

PATIENT-CENTERED CARE
Live Webinar

Workplace Safety: Creating a Culture of Care and Respect **November 6**

Paul Perryman,
MSN, MS, RN, NE-BC

Catherine Capp,
MSN, RN, NE-BC

Sound Check
11:55

Start Time
12:00

Contact UNCLCN

Questions, Feedback, Technical Support:
Phone: (919) 445-1000
Email: unclcn@unc.edu
Website: unclcn.org

Poll Everywhere for Q&A: pollev.com/unclcn
Upcoming Live Webinars: learn.unclcn.org/live
Self-Paced, Online Courses: learn.unclcn.org/spoc

1

Poll Everywhere

Join by Web

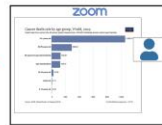
- 1 Go to PollEv.com
- 2 Enter UNCLCN
- 3 Respond to activity

2

To Claim CE Credits



Watch 53 Minutes



Zoom with Video
to See the Slides

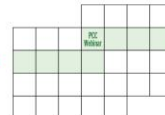
AND



Fill Out Evaluation



Claim Certificate



Claim in 7 Days

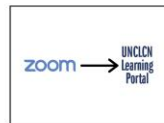
3

After the Webinar

Please wait for UNCLCN
to end the Zoom video.



UNCLCN
Ends Zoom



Zoom Sends Data
to Learning Portal



Claiming CE Credit
Is Open

4

Free Continuing Education Credits

Live Webinars

Only at the Day and Time Indicated

learn.unclcn.org

PATIENT-CENTERED CARE

2nd Wednesday Jan-Oct
1st Wednesday Nov-Dec

CME
NCPD/CNE
ACPE
ASRT
CTR
12 pm - 1 pm

ADVANCED PRACTICE PROVIDER

1st Wednesday Mar, Apr, Jun,
Sep, Oct, Dec

CME
NCPD/CNE
12 pm - 1 pm

RESEARCH TO PRACTICE

4th Wednesday Jan-Oct
3rd Wednesday Nov-Dec

CME
NCPD/CNE
ACPE
ASRT
CTR
12 pm - 1 pm

SOUTHEASTERN AMERICAN INDIAN CANCER HEALTH EQUITY PARTNERSHIP

1st Wednesday Feb, May, Nov

CME
12 pm - 1 pm

Self-Paced, Online Courses

Available any Day and Time

learn.unclcn.org/spoc

5

Spread the Word!

Do you enjoy our webinars and feel others may benefit, too?
Help us spread the word!

Become a promoter:

Receive special emails to share within your organization!



unclcn.org/promoter

Follow our social channels:



facebook.com/unclcn



unlinebergercancernetwork



linkedin.com/in/unclcn

Send questions to unclcn@unc.edu or (919) 445-1000.

Thank you for spreading the word!

6

UNC Lineberger Cancer Network
PATIENT-CENTERED CARE
 Live Webinar

Paul Perryman,
 MSN, MS, RN, NE-BC

Catherine Capp,
 MSN, RN, NE-BC

**Workplace Safety:
 Creating a Culture of Care and Respect**

November 6

7

Our Presenter



Paul Perryman,
 MSN, MS, RN, NE-BC

Paul is a second career nurse after being a middle school and high school science teacher. In 2008, Paul began his nursing career in a medical step-down unit and progressed to the Cardiothoracic ICU where he advanced through the clinical ladder over the course of 5 years. In 2016, eager for an opportunity to lead a team of nurses, Paul took a step outside his critical care box towards Inpatient Psychiatry. During his time there he has managed Geropsychiatry, Adult Crisis, Perinatal Psychiatry units as well as the Electroconvulsive Therapy Clinic. In 2020, Paul was given the opportunity to serve as the Associate Director for Inpatient Psychiatry at UNC Hospitals with a primary responsibility at the Chapel Hill Campus as well as Interim Associate Director as he helped plan for the opening of the Youth Behavioral Health Hospital in Butner, NC.

During his time in Psychiatry, Paul has served as Co-Chair for the Workplace Safety Program Council, started a Behavioral Response Team Oversight Committee and coordinated the opening of a COVID Psychiatric Unit. He currently services as Director for Inpatient Medicine Services at UNC Hospitals.

8

Our Presenter

9

Our Presenter

- 4.** Paul Perryman, MSN, MS, RN, NE-BC, provided active support in the opening of the Youth Behavioral Health Hospital in Butner, NC

10

Our Presenter

4. Paul Perryman, MSN, MS, RN, NE-BC, provided active support in the opening of the Youth Behavioral Health Hospital in Butner, NC
3. He worked on the development of the Behavioral Response System and Oversight Committee for UNC Hospitals - Chapel Hill Campus

11

Our Presenter

4. Paul Perryman, MSN, MS, RN, NE-BC, provided active support in the opening of the Youth Behavioral Health Hospital in Butner, NC
3. He worked on the development of the Behavioral Response System and Oversight Committee for UNC Hospitals - Chapel Hill Campus
2. He was named one of North Carolina Great 100 Nurses

12

Our Presenter

4. Paul Perryman, MSN, MS, RN, NE-BC, provided active support in the opening of the Youth Behavioral Health Hospital in Butner, NC
3. He worked on the development of the Behavioral Response System and Oversight Committee for UNC Hospitals - Chapel Hill Campus
2. He was named one of North Carolina Great 100 Nurses
1. He was named Nurse Manager of the Year for UNC Hospitals in 2019.

13

Our Presenter



Catherine Capp,
MSN, RN, NE-BC

Catherine Capp, MSN, RN, NE-BC, is the Associate Nursing Director at UNC Health Hillsborough Campus, a 163-bed hospital. With over 20 years of experience at UNC Health, Catherine began her career as a nursing assistant and steadily advanced to hold a variety of leadership roles. She co-chairs the Workplace Safety Program Council for UNC Medical Center and co-directs the house-wide Falls Council. Catherine is also an active leader in the community, serving on the leadership team of Central Carolina Women in Business with the Hillsborough Chamber of Commerce. She earned her BSN and MSN degrees from UNC Chapel Hill.

14

Our Presenter

15

Our Presenter

- 3.** Catherine Capp, MSN, RN, NE-BC lead and achieved organizational goal efforts in FY24 to train a Workplace Safety Champion on every inpatient unit at UNC Medical Center.

16

Our Presenter

3. Catherine Capp, MSN, RN, NE-BC lead and achieved organizational goal efforts in FY24 to train a Workplace Safety Champion on every inpatient unit at UNC Medical Center.
2. Since Hillsborough opened nine years ago, Catherine has led Carolina Care efforts. Hillsborough Campus is a four-time winner of the Press Ganey Guardian of Excellence Award, awarded to hospitals in the top 5th percentile for patient experience in country.

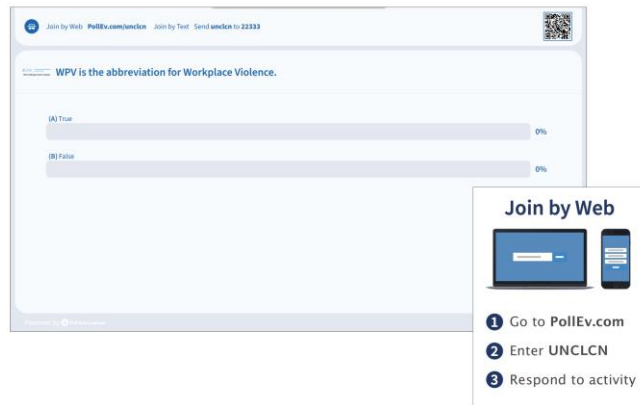
17

Our Presenter

3. Catherine Capp, MSN, RN, NE-BC lead and achieved organizational goal efforts in FY24 to train a Workplace Safety Champion on every inpatient unit at UNC Medical Center.
2. Since Hillsborough opened nine years ago, Catherine has led Carolina Care efforts. Hillsborough Campus is a four-time winner of the Press Ganey Guardian of Excellence Award, awarded to hospitals in the top 5th percentile for patient experience in country.
1. During Catherine's time as the Nurse Manager of the Inpatient Surgery unit, the Hillsborough Campus earned Total Hip and Knee Replacement Certification through The Joint Commission.

18

Sample Poll Everywhere Question



Join by Web: PollEv.com/junction Join by Text: Send [junction](https://poll.com/junction) to 223333

WPV is the abbreviation for Workplace Violence.

(A) True 0%

(B) False 0%

Join by Web

1 Go to PollEv.com

2 Enter UNCLCN

3 Respond to activity

19

ACCME Disclosure

This activity has been planned and implemented under the sole supervision of the Course Director, Stephanie Wheeler, PhD, MPH, in association with the UNC Office of Continuing Professional Development (CPD). The course director received research support from AstraZeneca (ended June 2023) and Pfizer Medical Foundation (ended December 2023). These financial relationships have been mitigated. CPD staff have no relevant financial relationships with ineligible companies as defined by the ACCME.

A potential conflict of interest occurs when an individual has an opportunity to affect educational content about health-care products or services of a commercial interest with which he/she has a financial relationship. The speakers and planners of this learning activity have not disclosed any relevant financial relationships with any commercial interests pertaining to this activity.

The presenter has no relevant financial relationships with ineligible companies as defined by the ACCME.

20

ANCC Disclosure

NCPD Activity #: 001-L23110
1.0 Contact Hours Provided

Relevant Financial Relationship:

No one with the ability to control content of this activity has a relevant financial relationship with an ineligible company.

Criteria for Activity Completion:

Criteria for successful completion requires attendance at the NCPD activity and submission of an evaluation within 30 days.

Approved Provider Statement:

UNC Health is approved as a provider of nursing continuing professional development by the North Carolina Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

21

The screenshot shows a poll interface with the following content:

- UNC Health logo and name in the top left corner.
- Question text: "WPV is the abbreviation for Workplace Violence."
- Two poll options: "True" and "False".
- Progress bars for each option, both showing "0%".
- Footer text: "Start the presentation to see live content. For screen share software, share the entire screen. Get help at pollev.com/app"

22

**Workplace Safety:
Creating a Culture of
Care and Respect**

Catherine Capp
MSN, RN, NE-BC

Paul Perryman
MSN, MS, RN, NE-BC



Center for Nursing Excellence & The Workplace Safety Council

23

Objectives

- Describe the scope of Workplace violence
- Define Workplace Violence and Its Domains
- Review Regulatory Requirements to Address Workplace Violence in Healthcare Settings
- Review Strategies to Prevent Workplace Violence
- Review Institutional Structures to Address Workplace Violence Prevention and Response

24



25

State of Healthcare Violence

- **57,610** reported incidents of workplace violence leading to days away from work or leaving an organization altogether
- **13%** of RN missed days of work are related to workplace violence
- **69%** of these cases nationally involve healthcare workers
- **25%** of nurses report being assaulted in acute care setting
- **62%** increase in incidence of nonfatal workplace violence to healthcare workers from 2011-2018
- Nonfatal workplace violence sustained near **10 incidents /10,000** full time workers between 2018 through 2022
- Estimated **12%** of events are reported

1. American Nurses Association. (n.d.). End Nurse Abuse. Retrieved November 1, 2024, from <https://www.nursingworld.org/practice-policy/work-environment/end-nurse-abuse/>
2. Bureau of Labor Statistics. (2023, September 20). Workplace violence, 2021-2022. U.S. Department of Labor. <https://www.bls.gov/factsheets/workplace-violence-2021-2022.htm>
3. Graham, D. R., & Cummings, A. C. (2022). The Joint Commission's new and revised workplace violence Prevention Standards for Hospitals: A major step forward toward improved quality and safety. *The Joint Commission Journal on Quality and Patient Safety*, 48(8), 455-463.
4. U.S. Bureau of Labor Statistics. (2018). *Workplace violence in healthcare: Factsheet*. <https://www.bls.gov/factsheets/workplace-violence-healthcare-2018.htm>
5. * - incidence per 10,000 worker

26

It's Personal

- “I’ve been bitten, kicked, punched, pushed, pinched, shoved, scratched, and spat upon,” says Lisa Tenney, RN, of the Maryland Emergency Nurses Association. “I have been bullied and called very ugly names. I’ve had my life, the life of my unborn child, and of my other family members threatened, requiring security escort to my car.”

The Joint Commission. (2018). *Sentinel event alert, issue 59: Physical and verbal abuse in the healthcare setting*. Retrieved from <https://www.jointcommission.org/resources/patient-safety-topics/sentinel-event/sentinel-event-alert-newsletters/>

27

Workplace Violence in Oncology Settings

- Literature focuses on high-risk settings such as emergency departments and mental health settings
- Oncology settings have high risk for WPV
- All clinical settings can benefit from WPV resources
- WPV trends in Oncology settings worsened during pandemic
 - Many patient and family stressors that were always present in Oncology settings made worse by pandemic regulations (visitor restrictions, delayed treatments, resource scarcity, patient fears)


Christensen, S. S., Snyder, C., Parkin, E. D., & Austria, M. J. (2023). Understanding the impact of nurse staffing on patient outcomes in oncology settings. *Clinical Journal of Oncology Nursing*, 27(5), 548-553. Oncology Nursing Society. <https://store.ons.org/system/files/journal-article-pdfs/ChristensenOctober2023CJON.pdf>

28



29

Working Definition of WPV at UNC Hospitals



Any violent action that may cause physical or emotional harm directed at persons at work or because of their work

Merendez et al. (2024). Prioritizing our healthcare workers: The importance of addressing the intersection of workplace violence and mental health and wellbeing. National Institute for Occupational Safety and Health. (2024, May 29). CDC Blogs. https://blogs.cdc.gov/niosh/science-blog/2024/05/29/how_violence_mhv/

30

Workplace Violence may be:

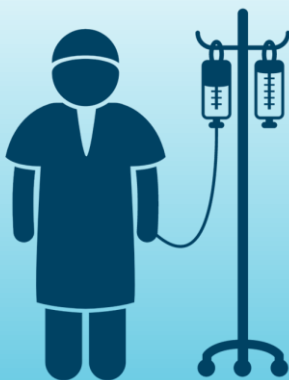
- Vertical
- Lateral/Horizontal



Menendez et al. (2024). Prioritizing our healthcare workers: The importance of addressing the intersection of workplace violence and mental health and wellbeing. National Institute for Occupational Safety and Health. (2024, May 29). CDC Blog. https://blogs.cdc.gov/niosh-science-blog/2024/05/29/how_violence_mh/

31

To be considered Workplace Violence:



- An action does not have to be done on purpose
- A person does not have to feel harmed
- An underlying diagnosis is not considered

Menendez et al. (2024). Prioritizing our healthcare workers: The importance of addressing the intersection of workplace violence and mental health and wellbeing. National Institute for Occupational Safety and Health. (2024, May 29). CDC Blog. https://blogs.cdc.gov/niosh-science-blog/2024/05/29/how_violence_mh/

32

One Event -



- May affect multiple staff
- Either through
 - direct contact
 - because the event created a hostile environment

Menendez et al. (2024). Prioritizing our healthcare workers: The importance of addressing the intersection of workplace violence and mental health and wellbeing. National Institute for Occupational Safety and Health. (2024, May 29). CDC Blogs. https://blogs.cdc.gov/niosh-science-blog/2024/05/29/cbhov_evidence_mhw/

33

5 Domains of Workplace Violence



- Threats
- Physical
- Verbal/written
- Harassment
- Bullying/intimidation/hostility & other disruptive behaviors

Menendez et al. (2024). Prioritizing our healthcare workers: The importance of addressing the intersection of workplace violence and mental health and wellbeing. National Institute for Occupational Safety and Health. (2024, May 29). CDC Blogs. https://blogs.cdc.gov/niosh-science-blog/2024/05/29/cbhov_evidence_mhw/

34



35



36

The Joint Commission

- Environment of Care
 - Annual assessment and risk mitigation action plan
 - System to monitor, report, and investigate WPV events
- Human Resources
 - Program must provide training and education at time of hire, annually, and with changes to WPV program
- Leadership
 - Prevention program must be led by designated individual and have multidisciplinary members
 - Program includes WPV prevention and follow-up policies and process to review events, analyze trends, provide follow up

Arnetz, JE. The Joint Commission's New and Revised Workplace Violence Prevention Standards for Hospitals: A Major Step Forward Toward Improved Quality and Safety. Jt Comm J Qual Patient Saf. 2022 Apr;48(4):241-245. doi: 10.1016/j.jcqs.2022.02.001. Epub 2022 Feb 5. PMID: 35191683. PMCID: PMC8816837.

37

Strategies for Workplace Violence Prevention

38

Inpatient Scenario

You walk into a patient's room to get a POC blood glucose before breakfast trays arrive. The patient, Mr. Smith, yells at you to "Get out of my room! I am not getting pricked by another needle!" You know his blood glucose levels are needed before he gets his insulin. What do you do?

39

Based on the Scenario just presented you action should be

- Tell the patient that he has a duty to himself to get his blood sugar taken when it is scheduled. 0%
- Give the patient a choice of getting his blood sugar now or at a time that they think would work in the next 30 minutes before breakfast arrives. 0%
- Tell the patient that you know what is best and to buckle up for the ride to health. 0%
- Give in to the patient's resistance for a blood sugar and hope for the best. 0%

Start the presentation to see live content. For screen share software, share the entire screen. Get help at pollev.com/app

40

De-escalation Strategies

- Respect personal space
- Actively listen
- Maintain distance
- Use nonthreatening verbal communication – narrate your care



The Joint Commission. (2023). *Quick safety 47: De-escalation in health care*. <https://www.jointcommission.org/resources/news-and-multimedia/newsletters/newsletters/quick-safety/quick-safety-47-deescalation-in-health-care/>; /media/EA12EAD68EE4DD78DE81E96DD7002EB.ashx

41

De-escalation



Don't:

- Move too quickly
- Touch unless necessary
- Use defensive tone of voice, language, or nonverbal positions

The Joint Commission. (2023). *Quick safety 47: De-escalation in health care*. <https://www.jointcommission.org/resources/news-and-multimedia/newsletters/newsletters/quick-safety/quick-safety-47-deescalation-in-health-care/>; /media/EA12EAD68EE4DD78DE81E96DD7002EB.ashx

42

STAMP



- Staring and eye contact
- Tone and volume of voice
- Anxiety (shaking, tearful, dilated pupils, “freeze”)
- Mumbling
- Pacing

1. Centers for Disease Control and Prevention. (2024). Prioritizing our healthcare workers: The importance of addressing the intersection of workplace violence and mental health and wellbeing. Retrieved from <https://blogs.cdc.gov/nioh/science/blog/2024/02/29/how-violence-imp>

2. The Joint Commission. (2023). *Quick safety 47: De-escalation in health care*. <https://www.jointcommission.org/resources/news-and-multimedia/newsletters/newsletters/quick-safety/quick-safety-47-deescalation-in-health-care/>; <https://www.jointcommission.org/resources/news-and-multimedia/newsletters/newsletters/quick-safety/quick-safety-47-deescalation-in-health-care/>; <https://www.jointcommission.org/resources/news-and-multimedia/newsletters/newsletters/quick-safety/quick-safety-47-deescalation-in-health-care/>

43

Perryman Care Cycle

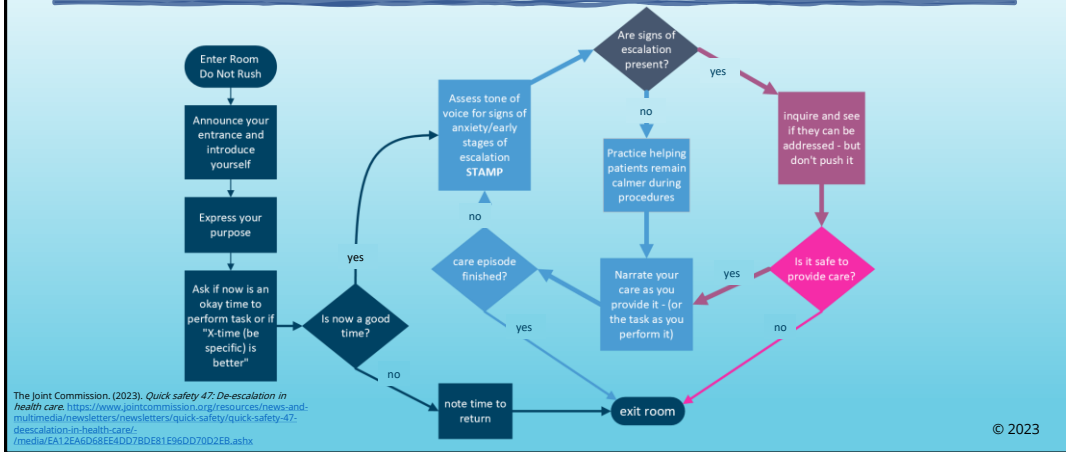


- Establish a daily routine
- Moments of Caring:
- Provide choices:

The Joint Commission. (2023). *Quick safety 47: De-escalation in health care*. <https://www.jointcommission.org/resources/news-and-multimedia/newsletters/newsletters/quick-safety/quick-safety-47-deescalation-in-health-care/>; <https://www.jointcommission.org/resources/news-and-multimedia/newsletters/newsletters/quick-safety/quick-safety-47-deescalation-in-health-care/>; <https://www.jointcommission.org/resources/news-and-multimedia/newsletters/newsletters/quick-safety/quick-safety-47-deescalation-in-health-care/>

44

Perryman Care Cycle



45

Institutional Structures to Address Workplace Violence Prevention and Response



46

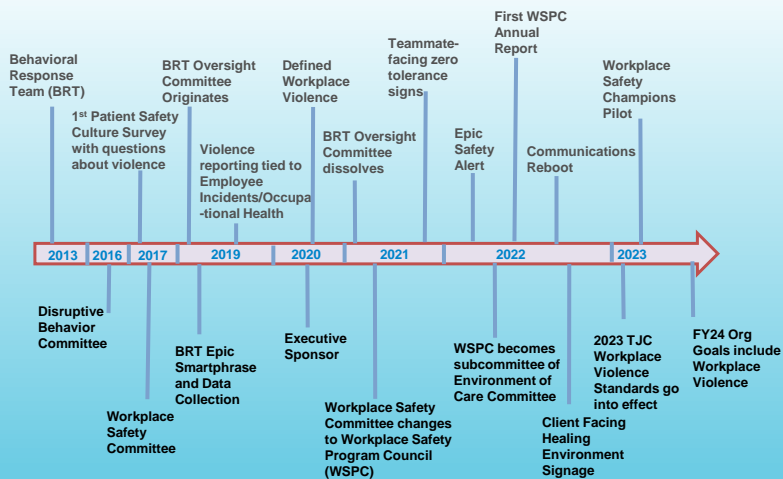
Overarching Vision – UNC Hospitals (UNCH)



The Joint Commission. (n.d.). Workplace violence prevention. The Joint Commission. Retrieved (Month Day, Year), from <https://www.jointcommission.org/our-priorities/workforce-safety-and-well-being/resource-center/workplace-violence-prevention/>

47

UNCH Workplace Safety Program Milestones



48

48

Sample Signage – Encouraging a Safety Culture

Zero Tolerance of Aggressive Behavior and Threatening Language
Tolerancia cero hacia la conducta agresiva y el lenguaje amenazante

We do not tolerate any form of violence, aggression, discrimination or verbal harassment towards ANYONE for ANY reason. Failure to comply may result in removal from the facility, dismissal from practice, arrest and/or legal action.

No toleramos ninguna forma de violencia, agresión, discriminación o acoso verbal hacia NINGUNA persona. El incumplimiento puede resultar en expulsión de las instalaciones, cese laboral, arresto y demanda judicial.

Physical assault Agresión física	Threatening behavior Comportamiento amenazante
Verbal harassment (name calling, swearing) Acoso verbal (insultos, obscenidades)	Sexual language or unwanted touching Lenguaje sexual o tocamientos no deseados
Possessing firearms or weapons Presencia de armas de fuego u otros armamentos	Damaging business equipment or property Daños a equipos o propiedades

URC
UNIVERSITY OF ROCHESTER
MEDICAL CENTER

ATTENTION PATIENTS AND VISITORS / **ATENCIÓN PACIENTES Y VISITANTES**

This is a healing environment.
Abuse of teammates, visitors or patients will not be tolerated.

No weapons (including guns or knives) are permitted on campus for everyone's safety.

No unauthorized videotaping in patient care areas.

Incidents may result in removal from this facility and prosecution.

Thank you for respecting everyone's right to an abuse free workplace.

URC HEALTH

Este es un espacio para sanar.
No se tolerará el maltrato hacia los empleados, los visitantes o los pacientes.

Por la seguridad de todos se prohíbe portar armas en el campus. Esto incluye armas de fuego y cuchillos.

Está prohibido grabar videos sin autorización en las áreas de atención a los pacientes.

Los incidentes de este tipo pueden resultar en expulsión de las instalaciones y acción judicial.

Gracias por respetar el derecho de todos a trabajar en un lugar libre de maltrato.

YOU REPORT. WE SUPPORT

Studies suggest that half of all verbal and physical assaults by patients against healthcare workers are never reported. **Report all incidents of verbal and physical abuse using the SAFE Employee Event Report. Help us keep our hospital safe.**

Sample Patient Management Tip Graphic

Recognizing & Managing Disruptive Behavior in Patients & Visitors

Workplace Safety Program

Signs of Escalating Behaviors

- Agitation, staring, anxious or nervous pacing
- Sudden refusal of care
- Disregarding unit guidelines
- Yelling or using profanity
- Making verbal threats of violence
- Talking in threatening, abusive, violating personal boundaries, harassing tone
- Making statements of harm towards self or others

What You Can Do to De-escalate

- Use an open and supportive attitude
- Approach with a senior staff member when possible
- Let the person know they are there to help
- Use simple terms to explain how their behavior is impacting you and others
- Listen and validate
- Offer clear options to help them partner with you in their care
- Be explicit about what can not be changed
- Establish the issues to share understanding
- Summarize

IN CASE OF EMERGENCY:

- Hospital: Call the Switchboard (984-974-4111) – ask for Behavioral Response Team (BRT) or Hospitals Police (984-974-3686)
- Clinics (not at the Medical Center or Hillsborough): contact 911, then Hospitals Police
- For more guidance, refer to the Workplace Safety Program intranet page – scan the QR code

1. The Joint Commission. (2023). *Quick safety 47: De-escalation in health care*. <https://www.jointcommission.org/resources/news-and-multimedia/newsletters/newsletters/quick-safety/quick-safety-47-deescalation-in-health-care/>

2. Occupational Safety and Health Administration. (2016). *Preventing workplace violence: A guide for healthcare employers* (OSHA Publication No. 3827). U.S. Department of Labor. <https://www.osha-slc.gov/sites/default/files/OSHA3827.pdf>



51



52

Sample Platform to Report Violence - SAFE

What SAFE does

- Helps monitor WPV trends
 - Per unit, patient specific, patient population (e.g. post-op), staff population.
- Is a report that can be referenced later
- Allows upper leadership to gain insight to WPV incidents and provide individualized follow up

What SAFE doesn't do

- Activate a police response
- Punish the offending patient, visitor, or employee
- Punish the reporting staff member
- Automatically mobilize hospital WPV resources
- Directly prevent future violent behavior



The Joint Commission. (n.d.). Workplace violence prevention. The Joint Commission. Retrieved [Month Day, Year], from <https://www.jointcommission.org/priorities/workforce-safety-and-well-being/resource-center/workplace-violence-prevention/>

53

Sample - Safety Alert System

The Safety Alert System warns of known risks and provides instructions for safe interactions with patients and/or their visitors if they meet certain criteria.

YOUR role: The following situations may be eligible for a safety alert and should be escalated after immediate safety is established:

 Weapons	Intentional violation of rules against firearms/weapons, discharging of firearm or brandishing of other types of weapons while receiving care.
 Assault	Physical assault with injury requiring care beyond first aid.
 Certain Types of Threats	Credible threats regarding use of items that could cause widespread or catastrophic injury such as firearms, explosives or other weapons.

Establish Safety FIRST

The Safety Alert System is a communication pathway, it does NOT summon emergency response teams. Follow your setting's emergency response steps FIRST.

54

Sample - Staff Follow up Tool - Laudio

Good morning XXXX:

I heard about your incident **last week where your patient was verbally and physically inappropriate toward you in the ED.** I'm really sorry to hear this has happened and am reaching out to make sure you are ok. Thank you for reporting this.

When you come to work you should feel safe and we want to do whatever we can to ensure things like this don't happen. Patient care is difficult enough without adding disruptive behavior like this. From your perspective, is there anything we could have done differently to prevent this? We as a leadership team are always working to improve safety in our workplace.

Since this incident we have had a lot of discussion about communication between our Hospitals Police and Nursing teams so we are better prepared when patients like this present to the hospital.

Please know that we have an employee assistance program called Headspace that is free and confidential should you want to talk to someone. Counselors are available to assist you 24 hours a day, 7 days a week at 855-394-5547. You can also go online to receive help at headspace.com/work-life and use the company code: **unch**.

Again, I am really sorry that this happened to you. You are a valued member of our team and your safety and wellbeing is a priority. Please reach out if you want to talk.

Stephanie

55

Sample - Employee Resources



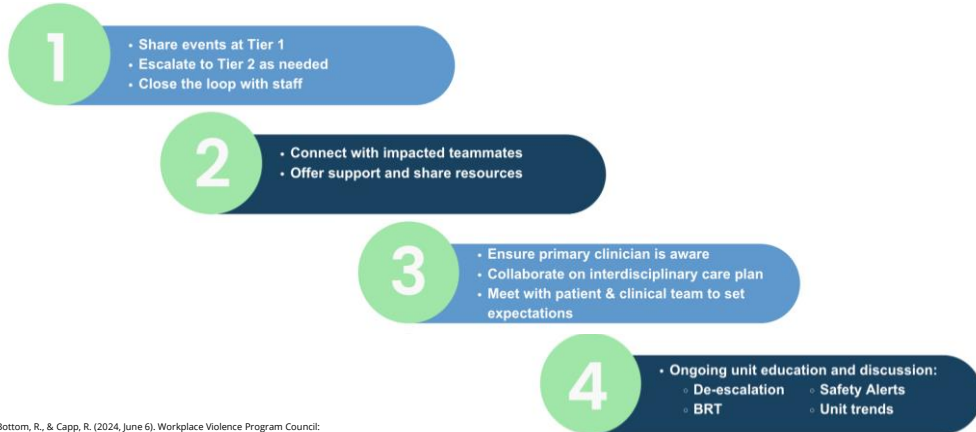
Policy: Guidelines for management of disruptive patients and staff

- Staff signage communicating that experiencing WPV is “not part of the job”
- CPI (Crisis Prevention Institute) Training
- Link to the SAFE Reporting Portal
- Information on Staff Support Resources
 - EAP (Employee Assistance Program)
 - Beacon Program
 - Taking Care of Our Own
 - Peer Support Program
 - Critical Incident Stress Management
 - Pastoral Care

UNC Health. (2019). Guidelines for Management of Disruptive Patients/Guests - Inpatient. Retrieved from <https://unchcs.sharepoint.com/sites/TrainingLibrary/Training%20Library/Compliance%20Attestations.pdf>

56

Sample - Nurse Manager Role in Workplace Safety



Bottom, R., & Capp, R. (2024, June 6). Workplace Violence Program Council: Nurse leader recommendations, role, and resources. Nurse Leaders Presentation.

57

Sample - Escalation Pathways



Bottom, R., & Capp, C. (2024, June 6). Workplace Violence Program Council: Nurse leader recommendations, role, and resources. Nurse Leaders Presentation.

58

Sample - Frontline Empowerment: Workplace Safety Champions



Expectations:

- Provide support and education to teammates (ex: unit-based staff meetings, posting flyers/education, huddles, etc).
- Monitor progress by reviewing workplace violence SAFE data
- Partner with manager/director to review progress, address barriers, and celebrate successes

59

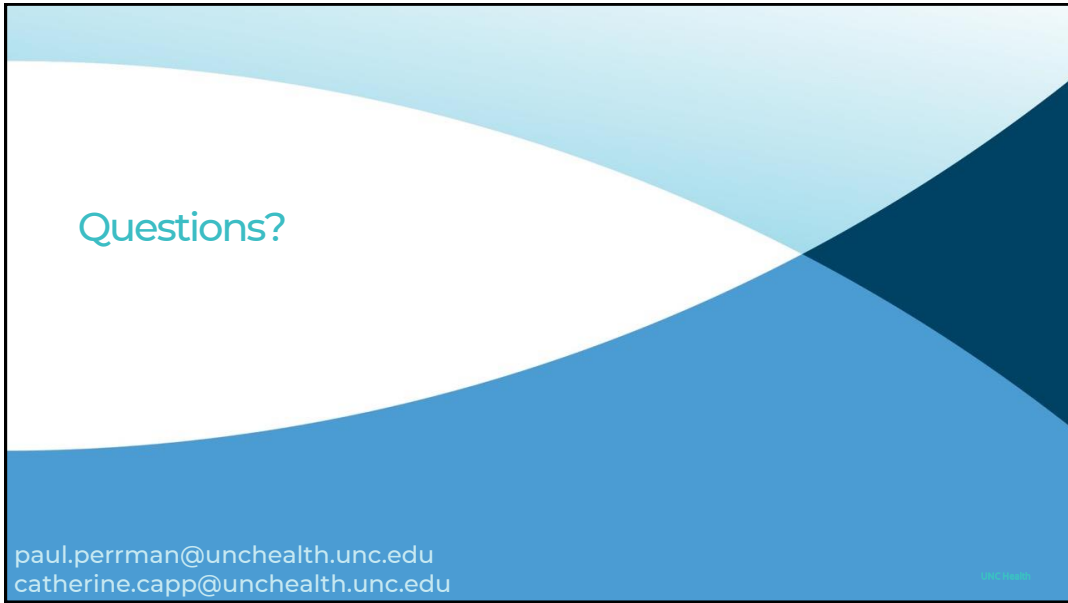
Sample - Promoting Culture of Safety and Reporting: Workplace Safety Hero Recognition



• **Workplace Safety Hero**

- Teammate, unit or department safety heroes are recognized monthly.
- Honorees may be nominated for their actions or initiatives to help protect and support teammates who might experience workplace violence.

60



61



62

Thank You . . .

University Cancer
Research Fund



UNC Lineberger Cancer Network

The Telehealth Team

Tim Poe – Director

- Veneranda Obure – Technology Support Specialist
- Andrew Dodgson, DPT – Continuing Education Specialist
- Jon Powell, PhD – Continuing Education Specialist
- Patrick Muscarella – Technology Support Technician
- Oliver Marth – Technology Support Technician
- Barbara Walsh, DNP, MPH, MSN, RN – Nurse Planner

The song *Back Rhodes* written and performed by Don Poe

63

Upcoming Live Webinars

learn.unclcn.org



SOUTHEASTERN AMERICAN
INDIAN CANCER HEALTH
EQUITY PARTNERSHIP

November 13
12:00 PM

Evolution of Native Patient Navigation

Linda Burhansstipanov, MSPH, DRPH, OPN-CG



ADVANCED
PRACTICE PROVIDER

November 13
4:00 PM

The Expanding World of Cellular Therapy

Brianne Buchanan, PA-C



RESEARCH
TO PRACTICE

November 20
12:00 PM

Updates in Targeted Therapy for Non-Small Cell Lung Cancer

Shetal Patel, MD, PhD

64

Self-Paced, Online Courses

learn.unclcn.org/spoc



ADVANCED PRACTICE PROVIDER Self-Paced Online Course

Basics of EKG Interpretation with an Oncology Focus
Tracy Vernon-Platt, DNP, ANP-BC



RESEARCH TO PRACTICE Self-Paced Online Course

Multiply Myeloma in North Carolina: Updates
Samuel M. Rubinstein, MD, MSCI



PATIENT-CENTERED CARE Self-Paced Online Course

Colorectal Cancer: Epidemiology, Risk Factors, and Screening Strategies
Lisa M. Gangarosa, MD

65

We Thank You for Participating Today!

UNC Lineberger Cancer Network

Sign up for our monthly e-newsletter

Email: unclcn@unc.edu

Call: (919) 445-1000

Check us out at

unclcn.org and learn.unclcn.org

Look for us on these social media platforms



facebook.com/unclcn



unclcn.org and unclcn.org



linkedin.com/in/unclcn

66