Implementation of De-escalation Training for Pediatric Nurses

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Background

- Advocate Children's Hospital is a 380-bed, non-freestanding children's hospital with two campuses in the Chicagoland area.
- We observed rise in behavioral health patient visits to the Pediatric Emergency department and an increase in admissions attributed to primary behavioral health diagnoses.
- Throughout the pandemic and its aftermath, there was a noticeable uptick in workplace violence reporting and related injuries.
- Nurses expressed a lack of confidence in handling behavioral health patients and escalated visitors.
- Insights from the annual nursing survey underscored nurses' feelings of insecurity and a perceived lack of support in their workplace.

Education Need

- Inconsistent workplace violence education for pediatric emergency departments and the inpatient behavioral health uni
- Inpatient pediatric units lacked any form of workplace • violence education.
- A literature search provided support for workplace violence (WPV) education as an effective prevention and mitigation strategy.

Engagement Strategies

- Hospital-wide initiative
- De-escalation classes were open and available to everyone in the children's hospital with a focus on training nurses
- Train the trainer approach-volunteers from across the children's hospital
- 8 hour in-person training class with verbal and physical deescalation skills
- Classes began in June of 2022
- Over 1000 people trained from June of 2022-December 2023



Evaluation

- Nurses indicated that after completing the training course they could identify escalating behaviors and use de-escalation strategies to intervene. • Transformation in the approach to behavioral management strategies,
- emphasizing early identification and interventions.
- Nurses affirmed their ability to recognize escalating behaviors and apply de-escalation techniques for effective intervention.
- Increased awareness to bedside staff of the national behavioral health crisis
- Appreciation of organizational commitment to provide training and work on safety planning.
- An overall decrease in WPV incidents from 2022 to 2023 (78 in 2022 and 21 in 2023)

Findings

- 140 120 100 80
- 60
- 40
- 20
- 0

Figure 1. 91% of surveyed participants expressed confidence in their ability to identify threatening situations and respond in a safer manner after completing the class.

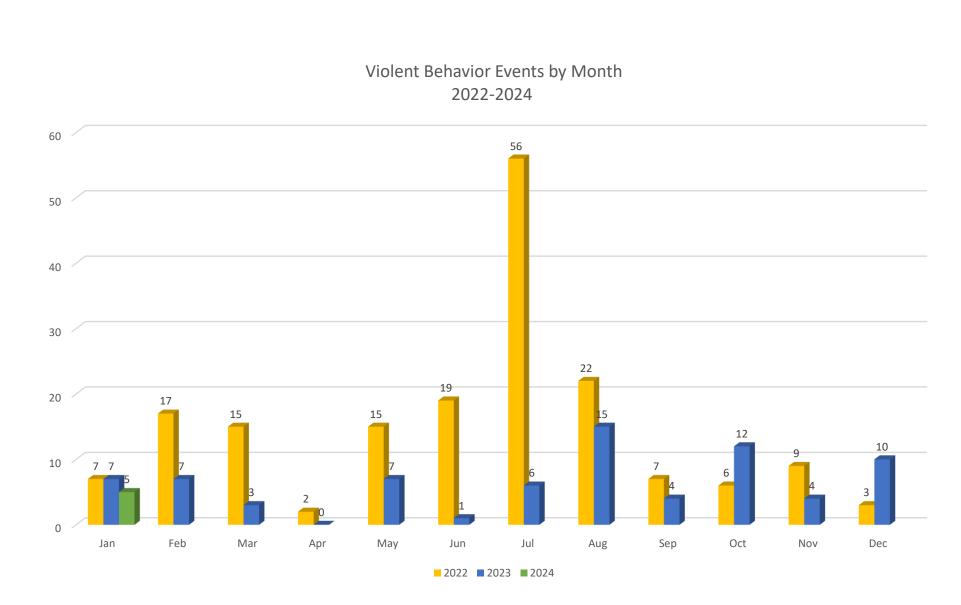
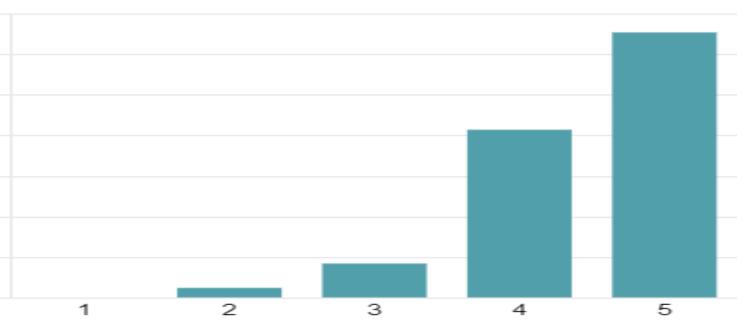


Figure 2. Total Violent behavior events decreased from 78 in 2022 to 21 in 2023

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Conclusions

Implications for Practice

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• In 2021, a national emergency in children's mental health was declared by major organizations including the AAP (American Academy of Pediatrics), AACAP (American Academy of Child and Adolescent Psychiatry), and CHA (Children's Hospital Association) ("AAP, AACAP, CHA Declare National Emergency in Children's Mental Health," 2021).

A comprehensive review of the admitting diagnoses at our children's hospital for the same year revealed that 18% of the admissions were attributed to primary behavioral health diagnoses. These encompassed conditions such as anxiety, depression, overdose, suicide ideation, aggression, and eating disorders.

• Noteworthy trends included a surge in workplace violence, an increase in behavioral health admissions, and the recognition of a national emergency in children's mental health.

• The identified challenges prompted the need to provide targeted in-person training and education to our nursing staff.

• Reaffirmed the benefits of live, in-person classes with interactive, engaging material.

• We were able to use the de-escalation program to connect with real-life examples provided by the class.

The class required participant engagement, participation, post knowledge assessment and evaluation.

Our experience highlighted the enduring efficacy of live, face-to-face interactions, especially when coupled with dynamic and participatory teaching methodologies.