

## An integrated innovative education approach; How to manage an aggressive youth in an inpatient setting.

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## Abstract

Poster Topic: Education; Safety/Quality

### Background:

A needs assessment revealed that nurses on a general pediatric ward at a Children's Hospital, felt ill prepared to manage and/or prevent a situation that involved potential/actual patient agitation. Additionally this was also confirmed from a Claims, Concerns, Issues (CCIs) evaluation that was conducted on staff in this area and from information collected from previous Code White debriefs.

### Objective/ Description:

A quality improvement initiative was started with the intent to improve the verbal de-escalation skills of nursing staff, educate them about the use of physical/mechanical and chemical restraints and help improve role clarification during an aggressive patient situation. An innovative education plan that consisted of three components was formulated:

- 1) a one hour workshop focusing on the early identification of risk, verbal de-escalation skill development and a review of the current hospital's Code White Policy;
- 2) in-services at nursing huddles to review physical holds/mechanical restraints;
- 3) "in situ" simulations were observed and videotaped. Interactions and communications were coded and evaluated. Post simulation debriefing discussions were audio taped and subject to qualitative content analysis.

### Impact:

130 nurses participated in the one hour workshop. All participants completed a pre- and post-workshop questionnaire that measured cognitive load and self-efficacy. 14 nurses participated in the "in situ" simulations and debriefing discussions. All completed a post simulation evaluation that focused on cognitive load during the simulation. Preliminary results indicate that staff felt more confident to deal with the prevention and management of potential/actual aggression/agitation. Staff remained unsure of the roles within a Code White event and unclear about the policy. Analysis of audio content revealed that staff were uncertain how to communicate with caregivers when the patient's behaviour escalated. Future Implications Findings have opened discussions for broader organization education regarding the management of an aggressive patient and also possible amendments to the hospital Code

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