

Assault Precautions

- Assess the need for constant observation on a case by case basis.
- Use a team approach when interacting with the patient; never enter patient room/area alone.
- Approach patient in calm, neutral manner when communicating about behaviors. Focus on the behavior. Patient comments cannot be personalized.
- Do not argue with patient. If a patient is unable/unwilling to cooperate with care, report to team and re-attempt at a later time.
- Consider nursing assignments based on patient needs.
- Set behavioral expectations every shift: non-punitive, enforceable, and written with consequences of non-adherence clearly stated. Include patient in process.
- Assure behavioral plan is documented in medical record, updated, communicated and followed.
- Provide positive feedback when progress is made toward agreed upon behavior.
- Assess own reactions toward patient. Discuss own feelings with team ensure clinical/ patient centered focus.
- Meet as an Interdisciplinary Team to discuss pt.'s progress, concerns and to ensure consistent communication regarding planning for patient care.
- Consider entering a Violence Risk indicator.
- Include family/guardian in patient education.