

# Handle with CARE



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## Dealing with aggression and violence : training and support parts of the puzzle

### Problem

Healthcare professionals are **confronted with violence** in the workplace more than ever<sup>1</sup>. In daily life two natural answers come to mind when facing violence : fight or flight. However these responses are inappropriate in a hospital setting. **How can we help them deal with it ?**

### Answer

We developed an educational training program designed to :

- develop clinical judgment,
- improve communication skills,
- acquire de-escalation techniques,
- promote the use of risk assessment tools and related support.

### Training

Several forms of training are available to **best suit the needs** of nurses:

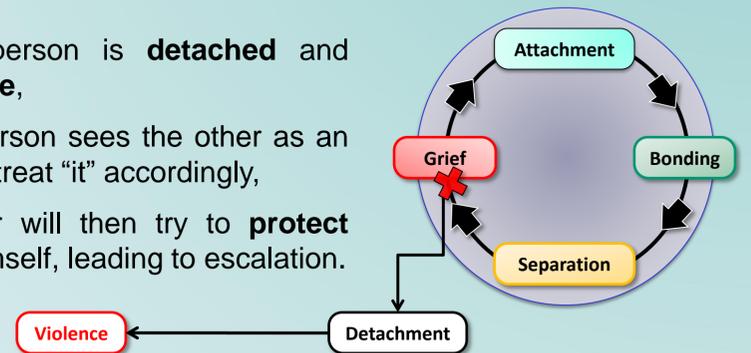
- a hospital wide four day long workshop<sup>2</sup> is offered four times each year.
- special training workshops are devised & tailored to the specific needs of nurses in a given clinical setting.
- workshops are included in specialized postgraduate training for nurses.
- special courses have been created in the aux. nurses training program.

### Foundation

The way a violent behavior is seen and decoded is as important, if not more, than the skills used to deal with it. For this purpose, we found **Georges Kohlrieser's attachment cycle**<sup>3</sup> adequate, relevant and accessible to all healthcare workers.

At the core of every violent incident we **always** find the **same three fundamentals** :

- the "violent" person is **detached** and **feels vulnerable**,
- the "violent" person sees the other as an **object** and will treat "it" accordingly,
- the interlocutor will then try to **protect and defend** himself, leading to escalation.



### Support

Support is **essential**. It's available to healthcare workers and teams to help them cope with aggression and its sequels : PLN may be called for help by physicians, nurses or nurses auxiliaries. Other specialized personnel are accessible such as psychiatric consultation-liaison team, staff psychologist, hospital security personnel, hospital jurists and support from the Hum. Res. Dep.

A leaflet has also been published to answer questions workers may have regarding workplace violence.<sup>4</sup>

### The future

Our experience shows that **training helps healthcare workers**. We are now working to formally evaluate its benefits. **Support is another important** piece of the puzzle, as it may prevent violence or its sequels on personnel and patients.

We need to implement **risk assessment tools**, create protocols and procedures for departments where none already exist, and reinforce the synergy between the different actors involved. There is still a long way to go to finish the puzzle, but we are on our way. One piece after another.

### References

1- Wang, S., Hayes, L., O'Brien-Pallas, L. *A Review and Evaluation of Workplace Violence Prevention Programs in the Health Sector*. NHRU. 2008. p.4. 2-Nguyen, A., Van Tuinen, M., GVMP : Gestion de la Violence en Milieu Professionnel. Programme de formation continue HUG 2012-13. 3- Kohlrieser, Georges., *Négociations sensibles. Cessez d'être otage et reprenez la main !* Dirigeants commerciaux de France. Pearson Education. 2009. 4- Margairaz, C., Levasseur-Racine, B., *Où trouver de l'aide en cas de violence sur le lieu de travail ?* HUG. Janvier 2007.