

A systematic review of violence risk assessment tools currently used in emergency care settings

WHAT DO WE KNOW?

- Staff working in emergency care settings (Emergency Departments [EDs] and Acute Medical Units [AMUs]) experience violence from patients and visitors at a disproportionate rate.
- Violence risk assessment is commonplace in mental health settings and is becoming more accepted in emergency care.

What is meant by *violence*?



Any non-verbal, verbal, or physical behaviour exhibited by a person which makes it difficult to deliver good care safely.

The situation in the UK

44%

of UK nursing staff in acute and urgent care settings experienced physical violence from a patient or relative in the last 12 months (2021 data)¹

It's estimated that 2% of staff are lost as a consequence of workplace violence²

OBJECTIVE

To examine the psychometric properties, acceptability, feasibility and usability of violence risk assessment tools currently used in emergency care.

METHODS

PICOC

- P** Violence towards others, perpetrated by emergency care attendees
- I** Structured risk assessment tools
- C** N/A
- O** Psychometric properties (including validity, reliability, internal consistency and predictive validity), feasibility, usability and acceptability
- C** Emergency care pathways

SEARCHES & SCREENING

- CINAHL, Embase, Medline, Web of Science, Google Scholar
- Published since 2007
- Exclusion criteria: Studies within specialist emergency care pathways (e.g., paediatric, psychiatric)

QUALITY APPRAISAL

- Intervention studies assessed for risk of bias using ROBINS-I tool
- Tool development/ testing studies appraised against scale development criteria

SYNTHESIS

- Unable to undertake statistical meta-analysis due to methodological and clinical heterogeneity, therefore narrative synthesis undertaken

RESULTS

8 included studies

Study settings	ED (n=8)*
Countries	Australia (n=4) USA (n=4)
Tools	Newly developed (n=3) Extant (n=3) Adaptation of extant tool (n=1) TOTAL: n=7
Target staff group	Nurses (n=5) Not specified (n=2)

* One study included observations of which 82.4% were conducted in ED

TOOL PROPERTIES

- **Predictive efficacy:** moderate or good
- **Interrater reliability:** moderate
- **Usability:** good
- Levels of tool **adoption** were mixed
- Implementation of tools did not reduce restraint use

CONCLUSIONS

- Violence risk assessment tools may be feasible for use in ED. However, there is currently insufficient high-quality evidence to draw conclusions about the predictive capacity of these tools.
- Additional research is needed to ascertain the acceptability, feasibility, and usability of these tools.

¹ RCN (2022) Employment Survey Report 2021: Workforce diversity and employment experiences. <https://bit.ly/3BmQOxc>

² Ipsos Mori (2010) Violence against frontline NHS staff [Online]. Available: <https://rb.gy/q2uz8>