Workplace Violence

Challenges and Perspectives from an Oklahoma Community Hospital

About Us

- Wagoner Community Hospital 100 bed community hospital in Northeastern Oklahoma. 32 bed inpatient adult psychiatric unit
- Main service area Tulsa, Wagoner, Muskogee, Rogers, Cherokee, Sequoyah, McIntosh, Adair, and Creek counties
- Not unheard of to receive patients for care from as far away as Woodward or Durant

Violent Episodes

- Violent episodes increased 117% over the past fiscal year
- Violent episodes defined as Level 1 (belligerent challenges authority) to Level 5 (individual acting our staff has to go hands on to control the individual and/or someone is injured or hurt from the interaction- we have had 31 of this type this year)
- Injuries range from scrapes and bruising to broken bones and or permanent disability
- Can be any patient at any time

Violent Episodes Impact

- Staff call in due to being to scared of safety to report to work
 - Leads to increase in agency usage which is financially draining for small hospitals
 - High turnover, constantly training new staff members
- Other patients refuse to come out of their rooms for treatment and therapy related to fear of personal safety
 - Longer days of stay
 - Impedes healing process of patients
 - Can exacerbate other health diagnoses (COPD, Hypertension, etc.)
- Some staff are desensitized to "violence", i.e. do not recognize patients punching holes in the wall as an episode because this is a normal occurrence in their work environment
- Law enforcement most often will not respond when called because there is "nothing they can do"

Patient Satisfaction Comments

- "More outside time would help, Also art time/music time with non-violent patients"
- "Others violent behavior made me nervous, anxious (fight/flight reaction)
- "Didn't feel safe because of (patient name) and (patient name)"
- "Melodie was very helpful to make sure my needs were met and was safe. She saved me from being hit by another patient"
- "There were several times that I felt threatened by another patient"

Suggested Action Items

- Allow ALL healthcare providers to press charges when assaulted by patients. Current law only allows ED workers and EMS personnel
- Initiate a statewide workgroup to address the holes in addressing and meeting the needs of the mental health population. We are failing this sub-group in our state at the current time