Department of Veterans Affairs Employee Education System

and

VHA Central Office Workplace Violence Prevention Program

present

Prevention and Management of Disruptive Behavior Level I
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Introduction

Welcome to the Prevention and Management of Disruptive Behavior Level I course.

To receive credit for this course, you must complete each required lesson. After reading the course material return to the Prevention and Management of Disruptive Behavior Level I course on the VA TMS, then complete the required Knowledge Check.

Included in the course are these lessons:

1. Introduction
2. Disruptive and Violent Behavior in the Workplace
3. Responding to Different Types of Behavior
4. Reporting Disruptive Behavior and VA Police Role
5. Preventing and Reporting Sexual Assaults

Disruptive Incident

Most people recognize hitting and physical harm as violence. Not everyone realizes that there are many behaviors in the workplace that are considered violent, including verbal attacks.

The National Institute for Occupational Safety and Health (NIOSH) defines violence as “any physical assault, threatening behavior, or verbal abuse that occurs while working or on duty.”

In Veterans Health Administration (VHA), the Prevention and Management of Disruptive Behavior (PMDB) Program educates employees to be aware of and prepared for workplace violence. Being aware and prepared will help you prevent violence in your workplace.

Violence Prevention and Awareness Training

This web-based training is an introduction to basic concepts in preventing and reporting disruptive behavior and violence in the workplace.

Upon completion of this course you will be able to:

1. identify prevention as the key to reducing disruptive behavior and violence;
2. recognize potentially disruptive situations and behaviors;
3. identify how to report disruptive behavior and violence appropriately and recognize the role of VA Police in providing assistance; and
4. list techniques to prevent and report suspected or alleged sexual assaults.

Advanced Prevention and Management of Disruptive Behavior Courses

After completing the online PMDB training, contact your supervisor or facility education office if you would like to sign up for the following PMDB courses offered in a classroom setting.
Observation and Assessment Skills
Learn how to recognize signs of escalating disruptive behavior and perform ongoing interactive assessments. This training emphasizes early intervention to prevent situations from escalating to physical violence.

Verbal De-escalation Skills
Learn and practice techniques to help de-escalate disruptive behavior through verbal and non-verbal interventions and setting effective limits. This training utilizes common workplace scenarios that help participants practice each technique in a class with a trained instructor.

Personal Safety Skills
Learn and practice escape techniques that minimize immediate danger and allow time to respond appropriately to situations involving physical violence. This training focuses on practicing skills that allow you to avoid and minimize injury to yourself and others if you are physically attacked.

Therapeutic Containment
Learn and practice team-based techniques for physically containing a disruptive or violent individual while minimizing potential injury to the contained person and staff.
Disruptive and Violent Behavior in the Workplace

This lesson will cover Disruptive and Violent Behavior in the Workplace.

Upon completion of this lesson you will be able to:

1. recognize types of violence;
2. identify causes of disruptive behavior that may lead to violence;
3. recognize ways to prevent disruptive behavior;
4. identify three elements that you can change in any situation to help prevent violence; and
5. recognize ways to keep your environment safe.

Disruptive Behavior Continuum

Any behavior ranging from annoying to violent can be considered disruptive if it threatens the safety of others. Recognizing disruptive behavior is the first step in doing something to help prevent violence.

Predatory or Affective?

One way to understand violence is to divide all types of violence into one of two categories:

Predatory (also called “planned”) violence or Affective (also called “reactive”) violence. We use the example of a cat.

When a cat is hunting a mouse, it becomes very focused, intent, controlled, quiet and is difficult to distract. The attack has one specific target and if you were to distract the cat, it would be more likely to run away or give up on the chase than it would be to attack you instead of its target. This is predatory behavior.

Affective Violence

When a person is carrying out affective violence he or she may:

- highly emotional, loud, angry, out of control;
- unfocused, striking out at anyone nearby with no specific target; and/or
- without any plan, and will usually only have a weapon if there is one easily available when he or she begins to lose control.
Subtle Forms of Violence

It is not always easy to recognize violence in the workplace, especially when it is subtle or when the damages are not so obvious. It is easy to see wounds from physical violence. But what about the unseen wounds from threatening behavior or verbal abuse?

Remember, the National Institute for Occupational Safety and Health (NIOSH) defines violence as "any physical assault, threatening behavior, or verbal abuse that occurs in the workplace." Listed are some types of threatening behavior and verbal abuse that occur in the workplace but may be hard to recognize. Subtle forms of violence should be reported to your supervisor, to Equal Employment Opportunity (EEO) Office, and/or to Human Resources, depending on the situation.

- Stalking
- Discrimination
- Intimidation
- Coercion
- Manipulation
- Rumors
- Blackmail
- Degradation
- Humiliation
- Disrespect
- Obsession
- Shunning
- Sexually Inappropriate Comments/Jokes/Gestures
- Hostile or inappropriate E-mailing, Texting, and Sexting

Causes of Disruptive Behavior

There are many causes of disruptive behavior. Often, violence is an attempt to regain control or to make things right when a person feels wronged. Let’s review some human factors that can lead to disruptive behavior. As we review the factors, think about ways that you could help reduce these possible causes of disruptive behavior.

Fear

When people feel uncertain or confused about what is happening, they may act disruptive or violent so that they feel more in control.

When people are afraid of bad news, such as medical disability, loss of a job, loss of independence, or loss of good health, they may feel that they have nothing else to lose by acting out in violent or disruptive ways.

Frustration

Frustration can build up to disruptive behavior for anyone. Everyday hassles such as waiting in long lines, being sent to several places before getting help, and dealing with paper work, can make people lose control of their behavior and become disruptive.

Poor Health or Pain

It is much harder to control our behavior when we feel sick or in pain. Other health related issues that can cause disruptive behavior are:

- multiple blood tests or delay in getting results of tests;
- mood changes due to pain or as side effects of pain medications; and
- recovery from surgery or other procedures that can cause delay in getting back to "life as usual".
Memory Loss
Everyone can forget things sometimes and some people have conditions that keep them from remembering things. When we can’t or don’t remember that we have already received help, we can become very angry and disruptive toward those we believe are not helping us.

Disrespect
When people feel disrespected by others they are much more likely to act disruptively. Some ways that people may feel disrespected are:

• not getting information, services, or results;
• feeling talked to like a child;
• feeling pressured to make decisions without enough information; and
• receiving unhelpful advice or sarcastic remarks.

What About You?
If you are like most people, you can imagine a situation in which you would physically attack another to protect yourself or your family. Remember anyone may become violent in order to regain control of a situation.

Have you ever slammed a door or thrown something? We all have at least thought about it and may have even acted on it when angry enough.

A person who is disruptive or violent can be influenced to help regain a sense of control. It is important to realize that you are part of what’s happening and you can influence the outcome. With a little training, you can learn to turn a negative situation into a positive one.

Prevention is the Key
Prevention is the key to making sure an unpleasant situation does not turn into a disruptive or violent incident. Preventing violence from happening is always a better choice than experiencing violence in the workplace.

The first step in preventing violence is understanding the three main elements involved in any situation:

• yourself;
• others; and
• environment.

Each of these elements interacts with each other in both good and bad ways to influence a situation. Your ability to watch all of the elements in a situation and change or influence them can help prevent violence.

Looking at Yourself
The first element to observe is the one over which you have the most control—yourself.

Reacting to a stressed or angry person by becoming stressed or angry yourself is always a lose-lose situation.

When looking at yourself, you want to ask yourself these questions:
• Body Language—How do I look? Are my arms crossed? Am I making eye contact? Is my facial expression angry or calm?
• Verbal Behavior—How do I sound? Do I sound threatening, uncaring, or mean? Am I interrupting the other person or trying to outtalk others? Am I using polite language and tone of voice?
• Personal Space—Am I standing too close or letting the other person get too close to me?
• Dangerous items—Am I wearing or holding anything that could be used to harm me, like a tie, scarf, jewelry, stethoscope, or scissors?
• Appearance—Am I wearing my hair in a way that would be easy to grab? Am I dressed respectfully and professionally?

Adjust Your Behavior

You can change or adjust your behavior to help improve the outcome of the situation. Helpful adjustments include:
• using a calm voice;
• keeping your distance and respecting others’ personal space;
• removing any item that can be used as a weapon against you;
• pulling back long hair in clips or tucking ponytails down the back of clothing;
• keeping an open posture and non-threatening eye contact;
• paying attention to your “gut feeling” as an early warning sign; and
• remembering that when you are in control of yourself, it is easier to be in control of the situation.

Looking at the Other Person

The second element in any situation is the one over which we have the least control--others.

When looking at the behavior of others, you want to ask yourself:
• Body Language—How is the person acting? Is the person pacing, clenching fists, slamming doors, pushing or throwing things?
• Verbal Behavior—How does the person sound? Is the person swearing, loud, or using offensive language? Is the person expressing exaggerated self-importance or entitlement? Is the person making threats or using a threatening tone of voice? Is the person blaming others or naming a target s/he plans to harm?
• Personal Space—How close is the other person? Is the person not keeping good personal space or a safe distance?
• Dangerous items—Is the person carrying a weapon or appear to be hiding weapons? Does the person have a cane, walker, or other item that can be used to hit or strike?
• Appearance—How does the person look? Does the person appear afraid, worried, angry, or suspicious?

Watch for Changes in Behavior

Once you have really looked at the other person, you'll have a better idea of what the person is thinking or feeling and what behavior to expect. Often violent behavior follows signs that a person is feeling stressed or out of control.
Helpful actions you can take when you see other people showing signs of stress include:

- ask how you can help the person;
- keep a safe and respectful distance;
- get help or notify others that someone may be in distress or losing control;
- take seriously all threats to harm or act violently; and
- remember that ignoring behavior doesn't make a problem go away. It can make it worse.

Looking at the Environment

The environment is the third element in any situation. The environment includes all of those things around you and the other person, some of which you may be able to change or control, and some you can't.

Heavy Lamp

Potential weapons – Heavy items such as lamps or paper weights can either be bolted down or put away to prevent others from using them as weapons. Sharp items such as scissors and letter openers should also be stored out of reach to keep others from using them as weapons. What other things can you think of that might be used as weapons?

Chair

Arrangement of furniture – In violent situations you may need to leave quickly. Be sure that furniture is not blocking your path to the door. Avoid getting trapped behind chairs, desks, or other types of furniture. How is the furniture arranged in the areas where you work?

Door

Available exits – It is a good idea to know where all of the exits are, in case you need to get away from a dangerous situation. You should also never try to stop an angry or violent person from leaving. Leaving is better than staying and hurting someone. How many exits are there in the areas where you work? Do you know more than one way to leave if you have to leave quickly?

Person in Line

Confusion/noise/overcrowding – Loud noises, overcrowding, and confusing situations can all make people frustrated, which can make them violent. It is a good idea to keep areas from getting too loud or crowded. Keeping radios, TVs, and talking at polite levels helps people from getting upset. What are some ways in your workplace you can control noise or overcrowding?

Thermostat

Temperature of room – When people get too hot or too cold, they are more likely to become upset, disruptive, or violent. How can you manage the temperature in areas where you work?

Disruptive and Violent Behavior in the Workplace: Summary

You have reviewed disruptive and violent behavior in the workplace.

You should now be able to:

1. recognize types of violence;
2. identify causes of disruptive behavior that may lead to violence;
3. recognize ways to prevent disruptive behavior;
4. identify three elements that you can change in any situation to help prevent violence; and
5. recognize ways to keep your environment safe.
Responding to Different Types of Behavior

This lesson will cover Responding to Different Types of Behavior.

Upon completion of this lesson you will be able to:

1. recognize normal, moderate, severe, panic, and tension reduction levels of stress;
2. match appropriate responses to each level of stress; and
3. select various verbal and non-verbal intervention techniques.

Stress Levels

We all experience stress. Depending on the situation, we may feel more stress sometimes than at other times.

Stress can be broken down into five basic levels: normal, moderate, severe, panic, tension reduction. Each level affects a person’s ability to make good choices and act appropriately. As people become more stressed, they take in less information and it becomes harder to help them. Once people rise to the highest level of stress, panic, they can become dangerous to the people around them.

Because each level of stress is different, there are different responses you should use at each level of stress. Let’s look closer as ways to respond to different levels.

When someone is at a normal or mild level of stress, good customer service skills will usually be enough to help the person calm down again. All employees can provide good customer service to help lower stress.

When someone is at a moderate level of stress, they will need helpful verbal and non-verbal techniques to help calm the person. Patient care employees receive training in verbal de-escalation techniques to help reduce moderate levels of stress. Non-patient care employees may need to notify their supervisor or seek help from patient care staff in these situations.

Advanced verbal limit-setting skills are needed once a person rises to the severe level of stress. Patient care employees receive training in limit-setting techniques in additional courses. Non-patient care employees should notify their supervisor or seek help from patient care staff once stress has escalated to severe levels.

At the panic level the biggest concern is that the person may become dangerous to others. Your best tools become ones of protection from physical attack. Patient care employees are trained to use Personal Safety Skills and Therapeutic Containment techniques in additional courses. Non-patient care employees should seek help immediately if they see someone is at a panic level of stress. Any employee may take VHA classes for personal safety and protection if she or he requests it.

In the last level of stress, tension reduction, the person is calming back down again after an escalation. It is important during this level of stress to support the person and help rebuild the customer relationship. All employees can help rebuild the customer relationship by using good customer service skills.

Staff Intervention

Understanding the different levels of stress helps you to act early to prevent disruptive behavior or violence. The type of action you choose will depend on the person’s stress level.
The goal is to stay supportive and connected with the person becoming stressed. The type of action you choose will depend on the person’s stress level intensity.

Every contact you have with others has a ripple effect, like a stone thrown into water. A positive or kind action by you can spread out to others through the people who experience your action. In the same way, a negative or unkind action by you can also spread out to others. By choosing to have positive interactions, we can all decrease the risk for disruptive behavior and violence in the workplace.

Customer Service

What is good customer service?

Good customer service makes the customer feel welcomed and well-served. Simple actions, like making eye contact, smiling, and stopping what you are doing to pay close attention to a customer, can go a long way in preventing stress that leads to violence.

Customer service is everyone’s job. Without our customers, we wouldn’t be here. So it is important to make time in your busy day to help our customers feel well-served.

Let’s look at four ways to serve our customers who are at a normal or mild level of stress.

1. Start by Introducing Yourself—“Hello. Welcome to the VA. How may I help you?”
2. Stop what you are doing—Make eye contact, turn away from your computer or bring your phone conversation to a close.
3. Listen to the Customer—Sometimes a person may just need to tell someone about the problem. Just listening can help calm the situation down before the problem becomes worse.
4. Apologize Appropriately—“Oh, I am so sorry to hear that.” Or “I’m sorry you haven’t had a great experience today. Let’s see what we can do to change that.”

Non-Verbal Interventions

The most important non-verbal communication you can show is empathy.

Empathy means connecting with how others are feeling in a real, warm, and caring way. Empathy helps an individual feel heard and understood. It can be very effective in de-escalating (calming down) a potential crisis. If your usual attitude is not one of empathy, trying to express it during a crisis may be very difficult.

Ways to Show Empathy

Sometimes showing empathy is hard. Remembering some simple non-verbal communication can help you to show empathy toward people who are stressed and can help them feel less stress.

Important non-verbal communication includes:

- stay calm and in control of your feelings;
- make eye contact;
- use open body language (uncrossed arms, turning toward the person, smiling);
- keep hands open and visible;
- use signs of active listening (head nodding, facial expressions that match the situation);
- respect personal space (stay out of striking distance);
- avoid touching an angry person because this may be misinterpreted; and
- avoid threatening gestures such as finger-pointing, hands on hips, staring or scowling.
Show through your behavior and appearance that you take this situation seriously and respect the person who is feeling stress.

**Verbal Interventions**

Combined with non-verbal communications that show empathy, your words can change a potentially disruptive situation, leading to reduced stress and safety for all concerned. Here are a few examples:

**Giving Recognition**

Good Morning, Mr. Thompson.

**Offering Self**

I know where that is. I can take you there.

**Asking Open-Ended Questions**

And then? Tell me more about that.

**Making Observations**

You look really tense right now.

**Seeking Clarification**

What is the most important thing for you to get done today?

**Higher Stress Levels**

When stress levels rise above the moderate level, advanced skills are needed. To manage severe levels of stress, you need training in advanced verbal de-escalation skills and limit-setting. To manage panic levels of stress, you need training in skills that will protect you from physical violence. These skill levels are trained in the PMDB classroom by certified PMDB trainers who will guide you in practicing advanced verbal and physical skills.

**Personal Safety Skills**

Personal safety skills are weight-based, not strength-based techniques designed to protect you from being physically attacked. These techniques allow you to escape from attacks with the least risk of injury to yourself or the person who is attacking you, since the person attacking you may be a patient in your care. Personal Safety Skills are trained in the classroom by a certified PMDB Trainer. You can ask your supervisor for more information about this in-class PMDB training.

**Therapeutic Containment**

Therapeutic Containment is a weight-based, not strength-based technique that can be used to physically contain a patient safely and effectively. It is used only when the patient has become so physically violent that his/her medical care cannot continue until the patient is physically contained. This technique requires a minimum of three trained people and is always used as a last resort when a patient’s behavior threatens the safety of the workplace. Therapeutic Containment is trained in the classroom by a certified PMDB Trainer. You can ask your supervisor for more information about this in-class PMDB training.
Responding to Different Types of Behavior: Summary

You have reviewed Responses to Different Types of Behavior.

You should now be able to:

1. recognize normal, moderate, severe, panic, and tension reduction levels of stress;
2. match appropriate responses to each level of stress; and
3. select various verbal and non-verbal intervention techniques.
Reporting Disruptive Behavior and VA Police Role

This lesson will cover Responding to Different Types of Behavior.

Upon completion of this lesson, you will be able to:

1. define the role of the Disruptive Behavior Committee (DBC);
2. identify the importance of reporting disruptive behavior and violence;
3. identify how to report disruptive behavior and violence appropriately; and
4. recognize the role of VA Police in providing assistance.

Reporting Background

Training in violence prevention is essential. Healthcare workers have the highest rates of non-fatal injury from workplace assaults of any occupational group. In healthcare settings, there is increased risk for disruptive behavior and violence simply because of the type of work that is being done and the kinds of problems that come into the workplace. The more people who know how to respond to disruptive behavior correctly, the more likely we are to stop violent behavior before it escalates.

Did you know?

- Employers are required to keep the workplace safe and to provide education to employees about preventing workplace violence.
- The Occupational Safety and Health Administration (OSHA) and The Joint Commission (TJC) mandate that healthcare organizations develop policies and employee training to prevent workplace violence.
- Public Law 38 CFR 17.107 prohibits Veterans Health Administration (VHA) from barring or banning any eligible Veteran from care, including disruptive or violent patients. When patients are violent or disruptive, VHA is allowed to limit the time, place, and/or manner of care in order to protect the safety of the workplace.
- VHA Directive 2012-026 makes facilities and Veterans Integrated Service Networks (VISNs) responsible for “ensuring that behaviors which undermine a safe and healing environment are appropriately reported, addressed, and monitored.” This includes prevention, management, and reporting of sexual assaults, disruptive behavior, violence, and other safety incidents.

The Importance of Reporting

In general, only about 50% of workplace violence gets reported. In healthcare, reporting of violence drops to only 20% of incidents. There may be many reasons why employees decide not to report workplace violence: busy work schedules, fear of retaliation, concerns about getting others in trouble, or even confusion about how to report disruptive or violent behavior.

Employees are encouraged to report all incidents of disruptive and violent behavior. The more we know about what kinds of violence occur in the workplace and how often, the better we will be able to prevent and manage future incidents.

Do you know what kinds of behavior to report?
**Verbal Abuse, Intimidation, or Threats**

Verbal abuse, intimidation, or threats have no business in the workplace. No one deserves to be exposed to these types of violence. Sometimes it is easy for employees to think that tolerating this behavior is a part of their job, but it is not. These types of verbal abuse can lead to low morale and extreme job dissatisfaction over time. Reporting verbal abuse, intimidation, and threats can help supervisors and management protect employees in the workplace.

**Physical Acting Out**

It is important to report physical acting out such as throwing things, damage to property, slamming doors, or other threatening behavior. These behaviors can be dangerous and are often signs that a person is escalating to more violent actions that can harm others.

**Threats**

A threat is when a person specifically expresses a plan to do harm. Threats are often spoken, but can also be in writing such as letters, emails, texts, or online chat rooms or social media. Report any threat (written or spoken) to cause harm to self or others.

**Physical Harm**

Always report any physical harm to self or others. Examples include but are not limited to cutting, hitting, striking, biting, kicking, pushing, tripping, grabbing, choking, hair-pulling etc.

**Possession of Weapons**

Weapons are strictly prohibited on federal property. Report any weapons you see in the workplace to your supervisor so that management and VA Police are better able to prevent and manage incidents.

**Sexually Inappropriate Behavior or Language**

Sexually inappropriate behavior or language can feel threatening and demeaning. This behavior has no place in the workplace. If you experience sexually inappropriate behavior that causes you to feel uncomfortable or threatened, notify your supervisor or other management official.

**Domestic Violence**

Domestic and interpersonal violence doesn't always stay in the home. Sometimes violence that starts at home can follow employees to work and spill over into the workplace. When VA Police and management know about the possibility of domestic violence coming into the workplace, they can put safety plans in place to help protect all employees in the workplace.

**Stalking**

One definition of the word stalk is "to approach with secrecy." Basically, stalking is when someone is following, watching, spying on, or otherwise monitoring another person in a way that is unwanted or causes problems for the person being followed or watched.

Technology such as email, telephones, voicemail, text messaging, social network sites or global positioning systems (GPS) can be used to stalk others. Stalkers can be current or past patients, clients, co-workers, friends, spouses, romantic partners, or significant others. Having current or past relationships with a person does not mean that his or her stalking behavior is acceptable or permitted.
Bullying
Workplace bullying is repeated, health-harming mistreatment of one or more people by one or more perpetrators in the workplace. There are many ways that people who work together may bully each other, and the damage to the working environment is undeniable. You should report bullying in the workplace to your supervisor or other members of management as soon as you are aware it is happening.

How to Report
Reporting violent, disruptive, or threatening behavior in the workplace is vital to keeping our workplaces safe. VHA is committed to supporting and encouraging reporting of workplace violence. There are several ways that you can report incidents.

Uniform Offense Reports
The Office of Security and Law Enforcement (OSLE) provides police services at VHA facilities. VA Police serve as first responders to many incidents of workplace violence. Incidents that may require immediate police assistance include:

- active physical harm, physical attacks, or other immediately dangerous behavior;
- use of weapons or threat of weapons in the workplace;
- criminal activities such as theft, damage to property, or setting fires; and
- threats that someone is in immediate danger and needs protection.

VA Police can take your report by writing a Uniform Offense Report (UOR). Depending on the circumstances, the UOR will be forwarded to other facility committees, Regional Counsel, patient safety, quality management, Office of Inspector General (OIG), or the Integrated Operations Center (IOC) in accordance with policy.

Supervisory Chain of Command and Reports of Contact
In situations where police assistance is not immediately needed, the first person to notify is your supervisor. Supervisors are responsible for making sure that your reports of dangerous, violent, disruptive or inappropriate behavior are reported appropriately.

When you are uncertain about when, what, or how to report, you can ask your immediate supervisor or other members of leadership in your service or facility. Other members of leadership may include your supervisor’s immediate supervisor, your program director, your service chief or assistant chief, your service’s representative in the facility executive office, and your facility director.

Disruptive Behavior Committee (DBC) Reports
Reports of disruptive, threatening, or violent patient behavior should go to your facility Disruptive Behavior Committee, represented by the DBC Chair.

Patient Event Reports
When patients are injured, threatened, or harmed, your patient safety program receives reports through Patient Event Reports. Many facilities have a specific section for details regarding violent or disruptive behaviors that were part of the patient event.
Workers Compensation (ASISTS)

Sometimes workplace violence can lead to employee injuries. Employee injuries should be reported through ASISTS and Workers Compensation Reports. Your supervisor and workers compensation specialists can help you find the reporting tool if you are injured at work.

Human Resources/EEO

Sometimes employees experience violence, threats, or inappropriate behavior from their co-workers. This is often called "lateral violence." When you experience lateral violence from co-workers you can report it to your supervisor, as well as to Human Resources or to the Equal Employment Opportunity (EEO) office.

Labor Management Relations/Unions

You can also contact your Labor Management Relations office or local Union when you experience negative behavior in your workplace. Find out who your union representative(s) is so that you will know where to report concerns.

Police Assistance

Every VHA Facility has a VA Police Service that responds to emergencies and criminal activity. VA Police are very valuable allies. They help keep the workplace safe by upholding and enforcing the law, and by working with all facility employees and management to protect everyone’s safety.

Common ways VA Police help prevent workplace violence include:

- applying state, local, and federal laws in workplace law enforcement;
- participating as members of the Disruptive Behavior Committee to help make decisions about managing disruptive and violent patient behavior in the facility;
- working with VHA customers and employees to support safe environments;
- investigating reports of violent, criminal, and/or disruptive behavior;
- responding to emergency calls from employees, patients, and others in the facility; and
- providing around-the-clock police presence in the medical centers to discourage criminal activity that could interfere with VHA facility operations.

It is important for you to know the emergency numbers at your facility for contacting VA Police in an emergency.

Disruptive Behavior Committee

VHA Directive 2010-053 requires all VHA facilities to have a team of threat assessment experts known as the Disruptive Behavior Committee or DBC. The team is made up of facility employees from behavioral health, VA Police, safety offices and programs, representatives of leadership, and other services at high risk for violence such as nursing, primary care and emergency departments. The committee reports to the Chief of Staff (COS), and is chaired by the COS or a senior clinical leader.

The DBC:

- receives and reviews reports of all patient-generated disruptive behavior incidents or violence;
- participates in Workplace Behavioral Risk Assessments (WBRA) to determine a level of risk for each workplace in the facility;
• makes data-driven threat assessments and threat management plans tailored to the individual patient generating the potential threat;
• recommends behavioral interventions to modify patient behavior; and
• oversees the education of employees in issues of workplace violence prevention through the Prevention and Management of Disruptive Behavior (PMDB) program.

You can contact the Chair of your DBC to find out how to make reports of violent and disruptive incidents at your facility.

Reporting Disruptive Behavior and VA Police Role: Summary

You have reviewed Responding to Different Types of Behavior.

You should now be able to:

1. define the role of the Disruptive Behavior Committee (DBC);
2. identify the importance of reporting disruptive behavior and violence;
3. identify how to report disruptive behavior and violence appropriately; and
4. recognize the role of VA Police in providing assistance.
Preventing and Reporting Sexual Assaults

This lesson will cover Preventing and Reporting Sexual Assaults.

Upon completion of this lesson, you will be able to:

1. define sexual assault;
2. identify situations involving sexual assault;
3. identify the methods used in sexual assaults; and
4. report sexual assaults appropriately.

What is Sexual Assault?

There are many kinds of assaults reported in VA. One particular type of assault that employees may find difficult to understand or respond to is sexual assault. VA defines sexual assault as:

Any type of sexual contact or attempted sexual contact that occurs without the explicit consent of the recipient of the unwanted sexual activity.

“Explicit consent” means a clear and communicated agreement. To give explicit consent, a person must clearly say “Yes” to an action or contact before it occurs.

Sexual Assault Incidents

In June 2011, the Government Accountability Office (GAO) testified to Congress about their investigation of sexual assault on VA property.

The incidents investigated, listed in order of frequency of report, were:

- inappropriate touch;
- rape;
- forced oral sex;
- forced medical exam; and
- exhibitionism, sexual letters, and molestation.

Who Was Involved?

According to the GAO Report (GAO-11-736T):

- most cases involved patient perpetrators;
- some cases involved employee-on-patient assaults; and
- a smaller number of cases involved employee-on-employee assaults.

It is important to remember, however, that both men and women can become the targets of sexual assault.

Methods Used in Sexual Assaults

Perpetrators of sexual assault may use several methods to get their victims to participate in unwanted sexual activity. Two types of methods are psychological coercion and physical force.
Psychological Coercion

Psychological coercion includes using threats, fear of bad consequences, or promises of favors in return for someone's cooperation.

Some examples of Psychological Coercion include a:

- supervisor threatening to fire you if you do not perform oral sex;
- co-worker who promises not to report your medical error to the supervisor or hospital administration in exchange for sex; and
- hospital contracting agent who promises to sign off on your government contract in exchange for sexual favors.

Physical Force

Using physical strength, weapons, or the threat of physical harm to overpower a victim.

Some examples of Physical Force include:

- holding a knife to someone's throat;
- physically holding someone down; and
- threatening to shoot someone.

Levels of Behavior

Recognizing dangerous behavior early and taking action sooner rather than later is very important for violence prevention. Research into sexual assault shows that some perpetrators groom their targeted victims by committing "low level" offenses to see whether a red light (stop) or green light (go) is given by the potential victim.

If low-level behavior is allowed or ignored (green light), then the perpetrator moves to increasingly more unacceptable behavior to test the victim's response to possible "high level" offenses.

If a targeted victim shows an assertive negative response to a slight offense (red light), the perpetrator realizes that they will need to continue searching to find a more vulnerable target.

Low Level

Some examples of Low Level Behavior include:

- inappropriate staring;
- invasion of personal space; and
- sexually inappropriate comment or "joke".

High Level

Some examples of High Level Behavior include:

- unwanted sexual touch;
- sexual assault, rape; and
- exhibitionism.
Green Light (Go!)

Here are some examples of passive responses to low level behavior that may signal a "green light" to a sexual predator:

- Jane looks away and says nothing when she notices John staring at her several times throughout the day.
- Bob laughs uncomfortably but doesn't object when Doug tells a sexually explicit joke about two men in the locker room.
- Even though it makes him uncomfortable, Gary doesn't want to cause problems by telling Sharon to stop rubbing his shoulders.

Red Light (Stop!)

Here are some examples of assertive responses to low level behavior that may signal a "red light" to a sexual predator:

- Without looking away, Jane says to John, "Why are you staring at me? That makes me uncomfortable. Please stop."
- Bob tells Doug, "I don't find jokes like that very funny. Please don't share them with me anymore."
- Gary says, "Sharon, you may be trying to be nice, but please don't rub my shoulders. It makes me uncomfortable."

VA Prevention Strategies

Now that we recognize predatory sexual behaviors, VA recommends Administrative and Individual strategies for prevention. When applied by everyone, these strategies help create a culture of non-violence that can lead to a safer environment for Veterans, staff, and visitors.

Administrative Interventions

Administrative Policy

Physical, sexual and emotional violence is totally and completely unacceptable.

Facilities are required by OSHA to have written violent behavior prevention policies and to implement violence prevention programs.

Reporting

Reporting is mandated and important for identifying the scope of the issue.

Any assault can be reported to VA Police and all sexual assaults must be reported immediately.

Any incident involving a patient victim should be documented in a Patient Event Report.

All patient-generated behavior, including sexual assault behavior by patients, should be reported to your Disruptive Behavior Committee (DBC).
Individual Interventions

Avoid Isolation
Perpetrators usually rely on isolating their victims. Stay away from isolated environments.
Use a “Buddy System” in your workplace during times when fewer employees are around.

Refuse Relocation
Do everything possible to avoid being physically moved from one location to another by the perpetrator.
1. Perpetrators will often move victims to isolate them or remove them from "the last place they were seen."
2. Risk of serious injury rises when offenders succeed at relocating victims to more isolated areas.

Leave
Your "gut" feeling will often warn you when a situation does not feel or appear safe—Listen to that feeling.
If your instincts tell you a situation does not seem "right" or feels "unsafe," leave the situation immediately.

Reporting as a Prevention Strategy
Consider the following three scenarios.

1. Nancy is a secretary in human resources where Lisa, an employee in Environmental Management Services, has been paying her increasing amounts of attention. One morning, Lisa corners Nancy at her desk before anyone else is in the office and asks, "Hey, do you know how sex is like riding a bicycle?" Nancy answers, "I don't really think dirty jokes are funny. So please don't tell me anymore."

2. After listening to Mr. Johnson's lung sounds, Dr. Michaels turns away to pick up a blood pressure cuff. As she does, Mr. Johnson squeezes her buttocks and says, "Now it's my turn to check you out."

3. After their first day working together, Jill leans in close to Jake with her face almost touching his hair, takes a deep breath, and says, "I really love the smell of your shampoo." This makes Jake very uncomfortable and he asks her to not get so close to him.

Why Reporting Is Important
By reporting these events, Nancy, Dr. Michaels and Jake can start a process that:

- lets the offender know his/her behavior is not okay, should stop immediately, and should never occur again;
- lets the Disruptive Behavior Committee (DBC) monitor patient-generated behavior and lets the appropriate workplace safety team monitor employee-generated threat over time to see if this individual has a pattern of bad behavior that requires more serious action; and/or
- lets the facility know that things like this are happening so they can put safeguards in place to protect employees and other patients from being assaulted as well.

Reporting is important because without reports, we would never find out that problems exist.
How to Report Sexual Assault

When it comes to sexual assault allegations, **VA Police must be notified immediately.**

It is mandatory that VA Police notify the Integrated Operation Center (IOC) **within two hours** of any allegations of sexual assault. If you are aware of, or suspect that a sexual assault has occurred (on VA property or anytime VA care is being provided in the community), your role is to:

- listen and be supportive;
- contact your supervisor or other management official; and
- contact VA police.

You are **not** responsible for deciding whether a sexual assault occurred.

Sexual Assault: VA Stance

VA treats sexual assault with the utmost seriousness and respect. Top priority is given to the care and support of sexual assault survivors, and to a thorough investigation of all allegations of sexual assault. Anyone suspected of committing sexual assault may be prosecuted to the full extent of the law.

Preventing and Reporting Sexual Assaults: Summary

You have reviewed Preventing and Reporting Sexual Assaults.

You should now be able to:

1. define sexual assault;
2. identify situations involving sexual assault;
3. identify the methods used in sexual assaults; and
4. report sexual assaults appropriately.

To complete this course, return to the Prevention and Management of Disruptive Behavior Level I course on the VA TMS, then complete the required Knowledge Check.
Help

Contact Us

Content Manager
Kelly Vance, MD
National Director of the Prevention and Management of Disruptive Behavior (PMDB) Program
Lexington VA Medical Center
1101 Veterans Drive (116A10-LD)
Lexington, KY 40502-2236
Kelly.Vance2@va.gov

PMDB Level 1 Web Course
PMDB National Office and EES Program
VHA Central Office and EES St. Louis
EESPMDBSupportGroup@va.gov