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Workplace Violence Considerations Speaker Series

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Threat Assessment and Management in Healthcare



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Threat Assessment and Management in Healthcare

- Workplace Violence in Healthcare
- Differentiating Affective Violence and Targeted Violence
- Overview of Threat Assessment and Management
- Key Components of a Threat Assessment and Management Program
 - Threat Assessment Process
 - Threat Management Process
 - Overview Threat Management Teams
- Review of Available Resources and Key References

Workplace Violence in Healthcare

Definition

Workplace violence (WPV) in healthcare includes any act or threat of physical violence, harassment, intimidation, or other threatening disruptive behavior that occurs at the work site. It ranges from verbal abuse to physical assaults and even homicide (Occupational Safety and Health Administration [OSHA], 2023).

Workplace Violence in Healthcare

Incidence Rates and Trends

- Healthcare and social service workers are **five times more likely** to experience workplace violence than workers in other industries (OSHA, 2023).
- The **rate of nonfatal intentional injuries by another person** in the healthcare and social assistance sector was **10.4 per 10,000 full-time workers**, compared to **2.1 per 10,000 workers** in all private industries (BLS, 2022).
- In a 2022 report by the **American Hospital Association (AHA)**, **44% of nurses** reported experiencing physical violence, and **68% experienced verbal abuse** during the COVID-19 pandemic (AHA, 2022).
- A survey conducted by **National Nurses United** in 2021 found that **31% of hospital RNs** experienced an increase in workplace violence—often linked to staffing shortages and patient frustration during the pandemic (National Nurses United, 2021).

Differentiating Affective Violence & Targeted/ Predatory Violence

Affective Violence (Reactive or Impulsive Violence)

- Affective violence is **emotionally driven, impulsive, and reactive**. It occurs in response to a perceived threat, provocation, or frustration. The primary goal is **emotional expression**—not premeditated harm. This type of violence is typically characterized by high arousal, rage, or panic, and is often spontaneous (Meloy, 2006).
- **Example in healthcare:** A patient with a psychiatric condition strikes a nurse after a medication is denied or a visitor becomes aggressive after hearing distressing news about a loved one.

Differentiating Affective Violence & Targeted/Predatory Violence

Targeted or Predatory Violence

- Targeted or **predatory violence** is **planned, purposeful, and goal-directed**. It is not driven by emotion in the moment but rather by **deliberate intent to harm** a specific individual or group. This type of violence is often preceded by **observable behaviors**, such as planning, surveillance, and leakage (i.e., threats or behavioral cues) (Meloy, 2017; Fein et al., 1995).
- **Example in healthcare:** A disgruntled former employee who blames hospital leadership for their termination begins surveilling a facility and ultimately attempts a violent attack against a specific executive.

Workplace Violence Prevention Team vs. Threat Assessment and Management Team

Workplace Violence Prevention Team

Definition:

A **Workplace Violence Prevention Team** is a **multi-disciplinary committee** responsible for developing, implementing, and overseeing an organization's **workplace violence prevention program**. Its purpose is to **build a safe and respectful workplace culture, educate staff, and establish prevention and response protocols** for all types of workplace violence—including affective violence, such as patient aggression or visitor outbursts.

Primary Functions:

- Establishes and maintains a workplace violence prevention policy
- Conducts incident reviews and root cause analyses of violent events
- Oversees staff education and training on violence prevention and de-escalation
- Collaborates with departments (e.g., HR, Legal, Clinical, Security) to standardize reporting and response
- Develops strategies to reduce environmental and operational risk factors (e.g., long wait times, staffing levels)

Workplace Violence Prevention Team vs. Threat Assessment and Management Team

Threat Assessment and Management Team

Definition:

A **Threat Assessment and Management Team (TAMT)** is a **specialized interdisciplinary team** that uses a **behavioral risk assessment model** to **identify, assess, and manage individuals** who may pose a risk of **targeted or predatory violence**. These individuals often exhibit warning behaviors, fixation, or grievance-fueled motivations. The team's goal is to **interrupt the pathway to violence** before harm occurs.

Primary Functions:

- Investigates concerning behaviors and patterns indicating pre-attack planning
- Conducts structured behavioral threat assessments (e.g., using WAVR-21 or MOSAIC tools)
- Develops individualized threat management strategies (e.g., monitoring, interviews, mental health intervention)
- Engages in ongoing case management and follow-up until risk is mitigated
- Collaborates with legal, HR, behavioral health, and law enforcement when necessary

Overview of Threat Assessment and Management

The Major Steps in the Threat Assessment and Management (TAM) process are:

1. Recognize Concerning Behavior – Threat Identification

Identify early warning signs such as threats, stalking, or fixations that may indicate a risk of violence.

2. Initial Intake and Triage of the Threat

Quickly review the concern to determine the level of urgency and assign team resources appropriately.

3. Information Gathering – Threat Investigation

Collect relevant information from diverse sources (HR, clinical, law enforcement, social media, etc.) to build a behavioral picture.

4. Threat Assessment

Evaluate the likelihood, intent, and capability of violence using structured tools and professional judgment.

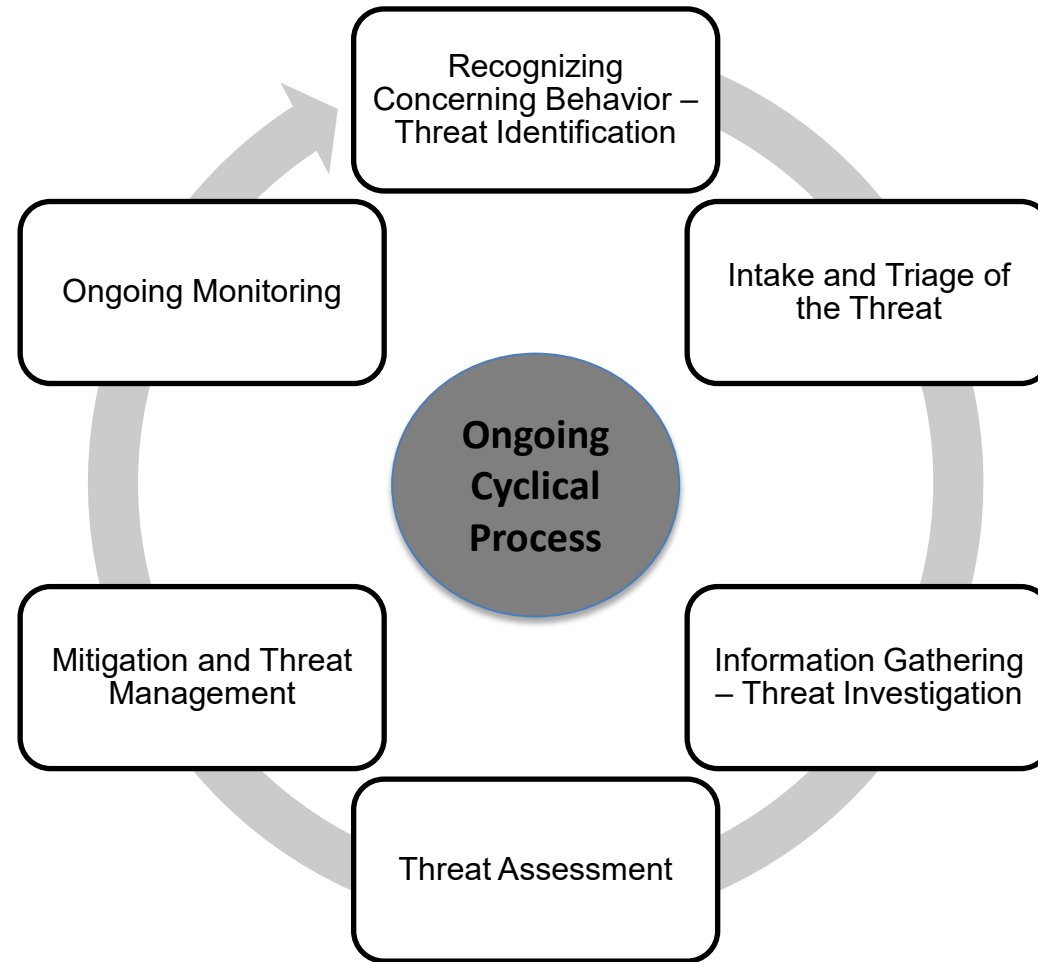
5. Mitigation and Threat Management

Implement tailored strategies—such as counseling, legal action, or monitoring—to reduce or mitigate risk.

6. Ongoing Monitoring

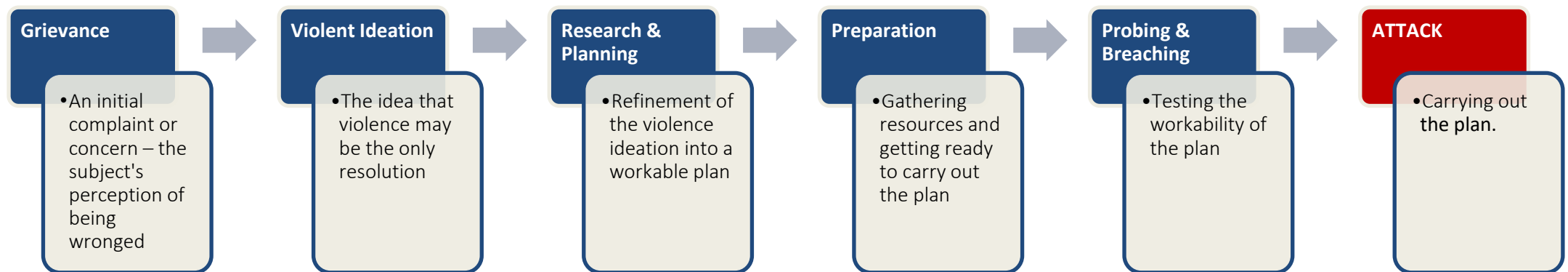
Continuously track the situation, reassess risk as needed, and adjust management strategies.

Overview of Threat Assessment and Management



Key Components of a Threat Assessment and Management Program – Threat Assessment

The Pathway to Violence



Calhoun & Weston's Pathway to Violence, 2016

Key Components of a Threat Assessment and Management Program – Threat Enhancers

Threat Enhancers

These are observable behaviors or contextual factors that **increase the likelihood** that an individual may engage in violence. They help identify escalation and support a higher risk rating.

Examples:

- Expression of **grievance and injustice fixation**
- **Leakage** (communicating intent to harm to third parties)
- **Planning and preparation** (e.g., surveillance, acquiring weapons)
- **Violent ideation or identification** with others who have committed violence
- **Narcissistic injury**, humiliation, or perceived loss of status
- **Substance abuse**, especially when paired with agitation or paranoia
- **History of violence** or criminal behavior
- **Resistance to help** or refusal to engage in mental health treatment

Key Components of a Threat Assessment and Management Program – Threat Mitigators

Threat Mitigators

These are behaviors or conditions that **decrease the likelihood** of violence or indicate a subject is **moving away from the pathway to violence**. They help reduce the urgency or severity of the risk assessment.

Examples:

- **Willingness to accept help** or engage with support services
- **Presence of strong protective factors** (e.g., supportive family, employment)
- **Demonstrated remorse or empathy**
- **Stable mental health care involvement**
- **Redirection of focus or abandonment of grievance**
- **Positive future orientation** (e.g., plans for school, work, or family)
- **Absence of planning or capability** (no access to weapons or target)
- **Compliance** with organizational interventions or law enforcement orders

Key Components of a Threat Assessment and Management Program – Threat Assessment

Levels of Concern in Threat Assessment

Low Level Concern

- No credible threat or signs of planning. Behavior may be inappropriate or disruptive but does not suggest intent to harm. Continue monitoring and document.

Moderate Level Concern

- Subject shows pre-violence indicators such as grievance, fixation, or emotional instability. No clear plan, but potential for escalation exists. Begin case management and monitoring.

High Level Concern

- Strong indicators of targeted violence are present, including planning, access to means, and intent. Individual appears to be on the pathway to violence. Initiate active intervention and threat containment.

Imminent Concern

- Specific, credible threat or observable steps taken toward violence (e.g., acquisition of weapon, surveillance). Immediate law enforcement response and protective measures are required.

Key Components of a Threat Assessment and Management Program – Threat Management and Mitigation

Goals of Threat Management and Mitigation

The primary goals of threat management and mitigation are to:

- **Prevent violence**
- **Protect potential targets**
- **Support the behavioral stability of individuals of concern**

Key Components of a Threat Assessment and Management Program – Target-Based Interventions

Target-Based Interventions

- Focused on increasing the safety and resilience of the potential target(s) of violence.
- May include enhanced physical security, relocation of the target, safety planning, protective escorts, or changes in scheduling and environment.
- Often involves direct coordination with the intended victim to ensure awareness, cooperation, and appropriate safety protocols.

Examples of Target-Based Interventions:

- Providing the target with a safety plan including alternate routes and emergency contacts
- Assigning a visible security escort for high-risk movements
- Installing or enhancing panic alarms or surveillance in the target's workspace
- Temporarily reassigning work duties or relocating the target to a secure area
- Coaching the target on situational awareness and how to respond to direct contact

Key Components of a Threat Assessment and Management Program – Subject-Based Interventions

Subject-Based Interventions

- Focused on influencing the behavior, mindset, or circumstances of the person of concern.
- May include mental health evaluation and support, legal or disciplinary action, monitoring, engagement strategies, or restriction of access to persons or property.
- Goal is to disrupt the pathway to violence and reduce motivation, capability, or opportunity for harm.

Examples of Subject-Based Interventions:

- Conducting a behavioral risk interview with the subject
- Mandating or encouraging a mental health evaluation
- Implementing a no-contact or no-trespass order
- Limiting or revoking access to buildings, information systems, or certain individuals
- Maintaining regular contact through security, HR, or behavioral health follow-up
- Providing the subject with alternative dispute resolution or grievance pathways

Key Components of a Threat Assessment and Management Program- Threat Assessment and Management Teams

Role of the Threat Assessment and Management Team

The Threat Assessment and Management Team (TAMT) serves as a multidisciplinary group responsible for identifying, assessing, and managing individuals who may pose a risk of targeted violence.

The team evaluates concerning behaviors, coordinates interventions, and develops strategic responses to mitigate threats while promoting the safety, health, and well-being of all involved.

Key TAMT Features

- **Multidisciplinary:** Combines input from HR, security, clinical, and legal.
- **Behavior-Focused:** Emphasizes observed behaviors over labels.
- **Preventative:** Aims to stop violence before it occurs.

Key Components of a Threat Assessment and Management Program- Threat Management Teams

An effective TAMT in a healthcare setting should include representation from multiple departments to ensure a holistic and coordinated response to threats such as:

- **Public Safety/Security:** Leads the investigation and physical safety response; coordinates with law enforcement.
- **Human Resources (HR):** Provides background on employment status, workplace behavior, and potential policy violations; supports administrative actions.
- **Behavioral Health/Mental Health Professional:** Offers clinical insights into the subject's psychological risk factors, stability, and treatment opportunities.
- **Legal/Risk Management:** Ensures actions are compliant with regulations and protects the organization from legal liability.
- **Clinical Leadership/Nursing or Medical Staff Representative:** Provides input on patient behavior, clinical risk factors, or workplace dynamics relevant to care settings.
- **Occupational Health:** Assists with employee wellness, workplace accommodations, and medical leave coordination.
- **Patient Experience/ Guest Services:** Key to identification and grievance mitigation.
- **Executive Leadership:** Supports implementation of major interventions, communicates strategic priorities, and ensures institutional backing.
- **Communications/PR (as needed):** Helps manage public messaging in high-profile or media-sensitive cases.

Available Resources and Key References

- **U.S. Department of Homeland Security – Preventing Terrorism and Targeted Violence** - Comprehensive resources on preventing targeted violence and terrorism. <https://www.dhs.gov/topics/preventing-terrorism-and-targeted-violence>
- **U.S. Secret Service National Threat Assessment Center**– Comprehensive guides on threat assessment methodology and managing individuals on the pathway to violence. <https://www.secretservice.gov/protection/ntac>
- **Federal Bureau of Investigation (FBI) Behavioral Analysis Unit & Active Shooter Resources** – Provides threat assessment training resources, case studies, behavioral indicators, and guides related to preventing targeted violence. Includes access to the Behavioral Threat Assessment Center (BTAC) and resources from the FBI's Office of Partner Engagement. <https://www.fbi.gov>
- **International Association for Healthcare Security and Safety (IAHSS)** – Offers guidelines, white papers, and training resources specific to violence prevention in healthcare environments. <https://www.iahss.org>
- **Association of Threat Assessment Professionals (ATAP)** – Offers certification (CTM), professional standards, model policies, and a global network of practitioners. <https://www.atapworldwide.org>
- **National Association for Behavioral Intervention and Threat Assessment (NABITA)** – Offers best practices and certification for multidisciplinary threat teams, with tools relevant to healthcare settings. <https://www.nabita.org>

Some Great Books:

- Scalora, M. J., Simons, A., Zimmerman, W., & Hatch-Maillette, M. (2017). ***Making prevention a reality: Identifying, assessing, and managing the threat of targeted attacks*** (Behavioral Analysis Unit-1, National Center for the Analysis of Violent Crime). Federal Bureau of Investigation. <https://www.fbi.gov/file-repository/making-prevention-a-reality.pdf/view>
- White, S. G., & Meloy, J. R. (2016). ***Threat assessment and management strategies: Identifying the howlers and hunters***. Specialized Training Services.

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