

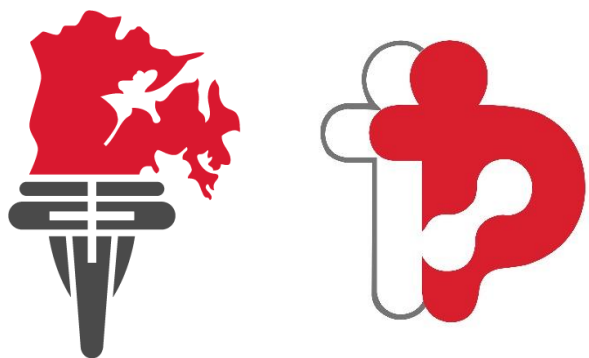
HA Convention 2026

# Workplace Violence Prevention in Occupational Therapy: A Multi-Layered Framework for Staff Safety in Psychiatric Care

Jim CH, Ho CM

Occupational Therapy Department

Tai Po Hospital



**Presented by:**

Coco Jim Chung Ho

SOT, TPH

# Contents

- 01 Workplace Violence (WV) in Psychiatric Occupational Therapy Service
- 02 A Multi-layered Framework for WV Prevention with Measures Across Each Layer
- 03 Implementation Results
- 04 Discussion and Way Forward

# 01

## Workplace Violence (WV) in Psychiatric Occupational Therapy Service



# Workplace Violence in Psychiatric Settings

## What is Workplace Violence (WV)?

Workplace violence is any act or threat of physical violence, harassment, intimidation, or other threatening disruptive behavior that occurs at the work site. (Occupational Safety and Health Administration, 2015)

## WV High Risk Areas in HA

Accident & Emergency

**Psychiatry**

Outreaching

Security

Ambulatory Care (e.g. GOPC, SOPC and ACC)

In-patient ward areas

Patient Relations Unit

(Hospital Authority, 2025)

Psychiatric settings face persistent risk due to patient's behavioral dysregulation, agitation, or psychotic symptoms

# The Occupational Therapy Context

- OT Staff in psychiatric care often conduct assessments and interventions involving close physical interaction
- Frequent exposure to unpredictable behavior patterns
- Balancing safety and therapeutic engagement is a continual challenge



Occupational  
Therapists

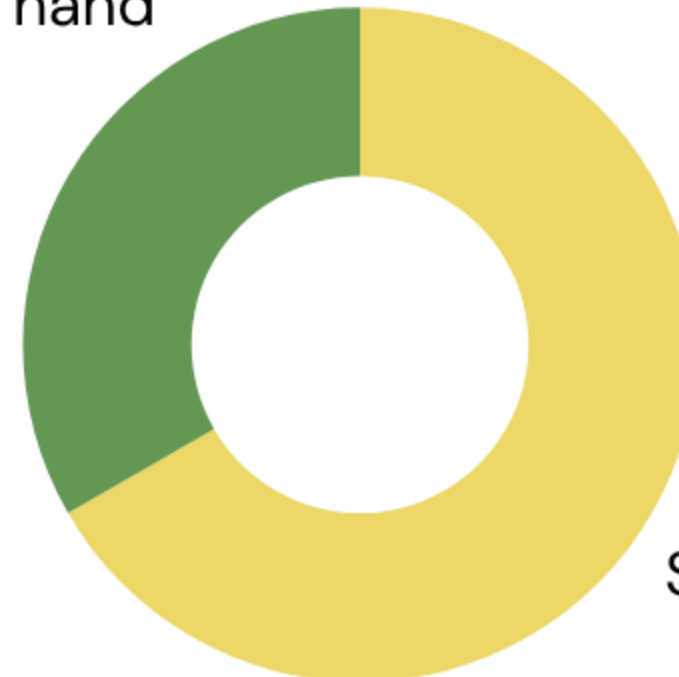


Patient Care  
Assistants

## IOD of Psychiatric Staff due to WV in OTD, TPH (1-3Q2025)

- Total incident: **3**
- SI Level: 1-2

Hitting with bare hand  
33.3%



Scratching with  
bare hand  
66.7%

# Rationale for A Systematic WV Prevention Framework

## **Impact of WV**

- Leads to staff injuries, anxiety and burnout
- Reduces therapeutic engagement and quality of care
- Impacts organizational morale and reputation

## **Need for a Systematic Prevention Framework**

- Emphasize on staff safety as foundational to quality care
- Supports occupational health policies and hospital safety culture

## **Ultimate Goal**




- To strengthen staff preparedness and reduce workplace violence risks

# 02

## **A Multi-layered Framework for WV Prevention with Strategies Across Each Layer**



# The Framework

	Layer	Focus	Objectives
	<b>Primary Prevention</b>	<b>Proactive Risk Reduction</b>	Build staff competence and confidence in preventing violence
	<b>Secondary Prevention</b>	<b>Early Detection and Rapid Response</b>	Strengthen staff's ability to recognize early warning signs and respond swiftly through coordinated, interdisciplinary action
	<b>Tertiary Prevention</b>	<b>Minimizing Harm Post-Incident</b>	Reduce injury after violent incidents while maintaining therapeutic care



# Primary Prevention- Proactive Risk Reduction

## Key Strategies

### Structured Training

**Pre-drill session and e-learning modules on de-escalation techniques** ensure staff are prepared before facing real scenarios

### Updated Guideline

**Continuously updated protocols** reflect best practices and lessons learned, keeping staff aligned with current standards



Pre-drill session

HAHO HR OSH  
De-escalation  
Techniques 緩和激  
化溝通技巧



[觀看](#)

e-learning modules

## 2 Secondary Prevention- Early Detection and Rapid Response

### Key Strategies

#### Simulation & Drills

**Annual workplace violence drills with hospital security** clarify workflows, test readiness, and reinforce coordination across departments



Violence Drill with Security

#### Cross- Disciplinary Learning

**Ward-based drills observed by staff** foster shared learning and adoption of good practices

#### Real-Time Monitoring

**Doorbell cameras in psychiatric treatment areas** provide immediate visibility, enabling timely support during emergencies



Doorbell Camera System

3

# Tertiary Prevention- Minimizing Harm Post-Incident

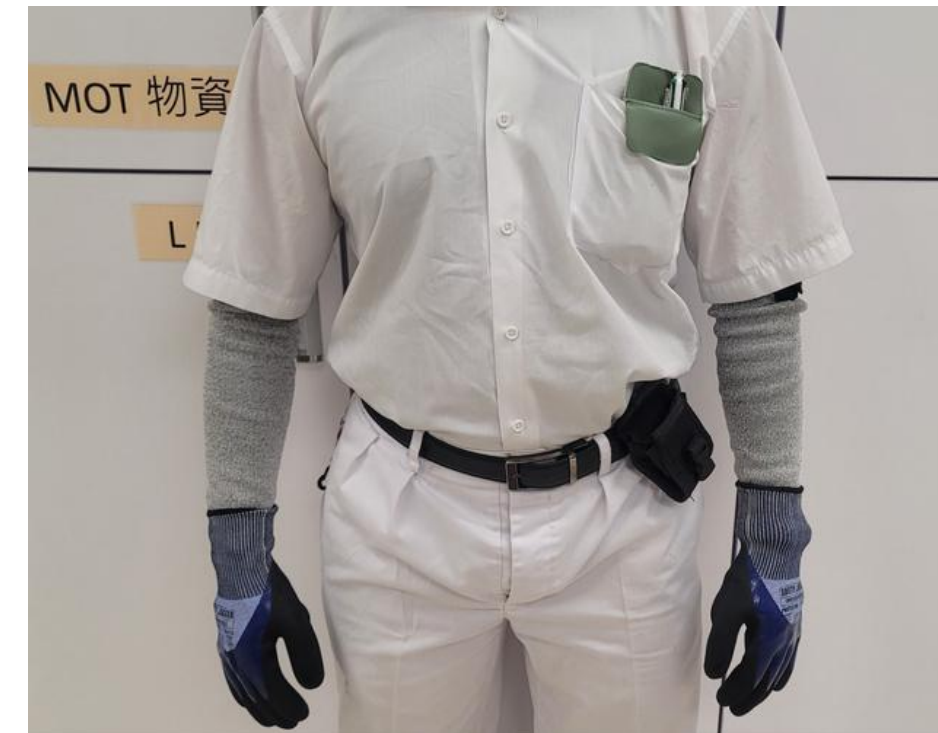
## Key Strategy

### Protective Equipment

**Bite- and scratch-resistant gloves and forearm sleeves** safeguard staff in high-risk wards (e.g. Learning Disability Ward) without compromising therapeutic engagement



Bite- and scratch-resistant forearm sleeves and gloves



Staff wearing protective equipment when providing service

# 03

## Implementation Results



# Evaluation Tools

## 1. Staff Survey

Staff rated the improvements (on a 0–10 point rating scale) following the implementation of three layers of workplace violence prevention strategies, focusing on:

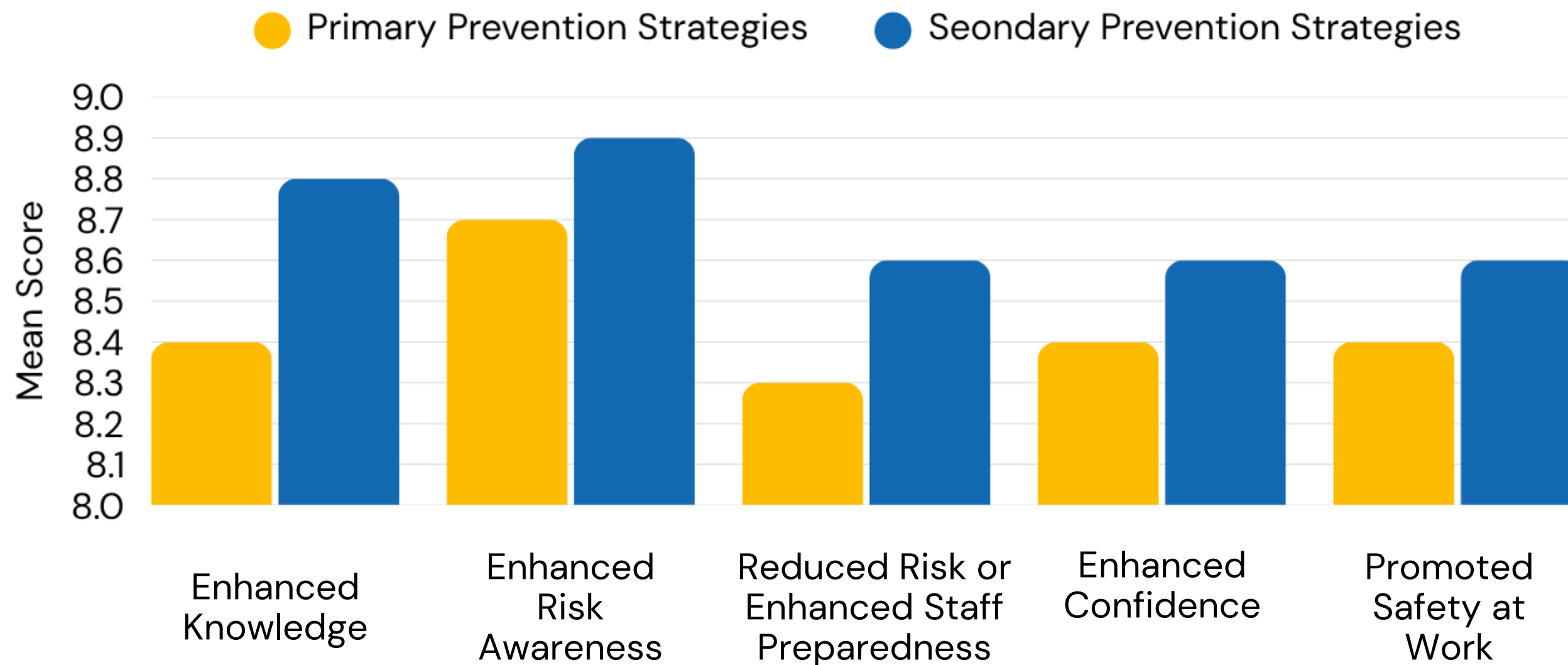
- **Knowledge** of handling workplace violence
- **Awareness** of potential risks.
- **Effectiveness** in reducing WV risk/ injuries and enhancing staff preparedness
- **Confidence** in handling workplace violence
- **Safety** at work.

## 2. Incident Review

**Review of the number of workplace violence incidents in 4Q2025–1Q2026** after full implementation of all strategies

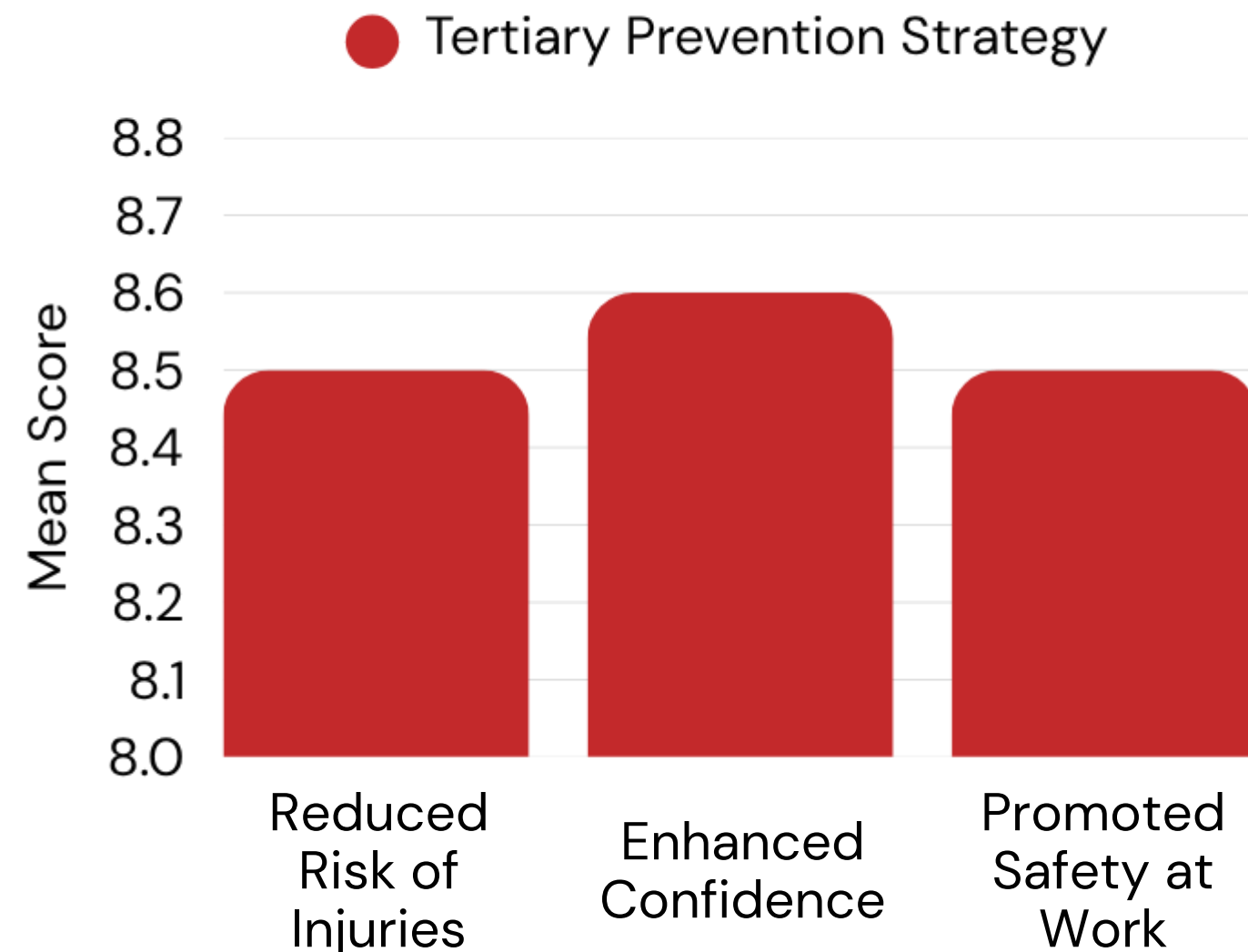
# Staff Survey– Primary and Secondary Prevention

- Number of Psychiatric OT Staff completed the survey: **29**
- **High rating** in all items (>8/10)
- Ratings for **secondary prevention are higher than primary prevention**, highlighting the importance of drills—whether observing or participating—and the role of an effective monitoring system to ensure timely support



# Staff Survey– Tertiary Prevention

- Addition survey questions completed by OT staff working in the **learning disability ward**
- Number of staff completed the survey: **11**
- **High rating** in all items (**>8/10**)
- Highest score in the domain of Enhanced Confidence (M=8.6, SD=1.2), suggesting the greatest effectiveness in **boosting staff's confidence** when managing behaviorally challenging patients during treatment provision



# Incident Review

**0**  
**Incidents**

in 4Q 2025-1Q 2026

Compared to 3 incidents in 1-3Q 2025



**04**

**Discussion and Way Forward**



# ALL 3 Layers of Prevention are essential for tackling WV

---

- Primary Strategies act as a base for staff awareness
- Secondary and Tertiary Strategies provides skills and tools for WV prevention



# Way Forward

## 1 Primary Prevention

### Enhance Preparation Training

Bring in **Personal Safety and Breakaway Training** for staff to further equip their skills in protecting self during WV

## 2 Secondary Prevention

### Enhance Simulation-based Training

- **Case-based Simulation Training** to revisit WV incidents and practice appropriate responses.
- **Involve more disciplines during drills (e.g. psychiatric ward staff)** to enhance coordination during WV incidents

### Improve Monitoring and Alert System

- **Consider applying for hospital CCTV systems** to enhance monitoring during WV incidents

## 3 Tertiary Prevention

### Enhance Access to Protective Equipment

- Bring in **New** equipment to protect staff



E.g. Neck Protector

- Ensure existing equipment in stock and in good condition

**Continuous evaluation and staff feedback** is essential  
to sustain progress and adapt strategies in preventing WV in psychiatric care

**Zero** Tolerance.  
**Zero** Incidents.  
Together, We Prevent Workplace Violence.

Thank you



# References

---

- Occupational Safety and Health Administration (2015). Preventing workplace violence: A road map for healthcare facilities. Occupational Safety and Health Administration
- Hospital Authority (2025). HA Safety Manual Workplace Violence (Chapter 7). Hong Kong: Hospital Authority.