Psychiatric Nurse and Mental Health Aides Responsible for Patient's Injuries

written by Nancy Brent | September 5, 2017

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Nursing literature has recently been reporting troublesome incidents of violence against nurses in hospitals and other health care settings. In the following case, however, it was not a nurse who was injured but an involuntarily committed psychiatric patient.[1]

Jason Davis was 28 years old and was diagnosed with schizo-affective and bipolar disorders. He had a history of substance abuse and suicide attempts and had been hospitalized many times since the age of 17. He threatened to kill his father and was committed to a locked wing of a nearby hospital and then transferred to an unlocked unit.[1]

While a patient on the unlocked unit, Davis and another patient eloped, purchased liquor at a nearby store, and proceeded to get drunk in the woods behind the hospital. When their absence was discovered, a state trooper specially assigned to the hospital and a mental health aide were summoned to find the patients and bring them back to the hospital.[2]

The patients were returned to the locked unit of the facility in order to be evaluated in a safe environment due to their drinking. Unfortunately, the patients were not cooperative when they arrived at the locked unit. According to one staff member, both were "loud and demanding' and there was "continuing escalation" between the patients and the nurses on the unit. Another report indicated that Davis said things like "I'll kill you" and "I'll break your neck" while looking at the staff and mental health aides.[2]

The head nurse ordered the patient to be restrained.

When attempting to take Davis to a seclusion room and be put in restraints, further threats from Davis were spoken. Then, Davis kicked one of the mental health aides in the stomach.

Several staff tried to physically restrain Davis and were eventually successful. However, once subdued, one of the mental health aides punched Davis in the head four or five times. The head nurse on the unit watched the mental health aide punch Davis and did nothing to intervene.[2]

When the restraint of Davis was completed, the head nurse got on her knees in front of Davis and said "This is what you get when you act–this is what you get when you act like this".

The head nurse's report about Davis' restraint stated that it was unknown when or how Davis' injuries

were sustained. She also included that she did not know what precipitated the “occurrence”. Last, in an internal facility complaint, she described the mental health aide’s arrest who punched the patient by security police to be “improper and disturbing”.[2]

Davis filed a suit alleging a violation of his federal civil rights under 43 U.S.C. Section 1983, alleging that the defendant mental health aides violated his due process rights under the 14th Amendment by using excessive force and that the mental health aides and the head nurse failed to prevent the mental health aide’s use of excessive force when he was punched, thus violating his right to freedom from unreasonable bodily restraint.[2]

The jury returned a verdict against six of the mental health aides, including the one who punched Davis, and against the head nurse.

Davis was awarded $100,000 in compensatory damages. Each defendant was assessed punitive damages as well. The head nurse’s portion of the punitive damages award was $250,000.

The defendants appealed the jury verdict arguing several grounds, including that was insufficient evidence for a reasonable jury to have found any of Davis’ constitutional rights were violated and that they were entitled to qualified immunity due to their status as governmental employees.

After a careful analysis of the testimony at trial, the federal appellate court affirmed the judgment against each of the defendants/appellants. Of particular interest is the court’s words about the conduct of the head nurse.

Because mental health aides are supervised by nursing staff generally and the head nurse specifically, she had a duty to intervene and make a difference in the outcome of this case. Rather than intercede, she (and other nurses not named as defendants) simply watched the altercation. Her breach of her legal and ethical responsibility to stop the escalation and prevent the use of excessive force resulted in liability for her and for the mental health aides.

This case is particularly important for those of you who work in mental health. Unfortunately, psychiatric patients can be anxious, threatening, and may become difficult to control. Even so, you must remain calm and follow protocols established to deal with potentially violent patients. It is never appropriate to act in the manner that the mental health aides and head nurse did here.

Likewise, as a head nurse, or as a staff nurse, for that matter, it is essential that those you supervise are properly instructed on how to handle a situation in which a patient may lose control. Make sure your staff is properly trained when confronted with a potentially violent patient. And, when necessary, you must intervene to prevent injury to a patient.

The head nurse further created legal and ethical liability for herself by making false statements in documents concerning the incident. It is not known why she did so, but perhaps she realized she breached her duties to the patient and did not want to admit this in writing.

Whether working on a mental health unit or elsewhere, nursing leadership is vital to prohibit patients being treated in the manner this patient was treated. Clearly, appropriate intervention was needed in order to prevent injury to the patient, the other patients on the unit, and to staff. Had the head nurse been a leader in the true sense, Mr. Davis' rights as a patient and a human being would have been preserved.

FOOTNOTES

1. Davis vs. Rennie, et. al., 264 F. 3d 86 (2001). (The description of the altercation is in summary form. If you are interested in reading the entire case, place the case information in your search bar.)
2. "Use of Excessive Force: Court Upholds Psych Patient's Lawsuit Against Nurses for PTSD", Legal Eagle Eye Newsletter for the Nursing Profession, December, 2001, 3.