Addressing Workplace Violence in Prelicensure Curriculum: Development, Administration, and Evaluation of an Innovative Teaching Bundle

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The burden of violence directed at workers in health care settings - particularly violence perpetrated by patients and visitors - is well-documented (Gomaa et al., 2014; Pompeii et al., 2013). Research suggests nursing students are exposed to violence as well, through clinical learning experiences and/or paid caregiving roles (Celebioglu, Akpinar, Kucukoglu, & Engin, 2010; Ferns & Meerabeau, 2008; Hinchberger, 2009; Magnavita & Heponiemi, 2011), a reality that supports the National Advisory Council on Nurse Education and Practice's call for formal and informal education and training to help students recognize, prevent, and mitigate workplace violence (WPV) (NACNEP, 2007). Nurse educators are well-qualified to teach about occupational hazards, including WPV, but such concepts are not systematically evident in pre-licensure curricula, effective pedagogical strategies related to such concepts are limited, and students may leave educational programs not realizing the significance of workplace safety to their practice.

To address this gap, learner experiences and needs related to WPV were identified, lecture material and situational trigger films related to WPV were created, and immersion simulation experiences were developed. This bundle of activities led to the implementation of a dynamic pedagogical strategy that addressed all domains of learning: cognitive, psychomotor, and affective (Bloom, 1956). Trigger films are short films that are used to engage the affective domain (Molloy, Sabol, Silva, & Guimond, 2016). Immersion simulation experiences are widely used throughout modern nursing curricula to teach decision-making and psychomotor skill development through replication of patient scenarios in a safe environment (Hayden, Smiley, Alexander, Kardong-Edgren, & Jeffries, 2014). While the use of trigger films alone or the use of immersion simulations alone can be effective, when coupling the two strategies in a controlled environment, the learning effect may be enhanced.

This presentation will detail the authors’ experiences in conducting the needs assessment and designing the pedagogical interventions aimed at increasing students’ understanding around patient/visitor-perpetrated violence and best-practice prevention and mitigation strategies. Such interventions recognized the existing typology of workplace violence and integrated conceptual models applied to violence prevention. As such, they served as an effective approach to prepare future nurses to recognize and respond to one of the more well-documented occupational hazards facing health care workers today.

Needs Assessment. The needs assessment involved self-administration of an anonymous, brief (<5 minute) survey of pre-licensure students. The survey tool was used in a completed CDC/NIOSH R01 (Pompeii et al., 2016; Pompeii et al., 2015; Schoenfisch et al., 2015) and edited to reflect the target population. The definition of violence included physical assault, physical threat, and verbal aggression. Participants were asked to provide information about their demographics, work history, clinical requirements, and experiences of patient/visitor-perpetrated violence. An open-ended question sought concerns and recommendations to improve occupational safety and health for nursing students. Data were collected in REDCap (Harris et al., 2009), and statistical analyses were conducted in SAS (SAS Institute, 2014).
The survey was completed by 58 pre-licensure students. Most were female (84%), in their first year of the program (81%), and less than 35 years old (88%). More than forty percent (43%) had some kind of paid work experience in a health care setting (e.g., as a nursing assistant), and nearly all (98%) had experience in the clinical setting as part of their curriculum requirements. Overall, 28% of pre-licensure students experienced at least one episode of patient/visitor-perpetrated violence in the past 12 months as part of paid work in healthcare or during a nursing program clinical experience. Half of these events (50%) were verbal in nature; the other half included a physical threat and/or physical assault. Over one-third (38%) of pre-licensure students had thought of changing careers as a result of patient/visitor-perpetrated violence. WPV prevention training was recommended by participants including: training with various occupational groups involved in responding to violent events (e.g., nursing, security), de-escalation training, resiliency training, and simulation-based training.

*Didactic Teaching.* In the first-semester course “Health and Wellness Across the Lifespan,” a lecture was presented (n=142 students), covering the topics of occupational safety and health (including WPV) among nurses, with attention paid to the epidemiology of the problem, key players (e.g., federal and state agencies, accrediting bodies, professional organizations), and current WPV prevention approaches.

*Trigger Film and Immersion Simulation.* Students attended a 10-minute pre-brief in which they met the involved faculty and content experts and learned about the film and simulation process. Then, small groups of students (n=5-6/group) viewed the one-minute trigger film depicting a patient-perpetrated violent event. The film was tailored to local needs and the student population by faculty and other content experts after review of the literature and available materials from national and international organizations (e.g., Crisis Prevention Institute, National Institute for Occupational Safety and Health). Immediately after viewing the film, a behavioral health expert facilitated an 8 to 10-minute debriefing period for students to share their emotional response to the scenario. Students then transitioned to a 10-minute immersion simulation in which they were confronted with an escalating situation including a (script-led) verbally aggressive hospitalized patient, played by a student volunteer; a second student volunteer served as the caregiver. The simulation provided an opportunity to engage in de-escalating techniques and was followed by a 15-minute small group debrief with content experts.

A pre-test and post-test was administered to evaluate changes in students’ knowledge related to WPV surrounding the trigger film and immersion simulation. A majority of students “strongly agreed” that after participation they were able to “recognize behaviors of an escalating family member or patient” (65%), “discuss how to maintain personal safety in an escalating situation” (75%), and “identify aspects of the clinical environment they may impact the safety of the workplace staff” (64%). Students conveyed general satisfaction with the addition of WPV content into their course work, with emphasis on its conduct in a simulated, safe environment and the inclusion of content experts. They also offered suggestions on how to improve the trigger film/simulation.

Details surrounding the needs assessment, content development, implementation of the intervention, pre-/post-test results, and lessons learned will be shared during the presentation. Conference attendees also will be invited to engage in a discussion about implementing this strategy in their own academic settings as a way to prepare students for future clinical practice. Materials will be made available to conference attendees upon request.

**Title:**
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**Keywords:**
nursing students, simulation and workplace violence

**References:**


**Abstract Summary:**
Nurse educators are well-qualified to teach about occupational hazards, including workplace violence (WPV), but such concepts are not systematically evident in pre-licensure curricula. To address this gap, learning needs related to WPV were identified, lecture material, and situational trigger films were created, and immersion simulation experiences were developed.

**Content Outline:**

**Introduction**
- Violence directed at workers in health care settings - particularly violence perpetrated by patients and visitors - is a well-documented concern.
- Although nurse educators are well-qualified to teach about workplace violence (WPV), effective pedagogical strategies related to such concepts are limited, and students may leave educational programs not realizing the significance of workplace safety to their practice.

**Body**
- Identification of learner experiences and needs related to WPV
  - Self-administration of an anonymous, brief (<5 minute) survey of pre-licensure students
- Creation and presentation of lecture material and situational trigger films related to WPV
  - In a first-semester course, a lecture was presented, covering WPV among nurses, with attention paid to the epidemiology of the problem, key players, and current prevention approaches
- Development and administration of immersion simulation experiences

**Conclusion**
- Pedagogical interventions for pre-licensure nursing students addressing WPV should recognize the existing typology of WPV and integrated conceptual models applied to WPV prevention.
- Details surrounding the needs assessment, content development, implementation of the intervention, pre-/post-test results, and lessons learned will be shared during the presentation. Conference attendees also will be invited to engage in a discussion about implementing this strategy in their own academic settings as a way to prepare students for future clinical practice. Materials will be made available to conference attendees upon request.

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**Professional Experience:** Dr. Molloy has been the simulation lab director for 8 years and manages simulation needs for prelicensure and advance practice nursing programs. She participates in educational research projects using simulation as pedagogy. She focuses on the use of deliberate practice to promote skill development with students and utilizes evidence-based practices in simulation for prebriefing and

**Author Summary:** Margie Molloy DNP, RN, CNE, CHSE is an Assistant Professor and the Director of the Center for Nursing Discovery at the Duke University School of Nursing. Margie is interested in exploring cutting edge nursing issues in both research and educational practice. Margie was the recipient of the spring 2012 Catalyst Faculty Innovation Award -for "Incorporating Obesity Education into the Undergraduate Nursing Curriculum".

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**Professional Experience:** Jayme Sherrod began teaching in 2013 at Belmont University in Nashville, TN. She was responsible for teaching in the laboratory and clinical settings. Upon moving to North Carolina, Jayme worked as a clinical instructor for pre-licensure students and then transitioned to the simulation lab. Jayme was responsible for teaching skills and clinical decision making to pre-licensure students through simulation. She is currently pursuing her PhD in Nursing at the University of North Carolina Greensboro with intentions of studying the experiences of new nurse educators.

**Author Summary:** Jayme Sherrod began teaching in 2013 at Belmont University in Nashville, TN. She was responsible for teaching in the laboratory and clinical settings. Upon moving to North Carolina, Jayme worked as a clinical instructor for pre-licensure students and then transitioned to the simulation lab. She is currently pursuing her PhD in Nursing at the University of North Carolina Greensboro with intentions of studying the experiences of new nurse educators.

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**Author Summary:** Sandra Yamane is currently a research assistant and post-graduate nursing student at Duke University. Most of Sandra’s career has been in the safety and occupational health field, beginning as a Safety and Occupational Health Coordinator for the US Coast Guard. She is currently collaborating on several studies of cybercivility with Dr. Jennie De Gagne with whom she recently published an article in Nurse Education Today. She plans to begin a DNP program in January.

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**Professional Experience:** Dr. Schoenfisch is an occupational epidemiologist with over a decade of research experience and presenting on occupational safety and health concerns among the nursing workforce, including workplace violence.

**Author Summary:** Dr. Schoenfisch, an Assistant Professor at the Duke University School of Nursing, is an occupational epidemiologist with over a decade of experience researching occupational safety and health concerns among the nursing workforce, including workplace violence.