2022

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Sept. 19–21, 2022

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UNIVERSITY OF MICHIGAN HEALTH
MICHIGAN MEDICINE

AtlantiCare

Main Line Health®

Implementing a Comprehensive Workplace Violence Prevention Program

Panel presenters

AtlantiCare, Atlantic City, NJ

Daren J. Dooley, MS, Corporate Director of Security
Susan Battaglia, MBA, BSN, RN, AVP, Nursing

Main Line Health, Radnor, PA

Nelly Perez-Melendez, MS, NREMT, Public Safety Support Specialist
Regina Reilly, MSN, RN, Clinical Nurse Educator Behavioral Health

University of Michigan Health, Ann Arbor, MI

Nasuh Malas, MD, MPH, Director, Pediatric Consult-Liaison Psychiatry,
Child and Adolescent Psychiatry Service Chief
Susan Burgess, MSN, APRN, AGCNS-BC
Psychiatric Behavioral Consultation Liaison Advanced Practice Nurse

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Learning Objectives

- Describe components of an effective health care violence prevention program.
- Discuss strategies that can be adopted to prevent and respond to workplace violence.

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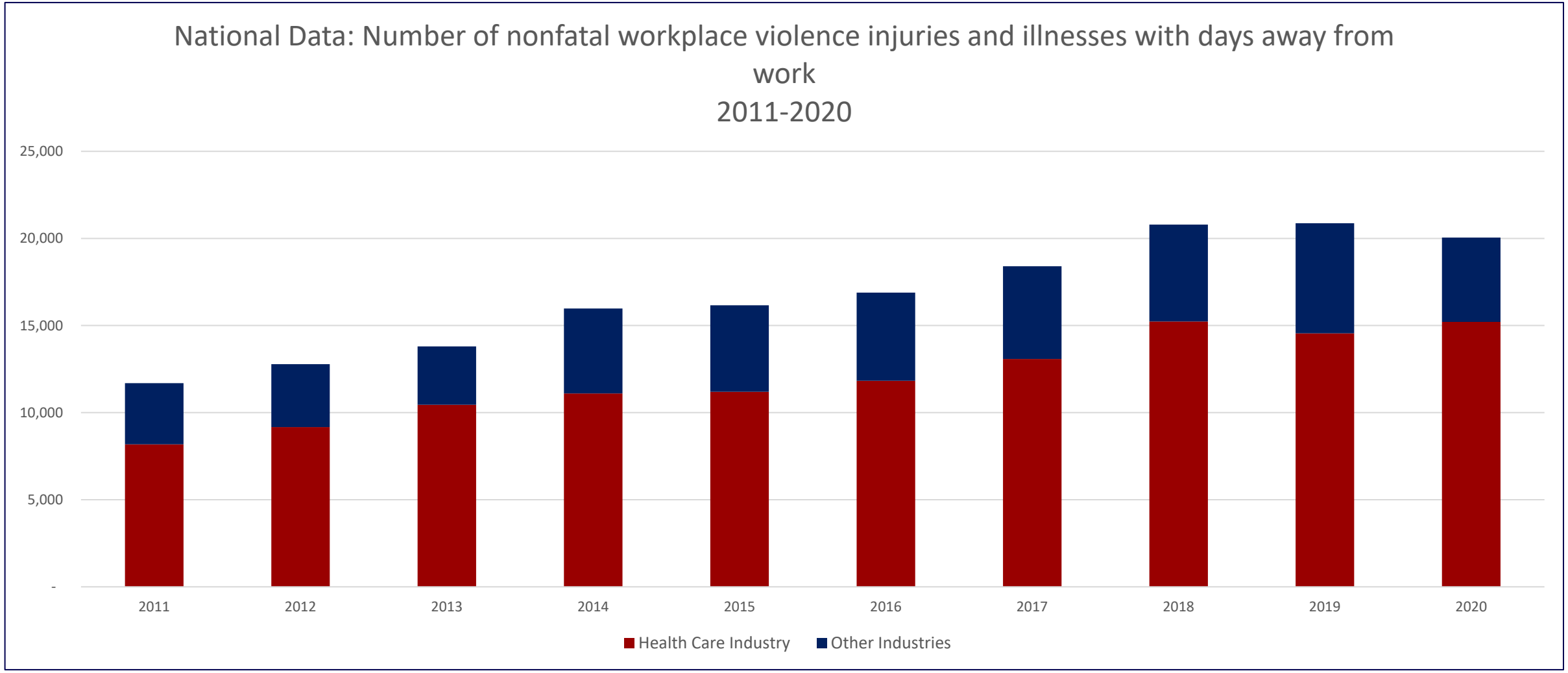
National Data: Number of non-fatal workplace violence injuries and illnesses with days away from work



Defining Workplace Violence

Threatening, disruptive or dangerous behavior impacting persons in the workplace that can include any of the following: verbal, nonverbal, written, or physical aggression; threatening, intimidating, harassing, or humiliating words or actions; bullying; sabotage; sexual or gender-based misconduct; physical assaults; or other behaviors of concern involving faculty, staff, learners, patients, or visitors – University of Michigan

The National Institute for Occupational Safety and Health (NIOSH) Sources of Workplace Violence in Healthcare:

- **Type 1**: Criminal Intent
- **Type 2**: Customer/Client (Patients/Families/Visitors)
- **Type 3**: Worker-on-worker
- **Type 4**: Personal Relationship (Domestic Violence)

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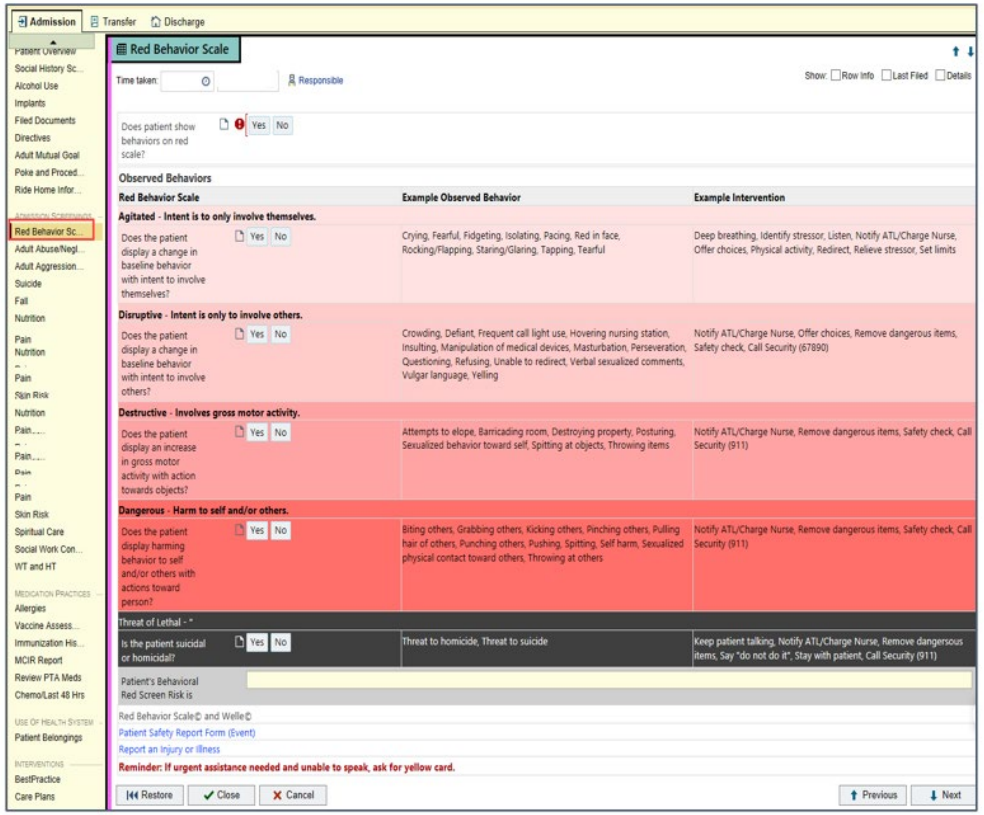
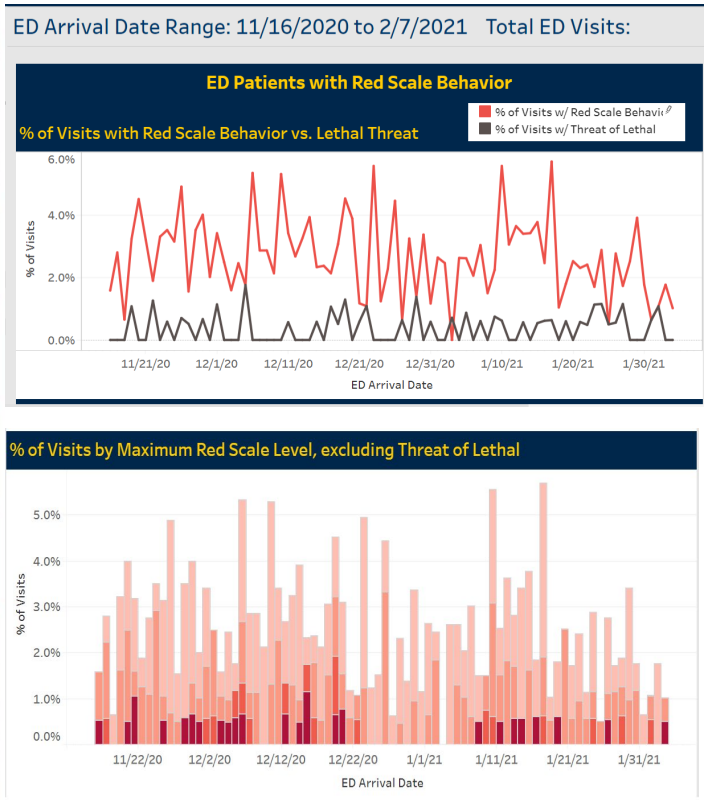
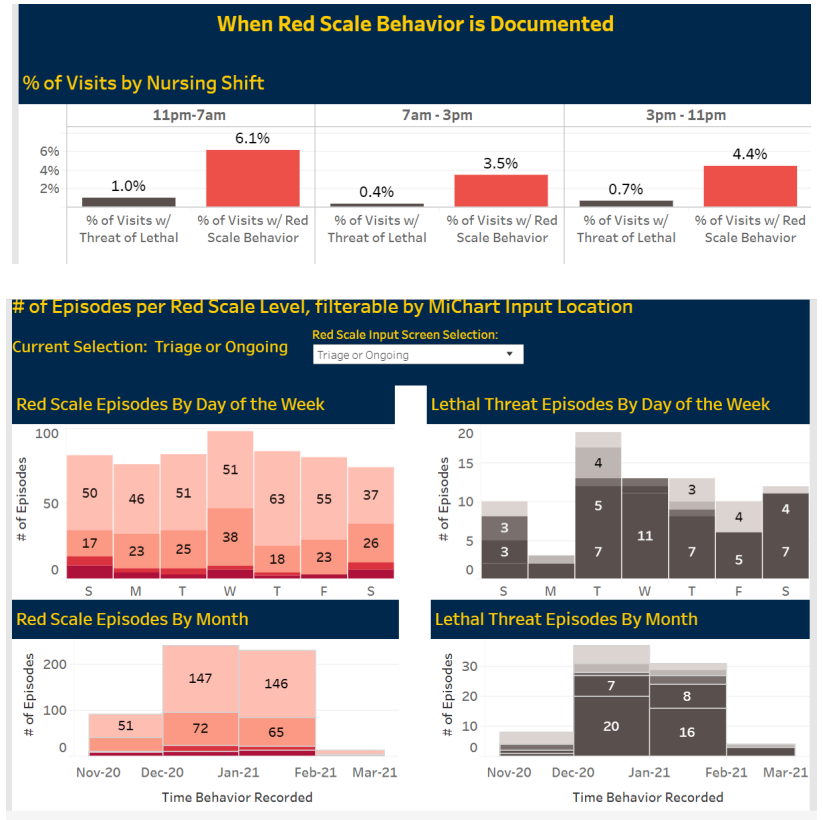
Can the Electronic Medical Record Help Prevent Workplace Violence?







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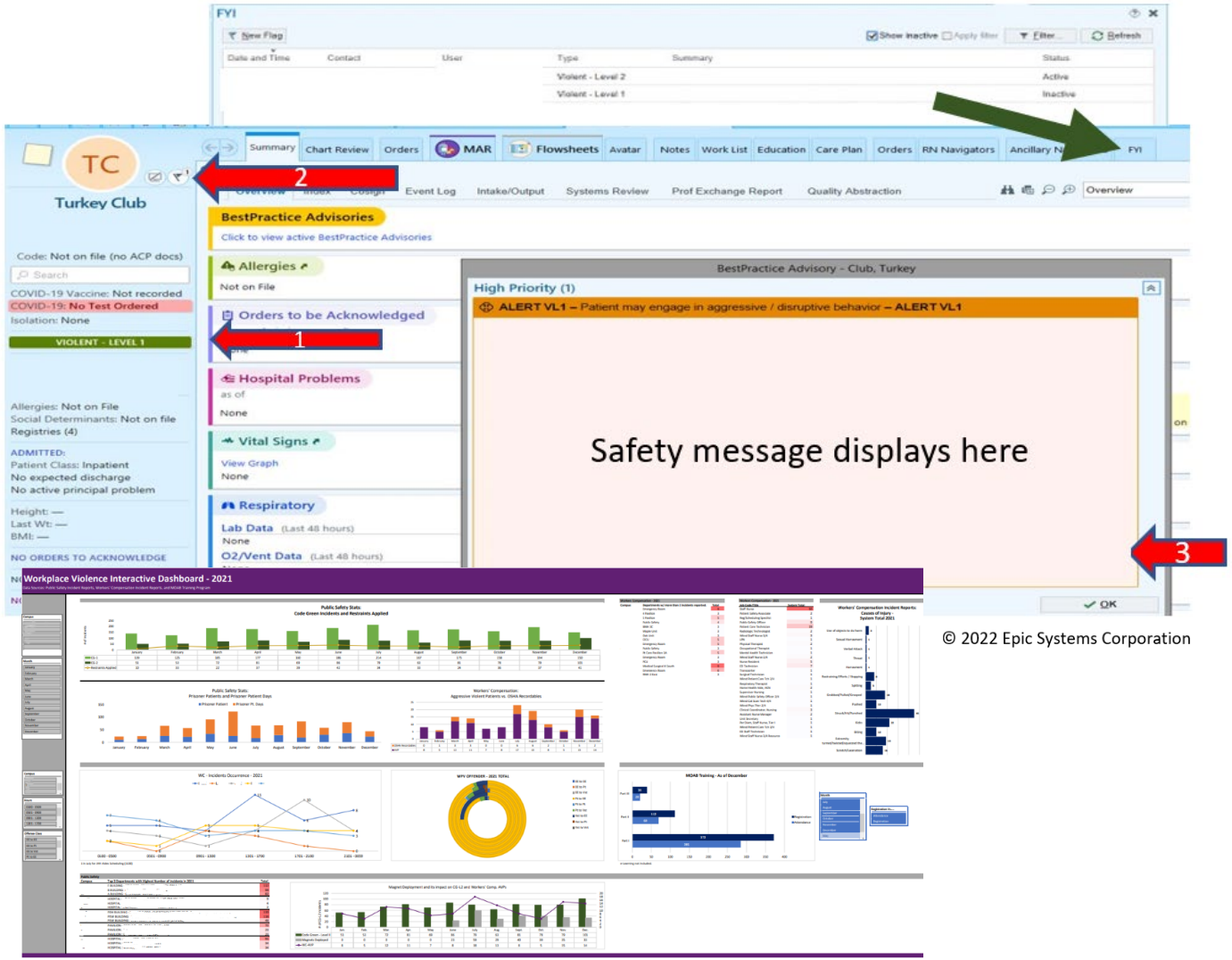
Implementing a Comprehensive Workplace Violence Prevention Program at Main Line Health



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AtlantiCare Workplace Violence Prevention Program

INPUTS

- State and Federal Legislation
- Regulatory Agencies
- Workplace Violence Risk Assessments
- Employee surveys
- Community Threat Assessments
- WPV incidents

PROGRAM STRUCTURE

- Leadership and Governance
- Safety Culture
- Employee Engagement
- Violence Prevention Committee
- Environmental Design
- Community Partnerships
- Reporting structures
- Employee Support

PRACTICE

- Communication
- Risk Mitigation
- Education and Training
- Reporting
- Employee Support
- Behavioral Emergency Response Team

MONITORING & REPORTING

- Data Analysis
- Reporting
- Improvement Actions
- Annual Program Assessment

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Panel Discussion

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Lessons Learned

- Establish fundamental framework to conceptualize and communicate about workplace violence.
- Value of interprofessional core team with regular cadence of meetings for continuous process improvement.
- EMR build takes time and resources → impacts policy process and education development.
- System standardization and using our current response workflows.
- Staff engagement from all levels within the organization that includes active listening.
- Increase awareness of staff perception of safety.
- Validate your program from internal and external perspectives (work site analysis).

Key Takeaways

- Build a group of champions
- Need to review the evidence
- Develop a way to conceptualize violence with a common language
- Measure and trend violence that informs interventions including prevention
- Universal and strategic targeted interventions supported by education and training
- Regular engagement from all stakeholders
- Remove barriers to reporting events

Questions?

Contact:

Susan Battaglia, MBA, BSN, RN, AVP susan.battaglia@atlanticare.org

Daren J. Dooley, MS daren.dooley@atlanticare.org

Susan Burgess, MSN, APRN, AGCNS-BC sgmullin@med.umich.edu

Nasuh Malas, MD, MPH nmalas@med.umich.edu

Nelly Perez-Melendez, MS, NREMT melendezn@mlhs.org

Regina Reilly, MSN, RN reillyre@mlhs.org