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Workplace Violence Prevention: Recognizing Risks, Identifying Behaviors

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About the Presenter

Scott B. Brehmer, MPH, CIH, CSP
Principal Consultant, Southern California Regional Manager

- 17 years in environmental, health and safety consulting

- B.S. Degree in biochemistry from UCLA and MPH from Loma Linda University

- Provides strategic consulting to clients on a broad range of EHS topics

- Featured speaker at upcoming EHSSENTIALS symposium for healthcare EHS professionals

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2 Dead in UCLA Shooting; Campus on Lockdown

POSTED 10:13 AM, JUNE 1, 2016, BY CINDY VON QUEDNOW, *UPDATED AT 11:17AM, JUNE 1, 2016*

Sources identify professor killed in UCLA shooting as William S. Klug

William S. Klug, 39, an associate professor of mechanical and aerospace engineering. (UCLA)
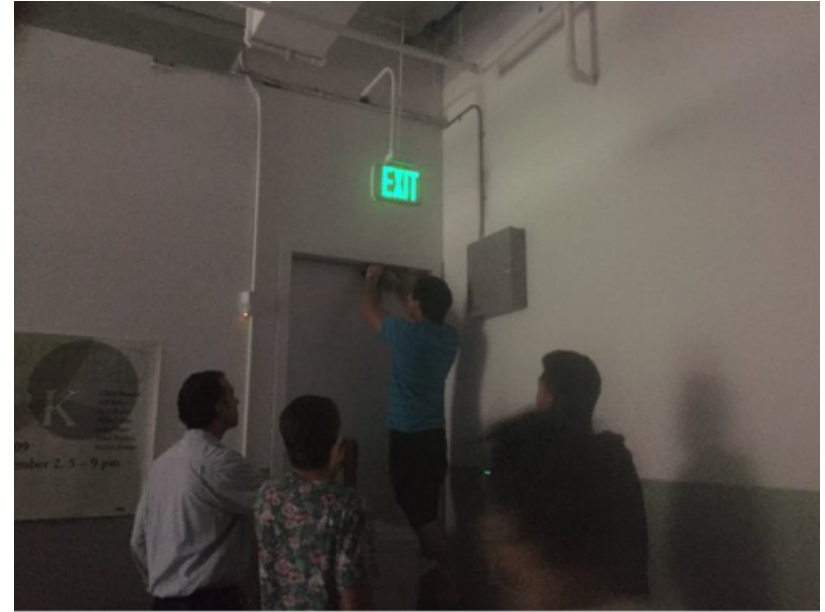
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Run, **Hide**, Fight

Natasha Zouves ABC7 ✔ @NatashaABC7 · 9m
#UCLA **shooting**, photo via @Jasonschechter "The doors open outward and we can't lock them so we are barricading..."

↩ ⟳ 78 ♥ 47 •••

Carrie Rapaport ⚽
@newt_ripley

[Follow]

Using my belt to lock the door down. #UCLA #activeshooter
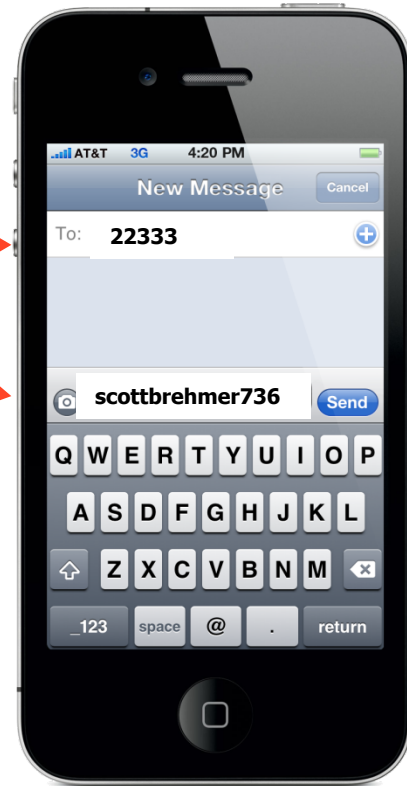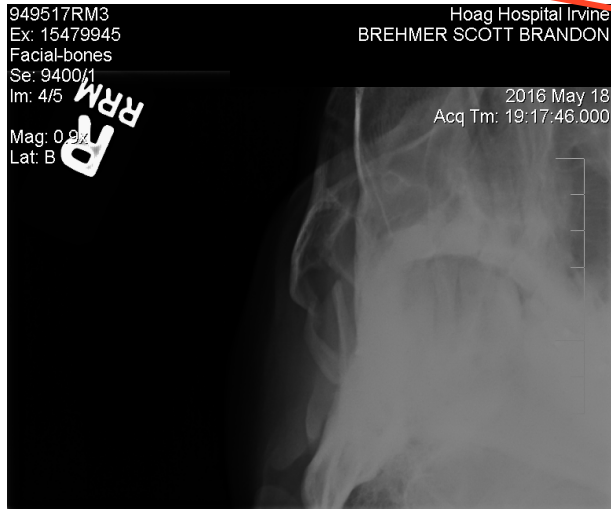10:23 AM - 1 Jun 2016

↩ ⟳ 526 ♥ 381

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Agenda

- Define and introduce topic of workplace violence
  - Regulatory background
  - Best practices of a Prevention Program
  - Cal/OSHA's Workplace Violence Prevention in Healthcare standard

- Identify environmental risks that may increase the likelihood of violent incidents

- Recognize precursors to violent behavior and the phases of behavioral change

- Learn techniques to de-escalate violent situations

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Warning! This webinar is interactive

- Get ready to participate using Poll Everywhere

- Go to www.PollEv.com/scottbrehmer736 or

- Text **scottbrehmer736** to 22333

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scottbrehmer736   Send

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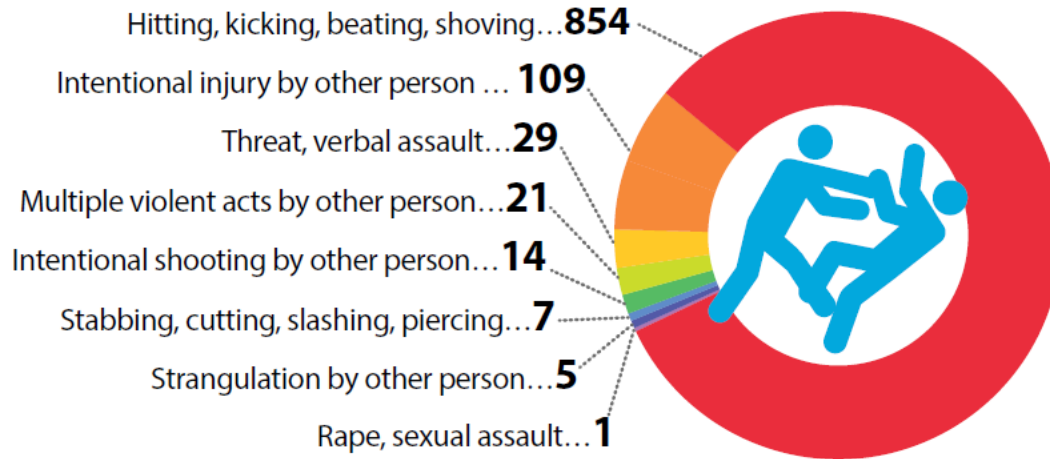_123   space   @   .   return

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2 Million American workers report having been victims of workplace violence each year
(Reference: OSHA)

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Workplace Violence that Results in Injury Claims

Violence in Oregon workplaces
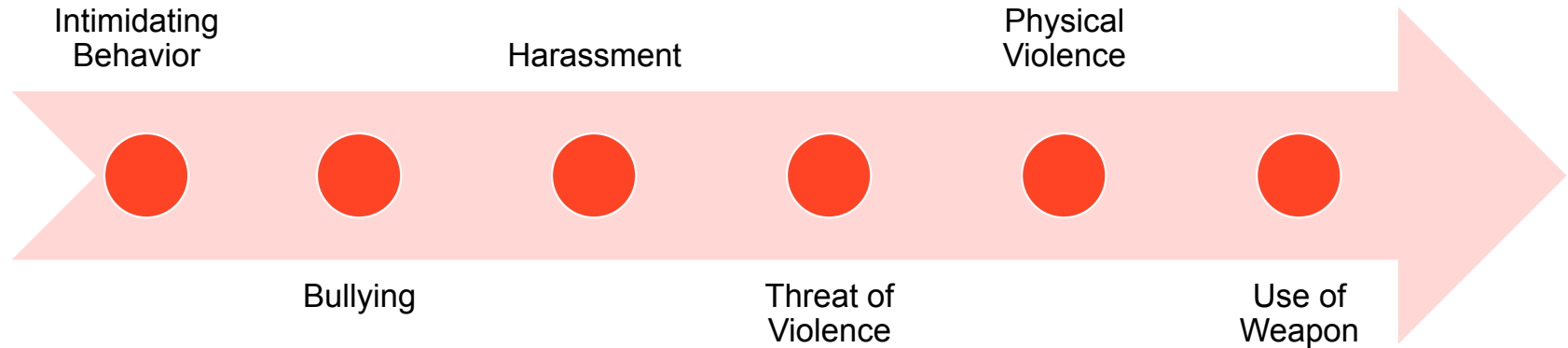Accepted disabling claims for work-related injuries, by event — 2013 and 2014

- Hitting, kicking, beating, shoving…**854**
- Intentional injury by other person … **109**
- Threat, verbal assault…**29**
- Multiple violent acts by other person…**21**
- Intentional shooting by other person…**14**
- Stabbing, cutting, slashing, piercing…**7**
- Strangulation by other person…**5**
- Rape, sexual assault…**1**

Source: Central Services Division, Oregon Department of Consumer and Business Services, November 2014

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Regulatory Background

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What is Workplace Violence?

Intimidating Behavior — Bullying — Harassment — Threat of Violence — Physical Violence — Use of Weapon

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Workplace Violence according to OSHA and Cal/OSHA

Occurs at the work site or involves on-duty employees

An Act or <u>Threat</u> of Violence

<u>Threat</u> or use of Physical Force

<u>Threat</u> or use of a firearm or other dangerous weapon

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Workplace Violence Types

Defined by OSHA and in Title 8 CCR 3342 (Proposed)

Type 1	Type 2	Type 3	Type 4
• Violence by strangers with no legitimate business on site • *Example: someone entering the workplace to steal valuables*	• Violence by customers, clients, students or patients • *Example: patient acts out violently*	• Violence by co-workers (present or former) • *Example: Disgruntled employee attacks manager*	• Violence by personal relations • *Example: a spouse, significant other, family member, or friend of an employee*

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Regulatory Background

OSHA General Duty Clause

- Employers are required to provide their employees with a place of employment that "is free from recognizable hazards that are causing or likely to cause death or serious harm to employees."

Title 8 CCR 3342 - Proposed

- To be adopted July 1, 2016 (likely to be delayed)
    - Workplace Violence Prevention in **Healthcare**
    - Very broad in scope
        - Hospitals, home health, paramedics, emergency medical services, including fire fighters, field operations, drug treatment clinics, student health, and ancillary health

Workplace Violence Prevention Program

Best Practices & Cal/OSHA Healthcare Requirements

- Policies
- Site-specific Prevention Plans
  - **Environmental risk assessment**
  - Procedures to correct issues
  - Procedures for post-incident investigation
- Training
  - **"Awareness" initial and annual refresher**
  - "Responder" and annual refresher
- Recordkeeping
  - Training records
  - Violent incident log
- Reporting
  - Annual evaluation of Program
  - Reporting to Cal/OSHA for Healthcare in California

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Workplace Violence Risks

Environmental Risk Factors

Environmental Risk Assessment

Plan should include procedures to identify and evaluate risk factors

- Employees working alone in isolated areas

- Poor illumination

- Lack of physical barriers

- Lack of security/door locks

- Poor escape routes

- Obstacles to accessing alarm systems

- Areas where unauthorized access may occur

- Furnishings that can be used as weapons

- Storage of high value items such as cash or pharmaceuticals

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Assess Your Work Environment

Critically examine your work environment

- Parking lots
- Walkways
- Entryways
- Reception areas
- Offices

Questions to ask about your work environment

- Is there adequate lighting?
- Do you have a convenient escape route?
- Are you able to call for assistance if you need it?
- What objects can potentially be used as weapons?

What Environmental Risk Factors Do You See?

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Precursors to Violent Behavior

Characteristics and Physical Signs

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Characteristics of a Potentially Violent Person

- Obsession with weapons

- Direct or veiled threats

- Intimidation or instilling fear in others

- Can be described as a loner

- Unwanted romantic interest in a co-worker

- Hyper-sensitive to criticism/doesn't accept responsibility

- Holds grudges and blames others

- Depressed/suicidal thoughts

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Physical Signs an Individual May Become Violent

- Sweating
- Pacing, restless, or repetitive movements
- Trembling or shaking
- Clenched jaws or fists
- Exaggerated or violent gestures
- Change in voice
- Loud talking
- Shallow, rapid breathing
- Scowling, sneering, or use of abusive language
- Glaring or avoiding eye contact
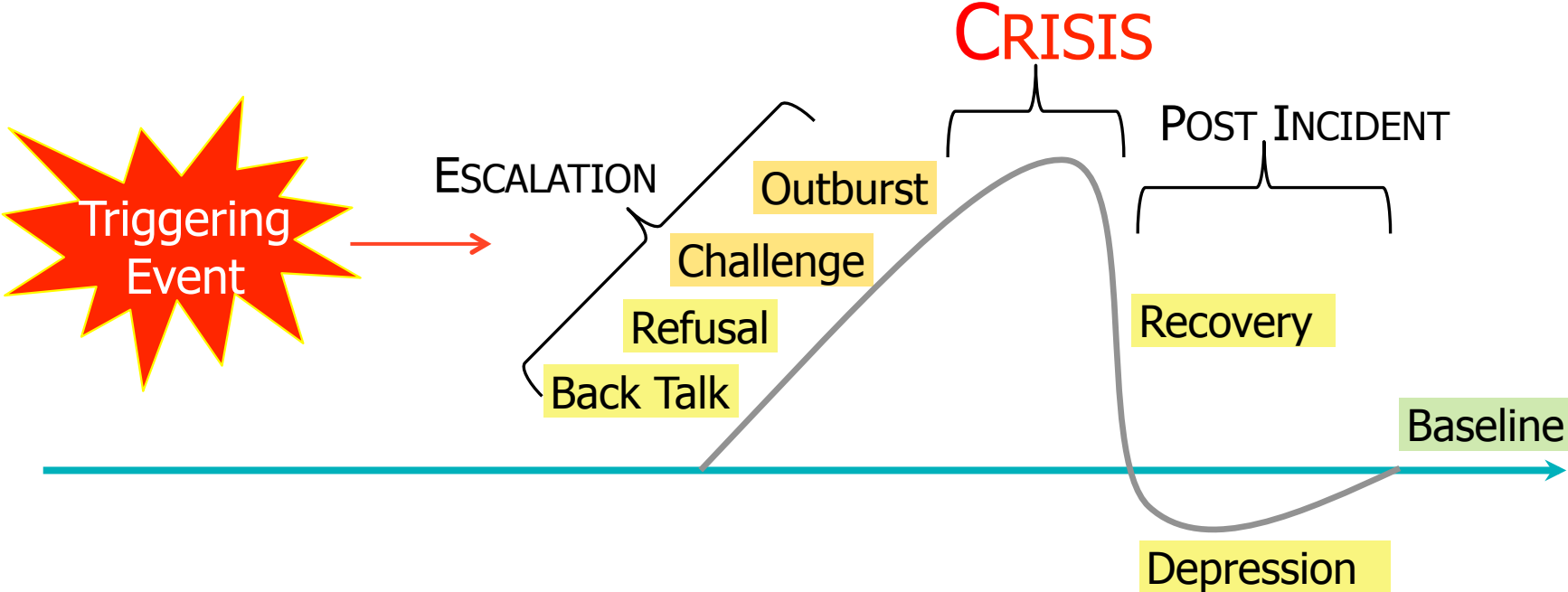- Violating personal space

Photo Credit: CDC – Workplace Violence Prevention for nurses

Aggression Cycle

Aggression Cycle

CRISIS

ESCALATION

POST INCIDENT

Triggering Event

Outburst

Challenge

Refusal

Back Talk

Recovery

Baseline

Depression

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Triggering Event

- Initiated through threat or stressor to aggressor; Typical stressors:
    - <u>Personal</u>: family fights, isolation, abuse, stress
    - <u>Environmental</u>: crowded areas, traffic, weather
    - <u>Physical trigger</u>: invasion of personal space, confrontational body language
    - <u>Loss of privileges</u>: Asked to leave an area, utilities shut off, terminated employment

THIS WAY OUT

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Backtalk and Refusal Stage

Back Talk

- Person is showing their anger and trying to incite you to be angry.
    - "Why should I?"
    - "Why don't you do it?"
    - "Whatevvver"

Refusal

- Person is challenging your control of the situation by refusing to comply.
    - "No, I'm not leaving!"
    - "No, I'm not doing that!"

Challenge and Outburst Phases

Challenge

- Person is attempting to directly challenge your authority.
  - "You can't make me!"
  - "Get me your manager!"
  - "You're not the boss of me!"

Outburst

- The person is no longer able to maintain control.
- May take two forms:
  - Verbal: Yelling, screaming, shouting profanity, cries
  - Physical: hitting, kicking, throwing, attacking, running

Crisis Stage
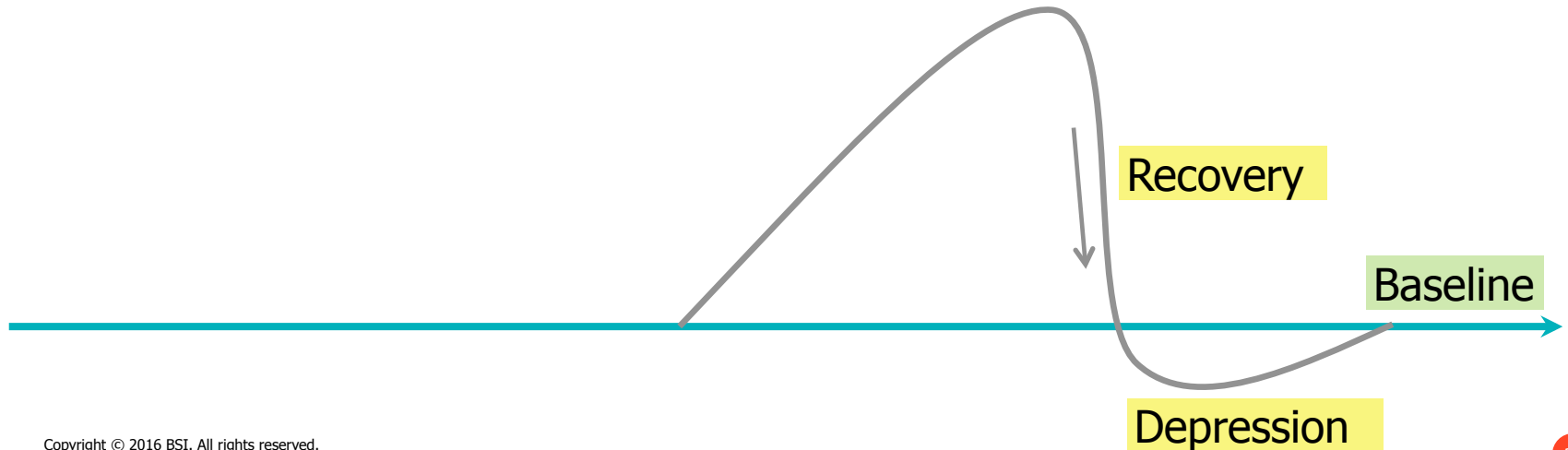
Person explodes into violent acts!

Recovery and Depression Stage

Recovery

- Person has expelled their energy
- Typically quiet
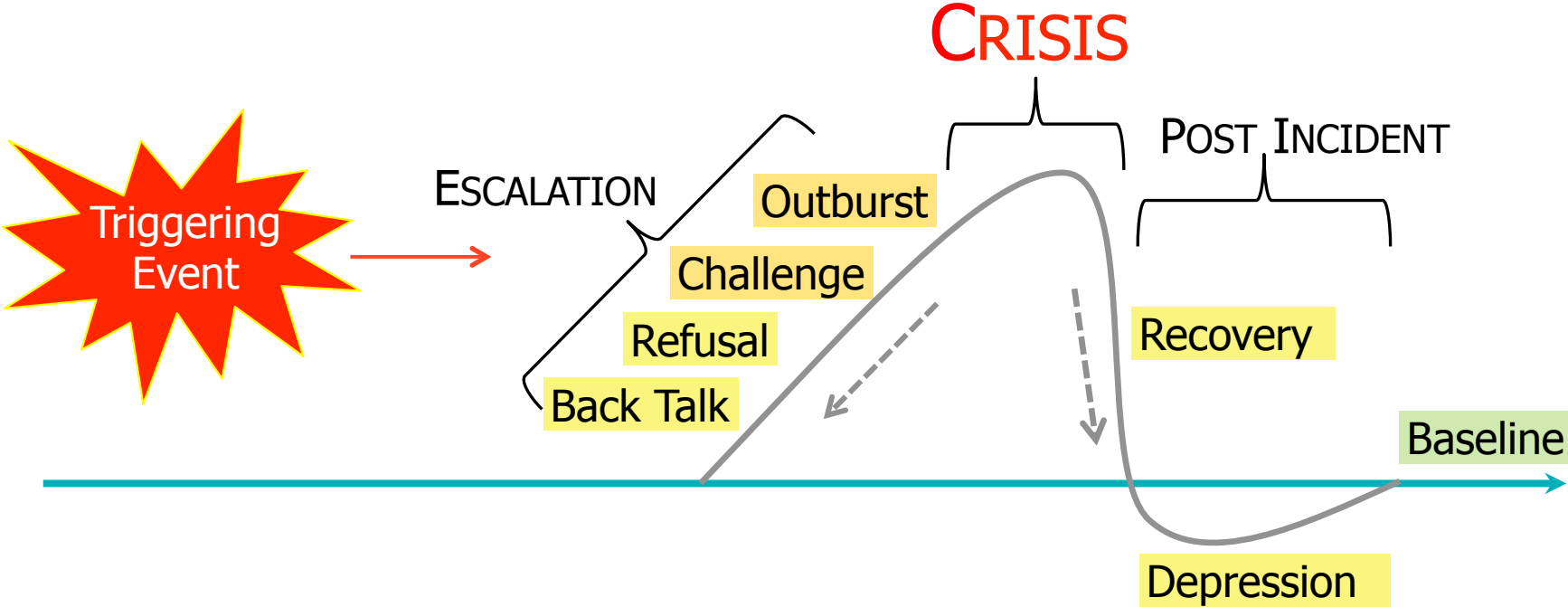- Re-introduction of triggers in this stage could re-start the cycle.

Depression

- Person reaches a "quiet stage"
- Energy level is below baseline
- May exhibit remorse for their actions.

Recovery

Baseline

Depression

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Strategies for De-escalation

Aggression Cycle

CRISIS

ESCALATION

POST INCIDENT

Triggering Event

Outburst

Challenge
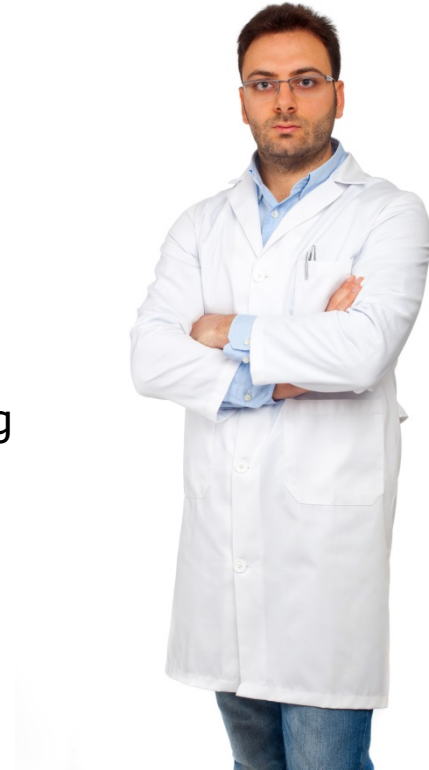
Refusal

Back Talk

Recovery

Baseline

Depression

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Strategies for De-escalation during Backtalk/Refusal

General Strategies

- Keep calm

- Have neutral body language

- Be empathetic, acknowledge concerns

- Actively listen

- Allow for personal space (1.5 to 3 feet)

- Try to remove triggers and keep the area non-threatening

- Give consistent and clear information

- Start thinking of a contingency plan

- Position yourself toward an exit

Strategies for De-escalation during Backtalk/Refusal

Active Listening

- Let the person talk without talking over them

- Focus on what the person is saying

- Restate what the person is saying to show you hear them and understand

- Keep answers short & clear

- Be aware of their body language

Strategies for De-escalation during Backtalk/Refusal

Self-control and Speaking

- DON'T TAKE IT PERSONALLY

- Maintain self-control

- Tone - try to avoid inflections of impatience, condescension, inattention, etc.

- Volume - keep the volume appropriate for the distance and situation

- Cadence - deliver your message using an even rate and rhythm

Strategies for De-escalation during Challenge/Outburst

General Strategies

- Position yourself toward an exit

- Respond to person with a team or buddy

- Have way to communicate with others, staff, security

- Set limits in reassuring tone with potential consequences

- Be prepared to escape

Strategies for De-escalation during Challenge/Outburst

Limit Setting

- Keep it simple, providing simple explanations why a behavior isn't acceptable

- Offer choices (choices = power)

- When appropriate give them time to make a decision

- Separate the person from the behavior; simply state what you see vs. labeling person

- If behavior continues, give options and consequences
    - Enforceable, make sure it's something you can do it

Strategies for Dealing With Crisis Phase

General Strategies

- Keep your distance

- Let the individual vent or release

- Use panic device or alarm to call security and warn others

- Continue verbal and non-verbal maneuvers if safe

- Control access to area

- Consider run, hide, fight

Strategies for Post-Incident/Recovery Phase

General Strategies

- Remain calm with neutral body language and stance

- Only engage once the crisis is over

- Remove any triggers or refrain from providing triggers
  - Move individual to a quiet area

- Provide empathy and reassurance

Questions?

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