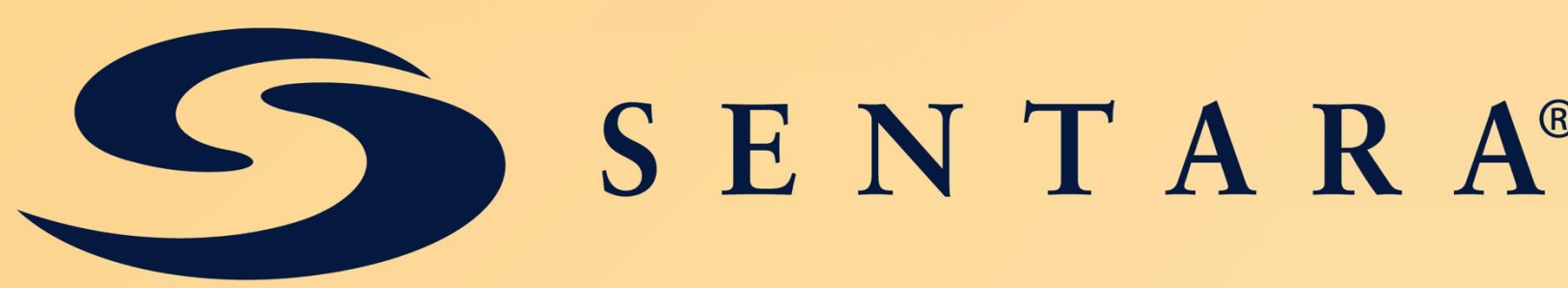# Development of a Tool to Predict Patient Violence for use on Adult Acute Care Medical-Surgical Units

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BACKGROUND

- The prevalence of patient violence against nursing is increasing.
- Seventy-five percent of nurses working in hospitals have experienced some form of violence.
- Inpatient hospital patients with violent behavior can create an unsafe work environment.
- Most violent events occur in adult inpatient settings compared to other healthcare departments.
- Nurses and nursing assistants are frequently the target of violent patient behavior
- Lack of organizational policies or training for staff to recognize and manage aggressive patient behaviors is a risk factor for workplace violence

PURPOSE

The purpose of this literature review was to develop a tool to use on adult medical-surgical inpatients to accurately predict and proactively manage episodes of violence or aggression in patients.

REVIEW OF LITERATURE

- Six published articles (2006-2013) reported effectiveness of violence screening tools in an adult medical-surgical setting
- Most violence assessment tools were developed for psychiatric units and patients
- Three tools were identified for use in adult medical-surgical units
  - M55
  - Aggressive Behavior Risk Assessment Tool (ABRAT)
  - Violence Assessment Tool (VAT)

EVIDENCE-BASED PREDICTORS OF PATIENT VIOLENCE

- Common behavioral cues can be used to estimate likelihood of violent behavior

Behavioral Cue	Increase in likelihood of violent behavior
Resisting healthcare	11 times
Abusive language	6 times
Yelling	7 times
Aggressive Statements	7 times

Source: Violence Assessment Tool (VAT)

TOOL DEVELOPMENT

- We developed a tool using data from the M55, ABRAT and VAT.
- The modified tool follows the ABRAT format and incorporates behaviors identified in the VAT.
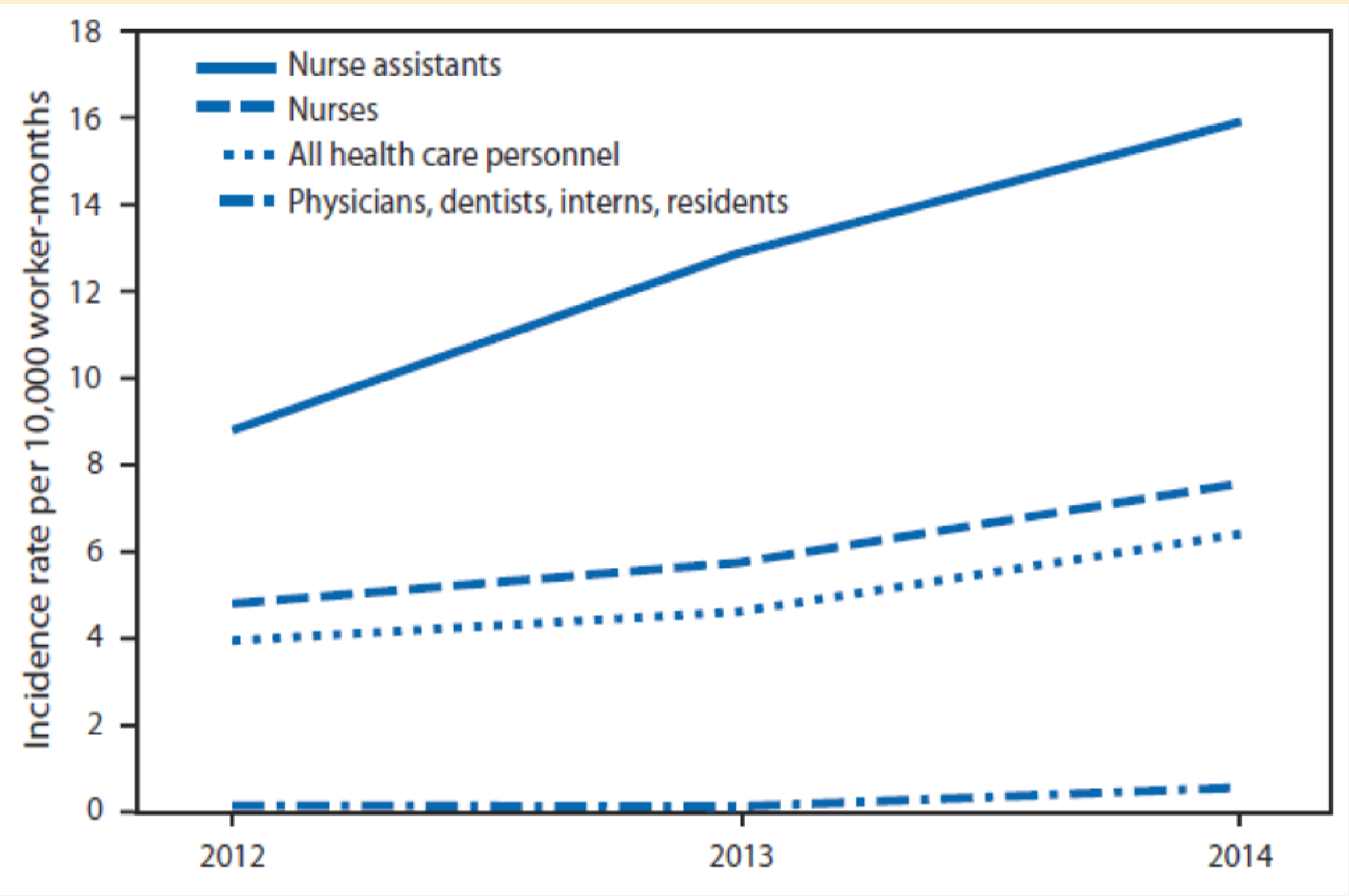
NEXT STEPS

1. The violence screening tool is being piloted on a medical-surgical unit at Sentara Martha Jefferson Hospital.
2. A process for dealing with potentially violent patients has been developed, and is being piloted concurrently.
3. Prior to the pilot, nursing staff was educated about assessing violent behavioral cues.

CONCLUSION

Using evidence to predict violent behavior in patients may better allow nurses to manage patient violent behavior. Implementation of a tool may decrease the number of violent episodes resulting in workplace violence injury and increase nurses' ability to anticipate violent patient behavior.

OCCUPATIONAL HEALTH AND SAFETY (OSHA) POSITIONS AND DATA

- OSHA defines workplace violence as "*violent acts* (including physical assaults and threats of assaults) *directed toward persons at work or on duty.*"
- Hospitals should instruct staff to report all events, provide shift updates about patient aggressive events, and to establish a *system to identify patients* at risk for violence

OSHA-recordable workplace violence injury incidence rates per 10,000 worker-months January 1, 2012–September 30, 2014

Source: CDC Morbidity and Mortality Weekly Report