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WORKPLACE VIOLENCE IN THE EMERGENCY DEPARTMENT SETTING: THE NUMBERS, THE FINANCIAL EFFECTS, AND HOW TO PREVENT IT ON MULTIPLE LEVELS

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Recent statistics show that violence has increased 23% in recent years to become the second most common cause of death at work. Unfortunately, there is suggestion from recent studies that suggest the number of injuries may be much higher than even reported. The violence affects the entire emergency system, with up to 100% of nurses and 78% of physicians being affected in the past year. My lecture includes data on the huge financial impacts of workplace violence on hospitals, with costs involving lost wages, lost productivity, recruiting, hiring and training. Fortunately, there are ways to prevent workplace violence at a practice level identifying characteristics of the high-risk individuals, identification of patients with practice alerts and armbands, and emergency department security procedures including metal detectors and improved security procedures. Other ways to improve safety in the workplace include national regulations (currently only recommendations), state regulations (in process), and national groups (the veterans administration is currently way in front with this). Training staff will become mandatory in the future in the United States and there are already some good training programs that should be modeled to prevent workplace violence.

Recent Publications

1. Claudius I, Desai S, Davis E, and Henderson S (2017) Case controlled analysis of patient-based risk factors for assault in the healthcare workplace. *West J Emerg Med.* 18(6):1153-58.
2. Copeland D and Henry M (2017) Workplace violence and perceptions of safety among emergency department staff members: Experiences, expectations, tolerance, reporting, and recommendations. *Journal of Trauma Nursing* 24(2):6-77.
3. Schnapp B, Slovis B, Shah A, et al. (2016) Workplace violence and harassment against emergency medicine residents. *West J Emerg Med.* 17(5):567-573.
4. Guay S, Goncalves J and Boyer R (2016) Evaluation of an education and training program to prevent and manage patients' violence in a mental health setting: a pretest-posttest intervention study. *Healthcare* 4(3):49.
5. Kowalenko T, Cunningham R, Sachs C, et al. (2012) Workplace violence in emergency medicine: Current knowledge and future directions. *Journal of Emergency Medicine* 43(3):523-531.

Biography

Karen Nolan Kuehl is an Emergency Physician and full-time Clinical Faculty at the Virginia Tech Carilion School of Medicine in Roanoke, Virginia. She currently serves as the Medical Director of Emergency Psychiatry at Carilion Roanoke Memorial Hospital and has set up multiple processes to improve the care of psychiatry patients within the emergency department, which sees almost 100,000 patients annually. She is also serving on the community-based opioid task force and the medical screening work group for mental health patients. She attended Medical School at the University of Colorado Health Sciences Center and trained in Emergency Medicine at the Stanford/Kaiser Emergency Medicine residency program in Stanford, California.

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