Appendix C1: Hospital Administrators - Evaluation of Hospital Workplace Violence Prevention Program: Abstraction Form

EVALUATION OF HOSPITAL WORKPLACE VIOLENCE PREVENTION PROGRAM: ABSTRACTION FORM

Check if hospital has:	Emergency Department:Psychiatric Unit(s):	# patients/year: # beds: Voluntary Adm: Y/N	 Involuntary Adm:
Y/N	• Detox Unit (stand-alone):	# beds:	
	VIOLENCE PREVENTION tal have a formal written wo		ntion plan?
•01 \	∕es •02 No	•99 Unknown	

If YES:

2. Does the workplace violence prevention plan directly address?

a. Establishment of a violence prevention committee	Yes No
b1. Worker-on-worker violence	Yes No
b2. Patient/family violence against workers	Yes No
b3. Domestic violence (where the victim is an employee) that enters the hospital	Yes No
b4. Criminal activity in and around the hospital	Yes No
b5. Violence against patients &/or visitors	Yes No
c. Recordkeeping process for tracking violent events	Yes No
d. Incident reporting, investigation, and evaluation methods	Yes No
e. Follow-up medical and psychological care	Yes No
f. Directions on how to access the facility's post-incident response system	Yes No

Public reporting burden of this collection of information is estimated to average 60minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0914).

3. Is a violence risk assessment completed? •01 Yes •02 No stated	•03 Not			
IF YES:				
3a. How often are the assessments completed?				
• At least annually • Other: •03	Not stated			
3b. Which of the following job- or task-specific factors are inclu	uded in the risk			
assessment?				
Working with unstable or volatile persons	Yes No			
Prevalence of weapons on site among patients, family, or visitors	Yes No			
Presence of gang members	Yes No			
Overcrowding and long waits for service that lead to client frustrations	Yes No			
Isolated and/or solo work with patients and/or residents during examinations or treatment	Yes No			
Lack of staff training	Yes No			
Impact of staffing (including security personnel) as a factor that may increase the risk of violent events	Yes No			
3c. Which of the following factors are examined when conducting surveys for hazards in the physical environment?	walk through			
Physical layout	Yes No			
Unrestricted access points	Yes No			
Crime rate in surrounding area	Yes No			
Non-working alarm systems, communication devices, surveillance cameras and/or mirrors	Yes No			
Poor lighting and visibility in facility	Yes No			
Poor lighting and visibility in parking areas	Yes No			
3d. Trends and patterns of violent events are examined through the collection and review of data? •01 Yes •02 No •03 Not stated				
4. How often are the violence prevention policies, procedures and response	onsibilities			
updated? • Annually • Other:	•03 Not stated			

Additional Comments about Workplace Violence Prevention Program:

TR		

1. Do employees receive workplace violence prevention training?

- •01 Yes •02 No •03 Not stated

IF YES:

2. How frequently is the workplace violence prevention training offered?

At hireQuarterly

Yearly

• Other: _____

•03 Not stated

3. Length and recipients of workplace violence prevention training:

	New Hire	Recurring Training
a. How long is the workplace violence prevention training? (in minutes)		
b. Which positions are <u>included</u> in the training?		
Nurses	Yes Not Stated	Yes Not Stated
Physicians	Yes Not Stated	Yes Not Stated
Unlicensed support staff	Yes Not Stated	Yes Not Stated
Managers	Yes Not Stated	Yes Not Stated
Clerical staff	Yes Not Stated	Yes Not Stated
Security	Yes Not Stated	Yes Not Stated
Volunteers	Yes Not Stated	Yes Not Stated
Other:		
c. Are contract employees included in the training?	Yes Not Stated	Yes Not Stated

d. Are per diem employees included in the training?	Yes Not Stated	Yes Not Stated
e. Are temporary staff included in the training?	Yes Not Stated	Yes Not Stated

- 4. Which formats are used for the training (check all that apply)?
 - Lecture format (presentations)
 - Reading prepared material/handouts in print
 - Interactive discussions
 - Role-playing
 - DVD
 - Computer-based training activities

Other (Specify:

- 5. Who conducts the **new hire** training?

 - Contract with a company that provides Train-the-Trainer sessions
 (what company: _______)
 - Department in facility (which department:
 - Not stated
- 6. Who conducts the **recurring** training?
 - Contract with a company that provides training to all new hires
 (what company:
 - Contract with a company that provides Train-the-Trainer sessions
 (what company:
 - Department in facility (which department: ______)
 - Not stated
- 7. Which of the following components are included in the violence prevention training?

	New Hire Training	Recurring Training
a. Requirements of workplace violence administrative rules	Yes Not Stated	Yes Not Stated
b. Review of the facility's relevant policies	Yes Not Stated	Yes Not Stated

c. Verbal methods to diffuse aggressive behavior	Yes Not Stated	Yes Not Stated
d. Physical maneuvers to diffuse or avoid aggressive behavior	Yes Not Stated	Yes Not Stated
e. Appropriate responses to workplace violence, including use of restraining techniques	Yes Not Stated	Yes Not Stated
f. Reporting requirements and procedures	Yes Not Stated	Yes Not Stated
g. Location and operation of safety devices	Yes Not Stated	Yes Not Stated
h. Resources for coping with violence	Yes Not Stated	Yes Not Stated
i. Summary and analysis of facility's risk factors identified in the worksite analysis & preventive actions taken in response to the risk factors identified	Yes Not Stated	Yes Not Stated
j. Information on multicultural diversity to increase staff sensitivity to racial & ethnic issues & differences	Yes Not Stated	Yes Not Stated
k. Other violence-related topics		
(Specify:)		

equipment (e.g. ala	irms and cam	eras) and how	to use it?	
•01 Y	es	•02 No	•03 Not state	ed
9. How often is the	training conte	ent reviewed?		
Annually stated	• Other:			•03 Not
Additional Commer	nts about Wor	kplace Violend	e Prevention Trainir	ng:
C. RECORD KEE	PING OF VIO	LENT EVENT	S AND INCIDENT II	NVESTIGATION
1. Does the facility	keep records	of all reported	l violent events?	
	•01 Yes	•02 N	•03 N	lot stated
IF YES:				
1a. Which d	epartment trad	cks the workpl	ace violence reports	?

1b. What type of data are recorded on the incident reports? (check all that apply)

8. Does hospital staff receive specific training and demonstrations on the security

• Incident d	ate / time / location	(circle all that	apply)	
• Job title o	f victim			
Activity at	the time of the viole	ent event		
 Perpetrate 	or			
• Type of vi	olent event			
Weapons	used			
 Description 	on of any physical in	njuries		
• Number o	of employees in the	vicinity		
• Employee	actions in respons	e to event		
• Facility ac	ctions in response to	o event		
• Recomme	endations			
Other (Sp	ecify:			
	 			_)
1c. Are reports tra	cked electronically?	?		
•01 Yes	•02 No	•03	Not stated	
Are incident investigati stated	ons conducted?	•01 Yes	•02 No	•03 Not
IF YES:				
2a. Who fills out th	ne incident investiga	ation reports?		
2b. What is collect	ted in the incident ir	nvestigation re	ports?	
Additional Comments ab	out Workplace Viole	ence Reportin	g and Investi	gation:
D. POST-INCIDENT R	ESPONSE			
 What types of service violent event? 	s are available for e	employees wh	o have been i	injured during a
• Critical incident deb	riefing (by whom:			
)		
 Employee health (m 	edical care)	 Psychological 	gical care/co	unseling

	• Employee Assistance Programs	• Other:		
E.	EQUIPMENT			
1.	What type(s) of equipment does the fa	cility utilize?		
	a. Alarm Systems		Yes	Not Stated
	b. Cell phones		Yes	Not Stated
	c. Personal alarm devices		Yes	Not Stated
	d. Panic alarms		Yes	Not Stated
	e. Audio surveillance systems		Yes	Not Stated
	f. Video surveillance systems:		Yes	Not Stated
	g. Other:			
2.	Are appropriate personnel trained to re •01 Yes •02 No	spond to each alarm system •03 Not stated	ı in use?	,
	Are there trained security personnel po ards, and in other locations, as needed?		ents, psy	ychiatric
	•01 Yes •02 No	•03 Not stated		
IF —	YES: Where are they posted?			
Αc	dditional Comments about Security Serv	vices:		

H. VIOLENCE PREVENTION COMMITTEE

1. Does the facility have a violence prevention committee?

•01 Yes •02 No

•03 Not stated

IF YES:

1a. Which job titles serve on the committee? (Check all that apply.)

Hospital Administrators

• Risk Manager

• Security Director

• Nurse Managers

	 Staff Nurses 		 Staff Physicians 		
	 Other (Specify 	y:)	
Not state		of the committee en	gages in direct patient contact? _	•03	
	1c. How often does the	e committee meet?			
	Quarterly	Yearly	• Other:		
	•03 Not stated				

1d. Is the violence prevention committee responsible for the following?

Completion of annual violence risk assessment	Yes	No	Not stated
Development of a written violence prevention plan		No	Not stated
Recommendations to the facility to reduce identified risks based on findings of the violence risk assessment	Yes	No	Not stated
Review of the design & layout of the facility as it relates to providing work areas safe from violence	Yes	No	Not stated
Development and maintenance of violence prevention training content and methods	Yes	No	Not stated
Development of strategies for encouraging the reporting of all incidents of workplace violence		No	Not stated
Development of procedures for reporting violent events		No	Not stated
Review data from post-incident reports in order to identify trends & make recommendations to prevent similar incidents	Yes	No	Not stated

Additional Comments about the Violence Prevention Committee: