Practice Matters

FROM WHERE I STAND

Workplace violence: Don't risk it, de-escalate it



By Leah Curtin, RN, ScD(h), FAAN

WHETHER you're a certified nursing assistant, licensed practical nurse, registered nurse, or nurse practitioner, you'll likely deal with patients who are feeling pain, have lost their independence, or are experiencing stress and anxiety—and they will sometimes lose control of their emotions. These angry and upset patients or family members can test your compassion, communication skills, and patience. They even may resort to violence.



Workplace vi-

olence is a serious and growing threat. And it's not confined to patients and families; it also may include your coworkers. When faced with threats of violence from a subordinate, coworker, patient,

or visitor, the first order of business is to consciously calm yourself before interacting with the person. If you're upset, it's only going to escalate the situation. Calm down and begin to look at the situation and how you can intervene safely. Take a deep breath.

Then, what do you do? The short answer is:

- 1. Give them space. Stand 2 to 3 feet away if possible.
- 2. Monitor your voice tone. Keep it measured and calm.
- 3. Know how to retreat. Have a planned escape route.

These techniques may help, but how do you know, unless it's patently obvious, that you are—or may be facing violence? Warning signs of potential violence from patients, families, or coworkers include:

- intimidating, harassing, bullying, or other belligerent and aggressive behavior
- numerous conflicts with patients, families, coworkers, or supervisors
- comments that indicate approval of using violence to resolve a problem
- comments that indicate desperation over family, finances, or other personal problems

• inappropriate references to guns or idle threats about using a weapon to harm someone and, of course, bringing a weapon to the workplace.

Don't risk it, de-escalate it

If you're ever concerned that a situation may turn violent, immediately alert your supervisor and follow your organization's reporting procedures. Then, start de-escalation techniques:

- Don't avoid the conflict. Be quiet, don't interrupt, and be attentive.
- Remain calm. When dealing with difficult patients, the best approach is to stay calm.
- Avoid being defensive. Listen to what the person is trying to tell you.
- Engage in conversation.
- Don't play the blame game. Work to see both sides and reflect the feelings the person is saying or displaying.
- Avoid overgeneralizations. Repeat the content of the person's message.
- Avoid the need to be right. Help the person clarify his or her request.
- Be empathetic. This is the quickest way to calm an angry or difficult patient.
- Align yourself with the person. For example, you might share times that you too have felt wronged.
- Avoid arguing. Be sincere, but don't contradict the person.
- Don't stonewall but set boundaries. Allow the person to release his or her frustration.
- Don't attack someone's character. Let the person know that you understand the complaint.
- If the person threatens violence, very slowly back away toward a door to a corridor.

If you haven't attended a training session on how to de-escalate violence, do so soon.

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