ABSTRACT

Background

Health care workers (HCW) in acute care settings have increased risk of exposure to violent behaviors from patients. De-escalation methods should be utilized to address unacceptable behaviors and prevent their occurrence. Nurses are at the highest risk of exposure to aggressive behaviors from patients when compared to other HCWs.

Methods

The Plan Do Study Act method of quality improvement (QI) was used for this project. Baseline assessment included review of work place violence (WPV) occurrences 12 months before the intervention. Discussions and needs assessment with nursing administration and with unit-based staff occurred due to WPV occurrences. Literature review and listserv query were conducted to identify programs and procedures to address WPV in acute care settings.

Intervention

This QI training program was implemented on a 28-bed intermediate care telemetry/stepdown unit in Central Virginia. Simulation based de-escalation training included the Ten Domains of De-escalation (TDD) program, Behavioral Emergency Response Team (BERT) and the organizational ATLAS response team. Evaluation of nursing staff confidence levels pre and post implementation of TDD using the Clinician Confidence in Coping with Patient Aggression instrument (CCPA) survey occurred. Participants included registered nurses, licensed practical nurses and patient care technicians. There were eleven simulation training occurrences from September 2023 through October 2023. Retrospective data regarding WPV calls and occurrences was collected and analyzed for the same time frame in 2022. Outcomes measured

included the number of BERT and ATLAS calls and the volume of WPV events pre-& post program training intervention.

Results

Post intervention, there was a 15.8% increase in the number of nursing staff who reported feeling self-assured in the presence of an aggressive patient. A 24.5% increase was measured in nursing staff who reported they knew effective techniques to intervene & de-escalate a patient post intervention. There were seven WPV events reported during the time frame the de-escalation and simulation training took place.

Conclusions

De-escalation and simulation training using the TDD were reported as impactful. Nursing staff requested a consistent response from the BERT and 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 and reducing the risk of violence.