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Implementing the Patient Safety Flag

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Presentation Objectives

- Raise awareness about the daily risk and impact of workplace violence on healthcare workers, and the importance of proactive solutions.
- Describe a multidisciplinary strategy to address workplace violence, including committee structure and staff empowerment.
- Introduce the Patient Safety Flag system, outlining its purpose, function, policy components, and how it promotes a culture of safety.
- Explain how the Safety Flag Review Committee promotes a consistent and equitable approach to placing flags in a patient's medical record.



Facing the Facts: Violence Is a Daily Risk



5x more likely: Healthcare workers face significantly higher rates of workplace violence than other sectors.



62% of nurses say healthcare violence risks patient safety.



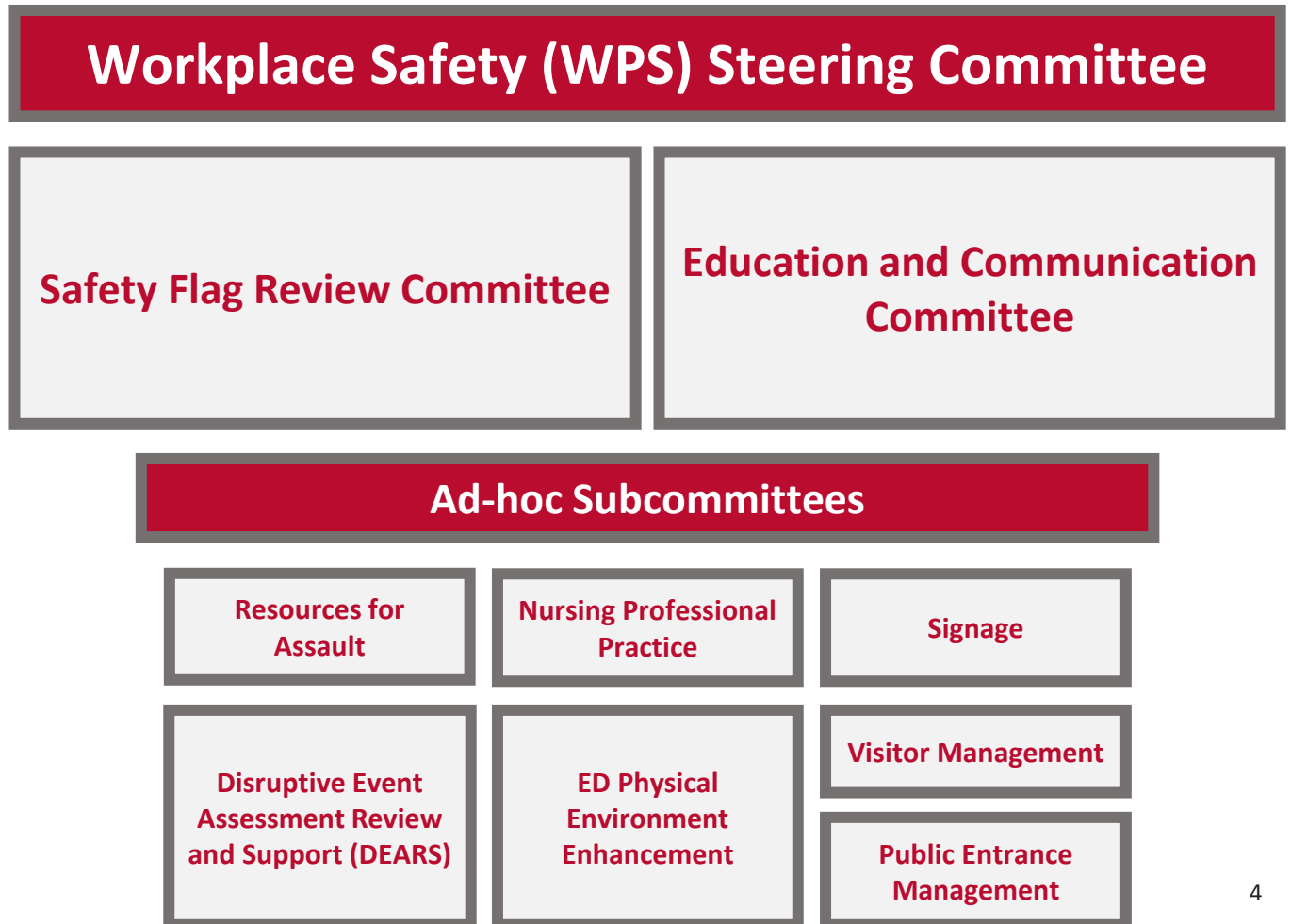
Only 47% of nurses report violent incidents, largely due to time pressures and management inaction.



How to Address WPV

Multidisciplinary Strategy

- Workplace violence affects all areas of healthcare.
- A multidisciplinary steering committee promotes shared accountability, enabling teams to address risks and implement system-wide safety strategies.
- Core committees—along with ad-hoc workgroups, focus on specific issues.



Background

Establishing the Flagging Process

- Reviewed literature and national models to identify best practices
- Engaged directly with the Veterans Affairs (VA) team to understand their patient flagging program
- Formed a multidisciplinary implementation team to design a system tailored to our organization
- Established the Safety Flag Review Committee under the Workplace Violence Steering Committee to provide oversight and ensure consistent application



Patient Safety Flag Policy Overview

Patient Safety Flag Policy Objective: Improve workplace safety through the effective identification, communication, and management of patients with aggressive or violent behavior while delivering high-quality care to patients.

This is achieved by:

- Promoting a culture of safety.
- Establishing a flagging system in the electronic health record (EHR).
- Establishment of interdisciplinary safety flag review committee
- Providing a clear framework
- Providing feedback



Key Definitions to Consider

- **Aggressive/Violent Behavior:** The use of physical force, violence, or other actions that have the capacity to inflict harm or to endanger the physical safety of another person or the property of the university.
- **At-Risk:** A patient who poses a risk for violent or aggressive behaviors.
- **Threatening Behavior:** Conduct which causes another person to believe that their physical safety, or the security of property may be endangered.
- **Flag:** A visual and / or electronic alert used to: inform staff of a risk of violent, aggressive or responsive behaviors signal additional and individualized care-needs and preventive measures.
- **Flagging:** A standardized method to communicate safety concerns to workers. Individual client risk assessment: A systematic process used by clinical healthcare workers for evaluating a patient's likelihood of violent, aggressive or responsive behavior.
- **Patient:** For this policy, a patient is any recipient of care.



What is the Patient Safety Flagging System

The Patient Safety Flag is a visual alert in the Electronic Health Record (EHR) that identifies patients with a history or risk of aggressive or violent behavior.



Purpose

- Communicate critical patient behavior information
- Enhance staff readiness and response through awareness



Key Features

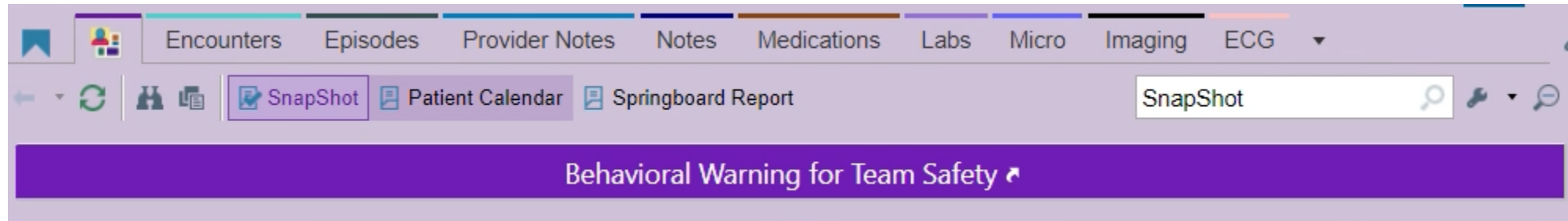
- Purple Banner: Signals a safety flag in the patient's chart
- Behavior Documentation: Documents incidents, triggers, and interventions.
- Committee Review: Ensures that flags are well-documented.



Ethical Considerations

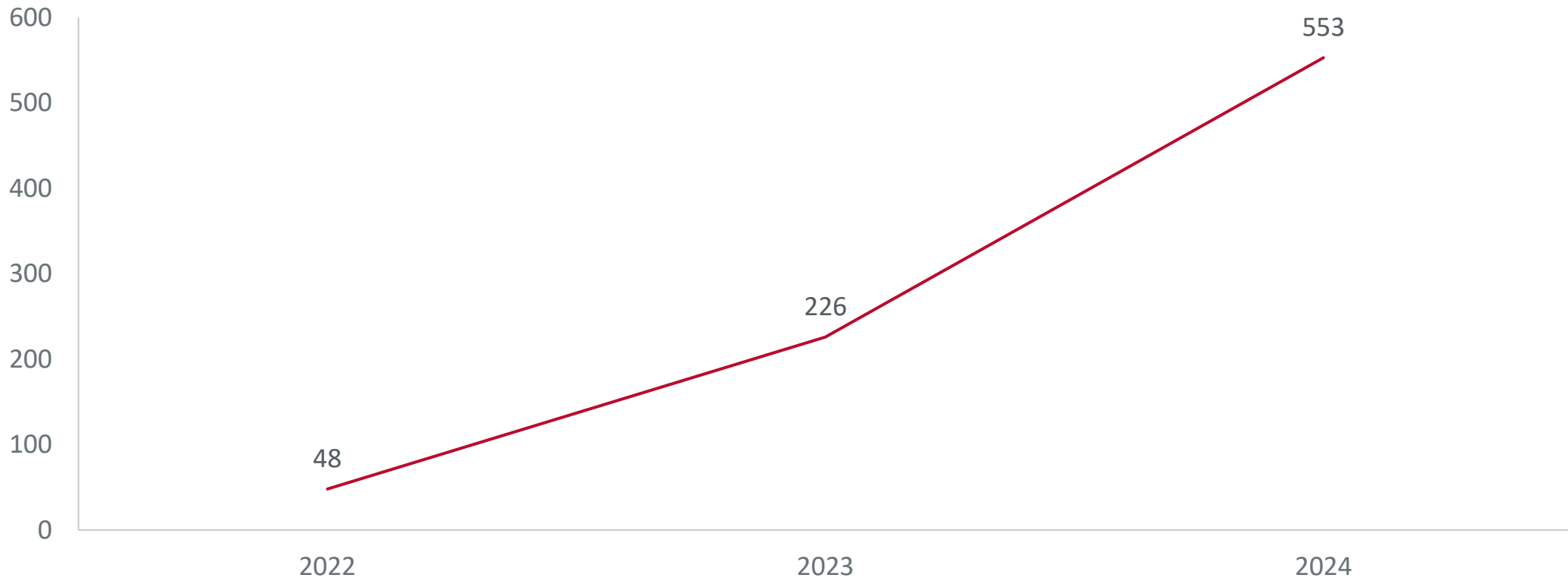
- Balances staff safety with patient dignity.
- Follows trauma-informed care principles to minimize stigma.

Patient Safety Flag Banner



Active Patient Safety Flags

Increased Staff Awareness of Patient Safety Flagging Process Correlates with Growth in Documentation of Disruptive Patient Behaviors (2022–2024)



Why Flagging Matters

Risk Anticipation & Mitigation

Flags identify risk early, enabling de-escalation before emergencies.

Continuity of Care

Visible flags ensure team-wide awareness and consistent care.

Workforce Wellbeing

Flagging empowers staff, promotes safety, and builds trust.



Behaviors that Could Warrant a Flag

Verbal Violence

Repeated acts of verbal aggression or threats that could cause harm.

- Harassment
- Shouting & swearing
- Condescending language
- Hate speech
- Threatening to hit, grab, or otherwise exercise physical force that could cause harm

Physical Violence

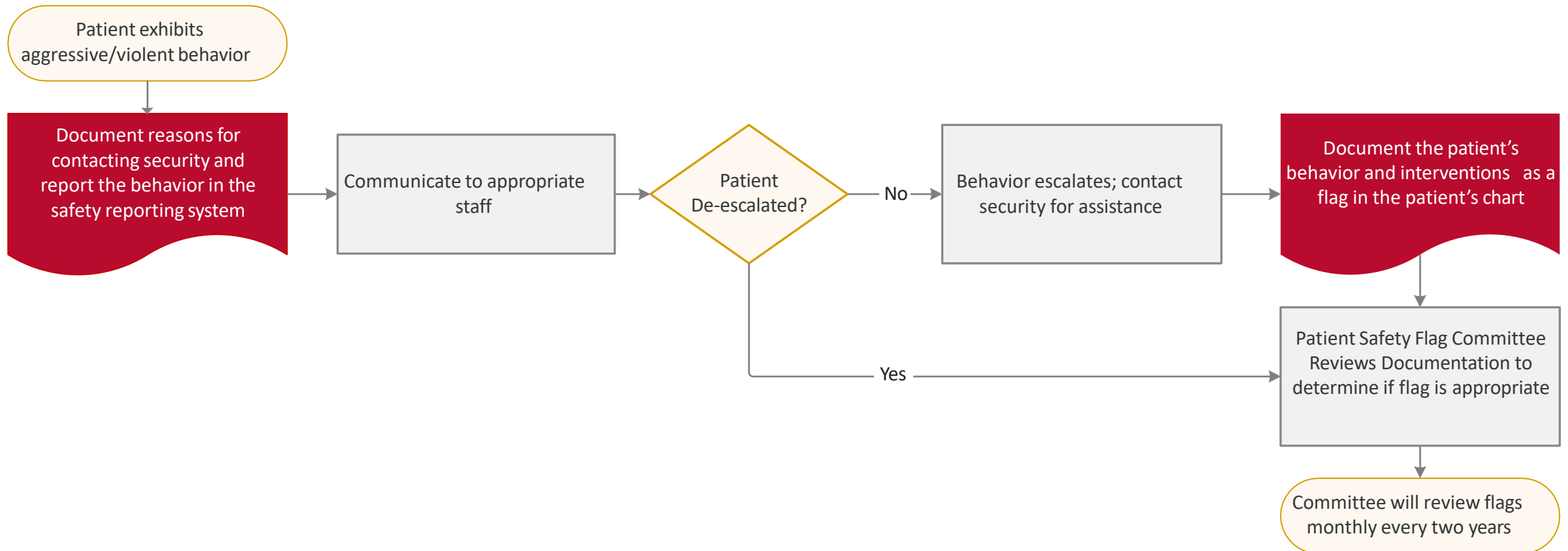
Attempted physical force that could result in an assault or cause harm.

- Hitting
- Pushing
- Punching
- Grabbing
- Kicking
- Pulling
- Spitting
- Scratching
- Choking
- Sexual Assault
- Pinching
- Assault with a weapon



From Assessment to Action: Flag Placement

- Staff with electronic medical record (EMR) access can view and place flags when appropriate.



Patient Notification

- Patients will only be notified if there is a restriction on the place, manner or time of the patient's care (i.e., boundary letter).

Ethical Considerations

- **Maintain patient dignity** by avoiding stigmatization.
- **Apply trauma-informed care** by acknowledging patient history and considering past trauma.
- **Consider safety and ethics** by ensuring the Patient Safety Flag is being used for the intended purpose.



*Each
Patient,
Their Own
Story*



Patient Safety Flag Review Committee

Review Process

Monthly meetings are held to review safety flags placed during the prior month. Data is reported to the WPS Steering Committee.

Membership

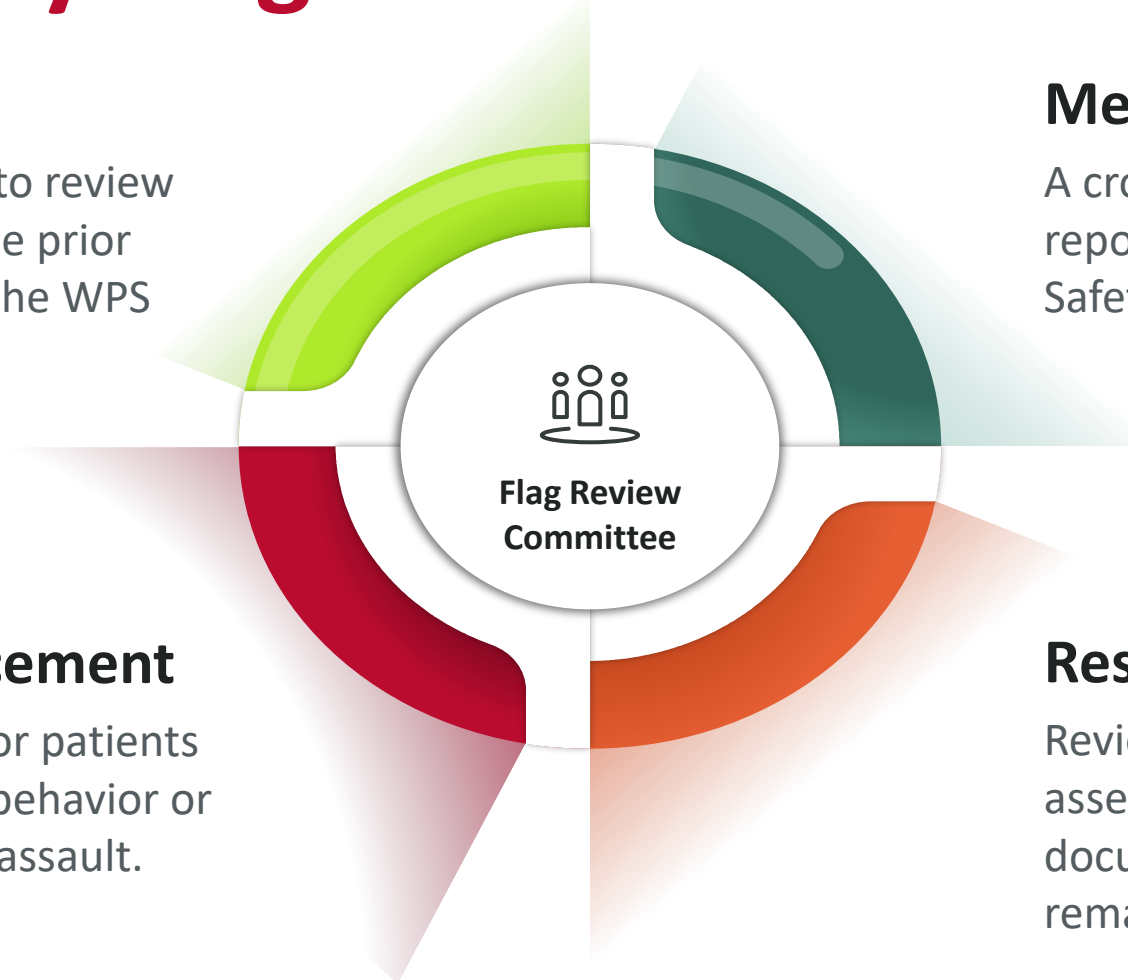
A cross-disciplinary team reporting to the Workplace Safety Steering Committee.

Retroactive Flag Placement

Safety flags may be added for patients with a history of disruptive behavior or following a patient-on-staff assault.

Responsibility

Reviews documentation to assess if the flag is well-documented and if it should remain in place.



Flag Removal Criteria

- Time elapsed since last incident
- Changes in behavior or condition
- Evidence of reduced risk
- Information that is not relevant to the patients care or risk for violence (i.e., criminal charges not related)
- Statements that may indicate bias

Quality Review and Annual Reporting



Annual Report

The committee will provide an annual report to the WPS Steering Committee



Metrics and Outcomes

The annual report includes metrics and outcomes such as:

- Safety flags placed
- Timing of initial flag placement
- Timing of first review
- Flags removed
- Breakdowns by gender, race and other diversity, equity and inclusion metrics (if known)



Quality Review

Report also shared with Quality leadership, as requested

Providing Care to Patients with a Safety Flag



Contact Security

Always encourage staff to contact security if a situation is beyond the point of de-escalation.



Care Planning

Encourage collaboration with behavioral health (e.g., Behavioral Emergency Response Team (BERT)) for psych consults as needed, proactive care planning helps reduce the risk of assault



Patient Dismissal

Patients with repeat aggressive/violent behavior may be subject to dismissal and/or a referral to law enforcement.



Employee Training

- Easy-to-understand materials that explain the goal, purpose, and key components of the Patient Safety Flag Policy, including:
 - How flags are placed.
 - How to document behaviors.
 - When flags are reviewed and removed.
 - Interactive Scenarios: Use real-world examples or case studies that illustrate the proper application of the policy and how to handle flagged patients.
- Environment of Care Rounding: Regular check-ins with unit staff to assess their understanding of the Patient Safety Flag Policy, provide real-time feedback, and ensure consistent application of the flag.



Promoting Safety in Patient Care

Scenario

- Patient X, who cannot communicate verbally, becomes aggressive when loud noise triggers extreme inner ear pain.

Solution

A safety flag is placed for potential aggression. Staff explain noise sensitivity and recommend protective steps, like covering ears or relocating the patient during loud activities.

Outcomes

Staff are informed across the care continuum.

Increased awareness patient needs.

Early intervention reduces the risk of patient escalation.

Safety is improved for both staff and patients.

Addressing Disparities

- Review flagging data by demographic metrics in the electronic medical record
- Ensure consistency in application across patient groups

Tips for Daily Implementation

Integrate into Daily Workflow:

- Review safety flags during huddles or handoffs to proactively plan care and reduce risk.

Post-Incident Support Matters:

- After an assault or safety event, encourage debriefing with the team, offer emotional support, and connect staff to resources like EAP or peer support.

Recap Key Takeaways

- Workplace violence is a daily reality—proactive systems like safety flagging help protect staff and patients.
- A multidisciplinary approach ensures shared accountability and stronger, system-wide solutions.
- The Patient Safety Flag process supports consistent, equitable communication about risk.
- Ongoing metrics and staff feedback drive continuous improvement and reinforce a culture of safety.



Call to Action

- Review your organization's current policies and practices around workplace violence and risk communication.
- Assess whether a patient safety flag system would strengthen your approach to staff and patient safety.
- Engage frontline staff early when developing or refining your flagging process.



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Questions



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Thank You!