Jefferson Health

Pediatric Workplace Violence in Behavioral Health

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Session Overview

Definitions and statistical data

Causes and contributing factors

Trends and patterns in pediatric behavioral health settings

Impact on staff wellbeing

Intervention, mitigation and prevention strategies

Building a culture of safety

What is Workplace Violence?

OSHA

- “Any act or threat of physical violence, harassment, intimidation, or other threatening or disruptive behavior that occurs at the work site.”
- May range from verbal abuse and harassment to physical assaults or even homicide

Other types of Workplace Violence:

- Unwanted physical contact
- Bullying
- Verbal or other threats
- Spitting, biting

Pediatric Workplace Violence

- Occurs when the perpetrator of violence is a child or adolescent
- Family members or caregivers may also be perpetrators of the violence
- Most often directed at staff or other patients
- May involve verbal or physical assault, threats, or destruction of property

Statistics

Dramatic increase in incidents of violence or other mistreatment of healthcare workers by patients or visitors since 2020 (onset of COVID)

Healthcare workers in the United States are 5X more likely to experience workplace violence resulting in non-fatal injuries than any other profession or setting (Meese, et al, 2024)

81.6% of nurses surveyed reported experiencing at least one incident of workplace violence in the past year

Highest rates of pediatric workplace violence occur in emergency departments, pediatric units, and pediatric psychiatric treatment facilities

Pediatric mental health needs and hospitalizations are on the rise. Visits to ED for pediatric mental health have increased 60%, while hospitalizations have increased 25%

Causes and Trends

Patient-Related

- Mental Health Diagnosis
- Developmental Disorders/Autism
- Emotional Dysregulation
- Childhood trauma, abuse or neglect
- Substance-induced symptoms
- Social Media/Peer Groups/Bullying

Family-Related

- Stress within the home environment
  - Addiction, Abuse, Neglect
  - Socioeconomic stress Food insecurity
- Mistrust of healthcare providers
- Cultural/communication issues

Systems-Related

- Staffing shortages
  - Shift change, nights, weekends, holidays
- Long wait times/overcrowded ED's
- Delays in placement/bed availability
- Underreporting of incidents

Environment-of-Care Related

- Non-healing surroundings
- Noise levels
- Lack of structured activities
- Conflict with peer(s)
- Restrictions (phone, visitors, screen time)

Interventions

- Recognizing early signs of escalating behavior
- De-Escalation Techniques
- Least restrictive interventions attempted
  - Time out in room
  - Diversional Activities
  - Conversation with staff
  - 1:1 for safety
  - Medications
  - Physical Holds
  - Restraint
- Teamwork and communication essential

Impacts

Staff

- Psychological Trauma
- Physical injury
- Moral Distress
- Burnout
- Lost work time and income

Organization

- Decreased productivity
- High turnover rates
- Liability
- Regulatory inquiries
- Legal implications

Mitigation and Prevention Strategies

Trauma-Informed Approach

- Focus on themes of safety, trust, collaboration, and self-empowerment
- Identify and reduce triggers
- Educate staff on trauma-informed principles

Proactive measures to mitigate violence

- Creation of safe spaces for provision of care (“Safer rooms”)
- Training on de-escalation, assaultive management, conflict resolution, spatial and situational awareness
- Provide staff with tools needed (policies, screenings, risk assessments, PPE, response teams)

Building a Culture of Safety and Prioritizing Wellbeing

- Leadership commitment to staff safety
- Transparency and communication
- Post-Incident De-Briefing
- Availability of peer support and employee assistance programs for impacted staff
- Foster a spirit of teamwork, communication, and resilience
- Promote reporting without blame
- Administrative Support when legal charges are pressed

Post Incident Debrief Form

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POST-INCIDENT DE-BRIEF FORM

Date of Incident _____ **Location of Incident:** _____ **On-Point #** _____

Type of Incident: (Circle one where applicable)

☐ Code Gray ☐ Restraints (Violent or Non-Violent) ☐ Strongline/Security call ☐ Assault (Verbal/Physical)

☐ Other _____

Is the staff OK? (injuries, concerns, emotional distress, need for resources assessed)

_____

Is the patient OK? (injuries, restraints, needs assessed, treated with dignity and respect)

_____

Details of Incident: (triggers, behaviors, actions taken)

_____

_____

_____

What went well in dealing with incident:

_____

_____

_____

Opportunities for improvement identified:

_____

_____

_____

Additional Information or Comments: (Procedural/Environmental Factors contributing to incident, next steps, interventions implemented, etc._

_____

_____

_____

Attendees:

_____ _____ _____ _____

_____ _____ _____ _____

_____ _____ _____ _____

Key Takeaways

- Pediatric Workplace Violence is on the rise in Behavioral Health settings
- Many causal factors; screening, assessment, early intervention are key
- Teamwork and communication are essential when intervening in a potentially violent situation
- Impact on staff must be actively addressed
- Post-incident debriefing huddles help to support staff and identify strengths and opportunities
- Mitigation and prevention strategies are critical in building and sustaining a culture of safety

References

- American Academy of Pediatric (AAP). (2022). *Protecting Pediatric Healthcare Workers from Workplace Violence. Pediatrics, 149 (6).*
- The Joint Commission. (2018, rev. 2021). *Physical and verbal violence against health care workers.* Sentinel Event Alert 59.
- Substance Abuse and Mental Health Services Administration (SAMHSA) (2014). *Trauma-Informed Care in Behavioral Health Services (*Treatment Improved Protocol/TIP 57*).*
- Thomas AA, King S, Quigley P, Bannerman RE, Schultz TR. *Leveraging Technology to Mitigate Workplace Violence*. Nurs Adm Q. 2025 Oct-Dec 01;49(4):278-287. doi: 10.1097/NAQ.0000000000000716. Epub 2025 Aug 26. PMID: 40876048.
- Workplace Violence. Occupational Health and Safety Administration (OSHA). https://www.osha.gov/workplace-violence. Accessed October 3, 2025.

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