COURSE TOPIC
Flash Point

Course Details
Audience:
Dignity Health Employees and Health Care Personnel (HCP), including all persons working in any hospital / clinic / site.
Pre-Requisites: None
Duration: 0.50 Hours
At the end of this module you will learn how to:
• Define workplace violence
• Describe common myths
• Describe the workplace violence spectrum
• Recognize workplace violence Behaviors of Concern
• Define a workplace violence trigger
• Identify internal dangers
• Define an external threat
• Describe domestic violence spillover
• Describe de-escalation
• Describe critical components of workplace violence prevention
• Define the workplace violence prevention formula

Final Exam:
To receive full credit for this course you must read and comprehend all sections, and complete the final assessment with a min. score of 80%.

Read:
Please read and comprehend all scripts for each of the three Workplace Violence Awareness Training topics before starting the final exam.
Center for Personal Protection and Safety
FLASH POINT, Recognizing and Preventing Violence in the Workplace

- Chapter 1 – Introduction
- Chapter 2 – Spectrum of Violence
- Chapter 3 – Behaviors of Concern
- Chapter 4a – Domestic Violence
- Chapter 4b – Change
- Chapter 5 - Summary
FLASH POINT

INTRODUCTION

RANDY SPIVEY (Executive Director, Center for Personal Protection & Safety)
Flash Point – the point when a fire ignites. It happens when you have the right combination of fuel, heat and oxygen. It’s a point of no return. I’m Randy Spivey.

JIM SPORLEDER (Director, Center for Personal Protection & Safety)
And I’m Jim Sporleder, both from the Center for Personal Protection and Safety. From a match to a flamethrower, we’re all familiar with things that can generate a Flash Point and trigger a fire.

RANDY SPIVEY
But oxygen is invisible. You can't see it and you can't smell it. With too much oxygen in a room, though, even a small spark can create a devastating Flash Point.

JIM SPORLEDER
Like the buildup of oxygen in a room, there can be an escalation of behaviors in a workplace that left unchecked, can result in a violent outburst. And the warning signs may be almost as invisible as oxygen.

RANDY SPIVEY
That’s especially true in a healthcare environment where there are patients, visitors and even intruders to deal with. They often come into your facilities already under high levels of stress and anxiety. They may already be close to a Flash Point.

JOE BELLINO (System Executive, Security & Law Enforcement, Memorial Hermann Healthcare System)
What I tell people when they ask me, “What do hospitals do?” I tell them, “We are a hotel for sick people. And we provide a service. But we can’t lock our doors. And people don’t want to come.

DENNIS HEMPHILL (System VP of Safety, Security & Emergency Preparedness, Dignity Health)
Patients when they come, they’re already stressed; same as the family members. They’re already stressed when they come to the hospital.

LISA PRYSE (Division President of Healthcare, Old Dominion Security Company)
Very few people that come into the hospital come because they want to be there. So there’s already this high anxiety and sometimes disruptive behavior. There’s trauma that comes in, which is your anxiety levels very high.
MARY KAY COLLINS (Emergency Department Nurse, Spokane VA Hospital)
There’s that inability to control the scenario. There’s that fear of the unknown. The financial situations where now more and more hospitals are expecting you to pay upfront.

JIM SPORLEDER
All of these unique factors help can create an environment in which even a normally good-natured person might become difficult… And violence is something that usually escalates from lower level behaviors. It’s almost never true that someone “just snapped.”

RANDY SPIVEY
Most often, there are indicators that violence may be building—warning signs. If these are addressed effectively at the early stage, violence can often be prevented.

JIM SPORLEDER
You may not be able to stop every person determined to act out violently; but you can learn ways to help prevent escalation, mitigate harm, and in the most extreme cases, lessen if not prevent, loss of life.

Let’s get started.

**SPECTRUM OF VIOLENCE**

RANDY SPIVEY
When we talk about workplace violence, it’s easy to assume that only means physical assault of some kind… or at an extreme level, an armed attack. But workplace violence covers a whole range of disruptive behaviors that includes threats, harassment, intimidation, bullying, stalking, spillover from intimate partner violence, and many others.

JIM SPORLEDER
Workplace violence is any action that threatens the safety of an employee, negatively impacts an employee's physical and/or psychological well-being, or causes damage to an organization's property.

RANDY SPIVEY
These kinds of actions and behaviors can be tracked across what is known as the Spectrum of Workplace Violence. On the extreme right is death and there's nothing ambiguous about that. If shots are fired, if someone begins shooting people in a workplace, there are some things you can do to increase your chances of surviving. But the reality is you're reacting… not preventing.

JIM SPORLEDER
At the next level down the spectrum, are behaviors that clearly represent physical violence, but once again, if this occurs, the focus is on reacting rather than preventing.
RANDY SPIVEY
As we move to the left, we see a transition from physical violence to psychological and emotional violence. In this part of the spectrum are behaviors like intimidation, stalking, bullying, making threats, both direct and implied. These behaviors don't amount to physical violence, but they are destructive to the workplace.

JIM SPORLEDER
As we move further to the left of the spectrum, it’s easy to see that more options become available to prevent a volatile situation from evolving into something more violent. This is where we find what experts call “Behaviors of Concern”. These behaviors can be the first signs that someone is progressing toward a Flash Point.

BEHAVIORS OF CONCERN

RANDY SPIVEY
As we said before, the special challenge of hospitals and healthcare facilities is that sometimes people come in who are already upset or distressed. And it’s possible they could move very quickly from a low-level Behavior of Concern to a Flash Point.

MAN
*I don’t think you understand. She’s in pain...*

JIM SPORLEDER
Probably the most common and most understandable Behavior of Concern is expressed frustration. A patient or visitor is probably already anxious—anxious about his own health or the health of loved one, about money and how he might pay for treatment.

RANDY SPIVEY
It may be a challenge to determine if you’re seeing normal frustration or part of a build-up to a violent outburst. Regardless, it’s important to try and de-escalate the situation as soon as possible. Use supportive gestures and language. And your tone of voice is a critical aspect as well.

LISA PRYSE
You speak in a lower voice. You attempt to move them a little bit to the side. “Let me help you. Let’s move over here. How may I help you? Have them try to sit down.

MARY KAY COLLINS
If you can stay calm yourself and try to listen and let them vent their frustrations – because sometimes they’re right.

JIM SPORLEDER
Whether or not you think the patient is right, it’s important to make sure they feel they’ve been heard. If they hear you repeat back to them what their concerns are, they’re more likely to accept your response even if you can’t fully address their concerns in the moment.
DENNIS HEMPHILL
A lot of times, it’s just they just want somebody to talk to or listen to. You know, try to be sympathetic about what the problem is or what they’re going through, and a lot of times that works.

JOE BELLINO
Many times it’s just, “Can I help you? What’s wrong?” It’s just a simple question. I’ve seen people escalate because they weren’t even given a small drink of water. Being aware of that, if a person looks thirsty, offer them something.

RANDY SPIVEY
And even in a situation where you might not be able to solve someone’s problem, you may be able to prevent escalation by helping them see you and your co-workers as people who have compassion and concern for them.

MARY KAY COLLINS
I might not be able to fix it, but what can I help you with today? I can’t change that. But maybe I can do this for you.

JIM SPORLEDER
Though it may not always be possible to de-escalate a situation, it’s important to be aware of the direction of someone’s behavior. Is it becoming more intense or are there signs that things are calming down?

MAN
I’m sorry… It’s just been a hard day.

JIM SPORLEDER
One way to help avoid an escalation is to be careful not to encroach on someone’s personal space.

LISA PRYSE
If they are already elevated in their behavior, you do not want to go into that personal space. It is a form of respect to maintain your distance.

RANDY SPIVEY
Be sensitive to your own personal boundaries too. Someone moving into your personal space is a red flag. If you feel threatened, you should call Security or the appropriate authorities immediately.

JIM SPORLEDER
If the situation progresses to yelling and profanity, this is clearly an escalation into the categories of psychological or emotional Violence. These situations should be handled by Security or law enforcement as soon as possible.
RANDY SPIVEY
Of course, the mere act of calling security can, by itself, be inflammatory. That’s why it’s so important to have a team approach in dealing with these situations. One or more team members can deal with the upset person while someone else calls security. And you might consider having a code phrase…

WORKER
Mr. North is ready for his escort.

RANDY SPIVEY
…that allows you to discretely mask a call to security.

JIM SPORLEDER
Most likely, your organization already has specific policies and guidance in dealing with these kinds of situations. It’s important you be familiar with what those are. And it’s important you discuss and rehearse those procedures with your colleagues.

MAN 1
They killed him!

MAN 2
They didn’t kill him. They did everything they could.

MAN 1
No! They’re the reason that he is dead, and I am gonna make them pay.

RANDY SPIVEY
The most challenging people to deal with in a healthcare setting may well be those we call intruders. It could be someone seeking to exact revenge on a doctor or a staff person for perceived lack of care. It might be a patient’s abusive spouse in violation of a court restraining order. It could be a gang member intent on finishing a fight. And any or all of these intruders could be armed.

RANDY SPIVEY
For specific information and guidance on responding to, surviving, and protecting others in an Active Shooter event, be sure to see our related program.

DOMESTIC VIOLENCE

JIM SPORLEDER
With co-workers and other staff, it’s more likely you’ll be able to observe behaviors of concern at an earlier stage than with patients, visitors or intruders. In general, Behaviors of Concern are disruptive, aggressive, hostile, or emotionally abusive behaviors that generate anxiety or create a climate of distrust, and which adversely affect productivity and morale.
RANDY SPIVEY
Remember, Behaviors of Concern fall toward the left side of the Workplace Violence Spectrum and can include behaviors like: prolonged anger; holding grudges; hypersensitivity to criticism; blaming others; collecting injustices; preoccupation with violent themes; obsessions; extreme anxiety or visible distress and isolation.

JIM SPORLDER
But this can be a grey area as well. After all, we’ve all have bad days when we’ve snapped at someone or been angry or sad or even out of sorts. However, patterns or clusters of concerning behaviors can suggest the potential for future violence.

RANDY SPIVEY
That’s why it’s so important to be aware of Behaviors of Concern. These are the early indicators that someone might be building to a Flash Point. And don’t discount your intuition. If you sense something’s wrong, be sure to pay attention to that “inner voice.”

JIM SPORLDER
So what should you do if you see a behavior that concerns you? Let’s consider something like an angry outburst by a co-worker or colleague. Prolonged anger is often a red flag that a violent event might be building.

RANDY SPIVEY
But what if it’s not prolonged? What if it feels like someone is just having a bad day? Or maybe a problem at home is affecting someone’s coping skills?

JIM SPORLDER
In that kind of situation, you may just want to note it and remember it. Watch to see if it seemed to be an isolated incident or if seems to be the beginning of a pattern or escalation.

RANDY SPIVEY
If you feel comfortable talking to the person, you might just want to ask if anything’s wrong.

NURSE 1
Katie kept me up half the night, she wouldn’t go to sleep

NURSE 2
I know things are hard at home.

RANDY SPIVEY
In some situations, giving someone the chance to talk, to express what’s troubling them can be a powerful stress reliever.

MARY KAY COLLINS
You know, there’s just days when you know that things aren’t just going right for them. And I try not to delve into that – but I also let them know, “I know that something’s not right. If there’s something I can do, let me know.
JIM SPORLEDER
However, if you ask a co-worker how they're doing and their answer concerns you...

NURSE
Who’s looking out for me. I tell you what, you better look out for me.

JIM SPORLEDER
...you should take the next level of action, and report it to an appropriate person in your organization. Options include your Supervisor, Human Resources or perhaps Employee Assistance.

RANDY SPIVEY
But if you think there’s any chance of an imminent threat, be sure to notify Security immediately. And it’s important you’re familiar with the specific policies of your organization for reporting this kind of concern.

CHANGE

JIM SPORLEDER
Let’s take a closer look at another Behavior of Concern: Change. Sometimes there's a stereotype associated with a workplace violence offender: that he or she was a “loner.” But some people are just quiet by nature and may enjoy solitude.

RANDY SPIVEY
If someone CHANGES, though, if someone who was usually friendly and outgoing suddenly becomes quiet and disengaged, that change is a behavior of concern.

DENNIS HEMPHILL
You know your coworkers best. If you see your coworkers and all of a sudden their behavior starts to change they’re doing things out of the ordinary that – out of the norm that they normally wouldn’t do, that should be a red flag.

JIM SPORLEDER
There’s one aspect of workplace violence to which the healthcare community is uniquely exposed. Intimate Partner Violence is a growing cause of workplace violence generally, but it affects women disproportionately: The National Institute of Justice estimates that 25 percent of women have, are, or will be involved in Intimate Partner Violence at some point in their lives.

LISA PRYSE
Anytime that you have a large contingent of female workers, which in healthcare you have at least 80 percent of your workers are female, it’s prevalent, it’s something that’s got to be recognized…
RANDY SPIVEY
So how might you recognize signs of Intimate Partner Violence?

WORKER
*I told you, you can’t keep calling me at work.*

RANDY SPIVEY
There are definite signs that Intimate Partner Violence may be affecting a co-worker: Frequent and disruptive phone calls, texts and emails; frequent work absences; inappropriate clothing for the time of year (to cover marks or bruises); unplanned use of leave or vacation time; disruptive visits to the workplace from a current or former intimate partner.

JIM SPORLEDER
Understanding what these signs are, could help you save the life of a co-worker, but it might also help prevent possible injury to yourself and others… the reality is, Intimate Partner Violence can easily spill into your workplace.

JOE BELLINO
It’s a proven fact. Because the abuser knows that no matter what happens, whatever changes, they always know where the workplace is.

JIM SPORLEDER
There are many actions that can be taken to mitigate the spillover effects of Intimate Partner Violence.

JOE BELLINO
And many times it’s just offering a helping hand. “I don't mean to pry, but something’s different. Can I help you with anything?”

WORKER 1
*My husband, he just won’t…*

DENNIS HEMPHILL
Well, if we don’t know,

WORKER 2
*Have you talked to anybody about that?*

DENNIS HEMPHILL
we cannot help, and that’s why we encourage people to report, so that we want to help the best way we can.

RANDY SPIVEY
Like many of the other behaviors of concern, signs of intimate partner violence may be subtle. You may feel uncertain about whether or not to report them. Some workplace behaviors, however, should be reported in all cases.
NURSE
No! I will not change shifts with you!

JIM SPORLEDER
Aggressive and hostile behaviors are not acceptable in the workplace. The same is true for physical violence as well as threats and threatening behavior. All of these behaviors must be taken seriously and must be brought to the attention of the appropriate person or department. For these behaviors, the ONLY effective response is to report them immediately.

SUMMARY

JOE BELLINO
Many many times in these cases, if somebody had given us just a little bit of information, we could have prevented the act from occurring.

JIM SPORLEDER
Why is it that when violence erupts in a workplace, investigators often learn in the aftermath that people knew the situation was dangerous but no one took action? It's because there can be roadblocks to taking action.

RANDY SPIVEY
Actually, the first roadblock is simply lack of awareness. People who haven’t been trained to recognize Behaviors of Concern will not have the awareness needed to respond.

JIM SPORLEDER
And there are psychological barriers too. Some people worry about being seen as a “busybody” or a “snitch.”

RANDY SPIVEY
Sometimes people hesitate to report something because they're worried about retaliation. That's why confidential reporting systems can be so valuable.

JOE BELLINO
If you don’t feel comfortable, you can always go to HR. Your HR is your confidential resource.

JIM SPORLEDER
And sometimes people fail to take action because they think it’s someone else's responsibility. But it's not.

LISA PRYSE
You have a responsibility to help maintain that safe environment. So anything that’s out of the norm needs to be reported.
RANDY SPIVEY
The bottom line is that it’s professionals like you who make the backbone of an effective workplace violence prevention program. If you see something or sense something… say something.

RANDY SPIVEY
Workplace Violence can happen anywhere, and Healthcare facilities are at particular risk. Violence doesn’t just happen, and people don’t just snap.

JIM SPORLEDER
Patients and Visitors can bring elevated risks of violence into your workplace. They may be well down the spectrum of violence by the time you see them. Being alert to their frustration, anxiety and fear, and looking for ways to help mitigate those fears by helping a patient or visitor feel heard, getting them information, or notifying authorities if you feel a threat developing, are all effective ways in preventing escalation and minimizing harm.

RANDY SPIVEY
Intruders, particularly those armed or under the influence of powerful drugs, may leave you the least amount of time to consider your responses. As soon as you sense or see something like this, be sure to alert authorities

JIM SPORLEDER
There’s no greater contribution you can make to the safety of your workplace than to respond quickly and effectively to Behaviors of Concern – regardless of whose exhibiting them. It’s so important to work from a mindset of Awareness.

RANDY SPIVEY
Be aware of the situations and the people around you so you can recognize the early warning signs that violence might be brewing.

JIM SPORLEDER
And be prepared and committed to take action as soon as it’s required.

RANDY SPIVEY
YOU make all the difference.