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Leveraging the Electronic Health Record To Identify Workplace Violence

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Denver Health Hospital Authority

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Learning Objectives



- Describe the steps to develop and implement EHR documentation for workplace violence.
- Explain how workplace violence reporting in the EHR improves reporting culture.



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Denver Health at-a-glance

1 IN 2
DENVER BABIES
BORN AT
DENVER HEALTH



98%
MAJOR TRAUMA
SURVIVAL RATE



MORE THAN
130
MEDICAL
SPECIALITIES



Denver Health Paramedics answered nearly

133,000

911 CALLS FOR
EMERGENCY MEDICAL SERVICES



19
SCHOOL-BASED
HEALTH CENTERS



10 COMMUNITY
HEALTH CENTERS



88,000
BEHAVIORAL
HEALTH PATIENTS



1.4 MILLION
PATIENT VISITS



REV 2/25

Background

- Workplace violence (WPV) is rising nationwide (AHA, 2024)
- 44% of nurses report physical violence (ANA, 2022)
- 68% of nurses report verbal abuse in 6 months (ANA, 2022)
- 50-80% of violence is underreported or not reported (OSHA, 2023)
- Every hour, two nurses are assaulted in the U.S. (BLS, 2023)
- Healthcare workers are 5x more likely to experience violence than other sectors (OSHA, 2023)



confusion

quitting

patient

hopelessness

anger

violence

fear protect workplace

Quality Improvement Project



- Remove barriers to reporting in the inpatient setting
- Integrate reporting into the electronic health record
- Focus on seamless health record integration
- Real time data collection
- Nurse Managers dashboard
- WPV prevention reporting through EHR leverages technology, and eases administrative workload, while creating data driven decision making

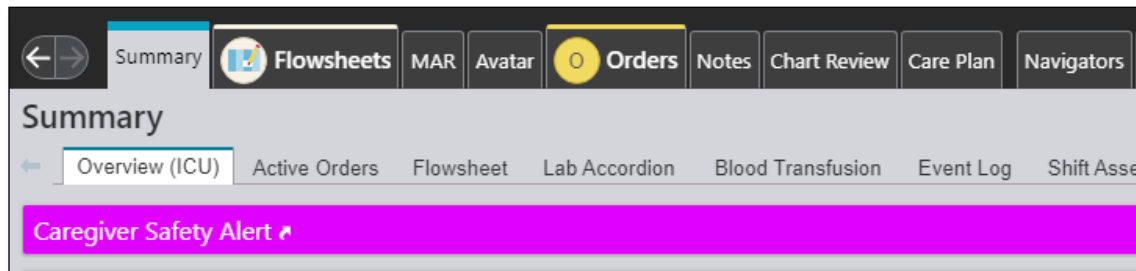
Flowsheet Added to EHR



- Encounter specific
- Documentation by CNA, RN, RT
- 1 click!

Psychosocial
Psychosocial (WDL)
Patient Mood
Patient behavior toward staff
Needs Expressed
Psychosocial Additional Assessments
Family Behaviors
Visitor Behaviors

Physically aggressive during current hospitalization
Sexually aggressive during current hospitalization
Verbally aggressive during current hospitalization
Verbal threat during current hospitalization



- **Physical** - Contact with another person (e.g., pushing), contact with bodily fluids (e.g., being spat upon), and contact with objects (e.g., being struck by a thrown object). Reference: NDNQI.
- **Sexual** – Nonconsensual contact or fondling, including touch of an individual’s sexual organs, forced kissing, attempted rape, etc. Reference: The Joint Commission.
- **Verbal** – Abusive, intimidating, or harassing language including hate speech. Reference: Adapted from NDNQI.
- **Threats** – A statement of an intention to inflict pain, injury, damage, or other hostile actions on someone in retribution for something done or not done. Reference: Adapted from NDNQI.

Role-based Customized Reporting

Bedside staff

05/28/25 1934	Physically aggressive during current hospitalization	—
Patient behavior toward staff: Punched CNA in mouth at 05/28/25 1934		
05/28/25 1800	Physically aggressive during current hospitalization	—
Patient behavior toward staff: When putting the patient back to bed, patient punched this CNA in the chest . at 05/28/25		
05/26/25 0628	Physically aggressive during current hospitalization	—
Patient behavior toward staff: punched CNA in chest when trying to change wet bed and also threw wet brief at the sitter		

Local Nurse Leaders

Caregiver Safety Alert- Last 24 Hours Login Dept

1 # Patients w/ Safety Alert

Department	# of Pts
DH PAV A 5A OASIS	1

Executive Nurse Leaders

Caregiver Safety Alert

3 # of Patients w/Safety Alert Last 24 Hours

Department	# Unique Patients
PAV A 7A	1
PAV B 3B	1
PAVA 5 OASIS	1

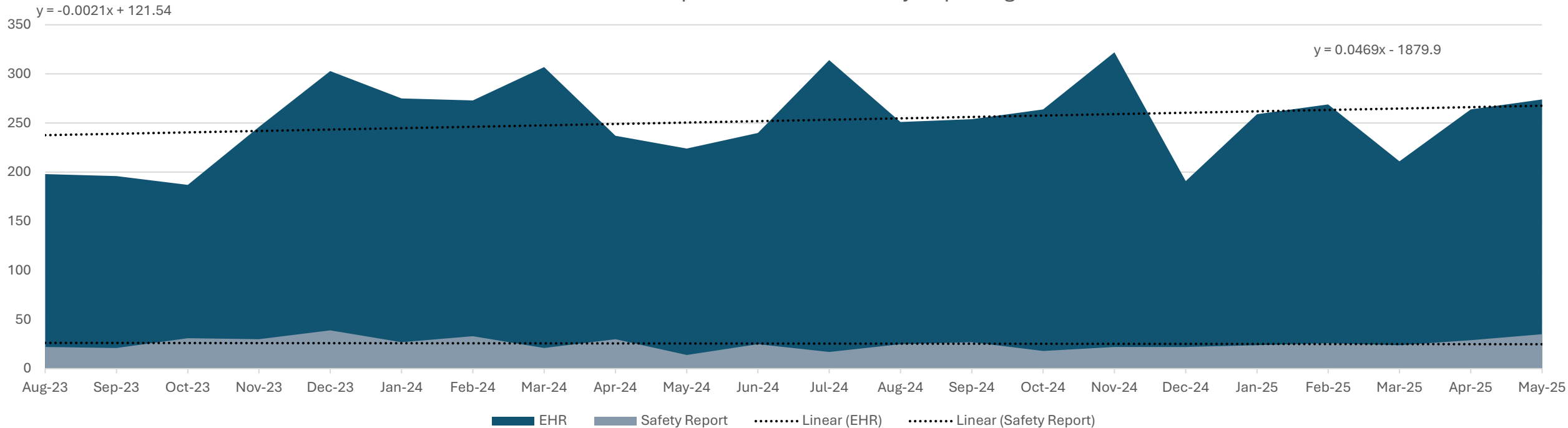
	#Unique Pts	#Events
Grand Total	3	22
PAV A 7A	1	4
Patient Name MRN # Caregiver Safety Alerts this Encounter		
		4
PAV B 3B	1	2
Patient Name MRN # Caregiver Safety Alerts this Encounter		
		2
PAVA 5 OASIS	1	16
Patient Name MRN # Caregiver Safety Alerts this Encounter		
		16

Outcomes



- More likely to report violence in EHR
- Almost 10-fold increase in the number of WPV events recorded (n=5560) when compared to incident reporting (n= 590)
- Sustained over 1.5 years

Events Reported in EHR vs Safety Reporting



Post-Interventions Taken Based on EHR Data



Improved organizational alignment



Implemented De-escalation Agitation Response Team (DART)



Streamlined Safety Reporting system



Standardized dome light usage

DART Note

Peri-Op Procedural area

Initiated by

- Charge RN Staff RN
- Provider Team CNA/HCT
- PSCA Administrative/Clerical
- Other

Reason for DART Response

- Physical Assault/Aggression
- Sexual Assault/Aggression
- Verbal Assault/Aggression
- Threatening Gestures
- Other (see details)

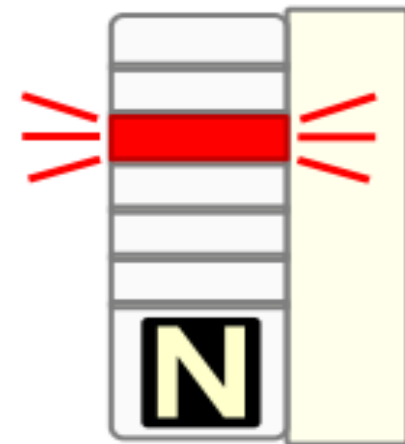
Reason for DART Response (Detail)

Responders Present

- DART Responder(s) Security
- Primary RN Charge RN
- Provider Other (Comment)

Behavioral Actions

- Pushed
- Slapped
- Punched
- Kicked



Integrated Visualization Across the System



Safety Awareness Report

- Combines all existing violence-related documentation in 1 place
- Flowsheets, Letters, Notes, FYI Flags
- Displays for all staff with access to EHR

The screenshot displays a 'SAFETY AWARENESS REPORT' interface. On the left is a patient information sidebar, and the main area shows various safety-related data points.

SAFETY AWARENESS REPORT

FYI Flags

Flag Type	Author	Status	Filed	Expires On
History of Hostility - Verbal Patient was verbally threatening staff	Project Team Inpatient, MD	Active	6/26/2025 2:32 PM	N/A

DART Notes (Past 90 Days)

6/26/2025 2:16 PM [Epic Foundation Nurse, RN] DART Note

Administrative Discharge Notes (Past 90 Days)

6/26/2025 2:35 PM Administrative Discharge

Caregiver Safety Alert: Current Encounter (since admission)

Date/Time	Patient behavior toward staff	Family Behaviors	Visitor Behaviors
07/08/25 0900	Physically aggressive during current hospitalization	—	—
06/26/25 1300	Physically aggressive during current hospitalization; Verbally aggressive during current hospitalization	Aggressive	Aggressive

Caregiver Safety Alert: Last Documentation from Previous Encounter

Flowsheet Row Admission (Current) from 4/23/2025 in Surgical Intensive Care Unit (SICU) with Mark B Reid, MD

Patient behavior toward staff	Family Behaviors	Visitor Behaviors
Physically aggressive during current hospitalization	Aggressive	Aggressive

Letters from 7/9/2022 to 7/8/2025

Letter On	Letter From	Letter Template	Reason for Letter	Letter Status
6/26/2025	DH NURSE, ALL	DH IP BEHAVIORAL AGREEMENT	Behavior Agreement	Sent

[Click here to view Letters in Chart Review written more than 3 years ago](#)

Educational Links

- [PolicyStat Home](#)
- [Workplace Safety - Home](#)

Lessons Learned



- Seeing accurate numbers is hard. Be ready to be vulnerable.
- Keep the documentation simple to increase likelihood of staff reporting.
- Need to balance the convenience of quick documentation while still encouraging reporting in Safety Incident software.
- Must have an institutional plan on how to handle violent patients.
- Be prepared to address concerns about bias/labeling patients.

Key Takeaways



- Accurate information guides transformation
- Staff is busy, reporting must be simplified
- Violence is not part of the job
- Transparency is not labeling

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Questions?

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