Improved Patient Flow Can Reduce Violence in a Psychiatric Emergency Center
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Problem:
Patient violence in mental health settings has been shown to have a negative effect on treatment outcomes for all patients. Violent patients can be isolated from treatment and both staff and other patients may lose confidence in a facility’s ability to deliver therapeutic care.

Evidence:
Many studies have addressed the frequency and causes of patient violence in psychiatric settings. There is little evidence on the use of improved patient flow to alleviate known triggers such as; overcrowding, with its inherent lack of patient privacy, patient clustering, and long waits for treatment.

Strategy:
A performance improvement team at JPS Health Network was developed and implements improvements to patient flow from the Psychiatric Emergency Center to inpatient units.

Practice Change:
Nurse culture change emphasizing that timely patient flow produces therapeutic patient care: Nurses empowered to be assertive with physicians concerning inpatient admission. Patient flow lead nurse each shift. Dedicated admission and discharge nurse. Continuous updates between units maintains focus on patient flow. Streamlined nurse-to-nurse reporting hand-off process. Nurses given autonomy in bed assignment.

Evaluation:
Rates of seclusion, restraint, and patient injury were identified as violence indicators and were measured before and after implementation of practice changes. Admission waiting times were also compared.

Results:
Ten months implementation: 37% improvement in admission waiting-times corresponded to an 11% decrease in seclusion, 45% decrease in restraints, and a 73% decrease in patient injuries from violence.

Recommendations:
The results suggest that improved patient flow could be adopted and evaluated as part of a patient violence reduction strategy at similar mental health care facilities.

Lessons Learned:
Each step towards reducing patient violence strengthens the idea that all aspects of nursing practice must be included in any violence reduction approach.
Bibliography


