

Factors Affecting the Success of Psychiatric Nurses in Conducting Risk Assessment of Violence Behavior

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Abstract

Background: Patient violence behavior in psychiatric services is a challenge for health care providers. Violence behavior can affect patients themselves, other patients and staff including nurses and affect the quality of service. Psychiatric nurses can play roles in conducting risk assessment of violence behaviors to reduce impact and make appropriate decisions.

Purpose: This systematic review aims to find out the factors that influence the success of psychiatric nurses in conducting risk assessment of violence behavior.

Method: This systematic review begins with making questions by the PICO method, identification, eligibility, article inclusion criteria selection, screening and appraisal. Search articles through the database of Science Direct, Pubmed and Ebsco with a time span from 2009-2019. And continue with PRISMA flow diagram and JBI critique tool up to get 13 articles that relevant to be analyzed by systematic review.

Result and Discussion: Reviews are carried out on articles that fit the inclusion criteria. Factors that influence the success of psychiatric nurses in conducting risk assessment of violence behavior are training and continuing education, self-confidence, understanding early warning signs/alert systems, understanding the causes of violence and the use of violence risk assessment tools) such as the Brøset Violence Checklist (BVC) and Dynamic Appraisal of situational Aggression (DASA)

Conclusion: Psychiatric nurses still need continuing education and training in understanding the early signs of a patient's violence behavior and the use of assistive devices in the form of risk assessment of violence behavior to increase the confidence of nurses and assist in making appropriate decisions.

Keywords: *Factors, psychiatric nurses, risk assessment, violence.*

Introduction

Violence behavior in patients with mental disorders has become common. Violence behavior includes physical violence, verbal violence that endangers and even harms others⁽¹⁾. At least 17% of patients treated have had violence behavior⁽²⁾.

Violence behavior impacts both the patient and others. Direct impact on the physical and psychological patient and staff⁽³⁾, the consequences of financing⁽⁴⁾, extending Length of Stay (LOS)⁽⁵⁾ and influencing quality nursing provided by nurses to patients^{(6),(1)}. Patients who experience violence from other patients can experience pain, injury and even worsening trauma

conditions if the patient is a patient with Post Traumatic Stress Disorder (PTSD)⁽⁴⁾.

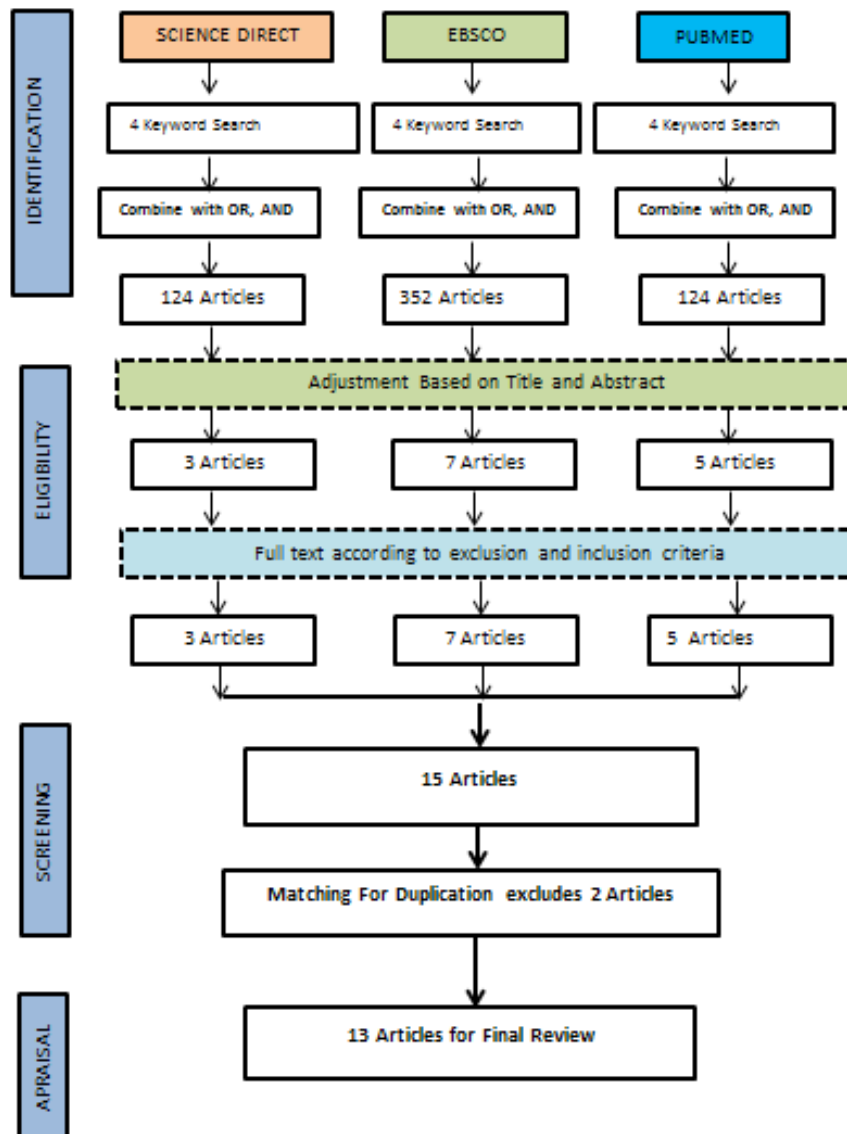
Nurses are staff in care rooms that play a role in conducting risk assessment of violence behavior. Lack of awareness in detecting early and managing effectively is still a factor in inhibiting handling that is not fast⁽⁴⁾. Nurses often ignore early warning signs of violence behavior⁽⁷⁾. As early as possible, conducting an appropriate structured risk assessment is expected to reduce violence behavior. This systematic review aims to find out the factors that influence the success of psychiatric nurses in conducting risk assessment of violence behavior.

Method

This systematic review begins with making questions by the PICO method, identification, eligibility, article inclusion criteria selection, screening and appraisal. Literature search aims to find articles that have been published in 3 databases, namely Science Direct, Proquest and Ebsco from 2009-2019. The search strategy uses several keywords: “psychiatric”, “nurse”, “risk assessment”, “violence”, combined with AND. The article will be included if the article describes the factors that influence the success of psychiatric nurses in conducting risk assessment of violence behavior. Articles in English. The article will be excluded if the article is a letter to editor, the contents of the article are not factoring that influence the success of psychiatric nurses in conducting risk assessment of violence

behavior. Screening and selection of articles based on inclusions and exclusions determined by the author.

In the search process, it was found 124 article titles on Science Direct, 352 on Ebsco and 124 on Pubmed. Then adjust the title and abstract obtained 15 articles. Articles that meet the inclusion and exclusion criteria are 15 articles, 5 articles in Pubmed, 3 articles in Science Direct and 7 articles in Ebsco. The screening process to find out the duplication results obtained there are duplication of 2 articles so they must be excluded. At the end of the stage, 13 articles were left for review. The search results and article selection are summarized in a diagram adapted from Preferred Reporting Items for Systematic reviews and Meta-Analyzes (PRISMA) are presented in Table 1. Search Framework



Result and Discussion

From the review of the article it can be concluded that several factors can influence the success of psychiatric nurses in conducting conducting risk assessment of violence behavior in patients, namely:

- a. **Sustainability training and education:** In conducting risk assessment for risk management of violence behavior, mental nurses still need adequate training and education aspects. The majority of respondents (98%) stated the need for continuing education and training on policies, procedures, processes, strategies and skills in conducting risk assessments and managing risks⁽⁸⁾. Another study, continuing education about the use of risk assessment tools is needed to show their use is compatible with therapy⁽⁹⁾. With the basic training of psychiatric nurses, one of the benefits of competency being felt was one of risk assessment of violence behavior ($p = 0.004$) as well as suicide and self-harm⁽¹⁰⁾. Continuing training and education are needed to improve the ability of nurses to make conducting risk assessment. Nurses as key agents in patient care. Knowledge and confidence aspects in managing risk and involving family play an important role⁽⁸⁾. In Malaysia, basic training for psychiatric nurses performing psychiatric services with competencies taught is assessment skills, risk assessment, therapeutic relationship skills, psychosocial interventions, medication management and clinical leadership skills⁽¹⁰⁾.
- b. **Confidence:** Nurses need confidence in making conducting risk assessment of violence behavior. Nurses who have good self-confidence can conduct risk assessments and better risk management⁽⁸⁾. In line with the results of another research that nurses with good confidence can make responsible decisions related to risk management⁽⁹⁾. Nurses are more confident in dealing with aggressive behavior after understanding the patient's warning signs⁽¹¹⁾. Nurses who have done basic training for mental nurses also affect nurses' confidence⁽¹⁰⁾. Nurses review, monitor and document improvement in behavior within 24 hours during treatment⁽¹²⁾.
- c. **Understanding early warning signs/alert systems:** Mental nurses as officers who are always with patients have sensitivity when there is an increase in patient behavior. The results of research, the implementation of the Alert System is important to increase awareness and communication around the risk of patient violence in psychiatric nurses⁽¹³⁾. In addition, research from the forensic service that introduces the FESAI (Forensic Early Warning Signs of Aggression Inventory) consists of 44 initial warning signs and 15 main categories. FESAI can assist nurses in recognizing early signs of violence behavior in patients. Understanding and awareness of the causes of violence behavior and signs that appear are key in handling patients with a patient-focused approach⁽¹⁴⁾. Nurses need more comprehensive observation skills related to interpreting signs or triggers of violence (sign and triggers)⁽¹⁵⁾. Nurses implement an Alert (risk assessment) System important to increase awareness and communication around the risk of patient violence⁽¹³⁾.
- d. **Understanding the factors that cause violence:** Understanding the factors that cause violence can help nurses make conducting risk assessment of violence behavior in patients. The determinants of violence behavior include female sex, diagnosis of personality disorders, disorders due to substance abuse⁽¹⁶⁾. Other factors described in the study are patients with psychological disorders and poor social skills, male gender, non-western ancestry, age less than 35 years old, unmarried and have personality disorders associated with acts of exile due to violence behavior⁽¹⁷⁾. Understanding of risk factors for violence behavior is an important step to improve predictions and take preventative actions⁽³⁾. Diagnosis of patients who most often experience violent behavior is psychopathy⁽¹⁸⁾; schizophrenia as much as 48.8%, bipolar beads⁽¹⁹⁾; schizophrenia and delusions as much as 55.1%, personality disorders, acute psychosis⁽²⁰⁾; substance abuse⁽¹⁶⁾.
- e. **Use of violence risk assessment tools:** Mental nurses in carrying out the assessment function can use tools to assess the risk of violence (violence risk assessment). Risk assessment and safety planning (risk assessment and safety planning) become a central component in mental health services⁽⁸⁾. In future research, hope to minimize the number of practitioners who believe that intuition is superior to a structured approach (clinical knowledge, research evidence and available tools)⁽⁹⁾. Nurses can use an accurate and reliable risk assessment tool⁽²¹⁾. Violence risk assessment tools help identify the risk of violence behavior of patients so that prevention can be carried out⁽²²⁾. The role of nurses in psychiatric

services are comprehensive, namely risk assessment and management, violence and aggression management, therapeutic relationships, medical knowledge, psychopharmacology and crisis escalation⁽²³⁾. Broad definition of risk is the possibility of danger to yourself or others or serious unwanted events. Risk assessment is the process of measuring whether this will happen. Risk management is a process or intervention to assist clients in reducing risk⁽²⁴⁾.

Risk assessment (risk assessment) is a strategy that can be used to reduce the occurrence of aggressive behavior^{(25),(26)} and life-saving for patients and the people around him⁽²²⁾. In line with research that nurses play a role in conducting a structured risk assessment in the prevention of violence behavior⁽⁵⁾. This is an important step to improve predictions and take preventative measures⁽³⁾.

Nurses involved in research and filling out risk assessment tools are illustrated in two tools, the Brøset Violence Checklist (BVC) and DASA that can be performed in an acute room⁽²¹⁾. In immediate prediction time, BVC and DASA have been proven to be easy to use, fast and within 24 hours able to predict the occurrence of violence behavior to help nurses in assessing the risk of violence behavior patients^{(21),(22)}.

DASA consists of seven assessments using dynamic factors and can help nurses by encouraging violent prevention interventions when the level of risk increases⁽²⁷⁾. DASA is accurate as a predictor of violence in hospitalization. DASA with Area Under Curve (AUC) in the range 0.84 (verbal aggression against others) to 0.93 (physical violence to others)⁽²⁶⁾. The DASA total score shows the prediction accuracy for violence in others and seclusion with restrain but less in violence against objects. Nurses say DASA is very useful in their practice⁽²⁸⁾. DASA psychometric results are quite good in predicting violent behavior⁽¹⁶⁾. BVC is a strong predictor of violence. BVC consists of six assessments using dynamic factors and is very appropriate to be used on the first day of hospital admission⁽²⁹⁾. For the standard cut-off point 3, specificity is 0.997 and sensitivity is 0.656. BVC shows satisfying specifications and sensitivity as predictors of the risk of short-term violence against staff and others by patients in forensic services⁽³⁰⁾.

Conclusion

Psychiatric nurses can make conducting risk assessment of violence behavior that is influenced by several factors including training and continuing education, confidence, understanding early warning signs/alert systems, understanding the causes of violence and using violence risk assessment tools (violence risk assessment). Psychiatric nurses still need continuing education and training in understanding the early signs of a patient's violence behavior and the use of assistive devices in the form of risk assessment of violence behavior to increase nurses' self-confidence and assist in making appropriate decisions.

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