Appendix C2:

Nursing Home Administrator - Evaluation of Nursing Home Workplace Violence Prevention Program: Combined Form

OMB No. 0920-0914 Exp. Date 2/29/2016

EVALUATION OF NURSING HOME WORKPLACE VIOLENCE PREVENTION PROGRAM: ABSTRACTION FORM

| Nursing home : | # patients/year: # beds: # employees: | | | |
|--|---|----------|---------------------------------------|-------------|
| COMMITTEE CHAIR INT | ERVIEWEE INFOR | MATION | | |
| 1. What is your job title? | | | | |
| 2. How long have you be | en in your current po | osition? | | |
| 3. How long have you be | en the committee ch | air? | · · · · · · · · · · · · · · · · · · · | |
| A. WORKPLACE VIOLE1. Does the nursing hom | | | | ntion plan? |
| •01 Yes (date imp | lemented : |) | •02 No | |
| If YES: | | | | |

2. Does the workplace violence prevention plan directly address?

| a. Establishment of a violence prevention committee | Yes | No |
|--|-----|----|
| b. Violence Prevention Policies | Yes | No |
| c1. Worker-on-worker violence | Yes | No |
| c2. Patient/family violence against workers | Yes | No |
| c3. Domestic violence (where the victim is an employee) that enters the hospital | Yes | No |
| c4. Criminal activity in and around the hospital | Yes | No |
| c5. Violence against patients &/or visitors | Yes | No |
| d. Recordkeeping process for tracking violent events | Yes | No |
| e. Incident reporting, investigation, and evaluation methods | Yes | No |
| f. Follow-up medical and psychological care | Yes | No |
| g. 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 30minutes 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

| 3a. How often are the assessments completed? | | |
|--|--------------------------------|-----------------------------|
| • At least annually • Other: | | |
| 3b. Which of the following job- or task-specific factors are incleassessment? | ıded in the r | isk |
| 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 | Yes | No |
| · | | |
| examinations or treatment | Yes | No |
| · · | Yes Yes | |
| examinations or treatment Lack of staff training Impact of staffing (including security personnel) as a factor that may | Yes | No |
| examinations or treatment Lack of staff training Impact of staffing (including security personnel) as a factor that may increase the risk of violent events 3c. Which of the following factors are examined when conducting surveys for hazards in the physical environment? | Yes | No ugh |
| examinations or treatment Lack of staff training Impact of staffing (including security personnel) as a factor that may increase the risk of violent events 3c. Which of the following factors are examined when conducting surveys for hazards in the physical environment? | Yes | No ugh No |
| examinations or treatment Lack of staff training Impact of staffing (including security personnel) as a factor that may increase the risk of violent events 3c. Which of the following factors are examined when conducting surveys for hazards in the physical environment? Physical layout | Yes walk throu | No No No |
| examinations or treatment Lack of staff training Impact of staffing (including security personnel) as a factor that may increase the risk of violent events 3c. Which of the following factors are examined when conducting surveys for hazards in the physical environment? Physical layout Unrestricted access points Crime rate in surrounding area Non-working alarm systems, communication devices, surveillance | walk throu | No ugh No No No |
| examinations or treatment Lack of staff training Impact of staffing (including security personnel) as a factor that may increase the risk of violent events 3c. Which of the following factors are examined when conducting surveys for hazards in the physical environment? Physical layout Unrestricted access points | Yes walk throu Yes Yes Yes Yes | No No No No |

4. How often are the violence prevention policies, procedures and responsibilities

• Other: _____

updated?

Annually

•02 No

3. Is a violence risk assessment completed? •01 Yes

B. TRAINING

- 1. Do employees receive workplace violence prevention training?
 - •01 Yes •02 No

IF YES:

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

| At hire | Quarterly | |
|---------------------------|-----------------------------|--|
| • Other: | | |

3. Length and recipients of workplace violence prevention training:

| | | Recurring |
|---|----------|-----------|
| | New Hire | Training |
| a. How long is the workplace violence prevention training? (in minutes) | | |
| b. Which positions are <u>included</u> in the training? | | |
| Nurses | Yes No | Yes No |
| Physicians | Yes No | Yes No |
| Unlicensed support staff | Yes No | Yes No |
| Managers | Yes No | Yes No |
| Clerical staff | Yes No | Yes No |
| Security | Yes No | Yes No |
| Volunteers | Yes No | Yes No |
| Other: | | |
| c. Are contract employees included in the training? | Yes No | Yes No |
| d. Are per diem employees included in the training? | Yes No | Yes No |
| e. Are temporary staff included in the training? | Yes No | Yes No |

Yearly

- 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

5. 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 No | Yes No |
| b. Review of the facility's relevant policies | Yes No | Yes No |
| c. Verbal methods to diffuse aggressive behavior | Yes No | Yes No |
| d. Physical maneuvers to diffuse or avoid aggressive behavior | Yes No | Yes No |
| e. Appropriate responses to workplace violence, including use of restraining techniques | Yes No | Yes No |
| f. Reporting requirements and procedures | Yes No | Yes No |
| g. Location and operation of safety devices | Yes No | Yes No |
| h. Resources for coping with violence | Yes No | Yes No |
| 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 No | Yes No |
| j. Information on multicultural diversity to increase staff sensitivity to racial & ethnic issues & differences | Yes No | Yes No |
| k. Other violence-related topics | | |
| (Specify:) | | |
| | | |

| Does nursing home staff re | ceive specific tr | raining and demonstrations on the security |
|--|-------------------|--|
| equipment (e.g. alarms and ca | ameras) and ho | ow to use it? |
| •01 Yes | •02 No | |

7. How often is the training content reviewed?

| Annually Other: | |
|---------------------|--|
|---------------------|--|

C. RECORD KEEPING OF VIOLENT EVENTS AND INCIDENT INVESTIGATION

1. Does the facility keep records of all reported violent events?

•01 Yes •02 No

IF YES:

1a. Which department tracks the workplace violence reports?

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

| Incident date / time / location (circle all that apply) | | | | | |
|---|--|--|--|--|--|
| Job title of victim | | | | | |
| Activity at the time of the violent event | | | | | |
| • Perpetrator | | | | | |
| Type of violent event | | | | | |
| Weapons used | | | | | |
| Description of any physical injuries | | | | | |
| Number of employees in the vicinity | | | | | |
| Employee actions in response to event | | | | | |
| Facility actions in response to event | | | | | |
| Recommendations | | | | | |
| • Other (Specify: | | | | | |
|) | | | | | |
| 1c. Are reports tracked electronically? | | | | | |
| •01 Yes •02 No | | | | | |
| 2. Are incident investigations conducted? •01 Yes •02 No | | | | | |
| IF YES: | | | | | |
| 2a. Who fills out the incident investigation reports? | | | | | |
| 2b. What is collected in the incident investigation reports? | | | | | |
| | | | | | |
| Additional Comments about Workplace Violence Reporting and Investigation: | | | | | |
| D. POST-INCIDENT RESPONSE | | | | | |
| 1. What types of services are available for employees who have been injured during a violent event? | | | | | |
| Critical incident debriefing (by whom:) | | | | | |
| Employee health (medical care) Psychological care/counseling | | | | | |
| Employee Assistance Programs Other: | | | | | |
| | | | | | |

E. EQUIPMENT

1. What type(s) of equipment does the facility utilize?

| a. Alarm Systems | Yes | No |
|--------------------------------|-----|----|
| b. Cell phones | Yes | No |
| c. Personal alarm devices | Yes | No |
| d. Panic alarms | Yes | No |
| e. Audio surveillance systems | Yes | No |
| f. Video surveillance systems: | Yes | No |
| g. Other: | | |

| | , | | | |
|----|---|--------------------------|----------------------------------|-------------|
| | g. Other: | | | |
| 2. | Are appropriate personnel trai •01 Yes | ned to respond •02 No | to each alarm syster | n in use? |
| Ad | ditional Comments about Sec | urity Services: | | |
| F. | VIOLENCE PREVENTION C | OMMITTEE | | |
| 1. | Does the facility have a violer | nce prevention | committee? | |
| | •01 Yes | •02 No | | |
| IF | YES: | | | |
| | 1a. Which job titles serve | on the committe | ee? (Check all that ap | oply.) |
| | Nursing Home A | dministrators | Risk Manag | er |
| | Security Director | | Nurse Mana | igers |
| | Staff Nurses | | Staff Physic | ians |
| | Other (Specify: _ | | |) |
| | 1b. What percentage of th | ne committee er | ngages in direct patie | nt contact? |
| | 1c. How often does the co | ommittee meet? | , | |
| | Quarterly | Yearly | • Other: | |

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

| Completion of annual violence risk assessment | Yes No |
|---|--------|
|---|--------|

| Development of a written violence prevention plan | Yes No |
|--|--------|
| Recommendations to the facility to reduce identified risks based on findings of the violence risk assessment | Yes No |
| Review of the design & layout of the facility as it relates to providing work areas safe from violence | Yes No |
| Development and maintenance of violence prevention training content and methods | Yes No |
| Development of strategies for encouraging the reporting of all incidents of workplace violence | Yes No |
| Development of procedures for reporting violent events | Yes No |
| Review data from post-incident reports in order to identify trends & make recommendations to prevent similar incidents | Yes No |

Additional Comments about the Violence Prevention Committee:

G. REGULATIONS (NJ only)

1. Are you familiar with the NJ Violence Prevention in Health Care Facilities Regulations?

| ●01 Yes | •02 No |
|---------|--------|

IF YES:

| 1a. What do you feel are some of the strengths of the Regulations? |
|---|
| |
| 1b. What do you feel are some of the weaknesses of the Regulations? |
| |
| |

H. Organizational-Level Safety Climate

| | 1 | 2 | 3 | 1 | |
|---|------------|---------------|-------------------------------|-------|-----------------|
| | completely | 2 disagrae | | 4 | 5 completely |
| Branch management in this agency | disagree | disagree | neither agree nor disagree | agree | agree |
| Reacts quickly to solve the problem | uisagree | | noi disagree | | agree |
| when told about safety and security | | | | | |
| hazards | | | | | |
| 2. Insists on thorough and regular | | | | | |
| safety and security reviews | | | | | |
| 3. Tries to continually improve safety | | | | | |
| and security for all workers | | | | | |
| 4. Provides all the equipment needed | | | | | |
| to keep workers safe in the field | | | | | |
| 5. Is strict about working safely when | | | | | |
| patient caseloads are high | | | | | |
| 6. Quickly corrects any safety or | | | | | |
| security hazard (even if it's costly) | | | | | |
| 7. Provides detailed safety reports to | | | | | |
| workers (e.g., injuries, violent events | | | | | |
| without an injury) | | | | | |
| 8. Considers a person's safety | | | | | |
| behavior when moving-promoting | | | | | |
| people | | | | | |
| Requires each case manager to | | | | | |
| help improve safety and security | | | | | |
| among the workers he/she supervises | | | | | |
| 10. Invests a lot of time and money in | | | | | |
| safety and security training for | | | | | |
| workers | | | | | |
| 11. Uses any available information to | | | | | |
| improve existing safety and security | | | | | |
| rules | | | | | |
| 12. Listens carefully to workers' ideas | | | | | |
| about improving safety and security | | | | | |
| 13. Considers safety and security | | | | | |
| when establishing patient volume and | | | | | |
| worker schedules | | | | | |
| 14. Provides workers with a lot of | | | | | |
| information on safety and security | | | | | |
| issues | | | | | |
| 15. Regularly holds safety and | | | | | |
| security awareness events (e.g., | | | | | |
| presentations, ceremonies) | | | | | |
| 16. Gives safety and security | | | | | |
| personnel the power they need to do | | | | | |
| their job | | | | | |