

Safety First

Extreme Situations Guide West Virginia Aged and Disabled Waiver Program

Disclaimer: This guide cannot predict nor identify all potential risks in extreme situations. This guide is intended to be used as a tool for Aged and Disabled Waiver workers and is not to be interpreted as an official policy.

Remember These Basic Tips for Extreme Situations

The best way to prevent violence is to practice safety first and use precautions at all times. Use these basic tips:

- **Stop:** Stopping makes you concentrate on your situation. Stop long enough to focus on what you see and hear around you.
- **Look:** Looking around narrows your attention to your “situation” and what is around you. It is called “situational” awareness. Be aware of what you see and hear.
- **Think:** Thinking before you act can keep you safe. Think about what you will do or what you will say in the situation. Thinking will allow you to develop a plan on how to get away safely or how to prevent a situation from getting worse.

I. Purpose

The purpose of this guide is to educate the Aged and Disabled Waiver (ADW) worker about potentially dangerous situations and ways to prevent potential risks of violence. This guide is for all ADW workers including personal attendants (direct care workers), case managers, agency nurses and other ADW program representatives who may need to visit the participant’s home. This guide will outline risk factors, assess potential for risks, offer tips for entering a risky situation and provide education about dealing with extreme situations. This guide cannot predict all extreme situations that a worker may encounter. It is important for the worker to discuss all extreme situations with the agency and appropriate authorities (police, Adult Protective Services, etc.). The risk may be caused by the person that you are serving or anyone who enters the ADW participant’s home. An extreme situation could quickly lead to workplace violence. Therefore, it is important for agencies to have workplace violence policies, reporting standards, training or other policies that are preventive.

II. Definition of an Extreme Situation

An extreme situation is an event where the agency staff is in harm’s way, a potential for physical threat exists, and/or physical harm has occurred.

III. Identifying Risks

There are certain traits and factors that have been identified that tend to make people more inclined to violence. While this is not the case with everyone, knowing this information can help you prepare for situations that could quickly become risky.

- Prior violence: Each time someone commits a violent act, it is more likely that violence will happen again. Ask your agency if there are any known past criminal behavior of the ADW participant or anyone in his/her home.
- Certain feelings: Some individuals will respond with violence or aggression when they are afraid, humiliated, bored, expressing grief or have a sense of powerlessness. To reduce risk, avoid putting individuals in positions that will trigger one of these emotions. Rather, give them knowledge that empowers them and helps them seek nonviolent options.

- Physical factors: Some physical factors such as lack of sleep, stress, physical exhaustion, use of drugs or alcohol, brain trauma, heat, hunger, cold, physical disability, chronic pain, etc., may increase the risk of violence
- Situational factors: Access to weapons, experiencing abuse or aggression themselves or feeling a sense of injustice or oppression can lead to aggression or violence.

Even if you do not have information about a person's past history or current emotional state, you can look for signs. Observe the person's body language. Are they:

- Pacing or fidgeting?
- Clenching fists or jaws?
- Agitated, out of touch with reality?
- Speaking in a loud voice or becoming verbally abusive?
- Making uneasy movements, tensing muscles and/or making threatening gestures?
- Staring, glaring, accelerating speech and/or raising tone of voice?

These behaviors are indicators, and you should take immediate steps to reduce the tension before it escalates.

Before you go into a home, ask your supervisor the following questions:

- Is there a history of violence (reported or unreported to the police)?
- Is the ADW person or a member of the family using illegal drugs or drinking alcohol in excess?
- Does the ADW person or a member of the family have erratic or dangerous behaviors which are not currently being managed by treatment?
- Are there firearms in a home where someone has a history of violence, substance abuse or other dangerous behaviors?
- Are there any vicious dogs or other animals that could be threatening? (Suggestion: When going to the home, you may want to keep small doggie treats to make friends.)
- Are there known safety hazards in the home or on the property?
- Does the ADW person fear anyone in the home? Does the person fear anyone in the community? What do they base that fear on? Would a person be at risk engaging with that individual?
- Is anyone in the home on probation, or does anyone in the home have a known criminal history?

It can be challenging to predict an extreme situation. There are ten basic areas called "risk markers" that may increase the potential for an extreme situation. These risk markers could exist with the ADW person, a family member or friend living/visiting in the home. For those friends or family, you may not have access to this type of information. That is why it is important to practice the three steps in this guide in an extreme situation: **Stop. Look. Think**. Using these basic tips will make you more aware of your surroundings (the person you are serving, the people in/out of the house, activities in the household, illegal activities or items in the home, etc.). That is the key to maintaining your personal safety.

Report any issues that you observe or hear to the agency immediately. These risks may not be present when you first begin serving the individual in the home. That is why it is important to be alert. Your personal safety always comes first. The following is a list of ten risk markers which may exist for many. However, everyone with these risk markers will not be a risk. You should "be on your toes" in these situations.

Risk Markers

1. History of physical violence, domestic violence or sexual assault (ADW participant, family or friend).
2. History of erratic or dangerous behaviors (which may or may not include delusions, hallucinations, violent fantasies, etc.).
3. History of substance abuse (ADW participant, family or friend in the household).
4. History of criminal convictions or arrests (particularly violent criminal history).
5. Guns or other weapons in the household (particularly in combination with history of violence, erratic or dangerous behaviors or substance abuse).
6. Pets in the household.
7. Illegal activity in the household (illegal drugs, theft, drug trafficking, etc.).
8. Criminal activity in the neighborhood (high crime area, drug activity in the area, shootings/crimes resulting in physical harm, etc.).
9. Isolated setting (no houses or businesses close by, extremely rural setting, poor road conditions to the home, etc.).
10. Narcotics or medication in the home (potential for theft, burglary, violence).



A. Tips for the Office

- For Personal Attendants:
 - Keep a calendar with the participant's name, address and phone number. Indicate the days and times that you will be in the home. Be consistent with the schedule.
 - Send your schedule to someone in the office.
 - Employees check in at specific times of the day. In the event the worker does not call at the scheduled time, a designated person calls them.
- For the Personal Attendant Supervisors:
 - Use a calendar (either paper or electronic) for each personal attendant so you know where he/she is at any given time.
 - Establish protocols. For example, if the personal attendant is unable to make it to an appointment, he/she should immediately notify the office about the change in their schedule.
 - Establish a check-in process or monitoring of employee whereabouts for safety purposes.
- For all staff who visit the home of an ADW participant:
 - Try to schedule visits to questionable areas early in the day (to minimize your chance of being in a potentially unsafe neighborhood in the dark and less likely to find loiterers). This may be unavoidable when the person needs services late in the day.
 - Use a call-in/call-out system to ensure that someone knows when you arrive at the home and when you leave the home.
 - Establish code words that can be used to indicate danger. Example: "Please tell Mr. Smith I will be at the appointment today." Mr. Smith means "I am in danger."

B. Tips for Going into the Home

- Put your purse/wallet in the trunk of your car before leaving your home (do not let anyone see you).
- Do not wear expensive jewelry, long earrings, necklaces, scarves, ties, lanyards, etc., as these items can be used to choke or restrain you. Pull your hair up away from your face so you can see what is going on around you and so it cannot be grabbed.

- Wear comfortable shoes and clothes so it's easy to get around.
- Keep your keys easily accessible and a small amount of money in your pocket.
- Plan your route ahead of time to make sure that you take the safest route possible.
- Carry either a phone or GPS system. Make sure that the battery is fully charged. Know where you are and how to get out of the neighborhood if you need to leave in a hurry.
- Know where you are going. Drive around the block to get a feel for the neighborhood.
- Pay attention to detail and don't get in a hurry.
- Carry a whistle.
- Consider not wearing nursing "scrubs" to the home. This may give the wrong message to the neighborhood that you are carrying narcotics and could make you or the participant an easy target for theft.
- Do not give out personal information, i.e., where you or any member of your family lives, your telephone number, email address, or Facebook contact information. Providing personal information could put you in danger.
- Always make sure someone knows where you are going and when you plan to return.
- Carry as few things as possible in your hands. Be alert as to whom and what is around you. Carrying a cell phone out in the open or listening to headphones makes you easy prey because you are distracted.
- Never get yourself into a position where you cannot escape. Always face the doorways so you can see a potential threat. Never let anyone come between you and the doorway. Never sit with your back to a door.
- Don't carry your credit/debit cards, driver's license, large amounts of money, etc., into the home.
- Sitting on a hard chair will decrease the risk of carrying home unwanted insects or sitting on an unknown substance. Also, it is easier to get out of a hard chair rather than a soft chair or a couch.
- Be respectful.
- Most assaults happen in the heat of the moment when someone feels a loss of power. It is best to stay calm. Do not take it personally. Do not try to take control. The anger is not about you. Do not get into a power struggle with the person.
- Don't react to a situation. Respond to a situation. Example: If a family member threatens you, don't immediately yell at them in a loud voice or argue with them.
- Sometimes the simplest thing can diffuse a situation. Acknowledge their feelings or emotions. Example: "Mr. Jones, I know you are angry. What if we help you fix something else for breakfast?" Sometimes this is enough to diffuse a hostile situation.



C. Personal Triggers

It is important to learn to recognize your personal triggers. Once you understand what makes you angry, you will need to learn how to control yourself. If you can't control yourself, you won't be able to control a hostile situation. You need to be able to recognize when you're upset and when the other person is upset.

The person may verbally attack you, your job, your agency, etc. Control how you react. If you become angry, this can escalate a bad situation. If you believe the person is getting ready to physically attack you, leave immediately.

Example 1: Dealing with a Difficult Situation

Wrong Way:

Participant: “ABC Agency is terrible, and you can’t even cook an egg. Why do they send people like you?”

You: “What do you mean? I’m a great cook. Don’t insult my cooking! I’m not coming back here.” (This is you reacting to an insult about your cooking. You are angry.)

Participant: “Then get out of here now! Tell them not to send anyone else. Get out!” Participant is screaming and throws a cane on the floor (participant is responding to frustration with frustration).

Right Way:

Participant: “ABC Agency is terrible, and you can’t even cook an egg. Why do they send people like you?”

You: “What about something else? How about oatmeal tomorrow?” (You control your frustration about the insult and give the participant a choice. The situation does not worsen.)

Participant: “Oatmeal? Can I have it for lunch?”

You: “Of course. Would you like raisins in it, too?” (Participant is calmer because you were calm. You have given the participant some control/power over the situation by offering a choice.)

Example 2: Dealing with a Potentially Violent Situation

Person has a history of violence and was in prison for assault and battery.

You may still use the method above to calm the situation. However, knowing the person’s history of violence may require additional thinking and action. Know the location of exits so you can escape easily. Are you prepared to leave with keys/cell phone in your pocket? Look around to see if there are items that the participant could use as a weapon (i.e., a cane). Does the person look tense and upset? What is your plan for getting out safely? Remember, your personal safety always comes first. Are you willing to go back into the home with this new knowledge about the person? These are questions to think about and discuss with your supervisor. It is important to have a plan **BEFORE** you go into the home.

D. Predictors of Anger

- History of violence
- Abusive language
- Threats
- High frustration
- Police/legal trouble
- Paranoia or extreme desperation
- Socially isolated.
- Knowledge of weapons and military training

E. Action

- Recognize their feelings and offer to help. Example: “You appear to be angry. Is there anything I can do?”
- Show concern. Example: “Are you in pain or not feeling well today?”
- Keep it simple and direct.
- In some situations, you may not want to say anything and just leave. If you use a lot of words when people are upset, they don’t really hear what is being said. Try not to let emotions creep into the situation. Panic is an emotion. When we become emotional, we do not react logically. By remaining calm, speaking in a low voice and knowing your plan, you have a much better chance of preventing the situation from escalating.

F. Safety Plan

A safety plan should include the following:

- Who or what is the risk?
- What does the risk look like?
- How can the risk be prevented?
- What should I do if it does happen?
- How do I get out safely?

1: History of Violence

Issue: Be sensitive to the potential for violent behavior and how to handle it if it should occur. If the person or someone in the household has a history of physical violence, domestic violence or sexual assault, these behaviors increase the risk to the person going into the home. You should be alert for escalating sexual harassment as this could lead to a more violent, aggressive behavior.

Guide:

- Pay close attention to your personal space and remain at a safe distance from anyone who could be potentially violent.
- Signs that you should leave the home include: yelling, screaming, hitting, choking, inappropriate and/or sexual photos or videos, inappropriate and/or sexual comments, clenched fists, throwing household items, threats of harm or threats to report you, blaming you, low tolerance and anger.
- When you see the situation escalating, remove yourself **IMMEDIATELY**. Do not wait. Go to a safe place and call the agency immediately. Call 911 for any life threatening emergencies.

2: History of Erratic or Dangerous Behaviors

Issue: A history of erratic or dangerous behaviors, which may or may not include hallucinations, delusions, or violent fantasies, can be signs of risk. Individuals who are experiencing a psychotic episode, especially with delusional and paranoid features, do have a higher potential for violence. These individuals should be approached with care and those who are working with these individuals must take care not to intensify existing paranoid thoughts or behaviors. It is important that these individuals take their medications as prescribed by a qualified professional. In cases where an individual is not taking prescribed medication due to non-compliance, or whose medication is not controlling their symptoms, those working with these individuals must take some degree of caution.

Guide:

- Most individuals having a psychotic episode have a similar set of symptoms that occur each time they become ill. It is recommended that you pay close attention to any changes in their normal behavior (what you see every day). Ask the agency if there are any signs or symptoms to look for before going into the home.
- Many times, you may see an increase in the person's symptoms. They may become suddenly fearful, think they are someone else or believe things that are not real, see things that are not there, express an increase in anger, change sleep and appetite pattern, avoid treatment, or fail to take their medication, etc.
- It is clear that individuals who have other issues that occur with their mental health symptoms may present more risk in terms of violence. This is especially true if the individual is abusing substances or has antisocial traits that accompany their mental health issues.

3. History of Substance Abuse

Issue: Some individuals or family/friends may be actively using illegal substances (pain pills (opiates), alcohol, methamphetamine, cocaine, hallucinogens or designer drugs like bath salts or synthetic marijuana). These individuals may steal the participant's medication, money or debit/credit cards to support their addiction. They may also bring others into the home who are involved with substance abuse. Additionally, if a person is involved in illegal drug activity, threats may occur if the person is fearful of being reported. Some substances can cause paranoia, delusions and agitation, making the individual more prone to violence, if provoked.

Guide:

- You should not confront these individuals about their substance abuse or other illegal activity. However, once you leave the home you should report this activity to your supervisory staff who can take the appropriate action.
- If you encounter an individual who is intoxicated or "high" on a substance, pay attention to personal space as not to increase their behavior (refer to tips under section V.).
- For personal safety, contact 911.

4. Criminal History

Issue: A history of criminal arrests or convictions, particularly violent, can be a potential for the risk of violence. Specific criminal areas to consider are murder, sexual assault, assault, etc.

Guide:

- Make sure you are very clear what your role is in the home and who you are. You are a personal attendant providing services to the person.
- Use first name only.
- Do not provide personal information such as last name, phone number, address, children, etc.

5. Guns/Weapons in the Home

Issue: In combination with erratic or dangerous behaviors, history of violence or violent criminal charges, substance abuse, having guns or weapons in the home can be potentially risky. While having a gun in the home may not pose a risk in some situations, the presence of other issues can affect the situation. Many individuals use guns for deer hunting and keep their gun in a locked gun cabinet. Look at the entire picture to determine if there is someone in the home with a history of violence, erratic or dangerous behaviors, substance abuse or criminal history. Evaluate whether it is safe to have this combination with guns or weapons in the home. Speak with your supervisor at the agency when you encounter these situations.

Guide:

- This area can be extremely unsafe in combination with risk markers 1, 2, 3 and 4 (listed on page 3).
- It is recommended that the worker NOT put themselves in danger when a weapon is in the home.
- If the person unexpectedly produces a gun or weapon, remain calm, go to the nearest door and leave the home.
- If you cannot get out of the door, quietly send a text to someone to call 911. You can also set up a code for danger. For example “pick up Jake.”
- You do NOT want to negotiate safety in this area.
- If a gun is in the home, the gun should be in a safe location and locked.
- For agencies, ensure that carrying guns or weapons in the workplace is addressed in the workplace violence policy.

6. Dangerous Pets in the Home

Issue: Animals in or near the home may appear friendly but can be very protective of their territory and owners. If aggression occurs, request that the animal be secured in a safe place prior to your visits. Talk to your supervisor at the agency; he/she may consider asking the participant to sign a behavior contract to ensure safety in the home.

Guide:

- Never approach an unfamiliar animal. Even a dog or cat that is assumed to be friendly can bite or scratch.
- Never run from a dog and scream.
- Stay still when an unfamiliar dog comes up to you.
- If knocked over by an animal, lie still.
- Do not look an animal in the eye. Do not disturb an animal that is sleeping, eating or caring for its young.
- Do not pet an animal without letting it see and sniff you first.
- Be aware of nontraditional pets (rabbits, snakes, insects, etc.) that may cause harm. Do not handle these pets.
- For an aggressive animal that is at risk of biting, you may consider requesting verification of rabies vaccines.

7. Illegal Activity in the Household

Issue: Illegal activities include the sale or distribution of illegal drugs, selling prescription medications, theft of money/cards or medications, illegal sale or possession of guns/weapons or any activity that is in violation of the law. If you see any illegal activity, do not confront the person. Leave and call the office.

Guide:

- **DO NOT** remain in the area to witness an illegal act. When illegal activity is suspected, immediately leave the situation (this is direct advice from law enforcement). Do not try to video or catch them in the act.
- Immediately notify law enforcement (911) for an emergency or risk of immediate harm.
- Immediately inform the agency.
- Report to Adult Protective Services any risk to the ADW person.
- Do not take a purse or money into the home.
- Do not take your own gun or weapon into the home (even if you have a concealed weapons permit). Most agencies have policies on workplace violence that prohibit carrying weapons or guns. The participant's home is your workplace.
- Report other workers or individuals going into the home who may be carrying a gun or weapon.

8. Criminal Activity in the Neighborhood

Issue: Be aware of other people who come and go from the home. Trust your intuition. Some examples of illegal activity may include sale and distribution of illegal drugs or prescription medication in the neighborhood, breaking/entering of homes, theft of personal property, verbal or physical threats and property damage (theft of tires, keying cars, and breaking into cars, etc.). It is important to report incidents of illegal activity to law enforcement. It is not necessary to have physical evidence before you report. You are to report what you know, see, hear or witness. It is up to the police to investigate, not you. Investigating to collect evidence may place you in further harm.

Guide:

- Plan ahead. If the participant's home is in a location that is not familiar to you, ask for precise driving directions, use GPS or a map.
- Carry a noise-making device such as a whistle.
- Carry a cell phone.
- Keep your car in good repair. Know whom to call if your car breaks down.
- Don't leave personal items visible in the car (purses, purchases, etc.).
- Always lock your car.
- Carry an extra set of keys.
- Choose a parking spot that is in the open and near a light, if you are there when it is dark.
- Check for people loitering near your vehicle. Check the front/back seat and underneath your car before getting in.

9. Isolated Setting

Issue: Many individuals in West Virginia live in isolated or remote areas with few neighbors. Bad roads, no roads, long distance from help, etc., may put you in a dangerous situation.

Guide:

- You may consider having someone go with you the first time you visit the home.
- Be sure to have the exact directions to the home.
- Ask about the condition of the roads in all weather conditions (snow, rain, etc.).
- Ask about creeks nearby or those that overflow blocking the road. Ask about hills and mountains for snow and ice.
- Park facing the road (back in if needed).
- Let someone know where you are, when you are going into the home and when you are leaving.

10. Narcotics/Medications in the Home

Issue: Narcotics (“pain pills”) or other medications can be a source of risk in the home. The simple existence of these medications in the home is not the cause for concern, it is the threat of illegal activity that can surround it. The following are potential risk areas.

- Theft of narcotics by family members, friends, neighbors or others in the home or coming into the home.
- Theft of money or credit/debit cards related to theft of narcotics in the home.
- Illegal distribution or sale of the narcotics in or around the home.
- Identification of you as a healthcare worker can target the participant for narcotics theft in the home. (Example: If you wear scrubs to the home, someone in the neighborhood may think that you are carrying pills to the home.)
- Violence related to illegal narcotics theft, sale and distribution in or around the home.

Commonly Abused Pharmaceutical Substances

Examples: Hydrocodone, Oxycodone, Norco, Tylox, Percodan, Vicidan, Lortab, Lorset, Dilaudid, Demerol, Opana, Methadone, Suboxone, Diazepam, Tramadol, Xanax, Ativan, Valium, Duragesic, Morphine and others.

National Institute on Drug Abuse: <http://www.drugabuse.gov/drugs-abuse/commonly-abused-drugs-charts/commonly-abused-prescription-drugs-chart>

Guide:

- Maintain personal safety first.
- **DO NOT** stay in an area after witnessing an illegal act. Leave immediately.
- Immediately notify law enforcement (911) for an emergency or risk of immediate harm.
- Immediately inform the agency.
- Report to Adult Protective Services any risk to ADW member.

V. Recognition of Extreme Situations

Issue: It is important to be aware of the physical signs that provide warning for a potentially dangerous situation. The following is a list of signs of impending aggression, violence, anger or extreme situations:

- Verbal attacks
- Threats of physical attacks
- Physical attacks
- Invading one's personal space
- Hands in pockets
- Fists clenched
- Pacing
- Yelling
- Profanity

Guide: Even with preventive efforts, an extreme situation could occur. In this case, keep the following tips in mind:

- Remain calm.
- Calmly listen to the person and keep a safe distance.
- Remind the person that you are there to help.
- Never tell the person to calm down.
- Respect the person; do not belittle them.
- Keep hands still, below chest level and out where participant can see them.
- Know your escape route.
- If you feel afraid, leave the home and call the agency office from a safe place nearby. If you are in immediate danger, call 911 and your supervisor. If the person cannot be left alone due to his or her need for assistance, call 911 to check on the person.

Contact with a Potentially Violent Person

Environment:

- Put safety first. Be aware of your surroundings.
- Make sure your car has gas and is in good working condition. Keep windows up/doors locked in risky neighborhoods. Check out the area before getting out of the car.
- Let someone know where you are going, how long you will be there and when you will leave.
- Stay near the outside door.
- Keep your car keys where they are readily available (preferably in a pocket).
- If there is a concern with violence, never go in the kitchen to talk. Many potential weapons are there such as knives, forks, heavy pans, glassware, etc.
- Allow the person to "blow off steam" but don't allow emotions to escalate.
- Do not allow the desire to help override caution.
- Sit between the person and the door or facing the door.
- Pay attention to exits.
- Stay out of rooms with no easy escapes.
- Stay away from heavy objects that can be thrown or used as weapons (phones, bottles, etc.).
- Have a pre-arranged method to call for help.
- Remove any dangerous items from the person (if possible).
- Pay attention to how you are dressed (comfortable shoes, keys in pocket/no purse, warm sweater or jacket if need to leave abruptly in winter, etc.).

Talking with the Agitated or the Potentially Violent Person:

- Appear calm and relaxed.
- Speak softly in a non-provocative, nonjudgmental voice.
- Begin by commenting in a neutral, concrete manner about the obvious.
- Empathize with the person's feelings.
- Avoid any emotional comments.
- Identify who you are by name and agency.
- Explain simply and clearly your reason for being there.
- Always be honest in your communication.
- Make sure there is adequate space between you and the person.
- If possible, both of you should be sitting.
- Show respect for the person at all times.
- Nonverbal communication is as important as verbal.
- Aim for a balance between non-threatening acceptance and being in control of the situation.
- When the person begins to talk, LISTEN.
- Appear empathetic, concerned and uncritical.
- Allow the person to tell their story.
- Obtain the person's view of the situation and what led up to the violent episode.
- Avoid continued direct eye contact.
- Never make promises you can't keep.

Pay Attention:

A criminal is looking for an easy target. Pay attention and focus on what you are doing as well as your surroundings. Do not talk on the cell phone or do anything else while you are walking because this can be a distraction. A criminal is looking for someone who is not paying attention. Think about what is normal for the situation and look for suspicious activity. You should look for something that is out of the ordinary, does not make sense or does not fit. This may be a red flag. Example: Someone standing on the corner for long periods of time. Cars pulling up in front for brief period of time, with exchanges being made through the windows. While this may not be a concern, it is important to be aware of your surroundings in order to minimize any problems.

- Carry yourself in a manner that lets people know you're confident. Keep your shoulders back, head held high and always pay attention to your surroundings.
- Trust your instincts. Most people have an innate ability to know when something is wrong. Does it "make the hairs on the back of your neck stand up?" If you get the feeling that something is not right, use caution. You may need someone to go with you or come back another time. Remember, safety first.

Assessment of Potential Risk in the Home

Directions: The purpose of the assessment is for the RN or Case Manager to identify safety risks for the worker and develop strategies to prevent harm. Address each area with a “yes” or “no.” For those areas with a “yes,” describe the strategy for ensuring worker safety. Then, educate the worker on safety strategies prior to entering the home. This could be a risk caused by the participant or the participant’s family/friends.

RISK MARKERS		Yes	No
Participant’s Name:	Other (family/friends):		
1. History of physical violence, domestic violence or rape (participant or family/friend). If yes, describe:			
2. History of erratic or dangerous behaviors (i.e., delusions, hallucinations, violent fantasies). If yes, describe:			
3. History of substance abuse (participant or family/friend in the household). If yes, describe:			
4. History of criminal convictions or arrests, particularly violent criminal history. If yes, describe:			
5. Guns or other weapons in the household, particularly in combination with history of violence, untreated/uncontrolled mental illness or substance abuse. If yes, describe:			
6. Potentially dangerous pets in the household. If yes, describe:			
7. Illegal activities such as illegal drugs, theft, drug trafficking, etc., in the household (participant or family/friend in the household). If yes, describe:			
8. Criminal activity in the neighborhood (high crime area, drug activity in the area, shootings/crimes resulting in physical harm, etc.).			
9. Isolated setting (no houses or business close by, extremely rural setting, poor road conditions to the home, etc.). If yes, describe:			
10. Narcotics or medication in the home (potential for theft, burglary, violence). If yes, describe:			

Strategies to ensure agency staff safety:

Extreme Situations Post Test

Worker Name: _____ Date: _____

1. You walk into the participant's home and her daughter is choking her. The participant's daughter threatens to stab both you and the participant. What do you do? Describe-written or verbal.

2. ADW participant tells you that his nephew is now in the home after being released from prison for rape. He is coming out of the bedroom, yelling at you and the participant for waking him up too early. What do you do? Describe-written or verbal.

3. You take the ADW participant to the grocery store. When you come back to the car, you see the participant selling their pain pills. She says, "Can you take me to the furniture store to pay a bill?" where you are afraid the same thing might happen. What do you do? Describe-written or verbal.

4. The risk markers for potential violence with a participant or in a home include:

- A. History of domestic violence in the home.
- B. Illegal activity in the home.
- C. History of substance abuse in the home.
- D. All of the above.

5. When faced with a potentially violent person, the important things to remember include:

- A. Safety first. Be aware of your surroundings.
- B. Stay near the outside door.
- C. Keep your car keys readily available.
- D. All of the above.

6. Guns or other weapons in the household can present a danger if:

- A. The person has a history of erratic or dangerous behaviors, violent past or substance abuse.
- B. The person has an old shotgun locked in a gun cabinet for deer hunting.

7. Good instructions to follow with a potentially vicious dog are:

- A. Never approach an unfamiliar dog.
- B. Never run from a dog and scream.
- C. Do not look a dog in the eye or bother a dog when he is eating, sleeping or with puppies.
- D. All of the above.

8. When speaking with a person that is becoming upset, the following tips are helpful:

- A. Appear calm, relaxed, and listen but be aware.
- B. Ensure there is enough space between you and the person to avoid being harmed.
- C. Talk in a soft, non-judgmental and empathetic (understanding) voice.
- D. All of the above.

9. How can the participant's medications be a risk to you as a worker?
- A. Witnessing the person illegally selling their medication.
 - B. Person reporting that you stole the medication when it didn't occur.
 - C. All of the above.
10. When I see a person selling pills, I must report it to the agency/police. True _____ False _____

Extreme Situations Post Test Answers

The following responses are for the agency, the employer or RN testing the direct care worker. The answers are not to be provided to the individual taking the test prior to beginning the test. The correct answers may be provided AFTER the test is completed.

1. **Personal Safety First.** The primary concern is that the worker says "get out safely." Other acceptable answers include leave the home immediately, call 911. It is good if the worker mentions planning strategies such as wearing comfortable shoes, staying close to the door; keeping out of the kitchen or away from potential weapons (such as kitchen knives, letter openers, etc.). See that the worker is thinking before acting, paying attention to his/her surroundings and making the worker's safety the most important. A worker may try to defend the participant. That is not a safe approach. Do not allow the worker to place themselves between someone who is harming a participant and the participant. The worker may be harmed and unable to save themselves or the participant from harm. It is a risk to all involved. Report to agency or police.

At no point should the worker say: Stop the daughter, grab the daughter, use a weapon, hit the daughter, jump in the middle, etc.

2. Acceptable Answers: Be aware of your surroundings and look for potential weapons. Remain calm when dealing with the person and speak softly. If the situation worsens, leave the home. Remember, personal safety is first. Once you have left the home, report to the agency. Use a code word for unsafe situations when calling the agency. Have a call-in/call-out system in place to make sure someone knows when you are in the home. Have a safety plan before going into the home. Carry cell phone and keys in pocket at all times. Don't carry large amounts of money or debit cards. Ensure that the worker is thinking and prepared at all times.

3. Do not take the participant to the furniture store. Get to a safe place. Report to the agency/police or call 911 if someone is threatening. Don't take pictures with your cell phone or wait around to collect evidence of the sale of drugs. Personal Safety First.

- 4. Answer is D.
- 5. Answer is D.
- 6. Answer is A.
- 7. Answer is D.
- 8. Answer is D.
- 9. Answer is D.
- 10. True.

STOP HERE:

Only RNs, Case Managers and Resource Consultants Continue

Extreme Situations Professional Activity

“I HAVE A SITUATION”

Disclaimer: *These situations do not represent a specific case. While some information may appear similar, they are not based upon actual personal scenarios.*

Extreme Situation Scenarios: The purpose of this activity is to utilize critical thinking to identify actions that ensure safety for everyone involved.

Situation 1: While the worker is in the home, a woman comes to the home, representing herself as an agency RN. While there, she asks to see the participant’s medications. Worker leaves the room to check on dinner. When she returns, the worker finds that the woman has stolen the participant’s medications. She is not a nurse and does not work for the agency.

Situation 2: Worker calls to report that the participant has told her that she has a gun in her purse. She reported that last night the participant said she went to a bar and was threatening people in the bar. Worker states that she is afraid. The participant has threatened her as well.

Situation 3: ADW person’s boyfriend comes to the home every day. He was a worker for the agency and was fired recently. He threatens to come to the agency office and “take you all out.”

Situation 4: ADW person’s grandson lives in the home with his girlfriend. Participant’s Lortab has been missing three months in a row. Participant won’t accuse grandson or the girlfriend. Every time it is missing, she accuses the agency worker of theft. There is very little food in the home, and those in the home live on the participant’s social security and do not contribute to the household.

Situation 5: Worker calls to report that the participant asked her to go to four different houses today. She took a bag with her and came out counting money. Worker does not want to go back to the home. None of the stops were on the Service Plan, but the participant threatens the worker, and warns the worker not tell anyone what she was doing.

Situation 6: You are going to a person’s home to conduct an assessment. The Case Manager told you that there was an allegation that the person’s son was “making meth” in the home; and the participant is selling pills out of the home. The workers report cars coming and going all day long. Person has a long history of drug abuse and has been arrested twice in the past.

Situation 7: You go to the home to evaluate the person for the first time. There are four huge dogs in the front yard. The dogs are barking wildly and lunge at the gate when you come close. One dog is biting the sign and trying to climb the fence. There is a sign on the gate that reads “DO NOT ENTER. ATTACK PITBULLS.”

Situation 8: There has been an allegation that the ADW participant has an unsecured gun. He adamantly says that he gave the gun to his mother. Worker says he still has a gun and agency won’t send her back. He has a history of erratic and/or dangerous behaviors and suicide attempts by overdose. He calls his Case Manager, begging her to come to his home. He is distraught, still denying he has a gun.

The Thinking Process

1. Analyze the facts.
 - a. Who reported the situation?
 - b. Is the person reliable and objective?
 - c. What do the current/past medical records or assessments say about the person or home?
 - d. Does this information point to a potential for harm for anyone going in the home?
2. Identify the potential risks.
 - a. Describe what the risk of harm looks like.
 - b. Outline the potential outcome(s) of harm.
 - c. Identify who or what is at risk of harm.
 - d. Identify what triggers the risk.
 - e. Identify the precursor.
3. Qualify the level of risk for harm.
 - a. Is the risk verbal threats?
 - b. Is the risk physical?
 - c. Is it a professional, agency, worker, liability or illegal risk?
 - d. Is there a potential for bodily injury or death?
4. Are there reasonable precautions and risk markers for this particular case? Yes No
 - a. If yes, what are they? *Example: Use your Risk Marker Assessment.*
 - b. How do you tell the worker what to look for? *Example: Cars coming in/out of home frequently, niece moving back into home, uncle getting out of jail/moving back in the home, person is unstable/yells threats when not taking medication, etc.*
5. What is your safety plan?
 - a. Can you or a worker go in safely? *Example: How do you keep the worker safe? Do they only provide services during specific hours when the individual is out of the home? Do you need to request to close the case for unsafe environment?*
 - b. Do you need to report to authorities? *Example: Police, Adult Protective Services, fraud, etc.*
 - c. Do you need a behavior contract or boundaries in service settings or service methods? *Example: Evaluations must happen at the doctor's office or Case Manager's office. Worker cannot drive member in their car due to risk of illegal activity.*

References

DHHR Violent/Hostile Work Policy, Policy Memorandum- 2123WV

Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers

<https://www.osha.gov/Publications/osha3148.pdf>

Home Health Care Safety and Awareness

<http://www.disabled-world.com/disability/caregivers/care.php>

Occupational Hazards in Home Health Care, NIOSH

<http://www.cdc.gov/niosh/docs/2010-125/pdfs/2010-125.pdf>

Risk Assessment, Violent Clients and Practitioner Safety, Christina Newhill, Ph.D., LCSW, School of Social Work University of Pittsburg

<http://www.socialworkpodcast.com/Client%20Violence%20Workshop%20Handout.pdf>

Safety Manual for Homecare Workers, Page 21, Worker Safety, State of Oregon

<https://apps.state.or.us/Forms/Served/de9062.pdf>

Worker Safety Curriculum, WV DHHR Bureau for Children and Family

Workplace Harassment Policy, WV Division of Personnel

Workplace Violence Checklist, OSHA

<https://www.osha.gov/SLTC/etools/hospital/hazards/workplaceviolence/checklist.html>

Workplace Violence, OSHA

https://www.osha.gov/OshDoc/data_General_Facts/factsheet-workplace-violence.pdf

Workplace Violence, Policies in Home Health and Hospice Care

<http://www.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Vol-18-2013/No1-Jan-2013/Workplace-Violence-Prevention-Policies-in-Home-Health-and-Hospice-Care-Agencies.html>