

Title:

Implementation and Evaluation of a Violence Screening Tool in the Psychiatric Emergency Department

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Session Title:

Rising Stars of Research and Scholarship Invited Student Posters

Keywords:

Broset violence Checklist, emergency department and workplace violence

References:

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Abstract Summary:

Workplace violence (WPV) is a serious occupational hazard worldwide. Nurses working in the emergency department (ED) are at higher risk. Identification of behavioral cues for violence with timely intervention has the potential to decrease the prevalence of violence in the ED.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
The learner will be able to understand the risk factors for WPV in the ED	Some of the risk factors are drug and alcohol use, lack of insight by psychiatric patients and the general nature of violence in the community that finds its way to the ED
The learner will be able to identify behavioral cues for violence	Some of the behavioral cues are pacing, cursing, yelling, screaming and physical assaults

Abstract Text:

Workplace violence (WPV) is a serious occupational hazard across multiple occupations across the United States. Although all nurses working across the continuum of care are targets of violence, those working in the emergency departments (ED) are at a higher risk. Contributory factors to violence in the ED include the increasing psychiatric population, the rise in polysubstance use, problem of violence in the community and patients using the ED for their primary care. Evidence have shown that appropriate identification of behavioral cues for violence with timely intervention has the potential to reduce the prevalence of violence in the ED. Regrettably, there are no standardized violence screening tools specific to the ED. Therefore, the purpose of this scholarly project is to implement and evaluate the effectiveness of a violence screening tool as a predictor of potential violence in the ED. The Interpersonal Relations Theory (IPT) will be guide the implementation of this DNP quality improvement project. According to the Center for Disease Control and Prevention (CDC, 2015), the primary way to stop violence in any form is to prevent it before it begins. Also, studies have shown that the establishment of a therapeutic relationship at the early stage of the staff-patient encounter has the potential to reduce violence. The methodology will include nurses using the Broset Violence Checklist (BVC) to assess patient at risk for violence in a large urban teaching hospital in Baltimore City, Maryland during a 15 weeks' period. Data will be collected using pre and post intervention staff assessment survey incorporated into Survey Monkey application. Descriptive statistics and pair t test will be used to analyze the result of the pre and post staff education staff assessment. Nurses will be assessed in five critical areas of violence experienced by nurses such as name calling, been pushed, kicked, yelled at and threatened with physical harm. The anticipated primary outcome is a decrease in the incidence of violence towards emergency department nurses while the secondary outcome is an improvement in the perception of safety among the ED staff.