Define and discuss how issues of (emotional and physical) safety are well addressed or challenged in workplace:

1. What is working well?

   Physical environment
   - Outpatient providers – paired outreach vs. lone home visits (as needed); transport risks
   - Ensuring exit access during interviews
   - Flexible pens/heavier chairs
   - Regular drills are held and information from drills used to modify procedures

   Psychological
   - Increased mental health staffing in youth detention centers
   - Debriefings after agitated behavior, outbursts, assault
     - For staff (ensure quick access to immediate support and EAP referral; reintegration if returning on leave)
   - Access to peer support
   - Staff expressed comfort in knowing that other staff “have their back”
     - Staff feel comfortable asking for help with challenging situations

2. What is challenging?

   Physical environment
   - Weak communication regarding events during shift change, interdepartmental activity
   - Crowded lobbies and wait times
   - Lack of privacy during interviews (public spaces at times)

   Psychological (interpersonal)
   - Double shifts/overtime leads to exhaustion, lack of attending behavior
   - Debriefings after agitated behavior, outbursts, assault
     - For staff (ensure quick access to immediate support and EAP referral; reintegration if returning on leave)
   - For clients/patients after witnessing an event are not getting sufficient attention
   - Lack of 1:1 time with patients (hospital issue)
   - “Sometimes” the assumption that because of our line of work that we are “immune” to secondary trauma. Staff hearing day-in-and-day-out about what many of our clients have gone through or are going through is emotionally taxing and can lead to a trauma experience. We need to make sure that staff are given the opportunity to discuss the impact of this with their colleagues.
- Involuntary commitment process and procedure (time lapse waiting for ambulance/police)

**Unknowns?**
- Community settings: uniformed, unarmed/armored guards, security/metal detectors
- Reintegration of/for/with staff after time off
- Comprehensive orientation to physical and psychological safety issues for direct care staff and supervisors upon hire

3. **What suggestions do you have to help improve the emotional and physical safety of the workplace for clients and staff?**

1. Modify the seating in the lobby so clients may feel that they are not “scrunched up” against someone else – expand the seating. Make some more “private” seating areas available.
   a. Enhancement of physical space (“coffee shop” homey, welcoming atrium atmosphere)
   b. Train support staff about trauma and how a crowded lobby and/or emotionally charged events in the lobby can impact clients, and discuss their role in helping enhance the feeling of safety for clients.
2. Ensure privacy for client/patient interviews
3. Increase 1:1 on hospital units
4. Modify policy and procedure on violence to include client/patient debriefing and develop a plan for how we can do this.
5. Pay more attention to the impact of overtime/double shifts on physical and emotional safety for all
6. Identify methods to address secondary trauma and compassion fatigue
   a. Have contact with staff if on leave from work
7. Provide thorough orientation and ongoing education, training and support for all staff, relative to their role and function
8. Invite and include the client/patient’s description of emotional safety in the assessment when assessing for the impact of trauma