15 Staff Safety and Workplace Violence Education (SAVE) Training

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Background

Mental health professionals working in community settings routinely encounter challenges to

violence report subsequent stress, role strain, and demoralization.[5] Others report effects that included constricted thinking, restricted coping, and states of fear, anxiety, and depression.[6] Such concerns can impede the daily routine of staff and contribute to performance impairment and further personal risk, especially for those without proper training. As a result, staff involved in outreach treatment may become less effective if afraid, or faced with dangerous situations with little or no knowledge of what to do next.[7] Witnessing episodes of violence, and the stress of observing such events directed toward colleagues can contribute further to feelings of helplessness and loss of control and predictability in the workplace.[8]

Community mental health staff members usually receive some degree of violence prevention training early in their careers and training for staff working with violent patients is frequently recommended.[9] Typically, this training includes a brief overview of risk factors for violence, and more focused interventions relative to inpatient or emergency psychiatric services like protocols for restraint and seclusion. However, this training usually offers little in the way of proper combinations of environmental preparation, situational awareness, and verbal and non-verbal management techniques to stave off WPV in street settings. Excellent programs are available to deliver audience training and instructor development courses on general crisis intervention management, but may be limited in their scope and specificity for violence prevention for caregivers primarily operating "in the streets."[10] In light of increasing patient acuity and the demand for mental health outreach services in the community, proper staff

identify key individual and situational stressors

iii. Medically compromised

Using the acronym, OBSERVE, a summary discussion of seven keys to successful violence pre-vention programming for mental health professionals, is shared with audience members (see Figure 15-2). Finally, in order to develop a unique agency safety plan, attendees are asked to

"OBSERVE"
1. <u>Observation & Assessm</u>ent
   a. Maintaining an index of suspicion
2. <u>Broad Communicatio</u>n
   a. Development of skills
   b. Crisis management
3. <u>Supervised Teamwo</u>rk
   a. When in doubt, shout
   b. Routine high-risk case review
4. <u>Education and Training</u>
   a. Identified expertise
   b. Certification and educational credit
   c. Refresher courses
5. <u>Respec</u>t
   a. Client
   b. Co-workers
6. <u>Visible Administrative Suppo</u>rt
   a. Empowered management
   b. Safety plans and protocols
7. <u>Early Debriefi</u>ng
   a. Review of all incidents
   b. Acknowledge all staff input
   c. Record appropriate details
   d. Medical/mental health treatment following incidents
   e. Time-out for employee

Figure 15-2   Seven keys to violence prevention for mental health professionals

Resources
¥ http://www.urmc.rochester.edu/smd/psych/special_prg/SAV   taff¥   httpskills Tww [(e.2e2J478(Safet)F4 1 Tf6.1(he3

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