

Patient-Visitor Violence: What Makes Nurses Feel Safe?

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Background

Patient-Visitor Violence (PVV) against hospital nursing staff members is a growing problem in the US and worldwide.

- Research has identified:
- Common types, frequency, & severity
 - Risk factors for assailants, victims, & organization
 - Relationship between PVV and quality of care
 - Psychological & professional consequences for nurse-victims
 - Factors that mitigate frequency, severity, & effects on nurse-victims and hospital staff
 - Underreporting of PVV is common
 - Acceptance of some level of PVV as part of the job

Study Aim

Determine factors that make nurses feel safe from Patient-Visitor Violence

Method

- Prospective, descriptive, multicenter sub-study using data from psychometric testing of the **Personal Workplace Safety Instrument for Emergency Nurses (PWSI-EN)**
- IRB approval by expedited review with waiver of signed inform consent

Sample

- 16 hospitals across US distributed link to online survey to clinical ED RNs via workplace email
- 8 with Magnet® recognition/ 8 non-Magnet
 - 4 academic medical centers, 3 teaching hospitals, 9 community hospitals

Instrument- PWSI EN

- 23 statements answered on a 1-to-5 Likert-like scale from *Strongly Disagree* to *Strongly Agree*
 - Valid (CVI = .96) and reliable (Cronbach's alpha = 0.91) instrument measures emergency nurse overall perceptions of safety from PVV and its components
- Demographic questions also included
- Frequency of fearing for their personal safety
 - Confidence in one's organization to create a safe workplace

Identifies total score for perceived safety (higher score = greater perceived safety) plus 6 sub-factors

- Unit and organizational leadership support
- Sense of belongingness
- Security personnel
- Trust
- Understanding processes
- Training

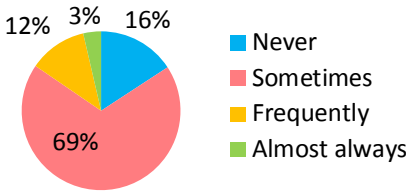
Results

Survey Respondent Characteristics (N=305)

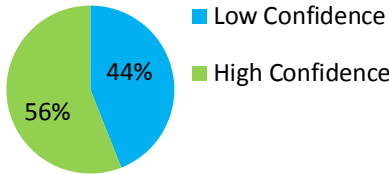
	n(%)
Age	
20-29	54(37.1)
30-39	100(64.9)
40-49	77(50.5)
50+	73(47.7)
Gender	
Male	51(17)
Female	254(83)
Primary Shift	
Days	141(46.3)
Evenings/Nights	164(53.7)
Registered nurse experience*	13.7[1.0, 44.0]
Current institution experience*	7.0[1.0, 37.0]
Emergency nursing experience*	7.0[1.0,44.0]

*in years[min, max]

Fearful for personal safety at work

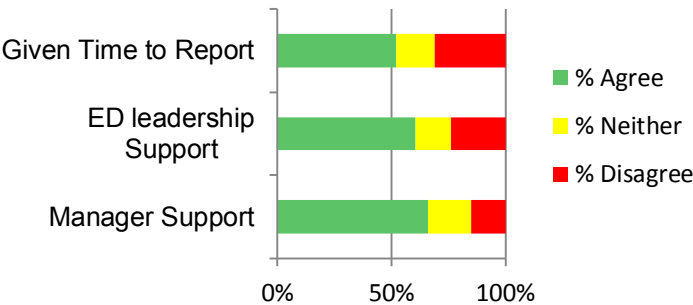


Confidence in organization to create a safe workplace

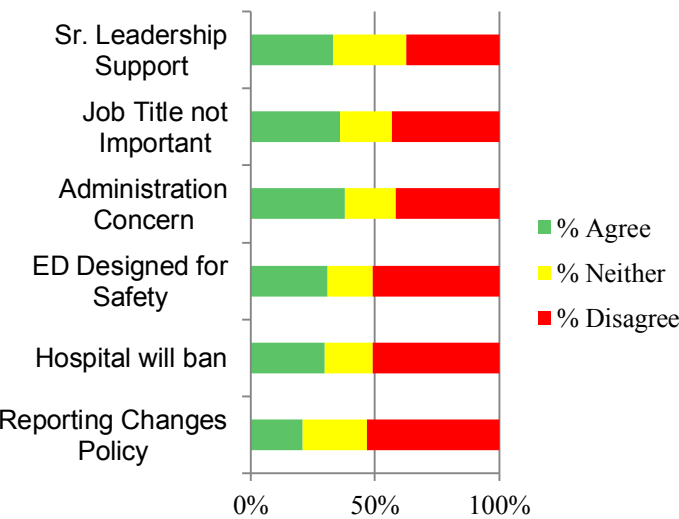


Unit and Organizational Leadership Support is primary factor influencing perceptions of safety

Unit Leadership Support



Organizational Leadership Support



Conclusions

- Clinical nurses feel less supported by senior nurse leaders and hospital administrators compared to their unit managers and administrators
- Nurse managers have great influence over many of the factors that make nurses feel safe from PVV
- Perceptions of personal safety are also influenced by perceptions of belongingness, security personnel, trust, understanding processes, and training related to PVV

Recommendations

- Senior nurse leaders and hospital administrators need to take an active and visible role around issues related to PVV
- Nurse managers & other unit administrators need to continue demonstrating support around issues related to PVV
- Use of a valid & reliable tool by nurse managers and hospital leaders, such as the PWSI-EN, to assess & improve perceptions of workplace safety among nursing staff members
- Confirmation of the validity & reliability of PWSI-EN in all nursing specialty areas

Funding

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Reference

Burchill, C.N. (2015). Development of the Personal Workplace Safety Instrument for Emergency Nurses. *WORK*, 51, 61-66. doi: 10.3233/WOR-141889