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Determining the Prevalence and Impact of Bullying and Cyberbullying as a Contributing Factor in Patients Who Have Been Admitted Into an Inpatients Facility.

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organization can contribute to adverse events. When direct care staff speak up, they often find themselves as second victims from reporting the event. Nonpunitive response to reporting is key to the development of organizational reliability. **SUMMARY OF EVIDENCE:** A review of the Agency for Healthcare Research and Quality (AHRQ) Surveys on Patient Safety Culture™ (SOPST™) results from 2008 to 2018 indicates that staff perceptions of trust in leaders has decreased over the past 10 years. Leaders need to provide a trusting environment where all staff feel safe to speak up. **DESCRIPTION OF PRACTICE OR PROTOCOL:** Strategies for nurse leaders to improve trust include nonpunitive response to error, eradicate uncivil and intimidating behaviors and model the desired behaviors, redesign systems that do not work, value and reward staff who report threats to patient safety, and address stressful work conditions and vicarious trauma that lead to professional burnout. **VALIDATION OF EVIDENCE:** A review of AHRQ SOPST™ results from 2008 through 2018 was conducted. The data were analyzed, trended, and reported. **RELEVANCE OF PMH NURSING:** Psychiatric clients face negativity, discrimination, and stigma. Nurses who trust will have psychological safety to bring to light prejudices and inequities. **FUTURE IMPLICATIONS:** Leaders can develop successful initiatives to improve trust in their organizations by reviewing survey results regularly to understand direct care staff perceptions of trust and concerns of punitive response to reporting.

Cyberbullying: Determining the Prevalence and Impact of Bullying and Cyberbullying as a Contributing Factor in Patients Who Have Been Admitted Into an Inpatients Facility

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PROBLEM STATEMENT: This study will examine the prevalence and impact of bullying/cyberbullying as a factor in youth admissions to an inpatient mental health facility. **THEORETICAL FRAMEWORK:** Bronfenbrenner's ecological systems theory. **METHOD AND DESIGN:** To understand these impacts, the standard of care was modified to include a bullying/cyberbullying survey at intake and discharge with both youth patients and their parents. The survey assessed aspects of perceived safety, how the bullying took place, the impact on the patient, and if it contributed to their admission. The survey data are from June

2018 to January 2019. **RESULTS:** A total of 733 patients had at least one survey in the data set. Of these patients, 26.5% indicated bullying/cyberbullying contributed to admission. When compared to diagnoses of bullying, only 19.2% of those that had indicated bullying on the survey were captured by a diagnosis of bullying/cyberbullying. There was a slight relationship between gender and indication of bullying/cyberbullying as well as patient/parent disagreement about bullying/cyberbullying contributing to admission with parents being more likely to indicate this than the patient. **IMPLICATIONS FOR PRACTICE:** Based on our results, youth mental health inpatient programs would benefit from screening for bullying/cyberbullying. RNs (registered nurses) will develop and/or provide education related to identifying and safely managing bullying/cyberbullying, which is needed for both patients and their families. **IMPLICATIONS FOR RESEARCH:** Future research is needed to understand the disconnect between parental and patient perceptions of bullying/cyberbullying, educational needs at the individual, family, and community levels, and how this information can be best utilized for population health aims of identifying and addressing community-level patterns of bullying/cyberbullying.

Gardening on a Psychiatric Inpatient Unit: Cultivating Recovery

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PROBLEM STATEMENT: Although the healing qualities of nature-related activities have been known and intuitively practiced for centuries, structured gardening for adults on an inpatient psychiatry unit has not been researched. The purpose of our multidisciplinary research team was to explore the experiences of gardening among adults in an acute psychiatric inpatient setting in the participants' own words. **THEORETICAL FRAMEWORK:** The recovery model guided our conceptualization of the research. Personal interviews with 25 inpatients were done shortly after they had attended a gardening activity on an outdoor deck with a raised planter filled with non-toxic herbs, succulents, and flowers. **METHOD AND DESIGN:** A purposefully designed, semistructured guide with neutral questions was used for data collection. Audio recordings were subsequently transcribed, de-identified, and checked for accuracy. Qualitative description inquiry was used by a three-person team to analyze the data. **RESULTS:** Resounding favorable descriptions of the overall experience was evident including metaphors for