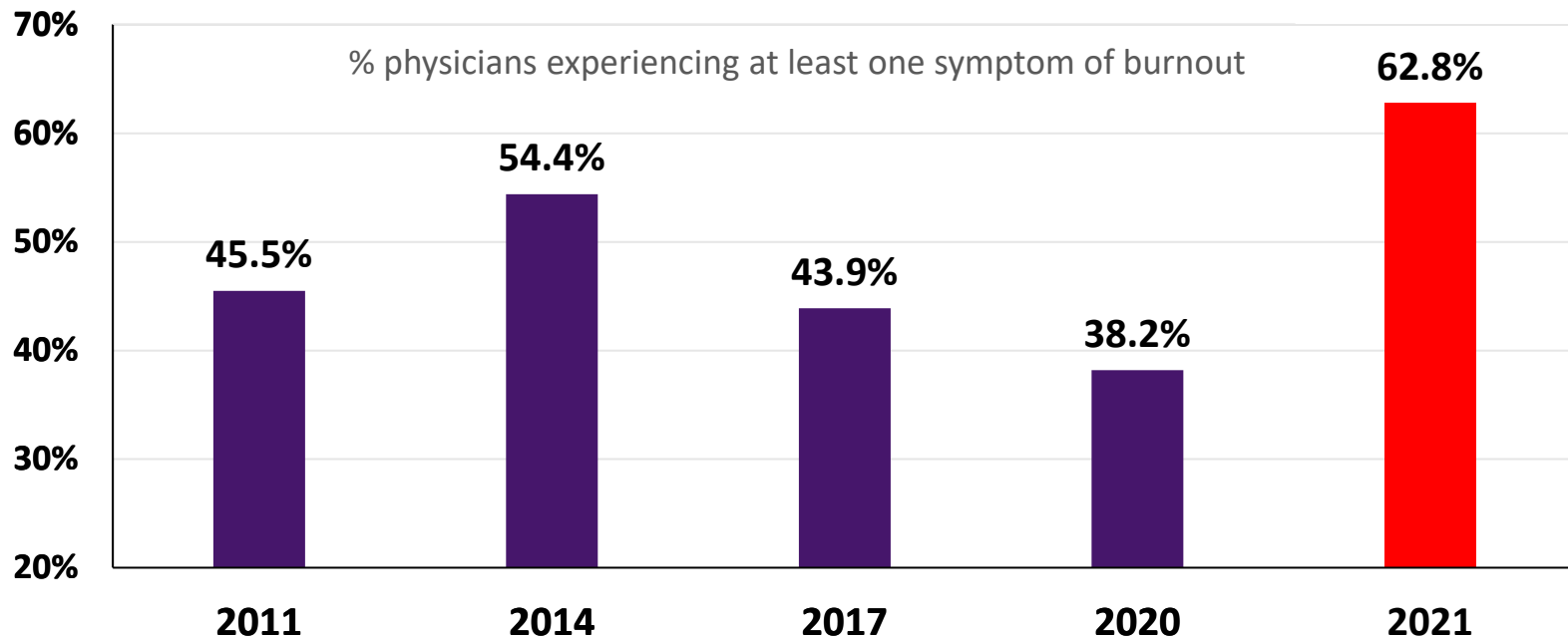




Protecting Our Healers

**AMA Interim Meeting
Friday, November 11, 2022**

Why now? Physicians in crisis




Source: *Changes in Burnout and Satisfaction With Work-Life Integration in Physicians Over the First 2 Years of the COVID-19 Pandemic*. Shanafelt, Tait D. et al., Mayo Clinic Proceedings, In press.

Mistreatment and discrimination among physicians

- In this study, mistreatment and discrimination by patients, families, and visitors were common, especially for female and racial and ethnic minority physicians, and associated with burnout.

JAMA
Network | **Open**



Original Investigation | Occupational Health

Physicians' Experiences With Mistreatment and Discrimination by Patients, Families, and Visitors and Association With Burnout

Liselotte N. Dyrbye, MD, MPH; Colin P. West, MD, PhD; Christine A. Sinsky, MD; Mickey Trockel, MD, PhD; Michael Tutty, PhD; Daniel Satele, BA; Lindsey Carlisare, MBA; Tait Shanafelt, MD

Abstract

IMPORTANCE Burnout is common among physicians and is associated with suboptimal patient outcomes. Little is known about how experiences with patients, families, and visitors differ by physician characteristics or contribute to the risk of burnout.

OBJECTIVE To examine the occurrence of mistreatment and discrimination by patients, families, and visitors by physician characteristics and the association between such interactions and experiencing burnout.

DESIGN, SETTING, AND PARTICIPANTS This cross-sectional survey was conducted from November 20, 2020, to March 23, 2021, among US physicians.

EXPOSURES Mistreatment and discrimination were measured using items adapted from the Association of American Medical College's Graduation Questionnaire with an additional item querying respondents about refusal of care because of the physicians' personal attributes; higher score indicated greater exposure to mistreatment and discrimination.

MAIN OUTCOMES AND MEASURES Burnout as measured by the Maslach Burnout Inventory.

RESULTS Of 6512 responding physicians, 2450 (39.4%) were female, and 369 (7.2%) were Hispanic; 681 (13.3%) were non-Hispanic Asian, Native Hawaiian, or Pacific Islander; and 3633 (70.5%) were non-Hispanic White individuals. Being subjected to racially or ethnically offensive remarks (1849 [29.4%]), offensive sexist remarks (1810 [28.7%]), or unwanted sexual advances (1291 [20.5%]) by patients, families, or visitors at least once in the previous year were common experiences. Approximately 1 in 5 physicians (1359 [21.6%]) had experienced a patient or their family refusing to allow them to provide care because of the physician's personal attributes at least once in the previous year. On multivariable analyses, female physicians (OR, 2.33; 95% CI, 2.02-2.69) and ethnic and racial

Key Points

Question How frequently do physicians experience mistreatment and discrimination by patients, their families, and visitors; how does this vary by physician characteristics; and what is the association between having such interactions and experiencing burnout?

Findings In this cross-sectional study of 6512 US physicians, mistreatment and discriminatory behaviors by patients, families, and visitors within the previous year were common, especially for female and racial and ethnic minority physicians, and associated with higher burnout rates.

Meaning The findings suggest that efforts to mitigate risk of physician burnout and improve the work experience of female and racial and ethnic minority physicians should include strategies that promote patient, family, and visitor civility.

+ Supplemental content

Author affiliations and article information are listed at the end of this article.

Source: Dyrbye LN, West CP, Sinsky CA, et al. Physicians' Experiences With Mistreatment and Discrimination by Patients, Families, and Visitors and Association With Burnout. JAMA Netw Open. 2022;5(5):e2213080. doi:10.1001/jamanetworkopen.2022.13080

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AMA

Physicians' powerful ally in patient care

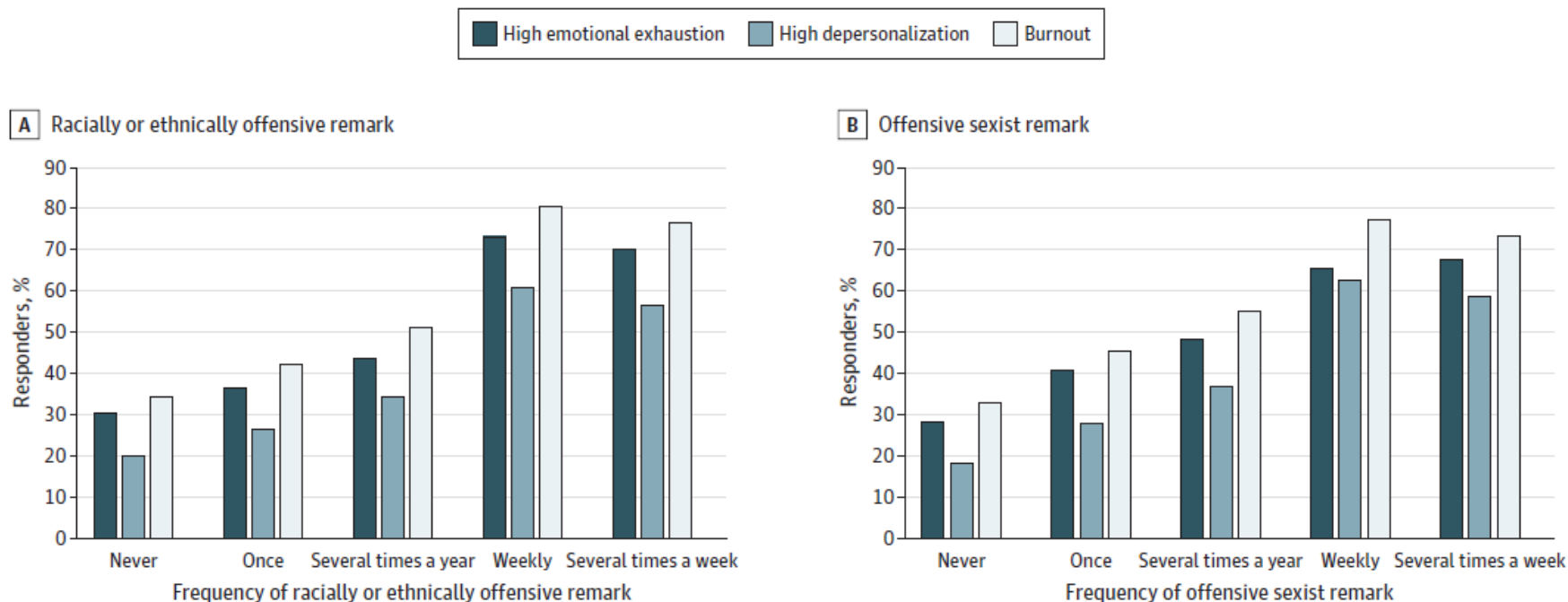
Personal experience of mistreatment and bias

Experience	Respondents, No. (%)											
	Male						Female					
	Non-Hispanic						Non-Hispanic					
	White (n = 2307)	Black or AA (n = 70)	AAPI (n = 354)	Indigenous or other (n = 113)	≥2 Races (n = 44)	Hispanic or Latino (n = 212)	White (n = 1315)	Black or AA (n = 111)	AAPI (n = 327)	Indigenous or other (n = 69)	≥2 Races (n = 56)	Hispanic or Latino (n = 157)
Been subjected to												
Offensive racially or ethnically remarks	476 (20.7)	40 (57.1)	182 (51.7)	51 (45.1)	18 (41.9)	69 (32.5)	321 (24.4)	61 (55.0)	192 (59.3)	44 (63.8)	28 (50.0)	73 (46.5)
Offensive sexist remarks	361 (15.7)	7 (10.1)	53 (15.1)	15 (13.3)	11 (25.0)	30 (14.2)	716 (54.6)	49 (44.5)	155 (47.7)	39 (56.5)	30 (53.6)	78 (49.7)
Unwanted sexual advances	363 (15.8)	16 (22.9)	39 (11.1)	21 (18.6)	12 (27.3)	42 (19.8)	422 (32.1)	38 (34.5)	87 (26.7)	21 (30.4)	22 (39.3)	40 (25.5)
Offensive remarks related to sexual orientation	197 (8.6)	4 (5.7)	22 (6.3)	9 (8.0)	9 (20.9)	20 (9.4)	173 (13.2)	11 (9.9)	38 (11.7)	16 (23.2)	9 (16.4)	25 (15.9)
Had a patient or his/her family refuse to allow them to provide care because of the physician's personal attributes	337 (14.7)	31 (44.3)	114 (32.4)	28 (24.8)	16 (37.2)	47 (22.2)	312 (23.8)	42 (37.8)	117 (36.1)	30 (43.5)	18 (32.1)	55 (35.0)
Been physically harmed (eg, hit, slapped, kicked)	348 (15.1)	6 (8.6)	29 (8.2)	18 (15.9)	14 (31.8)	26 (12.3)	247 (18.8)	12 (10.9)	55 (16.8)	11 (15.9)	8 (14.3)	23 (14.6)

Abbreviations: AA, African American; AAPI, Asian, Native Hawaiian, or Pacific Islander.

Source: Dyrbye LN, West CP, Sinsky CA, et al. Physicians' Experiences With Mistreatment and Discrimination by Patients, Families, and Visitors and Association With Burnout. JAMA Netw Open. 2022;5(5):e2213080. doi:10.1001/jamanetworkopen.2022.13080

Percentage with emotional exhaustion, depersonalization, and burnout



Source: Dyrbye LN, West CP, Sinsky CA, et al. Physicians' Experiences With Mistreatment and Discrimination by Patients, Families, and Visitors and Association With Burnout. JAMA Netw Open. 2022;5(5):e2213080. doi:10.1001/jamanetworkopen.2022.13080

AMA Policy

Code of Medical Ethics

1.2.2 Disruptive Behavior and Discrimination by Patients

Topic: Code of Medical Ethics

Policy Subtopic: Opinions on Patient-Physician Relationships (1.2 Special Issues in Patient-Physician Relationships)

Meeting Type: NA

Year Last Modified: 2020

Action: NA

Type: Code of Medical Ethics

Council & Committees: NA



The relationship between patients and physicians is based on trust and should serve to promote patients' well-being while respecting the dignity and rights of both patients and physicians.

Disrespectful, derogatory, or prejudiced, language or conduct, or prejudiced requests for accommodation of personal preferences on the part of either patients or physicians can undermine trust and compromise the integrity of the patient-physician relationship. It can make individuals who themselves experience (or are members of populations that have experienced) prejudice reluctant to seek care as patients or to provide care as health care professionals, and create an environment that strains relationships among patients, physicians, and the health care team.

Trust can be established and maintained only when there is mutual respect. Therefore, in their interactions with patients, physicians should:

- (a) Recognize that disrespectful, derogatory, or prejudiced language or conduct can cause psychological harm to those who are targeted.

Always Vigilant

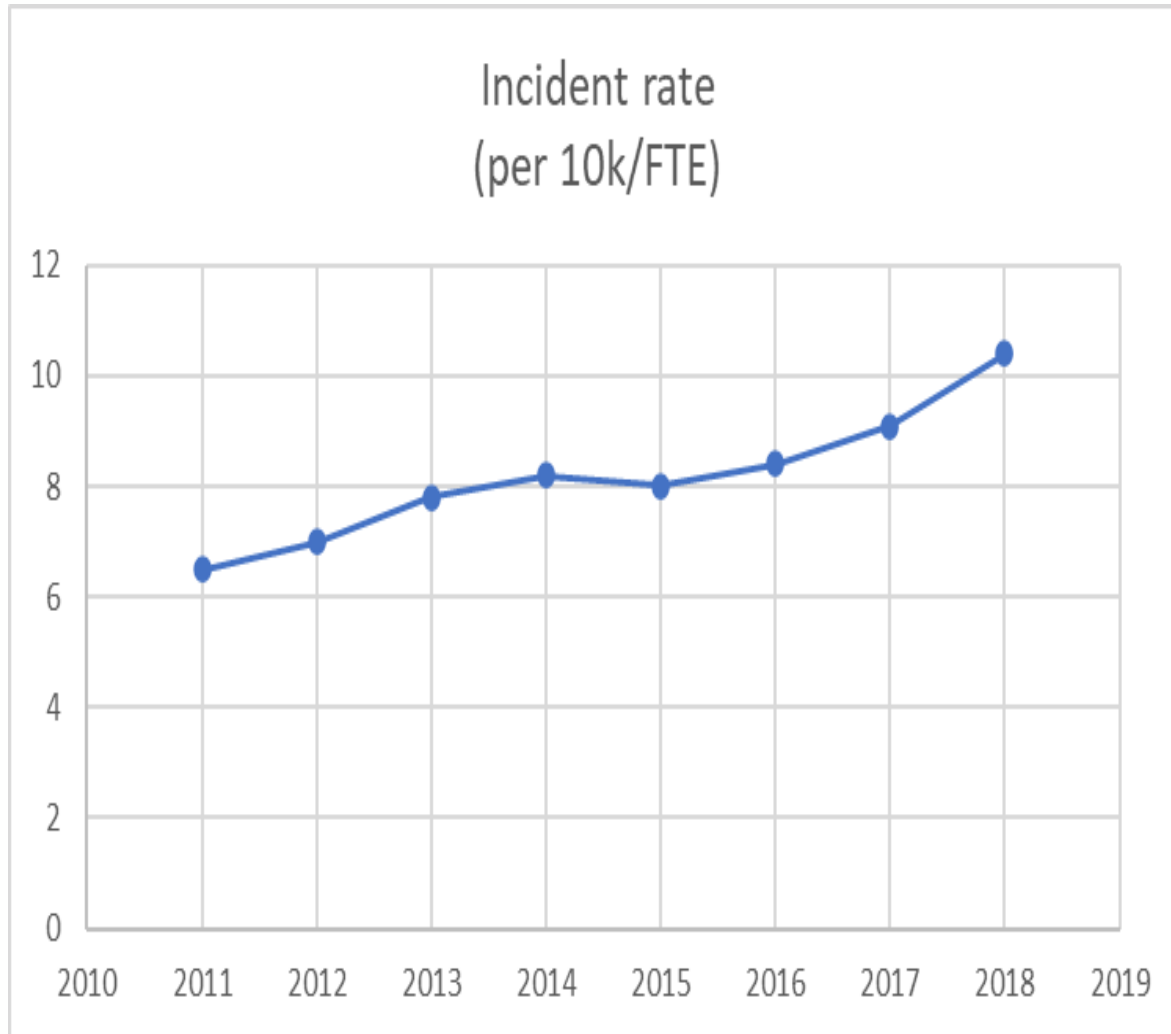


Protecting our Healers

N Murali, MD FACP AMP
System CMO, Medicine Services
Geisinger

Workplace Violence (WPV)

A national concern



25% of surveyed nurses reported they were physically assaulted by a patient or patient family member ([ANA](#)).

The incidence of nonfatal workplace violence to healthcare workers was **10.4 / 10,000 workers**.

The rate for all industries was **2.1** ([US Bureau of Labor Statistics](#)).

Healthcare workers have a **20%** higher chance of being the victim of workplace violence than other workers ([National Crime Victimization survey](#)).

What have we done to address WPV & Improve Safety?



Nanticoke women facing charges after assaulting two nurses, one pregnant

State College man arraigned on charges stemming from attack on Geisinger Lewistown employees

Women Charged for allegedly assaulting hospital security officers

Sunbury Teen Charged with attacking an RN

State Police: Violent Disruption Leads to Arrest

What have we done to address WPV & Improve Safety?

1. Patient and Visitor Pledge
2. WPV Multidisciplinary Task Force & System wide Oversight with Security Assessment to determine our capabilities

2019

Physical	% Complete
Doors	90
Walks	92
Partitions/Barriers	100
Lighting	90

Technical	% Complete
Access	50
Surveillance	75
Alarms	50
Communications	75

Operational	% Complete
Staffing	75
Appearance/Training	50
Special Programs	0
Structure/Policies/Procedures	50

2012
53 FTES

Today

Physical	% Complete
Doors	98
Walks	100
Partitions/Barriers	100
Lighting	98

Technical	% Complete
Access	90
Surveillance	85
Alarms	90
Communications	85

Operational	% Complete
Staffing	80
Appearance/Training	75
Special Programs	75
Structure/Policies/Procedures	80

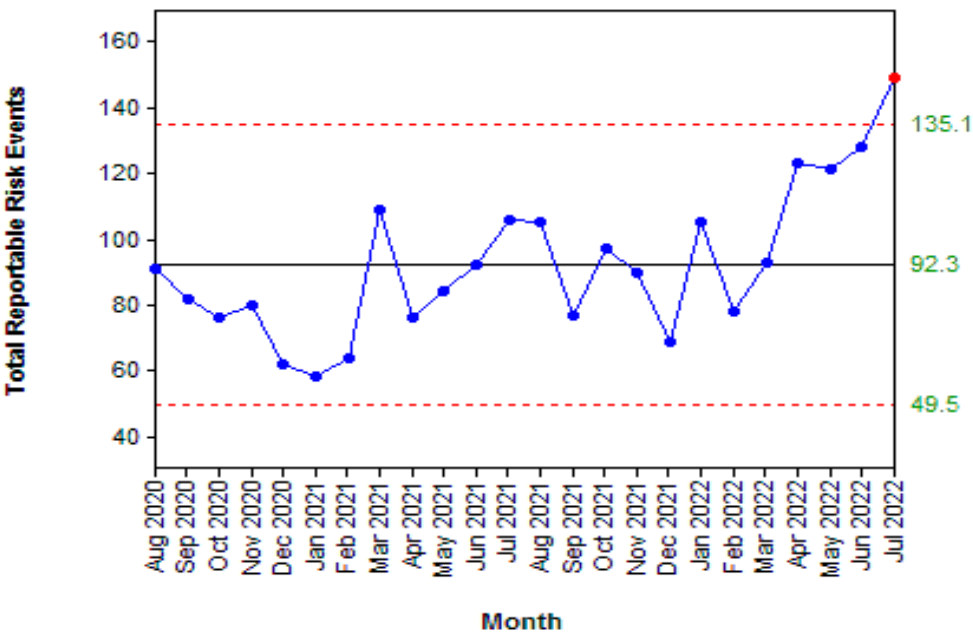
Today
137 FTEs

3. Security consultation is now required on all facility construction and renovation projects

What have we done to address WPV & Improve Safety?

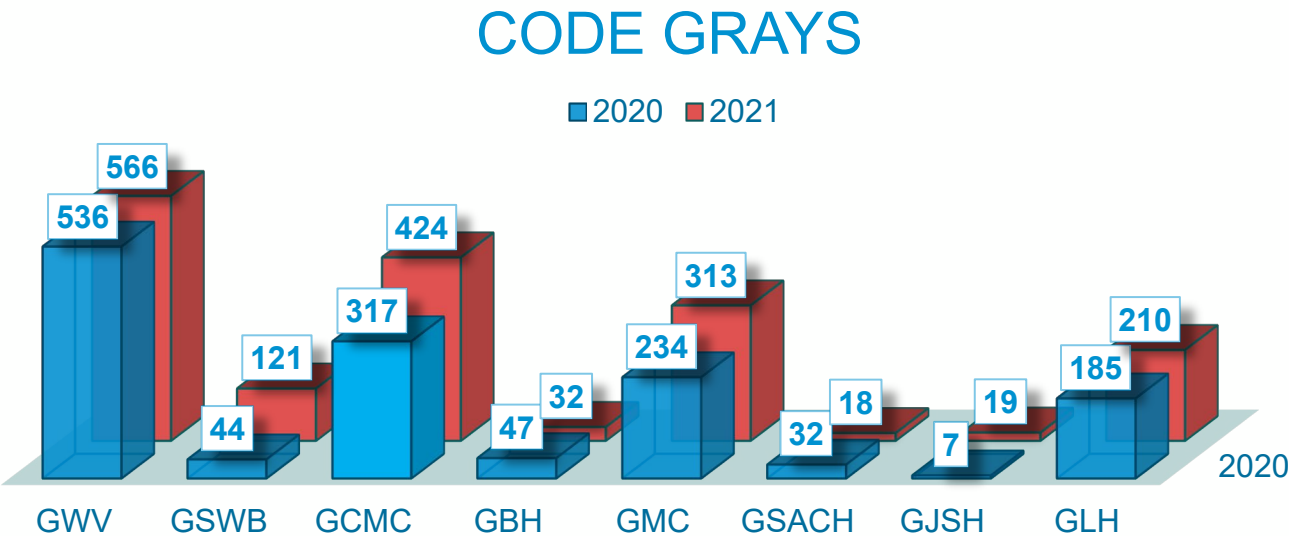
3. Emphasis on reporting, collection and data analysis

Assaults on staff



Sep 1, 2022 01:08:11

Code Gray incidents increased by 21% in 2021

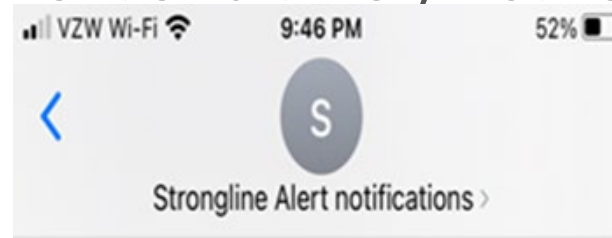


Geisinger security incidents are escalating in numbers, & in seriousness

Investment in Technology - Strongline

Creates safer environment and timely notifications to security and staff

How does it work?



Fri, Nov 6, 8:06 AM

Amanda Merk needs help
in the vicinity of GBH > 1st
> ED - Room 8

Dispatched security to
GBH > 1st > ED - Room 8

Resolved issue at GBH >
1st > ED - Nurse Station
Front: Duress incident /
handled by security

Currently Deployed

GBH, GSACH, GSWB, GWV, Woodbine

By Year-end 2022

GCMC, Pittston Healthplex, GMC

Early 2023

GJSH, GMCM, GLH, Gray's Woods

Over 6200 staff have now
been badged

2021

358 Activations

2022

375 Activations

Metal Detectors and Their Impact



Interceptions

Knives: 5000

Pepper Spray: 346

Firearms: 130

Tasers/Stun Guns: 20

Others: 1800

***prybars, hammers, screwdrivers, wrenches, razor blades, handcuffs, tasers, stun guns, brass knuckles, scissors, bullets, chemical mace, etc., etc.**



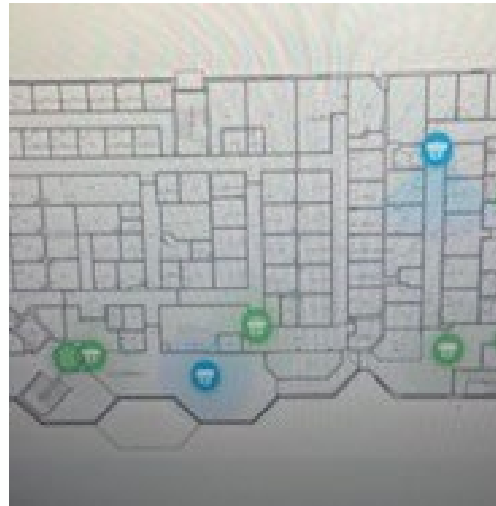
Security Cameras

Geisinger added nearly **200** cameras embedded with artificial intelligence (AI)

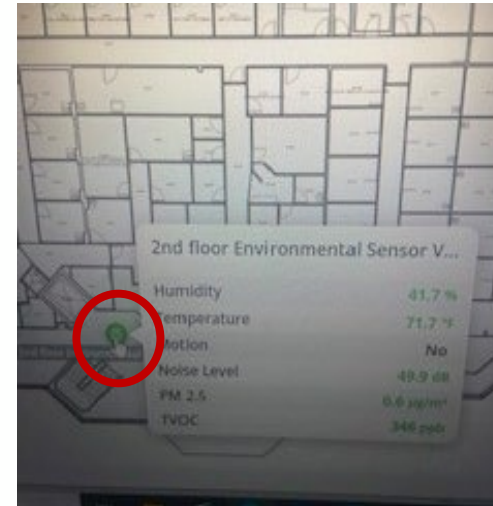
Capable of

- facial recognition
- vehicle identification
- license plate reading
- much more

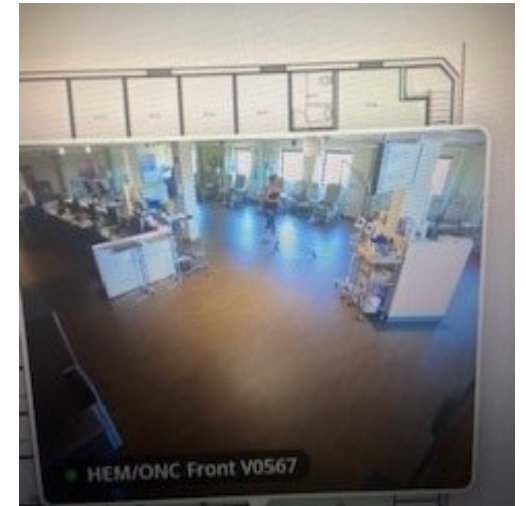
Intuitive Interface



Various Sensors



Smart Heatmaps



Our hands on approach

Training

- Active shooter training and drills
- Systemwide de-escalation & defensive training
- Threat assessments

Support

- Escorting staff and patients
- “Stand-by” duties for staff dealing with aggressive patients or employees
- Safe keeping of patient valuables

Technology

- Security cameras with embedded AI
- Modern security records management system
- Implement regionalized dispatch





Security K9 Program

Aria & Vicki Housner

Skills and training include explosive and firearm detection as well as tracking and de-escalation

Since February 2020, over 200 successful de-escalations and 214 Code Gray (combative person) responses

Two explosive searches within Geisinger facilities

Dozens of police assists for bomb threats, protective sweeps, and homicide investigations



Improving the competency of our officers

Competency and certifications

Pennsylvania Act 235 Certification

- 20% of Security Staff Certified.
- Administered by PA State Police
- Focus on the PA use of force law and associated tactics.

Career Ladder – requires progressive levels of certification by the International Association of Healthcare Safety and Security (IAHSS).

GMC Security as a “**Program of Distinction**” by IAHSS for demonstrating best practices in healthcare security. Less than 50 hospitals in the nation have been bestowed this honor.



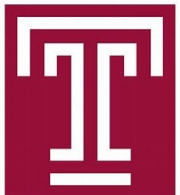
The Next Step

Establishing a Geisinger Police Force

Geisinger plans to create a police force within Security Operations

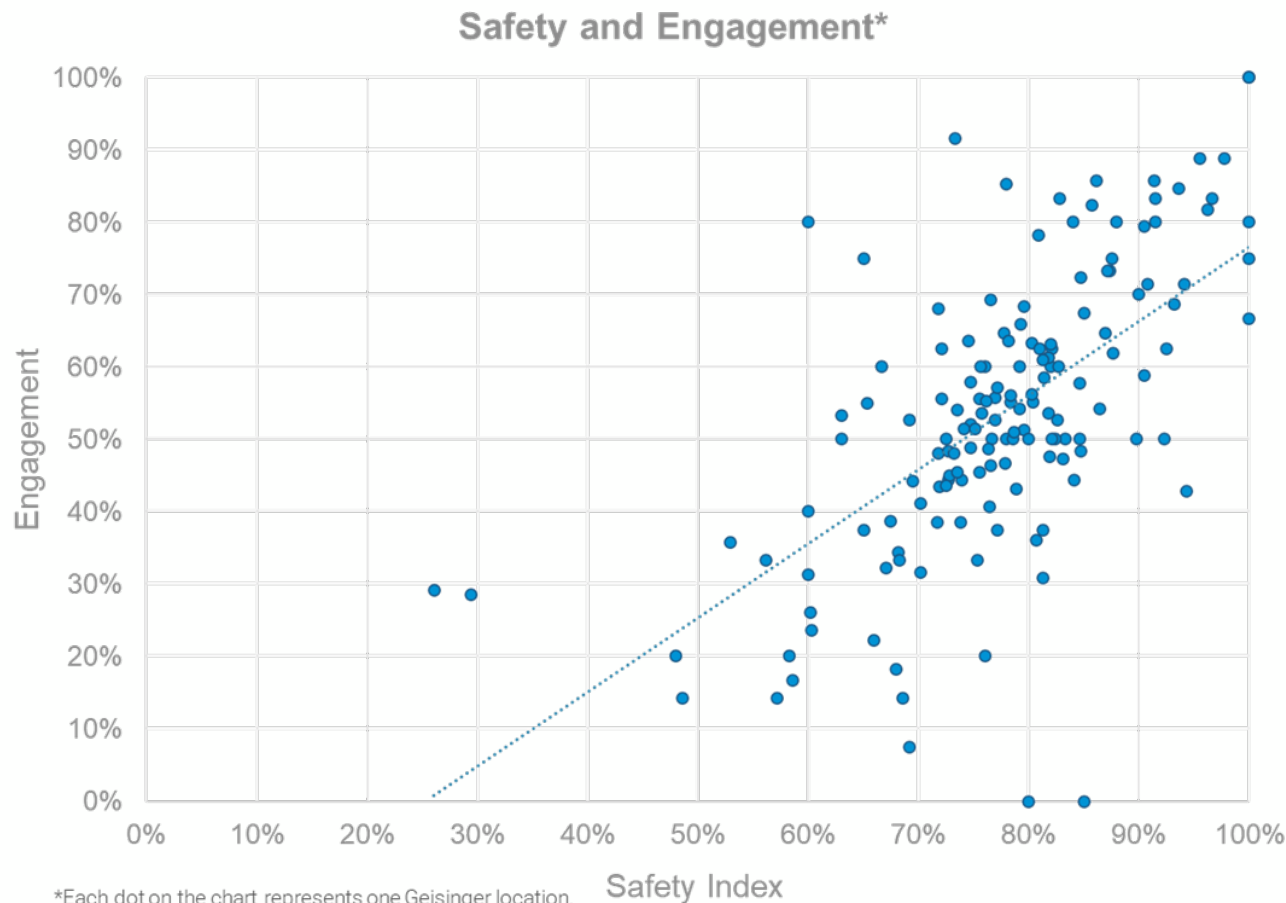
- first officers sworn in by end of this year
- goal is to have 20% of Security be police officers within 3 years

Geisinger police officers will have full police powers on Geisinger property



Employee Engagement and Safety

87% of our surveyed employees believe their supervisor takes action to address safety concerns that are brought to their attention



“... our society has changed, and people are carrying weapons, I no longer feel 100% safe at my workplace.”

“Security should be taken more seriously. The actions of society in general are becoming more erratic and aggressive.”

“Improve security at clinic sites. With more active shooter situations happening, we need more security guards and cameras.”

“We are repeatedly demeaned, harassed and threatened. We need security in our clinic.”

The evolution of security

Continued growth is necessary to meet today's demands and needs

Then

GCMC Security Daily Log

Shift: 0600-1400

Date: March 11, 2022

Recording officer: Lt. John Kurilla

Time	Activity
0600	On duty, shift report.
0605	Update weekly reports.
0615	ED/NS3 check.
0623	A Code GRAY was called for the ICU. Upon arrival, the patient was out in the hallway near the elevators and stopped by Security and ICU staff. It was found out by the ICU PA-C that there was no 302 on the patient. She walked away and left the building, security and the Nursing Supervisor followed and stopped the patient in the 1700 block of Mulberry St. Scranton Police were called when the 302 was filed by Scranton Counseling Center. The patient was escorted back to the hospital and placed in ED 31.
0656	Open revolving door.
0700	Officers will be posting at Nurse Station #3 for the shift.
0720	Called to open a door on 5th floor POB.
0731	Called to escort eloped patient from ED 31 back to ICU 6.
0800	Called to open Pharmacy Director's office.
0830	Called by Barry Decker, Valet Supervisor, someone lost a check and deck of cards in the garage. It is in their office if someone calls about it.
0940	Called by Candace from PCU. PCU 12 has visitors bringing in belongings, not allowed. Security will standby.
0945	Safety huddle.
0955	Called to wand new patient in ED 30.
1014	A Code GRAY was called for ICU 6. The patient was attempting to elope, she was stopped, brought back to the room and medicated.
1045	TEAMS meeting on Perspective report writing.
1130	ED/NS3 check. <i>The officer posted at NS3 was pulled to give breaks to the BCM Officers on sixth floor.</i>
1200	ED/NS3 check.
1238	Called to wand ED 29, transferring out.
1240	Nodes 1, 2, and 3 missing on Simplex panel. Called maintenance, Rob states Simplex is here working on the system.
1245	Basement.
1307	Called to wand outgoing patient in ED Hall 17.
1320	ED/NS3 check.
1333	Called to escort ICU 6 to D7. She is the patient who eloped this morning. Lt. Kurilla and SO's Huegel and Centeno escorted her to D7.
1400	Off duty.



- Daily activities recorded on a note pad and transferred to a Word document at the end of shift
- Activities are inconsistently recorded
- Manual reports

Now

andbox.resolve.com

Create a New Activity

Activity Type

Business Unit

Reported Date/Time

Priority

Description

CREATE

Creating an Activity

CC - Completed Activity List

Geisinger Health System

Last Update: Sep 1, 2022 1:12 PM

Priority	Activity Name	Activity Type	Assigned Date/Time	Reported Date/Time	Involved Location(s)	Activity Date
Low	ACT-2022081-107	Pending - Interior	August 23, 2022 1:03 pm	August 23, 2022 1:03 pm		Close - Complete
High	SBH-2022083-0843	Assistance - ED Assistance	August 23, 2022 10:25 am	August 23, 2022 10:25 am	Dispatched To: Bloomsburg - ED	Close - Complete
Low	SBH-2022083-0841	Emergency Callus Activation	August 23, 2022 1:03 pm	August 23, 2022 1:03 pm	Dispatched To: Danville	Close - Complete
Low	SBH-2022083-0842	Emergency Callus Activation	August 23, 2022 1:03 pm	August 23, 2022 1:03 pm	Dispatched To: Danville	Close - Complete
Low	ACT-2022083-111	Pending - Interior	August 23, 2022 1:03 pm	August 23, 2022 1:03 pm		Escalator Incident
Low	ACT-2022083-110	Pending - Interior	August 23, 2022 1:03 pm	August 23, 2022 1:03 pm		Close - Complete
Low	ACT-2022083-109	Photo ID Creation	August 23, 2022 1:03 pm	August 23, 2022 1:03 pm		Close - Complete
Low	ACT-2022083-108	Photo ID Creation	August 23, 2022 1:03 pm	August 23, 2022 1:03 pm		Close - Complete
Low	ACT-2022083-107	Photo ID Creation	August 23, 2022 1:03 pm	August 23, 2022 1:03 pm		Close - Complete
Low	ACT-2022083-106	Automobile Related Call - Parking Warning Issued	August 23, 2022 10:13 am	August 23, 2022 10:13 am		Escalator Incident
Low	ACT-2022083-105	Automobile Related Call - Parking Warning Issued	August 23, 2022 10:13 am	August 23, 2022 10:13 am		Close - Complete
Low	ACT-2022083-104	Automobile Related Call - Parking Warning Issued	August 23, 2022 10:13 am	August 23, 2022 10:13 am		Close - Complete
Low	ACT-2022083-103	Appt Patient Short-Loss Enforcement Agency	August 23, 2022 9:48 am	August 23, 2022 9:48 am		Close - Complete
Low	ACT-2022083-102	Visitor - Escort	August 23, 2022 9:37 am	August 23, 2022 9:37 am		Close - Complete
Low	SBH-2022083-0840	Typhs Control	August 23, 2022 10:05 am	August 23, 2022 10:05 am	Dispatched To: Danville - Headline	Close - Complete
Low	SBH-2022083-0840	Assistance - Valet Assist	August 23, 2022 10:05 am	August 23, 2022 10:05 am	Dispatched To: Danville - ED	Close - Complete
Low	SBH-2022083-0840	Assistance - Lift/Hydr	August 23, 2022 9:57 am	August 23, 2022 9:57 am	Dispatched To: Danville	Close - Complete
Low	SBH-2022083-0840	Assistance - Hydrant	August 23, 2022 9:48 am	August 23, 2022 9:48 am	Dispatched To: Danville - Gas Patient Clinic	Close - Complete
Low	SBH-2022083-0840	Automobile Related Call - Typhs Related	August 23, 2022 12:46 pm	August 23, 2022 12:46 pm	Dispatched To: Bloomsburg - Post-Partum	Close - Complete
Low	ACT-2022083-101	Pending - Interior	August 23, 2022 1:03 pm	August 23, 2022 1:03 pm		Close - Complete

Page 1 of 1 | 40 Rows



- Daily Activities captured on a Mobile Device, in real time
- Activities instantly updated
- Reports are auto generated in the system

New & revised JC standards for WPV

effective January 1, 2022

- Defining workplace violence (now includes Sexual Harassment).
- Leadership oversight.
- Worksite analysis (risk assessment).
- Develop policies and procedures for the prevention of workplace violence.
- Reporting systems, data collection, and analysis is required.
- Post-incident strategies.
- Training and education to decrease workplace violence.





Questions?

