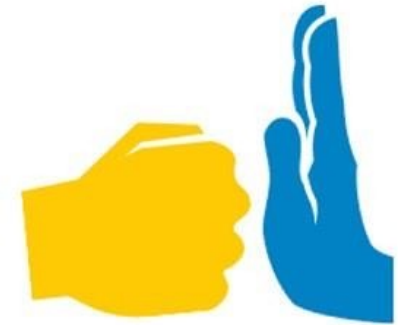




Why this topic?

Violence Prevention in Health Care Facilities Act 2006

- Violence is a major problem in health care facilities nationwide and this led to the passage of the Violence Prevention in Health Care Facilities Act 2006.
- Requires health care facilities to establish Violence Prevention Programs
- Requires facilities to have a Violence Prevention Committee to oversee programs and reduce assaults on health care workers. These type of assaults affect colleagues, patients, families, and visitors.



- Requires staff training to identify and manage violent behavior.

Risk Factors for Aggression

- Young males
- History of Violence
- Substance use and social isolation
- Major psychiatric disorders
- Personality disorders

- Low socio-economic status
- Medication non-compliance
- Inadequate pain relief

Precipitant of Aggressive Behavior

- Patient-staff communication



- Background, beliefs, values and principles
- Socio-cultural issues
- Mental illness
- Physical illness
- Prolonged waiting
- Cognitive deficits
- Other impairments (Traumatic Brain Injury)

Causes of Aggressive Behavior

- Feelings of threat
- Survival instinct
- Loss of Control
- Loss of power
- Unmet needs and goals
- Fear of the unknown





Causes of Aggressive Behavior in Clinical/Unit

- Invasion of personal space
- Inflexible rules and policies
- Lack of clinical and crises management skills
- Inability to identify cues and pre-cursors to aggression

Aggressive Behavior

Verbal Agitation

- Loud pressured speech • Threats
 - Imaginary, vague or targeted
- Intrusive behavior or speech

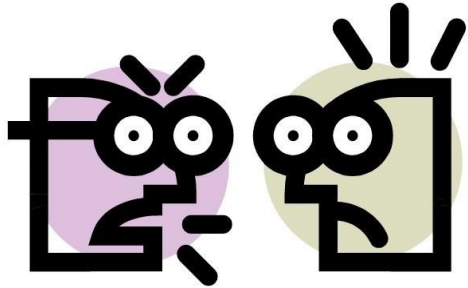
- Excessive demand for attention
- Numerous complaints

Motor Agitation

- Clenching or pounding of fists
- Pacing
- Inability to sit still



- Generalized tensing of muscles



Therapeutic Interventions

- Assess own feelings, attitude, beliefs, and biases
- Visualize from patient's perspective
- Utilize "non-defensive" posture
- Refrain from taking abusive statements **personal or becoming defensive**
- NO abuse, ridicule or sarcasm
- **LISTEN**
- Speak in low, quiet but firm voice in simple requests
- Apologize – avoid power struggle
 - “I am sorry you are feeling this way.”
- Offer alternatives



- Offer clear, consistent and enforceable limits on behavior; **NOT** feelings
- Keep hands open and visible
- No threats
- Do not challenge patients or call actions bluff
- Offer support – “How can I help you?”

De-Escalation and Special Population

Intoxicated, Impaired or on Drugs

- Do not approach patient alone



- Keep safe distance, monitor patient
- Be respectful
- Be direct, concrete and supportive
- Do not argue or rush
- Avoid sudden movements
- Do not lie to patient
- Offer food or drink



De-Escalation and Special Populations (cont'd)

Older Adults

- Be respectful
- Listen



- Give clear, short and straightforward instructions
- Be patient – he/she may be frightened or confused
- Provide something to occupy their mind – magazine, writing, a drink or snack
- Gentle touch or holding of hand

Adult

- Do not invade personal space

- Listen, Listen and Listen
- No threats
- Be firm yet respectful
- Be patient and honest
- Offer coping skills and strategies





De-Escalation and Special Populations (cont'd)

Frightened Patient

- Be firm and confident
- Explain actions before doing anything
- Speak clearly behavior
- Avoid threats•
- No
- Provide

Intimidating Patient

- Be clear, direct and firm
- Communicate consequences of
- No condescending or sarcastic
- surprises language
- choices but maintain firmness





Features of Verbal Interventions

- **Empathy** – show that you have listened and understand how the patient feels
- **Respect** – because patient is a human being and all human beings deserve respect
- **Genuineness** – respond in a non-institutionalized or stereotypical professional manner
- **Concreteness** – no vagueness. Convey behaviors and consequences clearly
- **Ventilation** – encourage patient to get it off his chest



Features of Verbal Interventions (cont'd)

- **Listen, Listen and Listen!**
- **Encouragement** – help counteract the sense of helplessness and hopelessness
- **Reassurance** – anxiety is not unusual and many people experience it
- **Show care and concern** – go the extra mile
- **Provide choices**
- **Set limits** – state clearly the boundaries of behavior allowed and consequences of going over limit

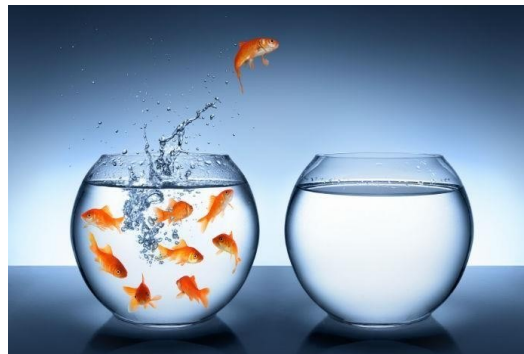


Escape Techniques

Try:

Problems you may face:

- Chokehold
- Hair pull and stethoscopes
- Punches
- Bites
- Same hand grab
- Opposite hand grab-coffee pour
- 2 hand on one hand grab
- 2 hand on 2 hand grab



Thank You