

# Mitigating Disputes in Healthcare Using Assertive Honoring™

Doron Pely, PhD\*



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Proprietary



## The Problem

Conflicts in healthcare facilities are a growing problem across the U.S. and throughout the world. Healthcare providers face, almost daily, threatening, intimidating and aggressive actions from some patients and family members. These aggressive actions range from belligerent body-language and tone of voice, through overt violence expressed in threatening moves and postures, shouts and explicit threats, to outright physical assaults.

Doctors, nurses, X-ray technicians, auxiliary workers, and managements struggle to fulfill their mission and provide quality medical services in a safe and secure environment for staff, patients and families – all the while keeping facilities accessible, while functioning in an increasingly more threatening and violent climate (see **Appendix A** for relevant statistical data).

We know that currently-available conflict management tools are not providing a sufficient answer to the safety and security needs of healthcare providers - the number of reported violent conflicts in hospitals keeps increasing steadily.

## The Impact on Employees

- Physical injury, disability, chronic pain, loss of sleep, nightmares, and flashbacks, short-term and long-term emotional reactions, including anger, sadness, frustration, anxiety, irritability, apathy, self-blame, decreased job dissatisfaction, decreased feelings of safety, fear of future assaults, post-traumatic stress disorder (PTSD)
- The consequences of workplace violence often persist long after a violent event, affecting staff members' quality of life, sometimes for years after the event.

## The Cost for Employers

- Increased turnover, absenteeism, need for staff medical and psychological care, property damage, increased security, litigation, increased workers' compensation claims, job dissatisfaction, and decreased morale.
- “Conservative estimates put the cost of violence in healthcare facilities at \$4.3 billion annually, or about \$250,000 per incident.”<sup>1</sup>
- Damage to reputation.

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<sup>1</sup> RNs Face Threat of Violence at Work, <http://www.nysna.org/rns-face-threat-violence-work#.VNB7GZ3F-Os>

## Searching for a Solution

In search of tools to help staff deal with these problems, we noticed that many conflicts in the healthcare sector, like conflicts elsewhere, have cross-cultural causes, such as clashing customs, values, languages, and norms. These, along with the “regular” causes of healthcare-related conflicts, such as pain, fear, uncertainty, helplessness, need to be taken into consideration when seeking ways to resolve, manage or mitigate conflicts in the ER and other departments.

For example, patients and their families may come from cultures that practice certain taboos regarding privacy, modesty or gender roles; in a hospital environment, such patients and families often find themselves in situations that strongly challenge these values. Also, staff members, in addition to their personal cultural affiliations, belong to a specific sub-culture (professional healthcare providers); this sub-culture often employs certain procedures and practices, uses a unique language and expresses certain values in ways that may leave patients and relatives anxious, confused, helpless and sometimes embarrassed.

Furthermore, we discovered that indigenous conflict resolution practices contain specific tools that, in combination with some existing approaches, can help staff members by enhancing their ability to rapidly detect and respond to specific levels of conflict, reassert authority, take steps that restore dignity, self-respect, calm and control to themselves, their colleagues, patients and family members, and harness the collaborative power of their team.

## The Solution - Assertive Honoring

Using existing and indigenous tools, we developed a new healthcare providers’ conflict mitigation method called: **Assertive Honoring**.

To share this knowledge with healthcare providers, we organized the **Assertive Honoring** method as a 1-day interactive workshop (up to 20 participants). The program sheds light on cross cultural norms (e.g., collectivistic vs. individualistic), and uses real-life experiences raised by participants to explore the theoretical foundations of several innovative applications, and then equip the staff with task-specific conflict mitigation tools through practice, simulation, and analysis.

### **The Assertive Honoring Workshop Teaches Staff the Following Skills:**

- Detecting early conflict signs
- Asserting authority
- Pre-empting evolving conflicts
- Acting judiciously on early signs
- Communicating effectively with security
- Communicating effectively with other staff members
- Communicating effectively with patient/family members
- Restoring patient’s/family members’ dignity/respect/confidence
- Transitioning conflicts from positions to needs
- Learning from past conflicts

## Assertive Honoring Techniques

In the course of a 1-day workshop, participants will learn and practice the following violence mitigating methods designed to facilitate **Assertive Honoring**:

- **Coping with Emotional Hijacking** – Re-asserting authority, through avoidance of “fight or flight” reactions, delayed response, and the enlisting of third party assistance in a way that de-escalate rather than escalate.
- **Transitioning from Positions to Needs** – Restoring the dignity, confidence and calm of the patient/family member by minimizing reactions to emotional “small child” positions, identifying actual needs behind these positions and responding to these needs in an empowering manner.
- **Executing a “Positive No”** – Creating a new mode of communication through the reframing of responses to demands in a way that helps reduce resentment and facilitate moves toward practical solutions.
- **Employing Proactive Team Solidarity** – Using team members and security personnel judiciously to avoid escalation and empower de-escalation.

Participants learn how to employ these tools in response to three different scenarios: **Hidden Conflict, Evolving Conflict and Declared Conflict.**

## Expected Results

- Reduced number and intensity of conflicts
- Safer work environment for staff and patients
- Reduced financial liability, lost workdays, compensation claims, and lawsuits

## Offered Services

The **Assertive Honoring** program comprises of four independent modules\*\*:

- **Preliminary Review** – A trained researcher will review the department’s policies, procedures and practices, and provide a preliminary report. (Alternately, a senior instructor will interview management and senior staff, learn from them about the specific challenges and brief them about the workshop).
- **Assertive Honoring Workshop** – A trained conflict management professional will conduct a 1-day workshop that will include, a review of existing situation, gathering of experiences and other inputs from participants, input-based simulations, and practice of the **Assertive Honoring** tools.
- **Periodic Follow-ups and Refreshers** – A trained practitioner will conduct periodic follow-ups to measure impact and provide on-going guidance.
- **“Training the Trainers”** – A trained conflict management professional will train medical staff to monitor, follow-up and refresh **Assertive Honoring** procedures within a department/facility.

\*\* Modules can be provided in sequence or independent of each other.



## Appendix A: Staff-Patient Conflicts in Healthcare – Statistics and Impact

- Violent crime rate per 100 U.S. hospital beds rose 25%, from 2.0 incidents in 2012 to 2.5 incidents in 2013.
- Assault rate increased from 10.7 to 11.1 (per 100 U.S. hospital beds).
- Rate of disorderly conduct incidents jumped, from 28 per 100 hospital beds in 2012 to 39.2 (40%) in 2013.<sup>2</sup>
- Healthcare workers are 16 times more likely to experience violence than other service workers.
- More than half of healthcare workers have experienced at least one incident of physical or psychological violence during their professional lifetime.
- In the US, assaults against healthcare workers account for nearly 70% of nonfatal injuries from occupational violence.

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\* Dr. Doron Pely is a University of Southern California (USC) Homegrown Violent Extremism Studies Associate, at the Safe Communities Institute, which is a part of the Sol Price School of Public Policy. Doron Pely has a PhD in dispute resolution from King's College, London, and an MA in dispute resolution from University of Massachusetts, Boston. For the past decade, Doron's research focused on cross-cultural, indigenous, dispute resolution practices. Doron lectures on dispute resolution in American and Israeli universities, consulted the United States Army, municipalities in Israel, and has participated in the creation of an innovative conflict mitigation method for Israeli hospitals.

<sup>2</sup> Hospital crime statistics from 2014 Healthcare Crime Survey produced by the International Healthcare Security and Safety Foundation (IHSSF) <http://ihssf.org/PDF/crimesurvey2014.pdf>