

## ALIGNMENT

# Rhode Island Enacts Hospital Workplace Violence Protection Act

(2021 Rhode Island Senate Bill No. 55/House Bill 6018  
/ Adopted and Effective 7/9/21)

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Alignment to Crisis Prevention Institute, Inc.  
(CPI) Training Programs

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## Alignment to Crisis Prevention Institute, Inc. (CPI) - *Nonviolent Crisis Intervention*®, 2<sup>nd</sup> Edition Training Program (NCI™)

For more than 40 years, CPI has supported hospitals and health facilities that strive to provide the safest environment for staff, patients, and visitors. Not only will the NCI™ 2<sup>nd</sup> Edition Training program meet the expectations outlined in Rhode Island's Hospital Workplace Violence Protection Act, CPI's train-the-trainer program and its family of advanced programs also offers a comprehensive array of curriculums that can meet all the needs an organization has for supporting a violence free workplace with an emphasis on crisis intervention and de-escalation techniques to better assist staff with achieving this goal.

Additionally, by participating in the NCI™ 2<sup>nd</sup> Edition Training program, staff will gain the skills and confidence necessary to handle crisis with minimal anxiety and maximum security. The training will help staff intervene more safely when behavior become dangerous and most importantly it won't damage the professional bond that healthcare staff have worked so hard to establish with their patients.

The following chart is designed to assist you in identifying some of the ways in which CPI's NCI™ 2<sup>nd</sup> Edition Training program can help hospitals and other medical facilities in the state of Rhode Island comply with the training and documentation requirements within this law. It may also assist you in identifying areas that may require a review and/or revision in your facility's policies and procedures.

### Definitions

**“Hospital”** means any institutional health service provider, facility, or institution, place, building, agency, or portion thereof, whether a partnership or corporation, whether public or private, whether organized for profit or not, used, operated, or engaged in providing health care services.

**“Workplace violence”** means any act of violence or threat of violence that occurs at a hospital, as that term is defined in chapter 17 of title 23, except for a lawful act of self-defense or defense of another. The term includes, without limitation, the use or threatened use of physical force against an employee or other provider of care, regardless of whether the employee or other provider of care is physically or psychologically injured.

- (a) All hospitals licensed in the state of Rhode Island shall:
- (1) Create a workplace safety committee which shall conduct periodic security and safety assessments to identify existing or potential hazards for assaults committed against employees;
  - (2) Develop and implement an assault prevention and protection program for employees based on assessments conducted under subsection (a)(1) of this section; and
  - (3) Provide assault prevention and protection training on a regular and ongoing basis for employees.
- (b) An assessment conducted under subsection (a)(1) of this section shall include, but need not be limited to:
- (1) Keeping track of the frequency of assaults committed against employees that occur on the premises of the hospital; and
  - (2) Identifying the causes and consequences of assaults against employees.
- (d) Assault prevention and protection training required under subsection (a)(3) of this section shall address the following topics:
- (1) General safety and personal safety procedures;
  - (2) Escalation cycles for assaultive behaviors;
  - (3) Factors that predict assaultive behaviors;
  - (4) Techniques for obtaining medical history from a patient with assaultive behavior;
  - (5) Verbal and physical techniques to de-escalate and minimize assaultive behaviors;
  - (6) Strategies for avoiding physical harm and minimizing use of restraints;
  - (7) Restraint techniques consistent with regulatory requirements;
  - (8) Self-defense, including:
    - (i) The amount of physical force that is reasonably necessary to protect the employee or a third person from assault; and
    - (ii) The use of the least restrictive procedures necessary under the circumstances, in accordance with an approved behavior management plan, and any other methods of response approved by the hospital;
  - (9) Procedures for documenting and reporting incidents involving assaultive behaviors;
  - (10) Programs for post-incident counseling for employees affected by the assaultive behavior and follow-ups as needed;
  - (11) Resources available to employees for coping with assaults; and
  - (12) The hospital's workplace assault prevention and protection program.

CPI provides support to organizations looking to review existing policies and has the expertise to provide support and consultation around the effective implementation of any workplace violence prevention plan. CPI's Policy Development Series can be instrumental in helping your organization develop and review your organization's policies and procedures. Once policies are implemented, staff should be educated regularly on the policies and procedures. These policies and procedures should be updated as needed.

CPI training emphasizes the importance of post-incident assessments after a restraint was used. The NCI™ 2<sup>nd</sup> Edition Training program provides a model for assessing and gathering incident data to aid staff in performing this important evaluation process.

The NCI™ 2<sup>nd</sup> Edition Training program focuses on prevention by recognizing the early warning signs of potential crisis situations and equipping staff with nonverbal and verbal de-escalation skills. The program teaches staff about the signs of aggression, how to handle them, and how to read a situation for indicators of violence.

The NCI™ 2<sup>nd</sup> Edition Training program uses both verbal and physical interventions. We train that the least restrictive form of intervention should always be considered and utilized first, prior to the use of any physical restraint. Within this training, we also introduce a risk assessment matrix which helps staff to consider what level of intervention to utilize based on the level of risk. The *Decision-Making Matrix*<sup>SM</sup> and Physical Skills Review both assist staff decision-making in the use of physical restraints. The physical restraints include lower-, medium-, and higher-level holding skills to safely manage risk behavior.

In the NCI™ 2<sup>nd</sup> Edition Training program, CPI offers a model for debriefing that can be utilized with patients, the staff members that were involved, or with any bystanders or witnesses to the event. This Postvention process creates a learning opportunity for everyone.

- (e) Hospitals shall provide assault prevention and protection training to a new employee within ninety (90) days of the employee's initial hiring date.
- (g) At least once every two (2) years, a hospital shall establish, in coordination with the hospital's workplace safety committee, a process by which the committee shall review the hospital's assault prevention and protection program developed and implemented under subsection (a)(2) of this section in order to evaluate the efficacy of the program and consider any changes to the program.

The NCI™ 2<sup>nd</sup> Edition Training program is designed to be easily customized making it simple for staff to incorporate organizational policy into each discussion area within the curriculum. It also aids in helping create individual personalized responses for case specific situations.