



2019

Table Top Exercise

The Violent/Agitated Patient

Idaho



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AGENDA

- Review information about table top exercise
- Table Top Exercise
 - Group discussion and decision
- Hot Wash
- Next Steps
 - After Action report
 - Corrective Action Plan

Table Top Exercise

- Tabletop exercises are discussion-based sessions where team members meet in an informal, classroom setting to discuss their roles during an emergency and their responses to a particular emergency situation.
- A facilitator guides participants through a discussion of one or more scenarios.
- The duration of a tabletop exercise depends on the audience, the topic being exercised and the exercise objectives.
- Many tabletop exercises can be conducted in a few hours, so they are cost-effective tools to validate plans and capabilities.

Table Tops

Table Tops can be used to:

- Enhance general awareness
- Validate plans and procedures
- Assess the types of systems needed to guide prevention of, protection from, response to, and recovery from a defined incident

Goal of Table Tops include:

- Facilitating concept understanding
- Identifying strengths & weaknesses
- Achieving changes in attitudes

Why do a Table Top

- Testing the plan, not the people
- Key personnel discuss simulated scenarios in an informal setting
- Assist in the promotion of understanding related concepts
- Used to assess plans, policies, procedures or the systems employed by the organization
- Highlight strengths and areas for improvement within current plans, policies and procedures

Exercise Roles

- Facilitator

Facilitates the exercise

- Participants (Players)

Key Staff & Decision Makers

External Agencies

Elected / Appointed Officials

- Evaluators

Observe behavior in relation to plans & procedures

Record Information without leading Players

Report observations

- Observers

Observe exercise; No interaction in exercise play

Hot wash, AAR and CAP or POC

- Hot wash
 - A debrief with the exercise planning team, controllers & evaluators held immediately following the exercise.
 - Allows controllers and evaluators to collect observations and thoughts about the conduct of the exercise which leads to the development of preliminary analyses of exercise observations.
- After Action Report (AAR)
 - Chronological narrative of discussion for each capability & associated activities
 - Highlight both strengths and areas for improvement
 - Identify discussion points relevant to your site's ability to carry out the activities
 - Demonstrate the capabilities being exercised
- Corrective Action Plan (CAP) or Plan of Correction (PoC)
 - Corrective actions are the concrete, actionable steps outlined in improvement plans that are intended to resolve preparedness gaps and shortcomings experienced in exercises or real-world incidents.

Hot wash

- What strengths in your workplace's emergency plans did this exercise identify?
- What weaknesses in your workplace's emergency plans did this exercise expose?
- What unanticipated issues arose during the exercise?
- What gaps were identified?
- What are some high-priority issues that should be addressed?
- What are some new ideas and recommendations for improvement?

Exercise: The Violent Patient

BEGINNING OF EXERCISE

Exercise: The Violent Patient

The front office / receptionist staff has been checking-in patients and performing customary duties.

Patients are directed to the waiting room to be called by staff and be taken back to the exam area.

A female patient in the waiting room begins to look agitated and starts saying out loud how ridiculous it is patients must be 15 minutes early, but doctors can be as late as they want.

Patient then comes to the front desk to express their dissatisfaction with wait time and demands to be seen.

Exercise: The Violent Patient Discussion

- Who should be informed of this behavior?
- What concerns might you have?
- What actions would you consider taking, if any, at this stage?

Exercise: The Violent Patient Discussion

Update:

- Patient attempts to go back to exam room area.

Discussion:

- What actions should you take?
- How are you communicating with employees? With patients? Who is communicating?
- Who is in charge of the situation?
- Who is responsible for contacting law enforcement? What information do you relay to them?

Exercise: The Violent Patient Discussion

Update:

Patient is yelling, slamming things around, and hitting the walls. Other patients in the waiting room are visibly frightened, some have gotten up and ran out of the clinic, others are frozen / afraid to move, and one patient has gotten up to subdue the agitated patient.

Discussion:

- What action will you take to ensure the safety of the other patients and staff?
- Who is responsible for deciding what actions to take?
- What additional concerns do you have at this time?
- Are you able to communicate with employees? How?

Exercise: The Violent Patient Discussion

Update:

Agitated patient has now become physically violent, hitting the other patient that came to help several times rendering him / her bloody and unconscious. The agitated female patient has blood on her face and hands; blood has also gotten on the floor, walls, and doors.

Discussion:

- What are your immediate concerns at this time?
- What will you do about the patient laying unconscious on the floor bleeding?
- What actions are being taken, and who is doing what?

Exercise: The Violent Patient Discussion

Update:

Law enforcement personnel arrive on-site. The agitated female patient was uncooperative and was subdued by law enforcement using a taser. Paramedics arrive, and law enforcement accompany the female patient to the hospital. A separate ambulance arrives and takes the good Samaritan patient to the emergency room.

Discussion:

- How will you account for patients? Employees?
- How do you prepare your employees for the disturbing scenes they may encounter as they leave the building?
- Who is responsible for communicating with law enforcement?
- Who is responsible for communicating with news media?
- What information will you give them?
- Can you control who else the media approaches? If not, what can you do?

Exercise: The Violent Patient Discussion

Update:

The building is designated a crime scene and will be closed for a minimum of two days for investigation and hazmat cleaning.

Discussion:

- Who initiates business continuity plans?
- What else needs to be considered?
- How is information disseminated to employees? To patients?

Exercise: The Violent Patient Discussion

Update:

- Two Days Later...
You are able to get back into the building and resume normal business operations. Several employees ask for more time to emotionally recover from the event.

Discussion:

- Are you able to continue normal business operations using fewer staff?
- How will you accommodate individuals who have been emotionally traumatized by the event?
- What resources will you make available to staff? To patients?
- How will you communicate your clinic's resilience to concerned clients?

Exercise: The Violent Patient Discussion

END OF EXCERCISE

Exercise: The Agitated Patient

Objectives:

1. Ensure the safety of the patient, staff and others in the clinic
2. Help the patient manage his emotions and distress and maintain or regain control of his behavior
3. Avoid restraining
4. Avoid coercive interventions that escalate agitation

First:

1. Verbally engage the patient
2. Establish a collaborative relationship
3. Verbally de-escalate the patient out of the agitated state

Exercise: The Agitated Patient

- Remain Calm. When dealing with trying patients, the best approach is to remain calm. ...
- Engage in Conversation. Try to draw out the patient's feelings by engaging in conversation. ...
- Be Empathetic. One of the quickest ways to calm an angry or difficult patient is by being empathetic. ...
- Avoid Arguing. ...

Exercise: Calmly ask some questions

- What has been stressful lately?
- Who is your support system?
- How do you typically spend your days?
- How has eating and sleeping been going?
- Have you been isolating more lately?
- Any medication or medication changes and how is that impacting you?
- What are your goals one year from now?
- Any other questions feel free to get back to me.

Motivational Interviewing

Motivational Interviewing

1. Engage: establish mutual respect
2. Focus: Let it be their idea
3. Evoking: Get the patient to state the issue
4. Generate Change
 - a) What do you want to change
 - b) How might you go about it
 - c) What would be your first step in making a change
5. Avoid
 - a) Telling
 - b) Power differential...get equal, not more powerful
 - c) Labeling.. It's a patient with diabetes, not a diabetic
6. Listen
 - a) Ask questions
 - b) Point out the positives
 - c) Present reasons for not changing
 - d) Guide toward specific plans

References

1. Verbal De-escalation of the Agitated Patient

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3298202/>

Questions

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