

## Workplace Violence in Vermont Hospitals: Report Summary Presentation to the House Health Care Committee January 2024 Report

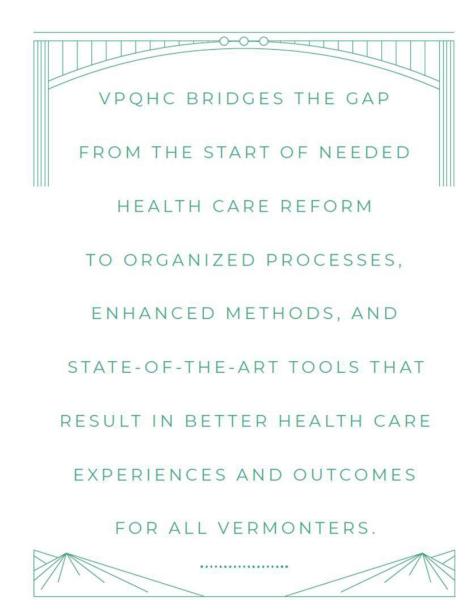
March 13, 2025

### **About VPQHC**

VPQHC is a 501(c) (3) nonprofit organization founded in 1988 and designated in 1989 by the Vermont Legislature as an independent, non-regulatory, peer review committee. Vermont's 9416 statute established VPQHC as the statewide quality organization in 1995.

VPQHC is a non-lobbying, neutral, and independent organization dedicated exclusively to advancing healthcare quality in Vermont.

Our **mission** is to reduce harm and save lives by advancing data-driven solutions that improve healthcare quality in Vermont.



### **VPQHC**



Morgan Bedard, MSW, CPHQ, LSSGBH, CLHP Quality Improvement **Specialist** 



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**Bonnie Collins Program Coordinator** & Executive Administrative Assistant

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(not pictured)



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**VT-CPAP** 

Ellen Arrowsmith LICSW **VTCPAP Program** Director



Annie Quinn **VTCPAP Program** Manager & Design **Specialist** 



Mary McQuiggan, LICSW Director of **Programs** 



Hillary Wolfley, **MSPH** Executive Director



Ali Johnson, MBA QI Specialist





~14 FTEs

Decades of experience in healthcare quality, and direct service experience across the continuum of care in Vermont



Randall Messier, MT, MSA, PCMH CCE **Quality Improvement Specialist** 



Bill Marcinkowski **Information Systems** Manager



Angela Morgan, RN, CPHQ **Program Director: SANE** Initiative



### **VPQHC** Board of Directors

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Mike Fisher, MS, BA, Chief Health Care Advocate, Vermont Legal Aid

Emma Harrigan, VP of Policy, Vermont Association of Hospitals and Health Systems

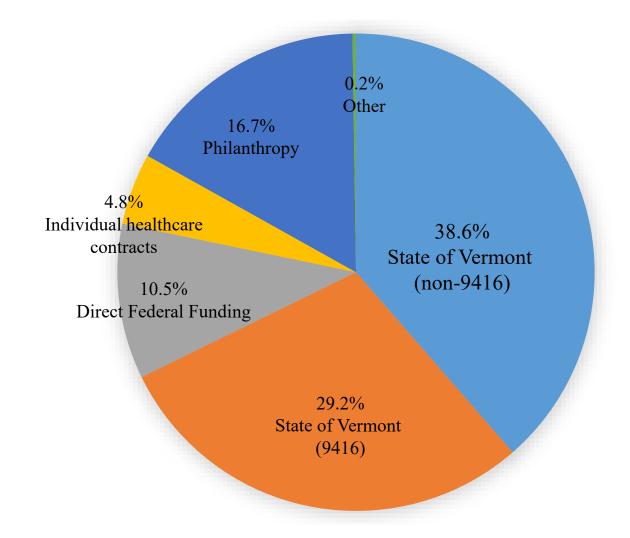
David Healy, Vice President and Senior GIS Applications, Stone Environmental

Kristy Hommel, MS, Mental Health Educator, Advocate & Public Speaker

Pat Jones, MS, BS, Director of Health Care Reform (Interim), Vermont Agency of Human Services

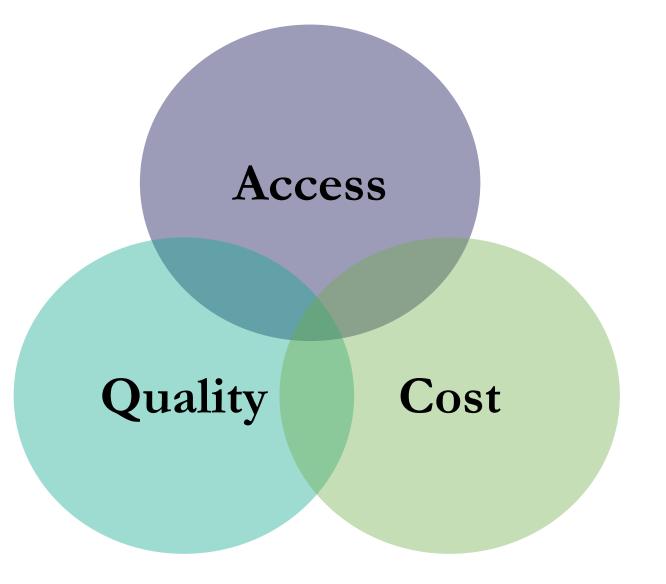
Lila Richardson, Esq., Attorney, Vermont Legal Aid (retired)

## **VPQHC** Funding



VPQHC's 9416 contract provides \$660,000 in annual funding. Per statute, this contract cannot exceed 75% of VPQHC's total operating budget. Currently, it accounts for 29% of the organization's total operating budget.

A well-balanced healthcare system must prioritize **quality** alongside access and cost.



### VPQHC: A Legacy of Advancing Health Care Quality in Vermont

#### 198

VPQHC is founded an independent nonprofit dedicated to improving the quality and efficiency of Vermont's healthcare system, governed by a coalition of providers, insurers, payers, employers, and consumers.

### 1990-1991

VPQHC receives a grant to advance continuous quality improvement (CQI) in Vermont hospitals, launching quality improvement projects in obstetrics, cardiology, orthopedics, mental health, AMI, CHF, patient satisfaction, and pneumonia.



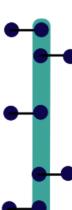
Vermont Statute 18 V.S.A. 9416 manda VPQHC to implement and maintain a state quality assurance system, reinforcing its re evaluating and improving health care ser

### 1997-

Focus on pediatric asthma, diabetes, str and heart disease outcomes, launches me health initiatives, and develops state guide for heart failure

### 2003-2

VE		
#	Initiative	Funde
1	Vermont Department of Corrections - External Quality Review Program	Vermont Department Corrections
2	Vermont Department of Health - 9416 Contract	Billback fund (contract overseen by Vermont Department Health)
3	Patient Safety Surveillance & Improvement System	Vermont Department Health



### 1989

The Vermont Legislature amends Statute § 1441, granting VPQHC peer review committee status, solidifying its role in health care quality improvement. VPQHC launches statewide quality assurance efforts, implements a health care database, and provides continuous quality improvement (CQI) training.

#### 1992-1994

VPQHC improves Vaginal Birth After Cesarean (VBAC) rates, develops Carpal Tunnel Syndrome and pediatric ear infection guidelines, establishes the

REPORT

### **VPQHC Select Reports and Resources**









A review of CMS' Hospital Star Rating

and Preview Reports

Hospital Quality Directors Learning Network facilitation; Care Management Directors Learning Network facilitation; technical support to Infection Preventionists with submission of HAI & SSI data into NHSN; six-part QI 101 training series for all healthcare providers; telehealth utilization analysis using

Leads the state's efforts in patient safety through a comprehensive surveillance system, including mandatory reporting, site visits, and the development of preventive strategies to reduce serious reportable events.

VHCURES; limited time for general QI technical assistance.

## VPQHC History & Current Initiatives

- Leading QI Initiatives in VT for 37 years
- 17 current initiatives focused on QI in variety of settings: primary care, hospitals, DAs, independent providers

# ACT 24: An act related to crimes against health care workers at hospitals and against emergency medical treatment providers

- S.36 (Act 24) of 2023 tasked VPQHC with assessing workplace violence prevention in Vermont hospitals
- Focus areas:
  - Training & de-escalation
  - Staffing levels
  - Patient assessments
  - Reporting systems
  - Physical environment improvements
  - Emphasis on health equity, best practices, and policy recommendations

## Report Process

- Literature review on evidence base & best practices
- Statewide hospital assessment survey (7 hospitals participated; small & large)
- Focus groups (5 sessions) to validate findings (Quality Directors, Chief Nursing Officers, Emergency Department Directors, Emergency Department Nurse Managers, and other hospital staff)
- Data analysis to identify common themes
- Recommendations for strengths, opportunities for improvement & policy considerations

## **Key Findings**

### **Strengths**

- **♥** Commitment to safety
- ✓ Willingness to adopt best practices

### **Challenges**

- X Inconsistent de-escalation training
- X Gaps in standardized reporting & data collection
- X Variation in environmental safety standards

## **Quotes from Focus Groups**

- "We all, at the same level of care, deserve and have a right to standardized resources for safety."
- "It would be helpful if there was a statewide de-escalation program funded by the state."
- \*"Hospitals are forced to choose between training and other priorities due to limited resources."

## Recommendations for Policy & Improvement:

- Implement Standardized De-escalation Training: Establish a comprehensive, high-quality training program across Vermont hospitals, with trauma-responsive care as a core component among others recommended by The Joint Commission.
- Enhance Workplace Violence Incident Reporting: Provide training and resources to improve reporting accuracy, consistency, and usability.
- Invest in Infrastructure for Staff Safety: Allocate funding to support facility upgrades that enhance workplace safety and security.
- Support Ongoing Quality Improvement & Technical Assistance: Ensure continuous support for hospitals through training, data analysis, and evidence-based strategies.
- Consider Establishing Minimum Set of Safety Standards: Define a baseline set of workplace violence prevention measures for hospitals.
- Support Development of a Learning Network: Facilitate data sharing, collaboration, and problem-solving among hospitals to address workplace violence challenges collectively.

### **Disclaimer**

- Research for this report was conducted in 2023. While many themes may remain the same, findings may not fully reflect the current state.
- Consider reassessing to capture updated insights and implementing an annual assessment to track trends and measure progress over time.

## **Key Takeaways**

- Workplace violence is a serious problem in healthcare, in Vermont and nationally, impacting staff safety and patient care.
- **Best practices exist** for implementing comprehensive workplace violence prevention programs, including training, reporting, security, and de-escalation strategies.
- There is variation among Vermont hospitals in their current workplace violence prevention initiatives, with gaps in training, data collection, and physical site measures.
- Policy, resources, and continuous quality improvement (QI) efforts can help standardize and strengthen workplace violence prevention across all hospitals, ensuring safer environments for healthcare workers and patients.

## Thank you

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& Randall Messier, MT, MSA, PCMH, CCE

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Conducted the research and authored the report but couldn't be here today! <a href="mailto:randallm@vpqhc.org">randallm@vpqhc.org</a>