



05. Services ó Patient 03. Violent Patient/Patient Visitor Management

STATEMENT:

Violence stemming from patients and patient visitors present considerable risk and concern to the healthcare industry. Healthcare Facilities (HCFs) should establish specific violence prevention and aggression management policies, processes and practices to deter, identify and manage violent events.

INTENT:

The HCF violent patient/patient visitor management policies and processes should be informed by data and research in this area and developed collaboratively through the engagement of key stakeholders and subject matter experts. These processes should be integrated with other HCF programs related to violence, such as targeted violence, management of weapons and threat management.

- a. The HCF should develop a Disruptive Patient / Patient Visitor policy that establishes and communicates processes and procedures for identifying, communicating, and managing violent, threatening, or other inappropriate or disruptive behavior.
- b. The HCF should develop processes and accompanying workflows designed to alert staff of potential disruptive behavior in patients and accompanying visitors with whom they may interact. Components of this process may include:
 - 1) Defined response procedure(s) for situations where disruptive behavior is observed or believed to be imminent.
 - 2) F g x g r o g p v q h c o g c p u q h i k f g p v h { k p i u w e j t k u m u w e j c u c u { u g o q h o h r c i u o " based on specific escalating behaviors and risks presented to staff and suggested action plan. This is illustrated in the below example:

Flag	Suggested Action Plan
Level 1 - Awareness for behaviors such as repeated loud cursing, verbal threats, intimidation, and precursors to violent behavior.	Staff should be aware and utilize HCF verbal de-escalation techniques where appropriate. Patient informed of consequences of continued inappropriate behavior.



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mitigation options may include:

- 1) Environmental changes to the treatment room to include removing all hazards and unnecessary equipment and furnishings.
 - 2) Implement patient search protocols to identify or remove any contraband or items that may be used as weapons. This may include metal screening or removal of patient belongings including clothing and use of a patient gown.
 - 3) Thoroughly search, inventory and secure any personal property located within or brought into the care location.
 - 4) Maximize observation and response capability to include potential assignment of additional staff such as a care provider, sitter or security officer.
 - 5) Identification of visible or auditory methods that alert other HCF staff of the concern, including support personnel and others who may interact with the patient or visitor but do not have direct access to the EHR.
 - 6) Introduction and reinforcement of behavioral expectation including agreement by the patient; this may include notification and discussion with family members.
 - 7) Medically approved patient restraints.
- e. Disruptive visitors may be restricted access to the patient, department or HCF in general. Processes should be developed to determine visitor restriction.
- f. Training programs and attendance expectations should be established and offered that address the prevention, recognition, avoidance, diffusion, response and reporting of threats, acts of aggression and other behaviors of concern. Education appropriate for job function and potential risk should be provided to all healthcare workers and support staff.

REFERENCES:

OSHA 3148

VA Hospitals Patient Records Flag

https://www.va.gov/vhapublications/ViewPublication.asp?pub_ID=2341

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