



Prevalence and characteristics of patient abuse towards trainee physicians at a single institution

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Introduction

- Abuse from patients directed towards healthcare personnel is a worldwide problem
 - There were 15-20 assaults per 10,000 Spanish physicians from 2010-2015¹
 - Half of Swiss hospital staff experienced violence from patients and/or visitors in the last year, with 11% experiencing violence in the past week²
 - 89% of US emergency medicine (EM) residents experienced verbal abuse in the last year³
- Lack of experience is associated with an increased risk of abuse⁴
- The goal of the study was to determine the prevalence and types of abuse experienced by residents at a single academic institution

Methods

- Survey characteristics:
 - IRB approved
 - Administered using Qualtrics online survey
 - Survey email sent to 647 residents and fellows
 - Open January-June 2021
 - Data analyzed using Qualtrics software and Microsoft Excel
- Site characteristics:
 - Single academic institution
 - Multiple training sites: academic hospital, Veterans Affairs hospital, community hospitals, outpatient clinics
- Questions asked:
 - Respondent demographics
 - Experienced and/or witnessed abuse from patients
 - How to address abuse

Results

- Survey demographics:
 - 123 respondents (19.0% response rate)
 - 53.4% female
 - 63.7% white
 - 50.0% between 25-30 years
 - 48.7% PGY-1 or -2s
 - 65.5% in a medical specialty
- 91.1% reported being verbally and/or physically abused by patients during residency
- 53.9% reported a patient made them fear for their physical safety
- 82.4% reported having witnessed patients abuse others
- Targets of witnessed abuse:
 - 88.6% nurses
 - 75.9% other trainee physicians
 - 36.7% attending physicians
- 81.0% felt the majority of abuse occurred in the inpatient setting
- Respondents felt that abuse is:
 - 78.8% a problem
 - 76.0% a cause of physician burn-out
 - 24.0% a cause of physician suicide
 - 83.4% a safety issue
- Addressing abuse:
 - 9.6% felt trained to do so
 - 35.6% felt expected to do so
 - 25.0% felt comfortable to do so

Figure 1. Types of verbal abuse experienced (blue) and witnessed (orange) by residents

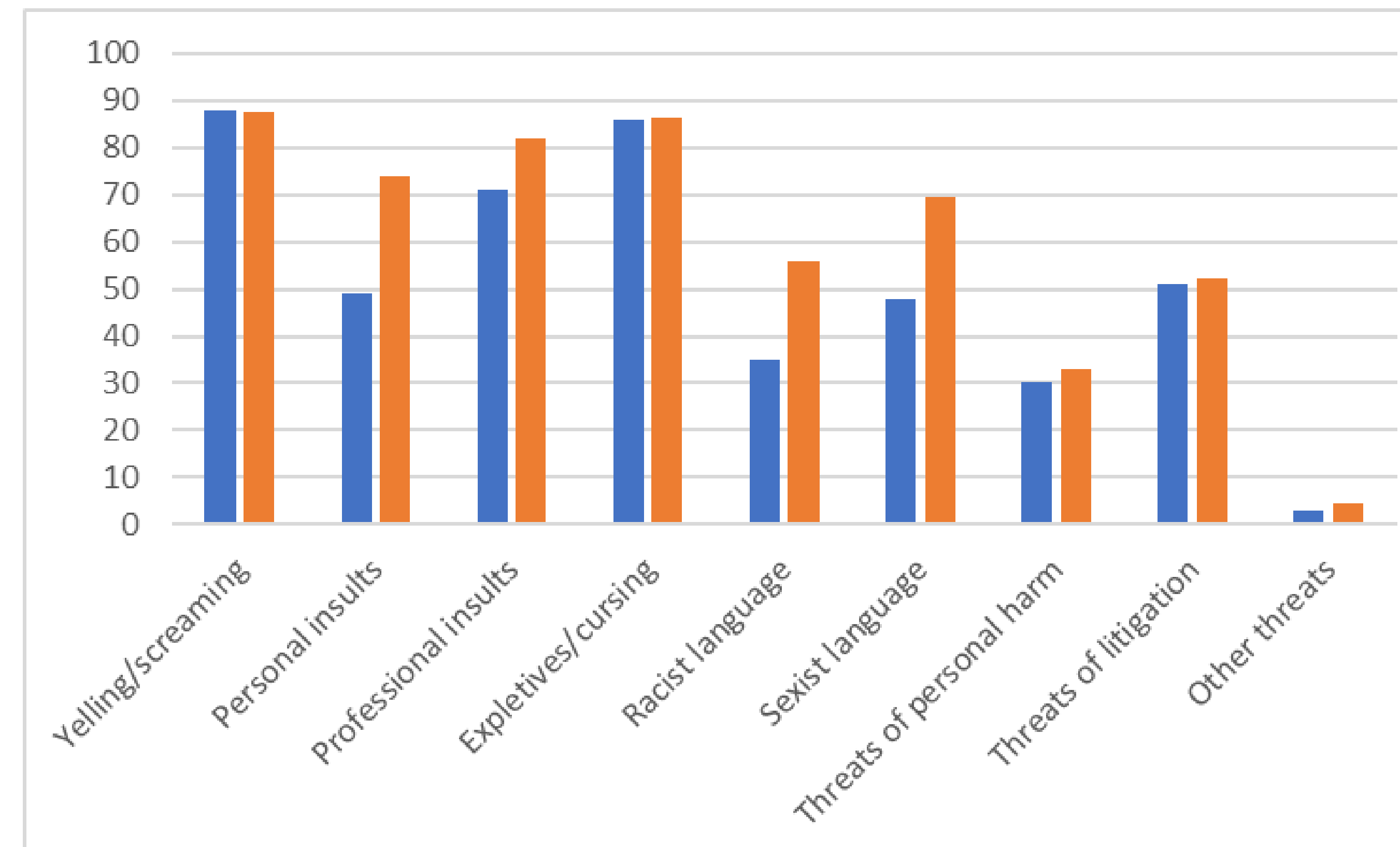


Figure 2. Types of physical abuse experienced (blue) and witnessed (orange) by residents

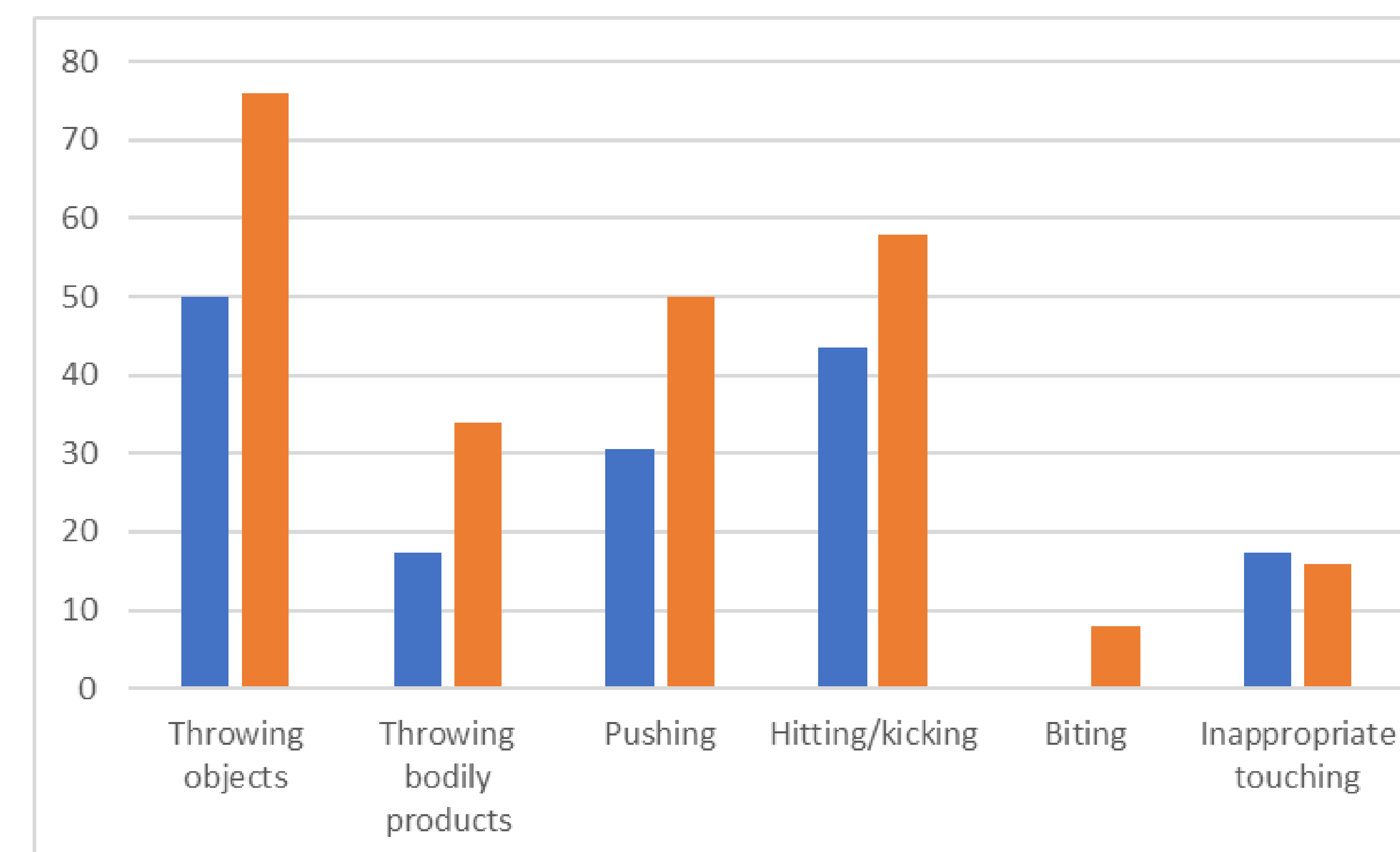


Table 1. Examples of proposed solutions from respondents

“[S]ystems wide intervention to set expectations for patients”
“Trainees early in their careers should be briefed on how to de-escalate a situation, how to anticipate dangerous situations, and how to save themselves in the event of personal threat without compromising the safety of the patient”
“[H]ave a strike system where [patients] become banned from [the institution]”
“[A]ttendings need to address verbal abuse more”
“There needs to be a top-down approach from leadership that emphasizes that abusive behavior and language towards any healthcare staff or students is unacceptable”
“[E]xpectations need to be set on admission so that patients are aware what inappropriate behavior is and what the consequences for that behavior would be”

Table 2. Examples of respondent thoughts on abuse and responses to abuse

“I’ve seen a lot of [patients] using illicit substances getting excused for their verbal and physical abuse, but in the real world that is irrelevant”
“[W]hen I told people about the experiences I was met with responses like ‘well remember, they are in pain’”
“There has been a ‘pass’ given to the perpetrator since their child ‘is really sick’”
“I have seen tons of [patients] with a red flag in their chart, but there is no consequence if they become abusive again”
“Physical and verbal abuse is usually ‘managed’ [by] having meetings from administration about how to deescalate, how to change the way we interact with patients/things we say in order to minimize the chance of this happening...It’s a disappointing and persistent culture... that continually allows physical and verbal abuse from patients to go unpunished without a realistic response to help ameliorate these interactions”

Discussion

- Vast majority of trainee respondents reported experiencing and/or witnessing verbal and/or physical abuse from patients during residency
- Over half felt that their personal safety had been endangered by a patient
- Prior studies have focused mainly on the emergency department:
 - Two-thirds of EM residents experienced at least one instance of physical violence per shift⁵
 - Nearly all experienced verbal abuse⁵
 - 40.8% of physicians were exposed to verbal or physical violence in the ED within the last year⁶
- Limitations of the study include subjective nature of surveys, low response rate, possibility that those who experienced abuse were more likely to respond, and inclusion of a single institution

Take Home Points

- Patient abuse of trainee physicians and other healthcare providers is commonplace
- Abuse tends to occur in the inpatient setting
- Few trainees feel trained to respond to abuse
- More work needs to be done to protect healthcare providers from abusive patients

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