

# Workplace Violence Conference

## August 14, 2019

# Sentinel Event Alert

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## Physical and verbal violence against health care workers

"I've been bitten, kicked, punched, pushed, pinched, shoved, scratched, and spat upon," says Lisa Tenney, RN, of the Maryland Emergency Nurses Association. "I have been bullied and called very ugly names. I've had my life, the life of my unborn child, and of my other family members threatened, requiring security escort to my car."<sup>1</sup>

Situations such as these describe some of the types of violence directed toward health care workers. Workplace violence is not merely the heinous, violent events that make the news; it is also the everyday occurrences, such as verbal abuse, that are often overlooked. While this *Sentinel Event Alert* focuses on physical and verbal violence, there is a whole spectrum of overlapping behaviors that undermine a culture of safety, addressed in *Sentinel Event Alert* issues 40 and 57;<sup>2,3</sup> those types of behaviors will not be addressed in this alert. The focus of this alert is to help your organization recognize and acknowledge workplace violence directed against health care workers from patients and visitors, better prepare staff to handle violence, and more effectively address the aftermath.

Published for Joint Commission accredited organizations and interested health care professionals, *Sentinel Event Alert* identifies specific types of sentinel and adverse events and high risk conditions, describes their common underlying causes, and recommends steps to reduce risk and prevent future occurrences.

Accredited organizations should consider information in a *Sentinel Event Alert* when designing or redesigning processes and consider implementing relevant suggestions contained in the alert or reasonable alternatives.

# Massachusetts nurse stabbed by former patient urges hospital safety changes

Megan Knowles - Friday, January 18th, 2019

A nurse stabbed 11 times by a former patient at a Southbridge, Mass., hospital has travelled across the U.S. to speak before hospital CEOs and CNOs, demanding action on improving hospital safety, ABC-affiliate TV station *WCVB* reports.

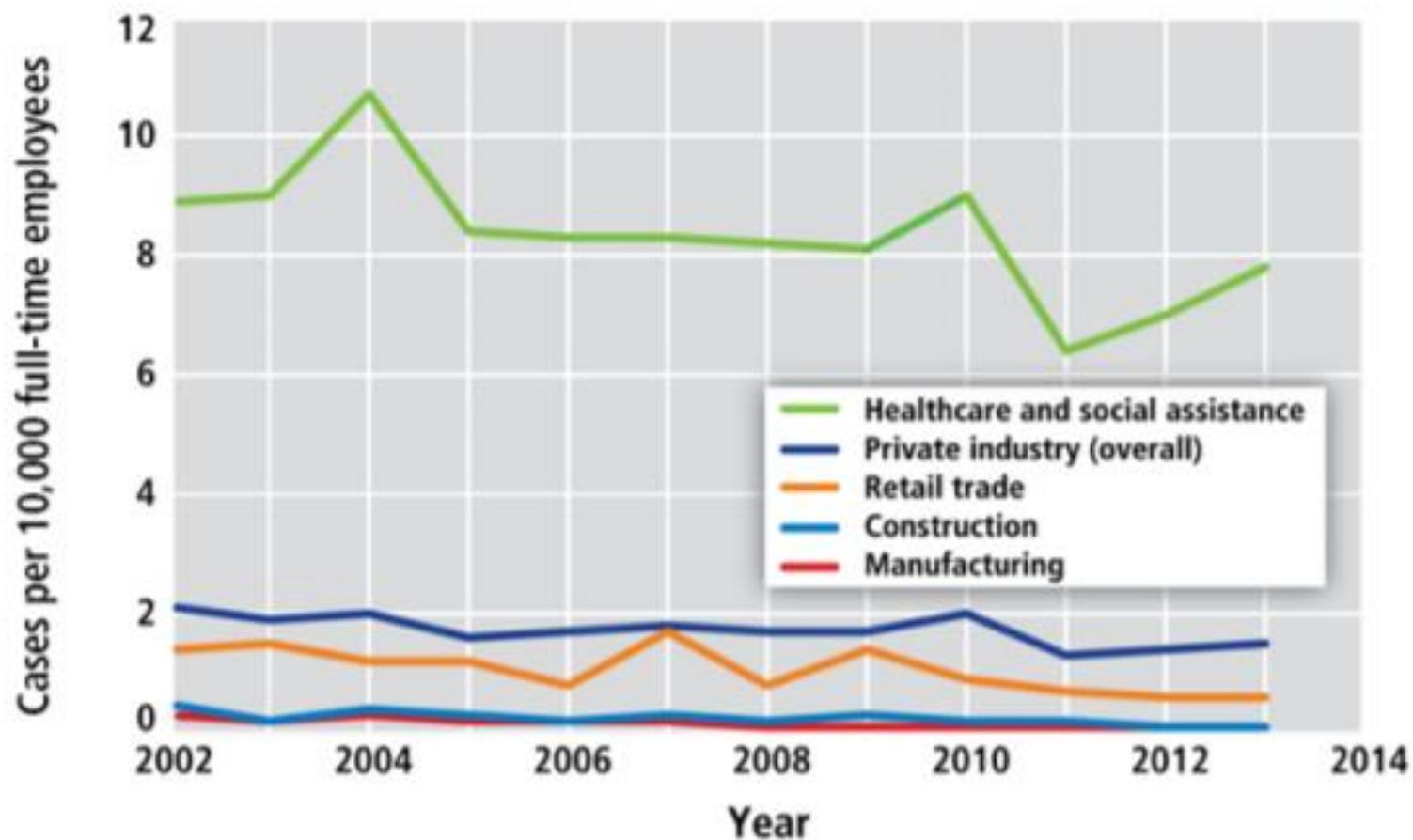
"I'm trying to do everything I can to make people safer out there because more and more healthcare workers are getting hurt. The threat is real. The threat is becoming more frequent, and the threat is becoming more violent," Elise Wilson, RN, told the station.

After 35 years on the job as a nurse, Ms. Wilson, was attacked by the former patient in 2017, allegedly because he was unhappy with the care received at Harrington Hospital three weeks before.

Ms. Wilson still doesn't have use of her hand and has not been able to return to the emergency room.

Since the attack, her former employer has installed metal detectors and given staff personal, silent pocket alarms, Ms. Wilson said.

## Violent Injuries Resulting in Days Away from Work, by Industry, 2002–2013



Data source: Bureau of Labor Statistics data for intentional injuries caused by humans, excluding self-inflicted injuries.

# Patient charged after nurse punched in face at Rhode Island hospital

A 24-year-old patient has been charged with punching a nurse in the face at the Women and Infants Hospital in Providence, R.I., city police told the *Providence Journal*.

The patient, Tiana Solis, was charged with assault on healthcare providers or emergency services medical personnel, said Cmdr. Thomas Verdi, deputy police chief.

On April 28, the 34-year-old nurse told police that in the emergency room she asked Ms. Solis standard medical history questions, and she "became agitated" and accused the nurse of judging her, according to the *Journal*. Police said that's when Ms. Solis allegedly punched the nurse in the face and chest.

Ms. Solis acknowledged to police that she punched the nurse, according to the *Journal*.

## Surveys highlight the prevalence of workplace violence among healthcare occupations:

- **21 percent** of registered nurses and nursing students reported being physically assaulted—and **over 50 percent** verbally abused—in a 12-month period (2014 American Nurses Association's Health Risk Appraisal survey of 3,765 registered nurses and nursing students).<sup>5</sup>
- **12 percent** of emergency department nurses experienced physical violence—and **59 percent** experienced verbal abuse—during a seven-day period (2009–2011 Emergency Nurses Association survey of 7,169 nurses).<sup>6</sup>
- **13 percent** of employees in Veterans Health Administration hospitals reported being assaulted in a year (2002 survey of 72,349 workers at 142 facilities).<sup>7</sup>

**Some professions and settings are more at risk than others.** In 2013, according to the Bureau of Labor Statistics, psychiatric aides experienced the highest rate of violent injuries that resulted in days away from work, at approximately 590 injuries per 10,000 full-time employees. This rate is more than 10 times higher than the next group, nursing assistants, who experienced about 55 such injuries per 10,000 full-time employees. Registered nurses experienced about 14 violent injuries resulting in days away from work per 10,000 full-time employees, compared with a rate of 4.2 in U.S. private industry as a whole. Surveys show that high-risk areas include emergency departments, geriatrics, and behavioral health, among others.<sup>6,7</sup>

In 2013, the most common causes of violent injuries resulting in days away from work across several healthcare occupations were hitting, kicking, beating, and/or shoving (see graph).

# EMT stabbed multiple times by patient while en route to Mass General

Mackenzie Bean - Thursday, July 11th, 2019

Boston police say a patient repeatedly stabbed an emergency medical technician while travelling in an ambulance to Massachusetts General Hospital on July 10, according to *The Boston Globe*.

The EMT was stabbed multiple times after responding to a call about an emotionally disturbed person, whom the EMT and her partner were taking to the hospital. The EMT suffered serious but not life-threatening injuries from the attack. She underwent surgery at Massachusetts General the night of July 10 and is now recovering.

The suspect, 31-year-old Julie Tejeda, was also arrested July 10. She faces charges of assault with intent to murder, assault and battery with a dangerous weapon, and assault and battery on a public employee.

## Case Reports: Prevention Strategies That Have Worked

- A security screening system in a Detroit hospital included stationary metal detectors supplemented by hand-held units. The system prevented the entry of 33 handguns, 1,324 knives, and 97 mace-type sprays during a 6-month period.
- A violence reporting program in the Portland, Oregon, VA Medical Center identified patients with a history of violence in a computerized database.\* The program helped reduce the number of all violent attacks by 91.6% by alerting staff to take additional safety measures when serving these patients.
- A system restricting movement of visitors in a New York City hospital used identification badges and color-coded passes to limit each visitor to a specific floor. The hospital also enforced the limit of two visitors at a time per patient. Over 18 months, these actions reduced the number of reported violent crimes by 65%.

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\*Health information and the electronic recording of this information must comply with applicable Federal standards on privacy under Titles 42 and 45 of the U.S. Code.

# VA Hospital Shooting: 'He Walked Up And Started Shooting At The Building'; Suspect Arrested At Jesse Brown Medical Center

August 12, 2019

**CHICAGO (CBS)** — A scare was averted Monday afternoon at the Jesse Brown VA Medical Center, when shots were fired into the hospital by a man with an assault rifle – but nobody was injured.

Jeffrey S. Sallet, special agent in charge of the FBI Chicago Field Office, said the offender was carrying an assault rifle. He said VA police mitigated the threat within 30 second of the gunman entering the building.

“We avoided tragedy here in the city of Chicago today,” Sallet said at a media conference Monday night.

As CBS 2’s Charlie De Mar reported, police said the shots started outside and continued inside the VA hospital.

“He walked up and started shooting at the building,” one witness told De Mar. As the shooter stopped to reload, the witness said, “by that time, a car tried to run him over.”

Cellphone video from inside the hospital showed just how quickly hospital police took down the shooter. He was on the ground in less than a minute.

# The Aftermath of the Shooting at Chicago's Mercy Hospital

BY KATHERINE BLOSSFIELD IANNITELLI, MD

A gunman shot and killed an emergency physician, a pharmacy resident, and a police officer at Chicago's Mercy Hospital in November, leaving the emergency physicians there reeling from the experience. They cycled through every emotion imaginable, from fear to guilt, but they were able to glean some lessons from their harrowing experience.

## **Keep Yourself Safe**

Basem Khishfe, MD, was working in the ED opposite Tamara O'Neal, MD, for eight hours that day. After learning that she had been shot in the parking lot, he and others wanted to run to their dying friend. "Our first instinct as physicians is to save lives," he said. But the shooter was moving toward the ED. The police urgently insisted that they barricade in a break room with other staff and a patient. One physician started toward the parking lot, but Dr. Khishfe prevented her. "I remember hugging her and telling her I want to run also, but we need to make sure everyone is safe so we can go help Tamara. "The most important thing is to protect yourself so you can help others when the incident is done," he said. "You can't help someone if you're dead."

All hospitals should develop a comprehensive violence prevention program. No universal strategy exists to prevent violence. The risk factors vary from hospital to hospital and from unit to unit. Hospitals should form multidisciplinary committees that include direct-care staff as well as union representatives (if available) to identify risk factors in specific work scenarios and to develop strategies for reducing them.

All hospital workers should be alert and cautious when interacting with patients and visitors. They should actively participate in safety training programs and be familiar with their employers' policies, procedures, and materials on violence prevention.

The National Institute for Occupational Safety and Health