

Field Safety Workshop

Malone College Social Work
Department

Introduction: Potential Threats to Field Students

- Inappropriate conduct within the host agency
- Dangerous work environment
- Aggressive/violent clients

Inappropriate Conduct within the Host Agency: Hostile Work Environment

- Inappropriate comments or actions regarding race, gender, sexuality, etc.
- May or may not be directed toward student, but still constitute hostile environment

Inappropriate Conduct within the Host Agency: Sexual Harrasment

- Student is subjected to unwanted sexual advances, suggestive speech, touching, pornographic materials or other verbal or physical conduct of a sexual nature
- Sexual harrasment typically involves a power differential between the perpetrator and the person being harrassed

Inappropriate Conduct within the Host Agency: Other Types of Harrasment

- Any verbal slur, negative stereotyping, hostile or demeaning act (including jokes or teasing) or written or graphic material, that shows animosity, aversion or disparagement toward an individual or group based on race, color, national origin, disability or handicap, age, or sex.

(Adapted from Malone College Personnel Policies, 2004)

Inappropriate Conduct within the Host Agency: Resolution

- Discuss situation with Field Instructor (if he/she is not perpetrator) AND
- Discuss situation with Field Coordinator (Ken) and/or Department Chair (Janie)
- There may be situations where it is inappropriate to discuss the situation with the Field Instructor. The student always has the right to first discuss the situation with a Malone College faculty member

- The student also has the right to press legal charges or pursue a civil lawsuit without approval of faculty members

Dangerous Work Environment

- Social workers often work in dangerous environments:
 - Criminal justice settings
 - Treatment facilities for mentally ill
 - Neighborhoods with high crime rates (agencies may be located here to serve populations-at-risk or social workers may visit homes in the neighborhood.)

- Dementia units in nursing facilities
- Schools with gang/violence problems
- In reality, just about any environment could be dangerous (for example, McDonalds has been the site of numerous mass murders in the past 2 decades)

Environmental Safety Measures

- Clear communication with clients, especially prior to home visit
 - Agency's mission and procedures
 - Expectations of staff and client conduct
 - Instructions to reduce safety hazards (pets, weapons, etc.)
 - Limits/Rules
 - Consequences for failure to adhere to rules

Personal Safety Assessment

- Sensible shoes that allow for quick movements/escape
- Conservative jewelry (long necklaces and earrings can be a liability)
- Avoid religious or political clothing or personal items
- Inform co-workers, supervisor of schedule, especially time of expected return to office

- Carry cell phone (pre-programmed to 911) if possible
- For community/home-based work, maintain car properly, obtain directions, find out where parking is available
- Discuss safety with Field Instructor early in placement

Adapted from Siberski, J. (2003). Home visit safety assessment. **Social Work Today**. 3(14), 19-20.

Violent/Aggressive Clients

- Social Work is a strengths-based discipline wherein we need to work hard to avoid being suspicious or afraid of clients
- However, we also need to acknowledge that social work clients may be capable of dangerous behavior due to a variety of life circumstances (risk factors)

Risk Factors

- Gender (Males more likely to be violent)
- Socio-economic status (poverty related to violence in some studies)
- Poor cognitive functioning (inability to understand or think in a normal manner)
- Substance abuse

Risk Factors, Continued

- Sexual/physical/emotional abuse
- Psychosis (a mental disorder in which people lose touch with reality and may become paranoid and/or violent)
- **PREVIOUS VIOLENCE** (strongest predictor of violent behavior)

Symptoms of Imminent Violence

- Motor activity: agitation, pacing, swinging arms
- Body language: tense, perplexed facial expression, furrowed brow, focusing gaze, muscular tension
- Speech: raised voice, violent statements

Safety Measures: Environmental

- Calm decorations/lighting
- Avoid blind spots or narrow corridors
- Avoid overcrowding
- Avoid excess stimulation
- Seating: Chairs should be level, client should have a clear escape route
- Respect client's personal space (cultural competency issue, as well)
- Make other staff aware of your whereabouts

- Keep client informed as to delays, pertinent information
- Screen for past violence at intake

Safety Measures: Verbal De-escalation

- Speak clearly, slowly and firmly
- Use a calm, open posture
- Reduce eye contact (cultural competence issue, as well)
- Keep both hands visible
- Do not stand if client is sitting
- Do not whisper or talk over patient
- Avoid sudden movements

- Avoid audiences
- Offer support
- Ask questions
- Give time-avoid interrupting
- Use reflective listening (paraphrase client's words, "What I hear you saying is _____")
- Don't take client's comments personally
- Be honest whenever possible

- Provide supportive feedback
- Provide client with choice
- Set limits (“you can do _____, but not _____”)
- Time out (give client a safe place to go to calm down and gather thoughts)

If Situation Escalates

- Summon assistance
- Stay calm
- Do not argue
- Keep client speaking (rather than acting)
- Adopt a non-threatening stance (a side on stance creates a smaller target and protects the vital organs)
- Use surrounding objects as shields if violence occurs

Escape Moves

- Wrist grab: work against attacker's thumb to break grip
- Headlock: push out on attacker's elbow, in/down on attacker's forearm
- Choking: throw arms up and spin
- Bite: push in to release jaw, then remove.
Try to avoid pulling away

A Word About Physical Restraint

- Physical restraint of clients is a controversial issue. Each agency typically has its own policies in this regard. These should be clarified by the intern if not clearly outlined during orientation. Interns should not attempt to physically restrain clients unless they have been trained and authorized by the internship agency to do so. (Inappropriate restraints have resulted in serious injury, and even death, in some cases.)

After Violence Occurs

- Seek medical assistance if necessary (be aware of fluid exchange: blood, saliva, etc.)
- Review incident with other staff/supervisor, **if you feel able physically and emotionally**
- Note nightmares, flashbacks, re-experiencing of trauma. If these persist or worsen, seek psychological treatment

Adapted from Gibb,P. De-escalating and defusing aggression: practical tips. Presentation at Toowong private hospital, retrieved September 11, 2004, from <http://www.Whs.qld.Gov.Au/conference/safetymanage/deescalatingaggression ppt.pdf>