

Current Trends in Healthcare Violence: Real Cases for Strategies on Lowering Your Risk

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Bonnie S. Michelman, CPP, CHPA
Director, MGH Police Security and Outside Services
Security Consultant, Partners HealthCare, Inc.
IAHSS, Past President
ASIS-International, Past President

The Bottom Line

QUESTION

- What can you do?

INDIVIDUAL

- Listen and trust your instincts
- Be proactive
- Get out of your comfort zone

ORGANIZATION

- Teach respect
- Encourage open communication
- Ask for involvement

Take Action Don't Ignore

- What percent of coworkers suspected or knew there was a problem when workplace violence occurred?

Almost 100%

What do you need?

A policy, a philosophy, a culture

Definition: Workplace Violence and Conflict Behavior

- Creates a work environment that a reasonable person would find intimidating, threatening, violent or abusive
- Affects a person's psychological or physical well being

Types of Workplace Violence and Conflict

- Domestic violence
- Assault and battery
- Verbal abuse
- Threats and harassment
- Intimidation
- Stalking
- Homicide
- Suicide
- Sexual assault
- Hate crimes

Why Increased Violence and Conflict?

- Mass layoffs
- Bankruptcies
- Anxiety about future
- Substance abuse
- Family structure
- Less corporate paternalism
- Geriatric issues
- Anticipation of war
- Terrorism
- Economic issues

Study of 170 Teaching Hospitals

32%	One verbal threat each day
18%	Weapons are displayed as a threat to staff once each month or more
43%	Physical attacks on medical staff of one or more per month
77%	One act of violence in the emergency department in the last five years that resulted in death

1,751,000 Days Lost of Work

- Lost wages: \$60 million
- Employer costs: \$3-\$5 billion
- Reported to police: ½
- Armed offenders: 30%
- Medical care required: 10%
- Federal, state and local government employees: 30%
- Men attackers: Stranger
- Women attackers: Someone they know

Workplace Violence and Conflict Is A Growing Concern

Unique Characteristics in Healthcare

- 80% female population
- Open access to public 24x7
- Numerous points of ingress/egress
- Vulnerable areas
- Microcosm of city
- Crisis mentality
- Staffing shortages
- Unpredictability
- High tension environment
- Higher psychiatric populations
- Substance abuse issues
- Space constraints

Violence and Conflict in Healthcare/Compliance

- 1996, OSHA Healthcare Guidelines advise more training.
 - Diffusing verbal and physical confrontations/workers should be counseled to avoid risking physical harm
 - Managing assaultive behavior/professional assault response
 - Personal safety and/or police-style assault avoidance
 - Emergency response teams should be trained and on call to intervene
 - CMS
 - JC/EOC

Types of Violent Incidents

- Employees having conflict with other employees or management
- Customer-patient-family angry with management or hospital
- Outside violent person attacks a place of business or takes hostages

Hardening the Target/ Minimizing the Risk

- State of the art integrated technology
- Well trained, competent security staff
- Prudent protocols and policies
- Robust education and training

Areas of Vulnerability

- Obstetrics/Pediatrics
- Psychiatric units
- Cash handling areas
- Parking garages
- Pharmacy
- Research
- Operating rooms
- Women's health
- Locker rooms
- Main lobbies
- Emergency departments
- Information systems

ED Security Issues

- Growing number of family disputes
- Increased numbers of homeless and psychiatric patients
- Disturbed persons do not necessarily have any business there
- Long waits
- Staff shortages
- Overcrowding
- Availability of drugs and cash
- Easy hospital access
- Availability of handguns
- Prison and jail releases
- Increased gang activity
- Ethnic conflict
- Domestic violence

Conflict Avoidance in the ED

- Greater access control
- Metal detectors
- Emergency alert and alarm systems
- Comfort of emergency department
- Closed circuit television
- Special secure rooms
- Gun lockers
- Special response teams
- Patient separation
- Training

What Constitutes A Threat

- Any words or actions that create a perception that there may be intent to harm oneself, others or property
- An indication of impending danger or harm

Direct threat

- “I am going to kill you!”
- “I’m going to punch you in the face!”
- “I will come in with a gun shooting!”

Veiled threat

- “_____ will pay for this!”
- “It will be a sorry day for him if I don’t get my money!”
- “The last boss who told me to do this wasn’t happy”
- This place will look like Disneyland if a doctor doesn’t see my brother soon!”

What Constitutes Harassment

- Words, conduct or action, usually repeated or persistent
- Directed at a specific person that annoys, alarms or causes substantial emotional distress

Systematic annoyances, threats or demands

- Family manipulates staff through threats or demands
- Staff feels pressured to conform or if reported to supervisors there is a fear of retribution by family
- Overtime demands become verbal threats of physical harm

Inflict distress

- Patient care impeded
- Staff afraid to work with patient or family
- Personal and professional lives severely affected due to stress, anxiety and fear

Domestic Violence and Conflict

- Pattern of coercive control exercised by one partner over the other

Patterns

- Sexual and physical assault
- Economic and psychological abuse
- Threats and harassment

Statistics

- Single leading cause of injury to woman
- Over 10 women per day are killed by their current or former husband or partner
- A woman is beaten every 7.4 seconds by her husband or boyfriend

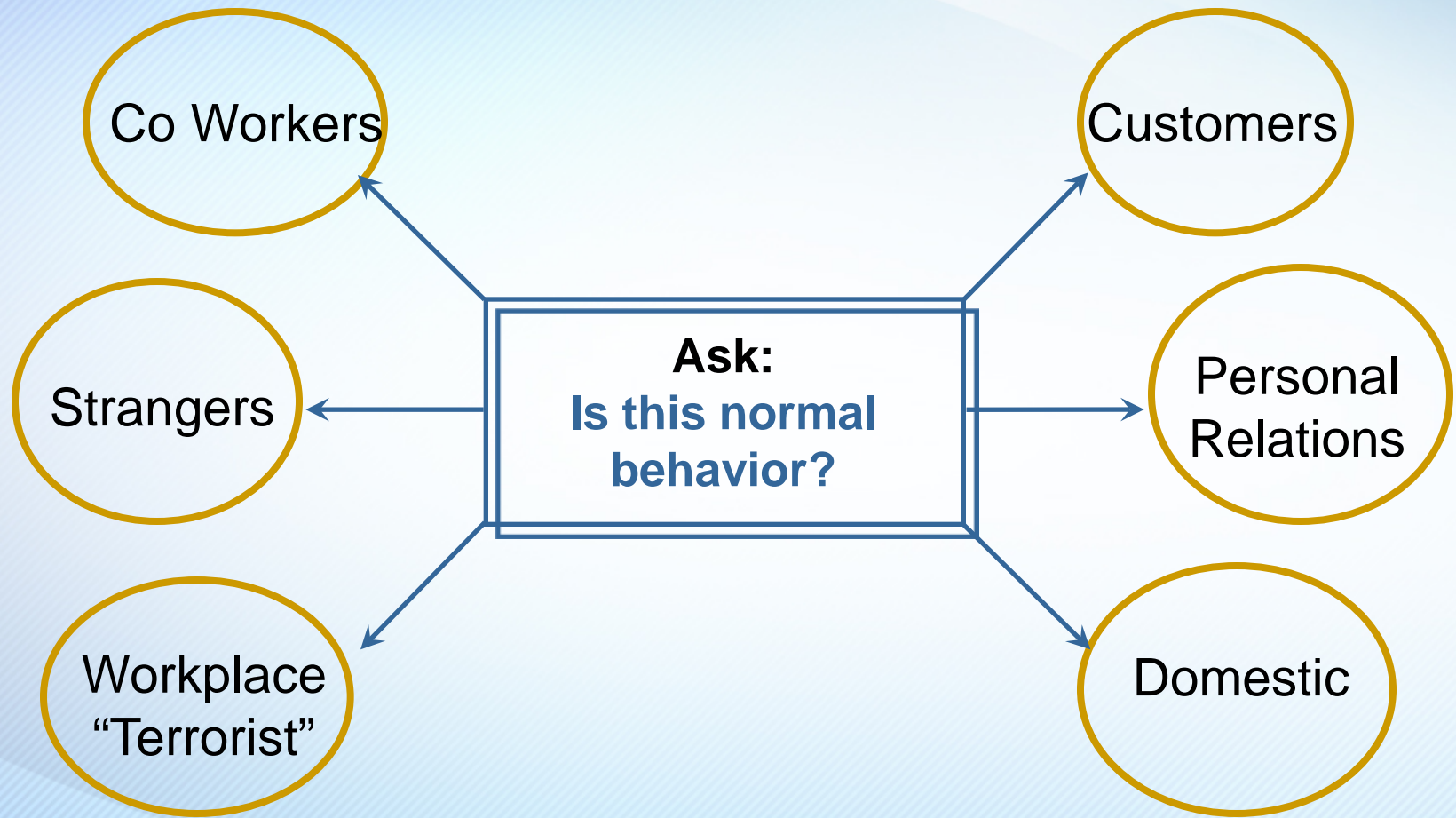
Precipitating Events

- Loss of job: laid off, retirement
- Passed over for promotion
- Rejection, office romance, divorce
- Fatal attraction
- Discrimination
- “No personal phone calls please”
- Repeated physical injuries

Cues For Potential Violence and Conflict

1. Overreaction to change, corporate policy
2. Threatening statements: weapon
3. Continuous violation of organization policies / rules
4. Attitude: “Everyone is against me” or “solve everything”
5. Emotional distress: Angry, aggressive, depressed
6. Substance / alcohol impairment
7. Excessive / unexplained absences / tardiness
8. Adverse reaction to phone calls
9. Changes in work performance

Perpetrators of Violence and Conflict



What Are The Potential Impacts?

Victim

- Health
- Isolation from friends and family
- Compromised performance
- Absenteeism / tardiness
- Workplace interruptions
- Safety concerns
- Self destructive behaviors

Workgroup

- Concern for the victim
- Resentment for the victim
- Trauma from witnessing violence
- Concern for personal safety
- Impact on interpersonal relationships
- Decreased productivity
- Work stops

What Are The Potential Impacts?

Organization

- Compromised safety
- Increased threats of violence
- Increased healthcare costs
- Turnover and recruitment costs
- Decreased productivity
- Work stops

Liability

- Negligent hiring and retention
- Failure to warn employees
- Exposing employees to violent misconduct
- Juries rarely award punitive damages when a “good faith” effort is shown by the employer

Active Shooter

- MGH experiences with active shooters
- Active shooter program
 - Creating training
 - Components
- Training methodology
- Drills/exercises
- Working with law enforcement
- The right place on the continuum

Active Shooter Project Accomplishments

- Active Shooter Committee established within Police, Security and Outside Services
- Research and benchmarking done to form a foundation
- Training on BPD expectations for all Security officers at the Boston Police Academy
- Internal “Active Shooter” table top exercise
- Development of a Police and Security “Active Shooter” procedure
- Dissemination of the policy and procedure to the entire department
- Training and testing of the above for all officers
- In conjunction with Emergency Preparedness, developed a draft Active Shooter Procedure

Lessons Learned

- Active shooter incidents are planned events
- Suspects behavior and specific actions are unpredictable
- ***Pre-incident signs*** existed in majority of incidents
- Incidents occur in a target rich environment
- First responders outgunned and/or did not have the training to respond to an active shooter situation
- A tactical intervention was too late

Common Myths

- “Out of the blue”
- “Never saw it coming”
- “He just snapped”
- “Violence is random, spontaneous, and unpredictable”
- “Most situations will resolve themselves if given a cooling-off period”
- “Warning signs are always predictive of violent behavior”

Pre-Incident Signs

...Red Flags / Concerning Behaviors...

- Violent fantasy writings/documentation
- Anger Issues
- Fascination with weapons and paraphernalia
- Boasting and practicing of fighting and combat proficiency
- Loner
- Non-compliance and disciplinary problems
- Interest in previous shooting situations
- Victim/martyr self-concept
- Paranoia
- Violence and cruelty
- Acting out
- Mental health history related to dangerousness
- Expressionless face
- Unusual interest in police, military, terrorist activities and materials
- Use of alcohol/drugs

How to Respond When an Active Shooter is in Your Vicinity

1. Evacuate – “Get Out”:

If there is an accessible escape path, attempt to evacuate the premises.

- Have an escape route in mind
- Leave all belongings behind
- If possible help others evacuate
- Prevent individuals from entering the affected area
- Follow the instructions of any law enforcement officer
- Do not attempt to move wounded people
- Call 911 when safe to do so
 - Call Security when safe to do so

How to Respond When An Active Shooter Is In Your Vicinity

2. Shelter In Place – “Hide Out”

If evacuation is not an option, find a place to hide where the active shooter is less likely to find you. Your hiding place should:

- Be “Out of site, out of mind”
- Provide protection if shots are fired in your direction
- Not trap you or restrict your options for movement

To prevent an active shooter from entering your hiding place:

- Lock the door
- Block the door

How to Respond When An Active Shooter Is In Your Vicinity

2. Shelter In Place – “Hide Out”

If the Active shooter is nearby:

- Silence your cell phone/pager
- Turn off any source of noise
- Hide behind large items
- Remain quiet

How to Respond When An Active Shooter Is In Your Vicinity

3. Call for help – “Call Out”:

If evacuation and hiding out are not possible:

- Remain calm
- If feasible, **call 911**
- If you cannot speak, leave the line open and allow the dispatcher to listen

How to Respond When An Active Shooter Is In Your Vicinity

4. “Take Out”:

- Take action against the active shooter

As a last resort, and only if your life is in immediate danger, attempt to disrupt and/or incapacitate the active shooter

- Security provides a management of aggressive behavior course which deals with this situation



Interactions with Outside Law Enforcement

- Do NOT expect officers to assist you as you get out.
 - **Their primary job is to locate and neutralize the shooter**
 - Medical assistance will follow once the threat is neutralized
- Law enforcement **MUST** assume that everyone is a threat to their safety
 - Be prepared:
 - You may have weapons pointed in your direction
 - You may be subject to search
 - You may be handcuffed

Interactions with Outside Law Enforcement

- Do **NOT**
 - Have anything in your hands; officers are taught that the hands kill

- Do
 - Raise your arms
 - Spread your fingers
 - Show hands as you drop to the floor
 - Spread arms and legs

Interactions with Outside Law Enforcement

- Key Information
 - Be prepared to calmly, quickly and accurately provide:
 - Name of the shooter (if known)
 - # of shooters
 - Description of shooter
 - Location of shooter
 - Number and types of weapons carried by shooter

1996 OSHA Healthcare Training Guidelines



Actions

Learn how to...

- Diffuse verbal and physical confrontations
- Avoid risking physical harm
- Manage assaultive behavior
- Set up emergency response teams who are on call

10-Step Prevention Plan



Actions

1. Do pre-employment screening
2. Train managers
 - Practice “golden rule” of employee treatment
 - See early warning signs
 - Deal with the after effects of a difficult situation
3. Teach managers the “golden rule” of employee treatment
4. Do incident response programs
5. Offer counseling services
6. Set up proper security measures
7. Spend more time with patients
8. Set up privacy for interviewing and intervention
9. Reduce communication barriers
10. Know services available for identified patients

Other Prevention Methods



Actions

- Covert investigations
- Utilization of forensic techniques
- Liaison with external law enforcement agencies
- Interviews of persons of interest
- Information and referrals to internal resources

Post-Event Management



Actions

- Arrests for violations of law and restraining orders
- Comprehensive follow up investigation
- Customized home and workplace security plan
- School and daycare safety plans
- Physical security improvements in the workplace
- Court assistance

Employees are the first line of defense

Dealing With Dangerous People

- Recognize the warning signs
- Take threats seriously
- Prevent escalation and avoid counter threats
- Threat them with dignity
- Seek professional help
- Train managers and supervisors
- Develop a referral policy
- Plan for emergencies

Security Department Protocol

- Initial contact
- Threat assessment
- Anonymity/confidentiality for employee/patient
- Investigative activities
- Customized safety plan
- Management of the perpetrator (if necessary)
- Liaison with appropriate individuals/agencies
- Follow-up

Security Response to Violence and Conflict

- Customized security plan
 - Gang members
 - Executives
 - Prisoners
 - Dignitaries
 - Domestic violence
 - Religious sects
- Risk assessment
- Court assistance, escort, liaison, safety

Security Response to Violence and Conflict

- Security surveys (home and work)
- Handwriting analysis
- Personalized travel plans
- Liaison Local, State, Federal Police, FBI
- Investigation/surveillance perpetrators activities
- Systems modification
- Legal assistance
- Prosecution

Empowering Employees: Managing Aggressive Behavior

- Non verbal communication
 - Body language
 - Space
 - Barriers
- Verbal communication
 - Paralanguage
 - Techniques to de-escalate behavior
- Diversions
- Protection

What Human Resources and Security Can Do

Actions

Screen Job Applicants

- Criminal history
- Driving record
- SSN verification
- Worker's compensation search
- Credit report
- Education verification
- Really listen
- Watch body language
- Behavioral profiling

What a Manager Can Do



Actions

Communicate to gain rapport with staff

- Tell employees who to report to
- Explain what behaviors to report
- Make statements about the value of a report
- Talk about confidentiality so no fear of reprisal
- Tell stories about how organization has acted
- Engage employees in social action
- Talk about the Employee Assistance Program (EAP)

What a Manager Can Do



Actions

Responding to a disclosure

- Inform Security immediately
- Respond helpfully and non-judgmentally
- Maintain confidentiality
- Communicate safety concerns
- Partner with internal departments
- Have DV information available
- Take action when indicators are present

Case Reviews: Real World Healthcare Violence/Conflict

- Employee to employee
- Employee to management
- Domestic violence
- Research subject
- Patient violence
- Visitor intimidation to caregiver
- Physician harassment
- Extortion attempts
- Hate crime

Why Employees Don't Act

- **Lack of awareness of resources**
- Fear of losing job
- Fears about confidentiality
- Desire to keep personal life separate from work
- Fear of co-workers and supervisors' response
- Fear of being wrong

Finally.....



Actions

Pay Attention	Don't ignore the cues
Communicate	Talk to someone you trust
Train Yourself	Seek training and education
Listen	Listen for what's being said and not said: Act accordingly

What are You Up Against??

The Company Culture:

- “Aren’t we overreacting here?”
- “Nothing like that could happen here.”
- Legal vs. HR vs. Security vs. Union vs. ...
- “It would cost too much to do that.”
- “You can’t stop somebody with a gun, so why bother?”

The Common Thread ...

In almost EVERY instance of workplace violence and conflict, coworkers suspected or knew there was a problem

THE QUESTIONS:

- What did management know?
- When did they know It?
- What did they do about It?

Ultimately

The best strategy to prevent workplace violence and conflict involves developing the right corporate culture, one that engenders:

- Respect
- Open Communication
- Effective Supervision
- Employee Involvement, Participation And Development Rather Than Power And Authority
- Have clear policy

PREVENTING WV = ZERO IGNORANCE