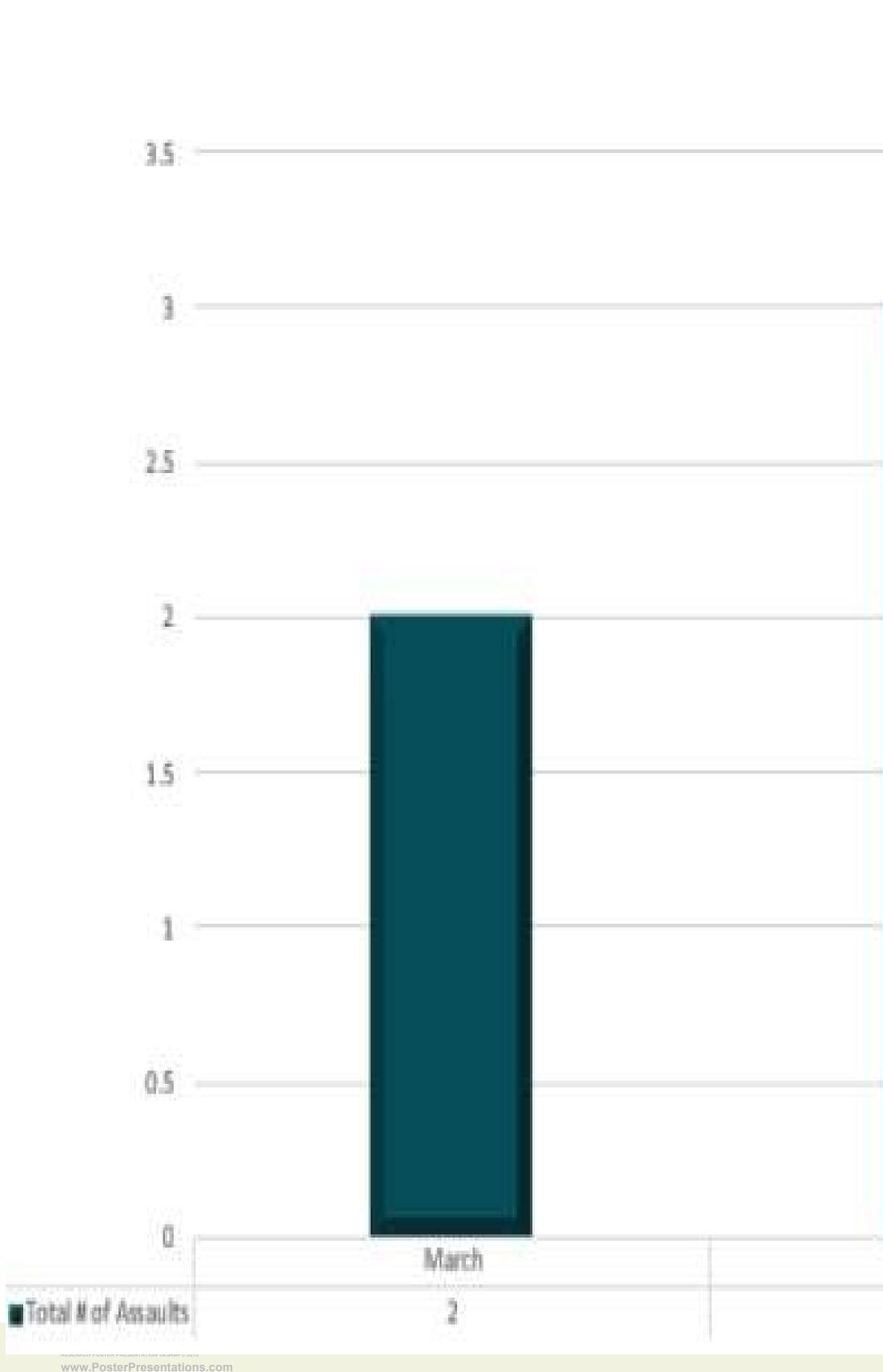
Give Me Some Warning! A Tool to Recognize if Patients May Become Violent

Introduction

This project is a quality improvement (QI) initiative to implement the Broset Violence Checklist and associated interventions. Based on the score, interventions are recommended that range from active listening, clarifying, decreasing stimuli, and verbal deescalation for moderate risk to notifying the physician, increasing observation of the patient, offering medication, or activating a team for support with deescalation for those that are identified as high risk for becoming violent.



Brittney Williamson, MSN, RN, NE-BC Melissa Rouse PhD, APRN, CNS-BC, NEA-BC, CENP, CPHQ Casey Adams, BSN, RN, CMSRN

Purpose and Assessment

On a medical unit, it was identified that there was a high rate of violent events occurring resulting in employee injury. There is not a current screening tool being used to identify patients who are at risk of becoming violent. The Broset Violence Checklist guides the nurses to answer questions in the electronic health record (EHR) related to six patient characteristics. A score of one to two is considered moderate risk for becoming violent and a score greater than two is considered high risk for becoming violent.

QI Project Data

S4E Monthly Staff Assaults by Patients

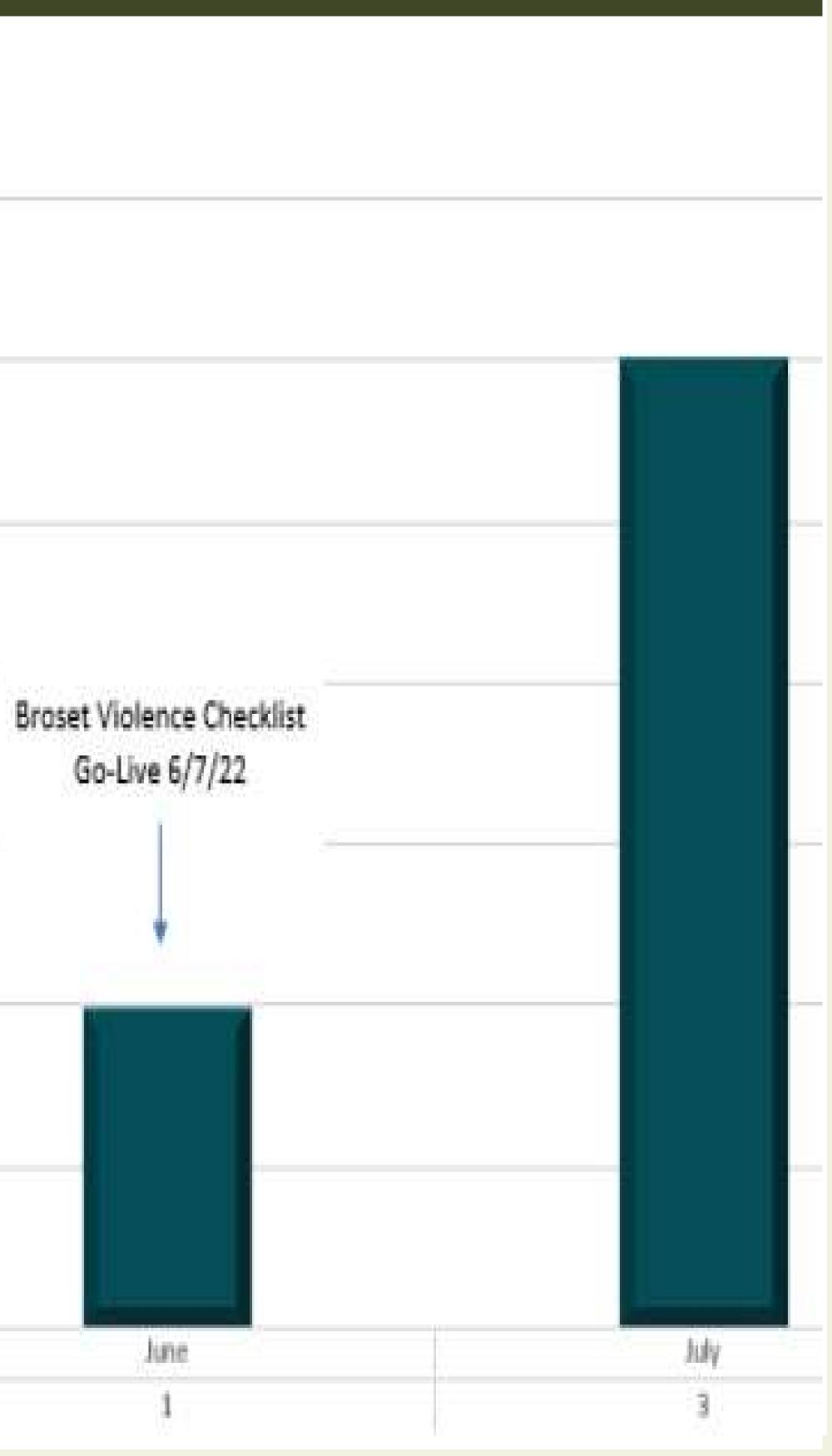
FY22

Education began	
Education began for staff	
Education began for staff	

Northeast Georgia Medical Center

Population and Timeline

This quality improvement project was implemented on a medical unit with a high rate of staff assaults. Data for staff assaults for three months prior to the implementation was compared to data for the 2 months during the time period that the Broset Violence Checklist was being used. Data collected was analyzed to determine if there was a decrease in staff assaults while the tool was being used.



Although there was not a decrease in on the need to combine the Broset toolkit for staff to use to manage project was foundational in the assessment and management of policy was not in place during the project time period. The newly developed policy will also provide an escalation algorithm that will guide the nurse to critically think through the application of such tools. Future staff completion of Crisis Prevention the interventions recommended by escalation techniques and is future staff assaults.

staff assaults during this project time frame, this QI Project gleaned insight Violence Checklist with an all-inclusive patient violence and aggression. This establishment of a policy to guide the patient aggression and violence, as a Institute (CPI) training will better guide the Broset score through learned depredicted to decrease the likelihood of



Results and Future Significance

References

- Doyle, K. E. (2020). *Mitigating workplace violence utilizing* the Broset Violence Checklist. Handle Proxy. Retrieved July 26, 2022, from http://hdl.handle.net/10713/12946
- Sarver, W. L., Radziewicz, R., Coyne, G., Colon, K., & Mantz, L.
 - (2019). Implementation of the Brøset Violence Checklist on an Acute Psychiatric Unit. Journal of the American Psychiatric Nurses Association, 25(6), 476-
 - 486. <u>https://doi.org/10.1177/1078390318820668</u>