The Implementation of a De-escalation Program to Reduce Violence Against Health Care Workers

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Clinical Question

- In aggressive or violent patients in the hospital setting does the use of de-escalation interventions decrease violence to nurses or health care workers?

Background

- Health care workers (HCW) in acute care settings have increased risk of exposure to violent behaviors from patients.
- Examples of violent behaviors include: harmful acts, shouting, threatening and attacking the HCW.
- De-escalation training methods should be utilized to address unacceptable behaviors & prevent their occurrence.
- Nurses are at the highest risk of exposure to aggressive behaviors from patients when compared to other HCWs.

Methods

- This *QI project occurred on a 28 bed intermediate care telemetry/stepdown unit in Central Virginia.
- Simulation based de-escalation education training included the *TDD program, *BERT & evaluation of nursing staff confidence levels pre and post implementation of TDD.
- Participants included a convenience-based group of registered nurses, licensed practical nurses & patient care technicians.
- Outcomes measured include the amount of BERT & ATLAS calls & the volume of WPV events pre & post program training intervention.
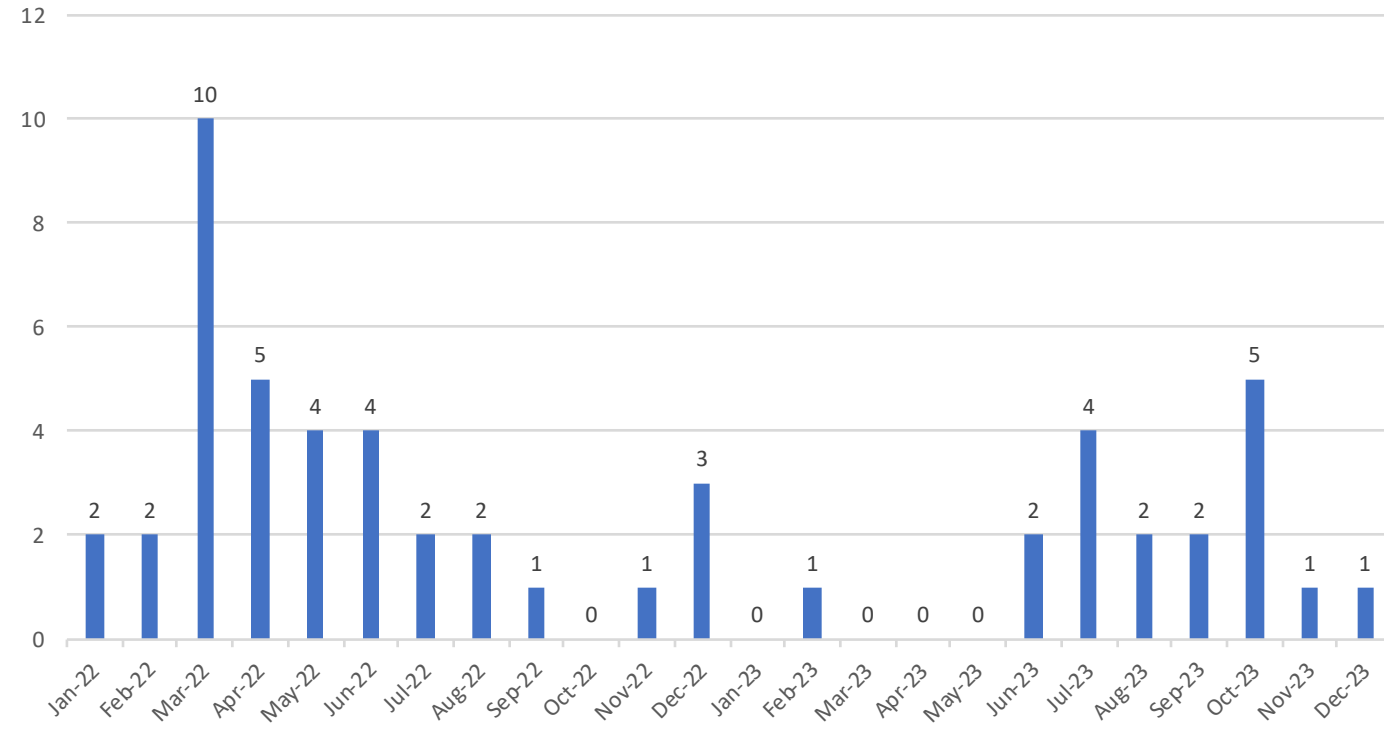
Purpose

- The purpose of this *QI project was to implement a *TDD program & measure effectiveness of de-escalation training using *TDD training provided to healthcare staff (RNs, LPNs & Patient Care Technicians).
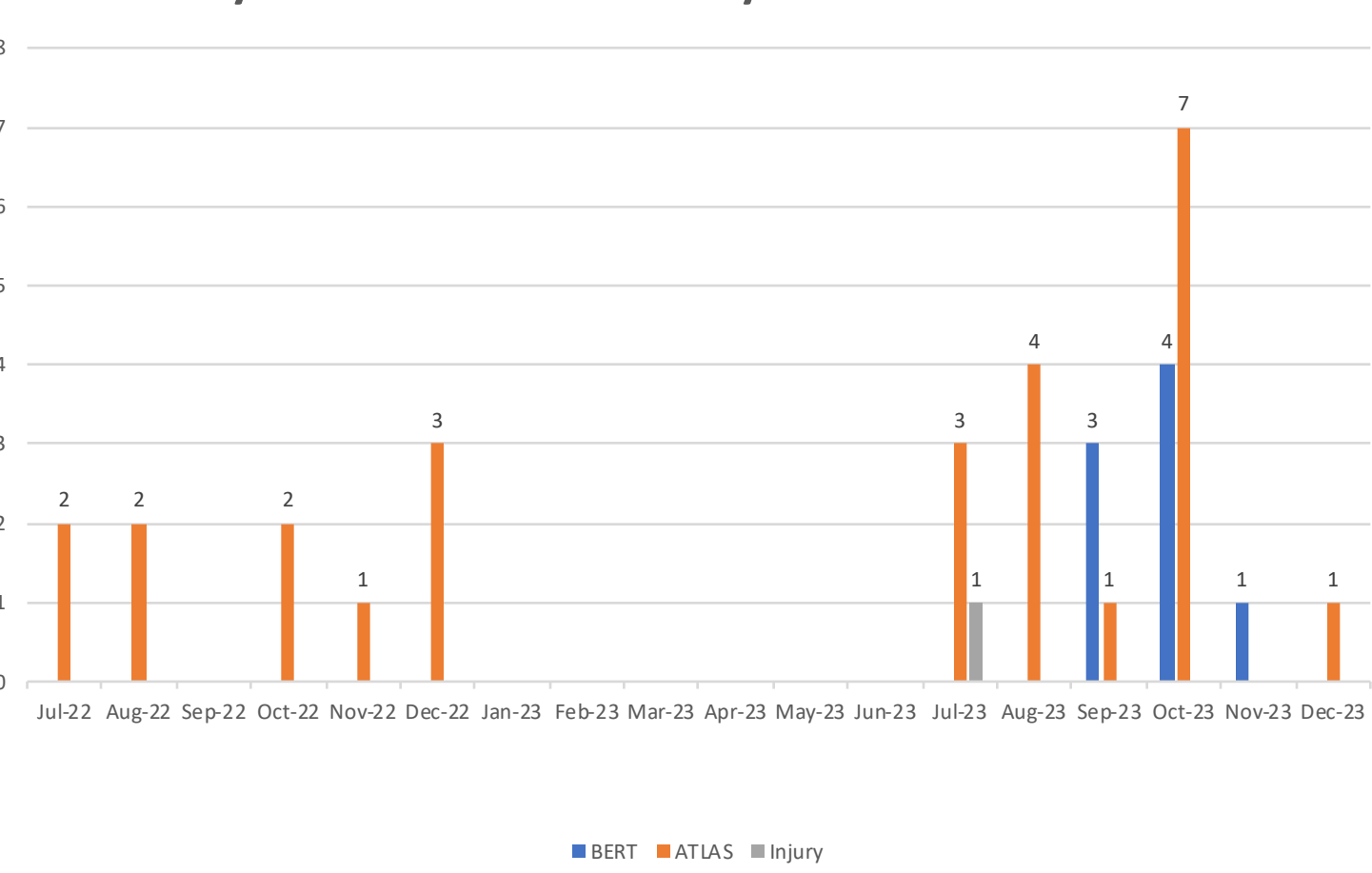

Neuro Science Telemetry Unit WPV Events January - December 2021
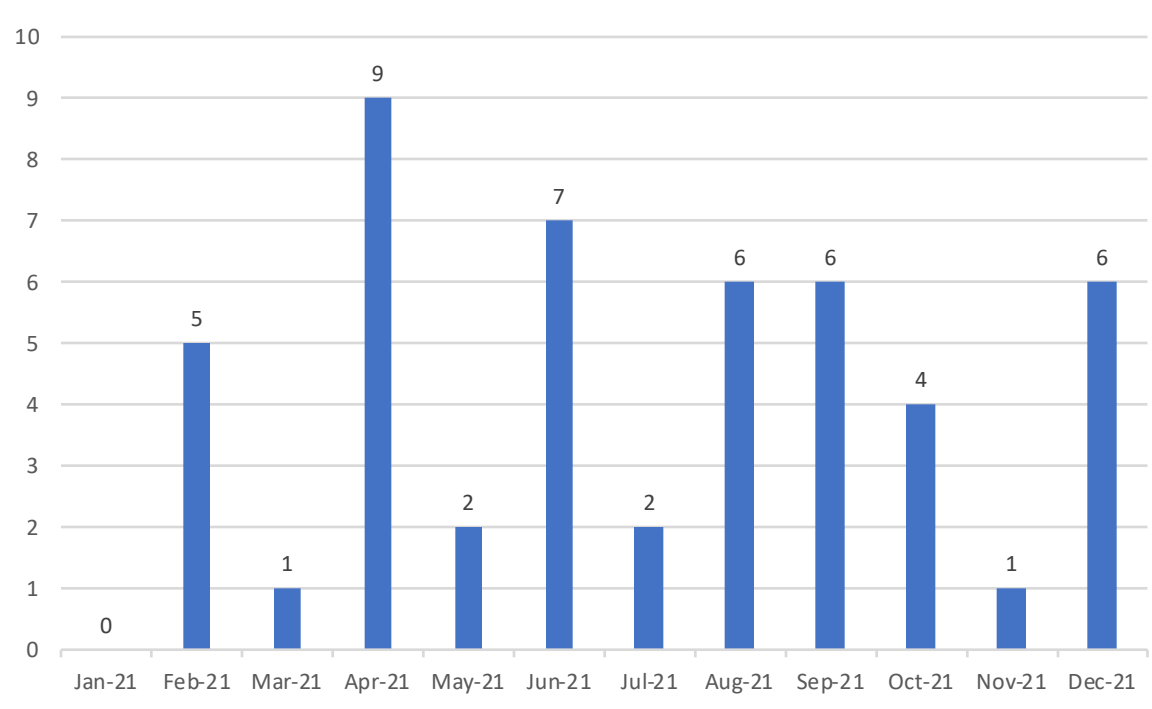
Neuro Science Telemetry Unit WPV Events Jan 2022 - Dec 2022 & Jan 2023 - Dec 2023

ATLAS & BERT Data July - December 2022 & July - December 2023

* QI = Quality Improvement
*TDD = Ten Domains of De-escalation Program
*BERT = Behavioral Emergency Response Team
*ATLAS = ATLAS Emergency Response Team

Results

- Post intervention there was an increase of 15.8% in the number of nursing staff who reported feeling self assured in the presence of an aggressive patient.
- There was a 24.5% increase in staff who reported they knew effective techniques to intervene & de-escalate a patient.
- Data from 2023 show there was an increase in the number of *BERT & *ATLAS calls post intervention compared to the previous year.
- The number of WPV events in 2023 decreased post intervention.

Conclusions

- De-escalation education & simulation training was reported as impactful.
- Nursing staff requested consistent response from the *BERT & *ATLAS team to effectively de-escalate patients.
- Nursing staff would benefit from an annual de-escalation training program to aid in effectively de-escalating patients & reducing the risk of violence.
- The organization anticipates a sustainable procedure for orientation and training using this TDD program.

References