MICHIGAN State FACE Program
Fatality Assessment & Control Evaluation

General Industry Fatality Summary

INCIDENT FACTS

REPORT #:
22MI033

REPORT DATE:
April 19, 2024

INCIDENT DATE:
March 20, 2022

WORKER:
30-year-old

INDUSTRY:
Outpatient Mental Health and Substance Abuse Centers

OCCUPATION:
Mental Health Technician

EVENT TYPE:
Struck By

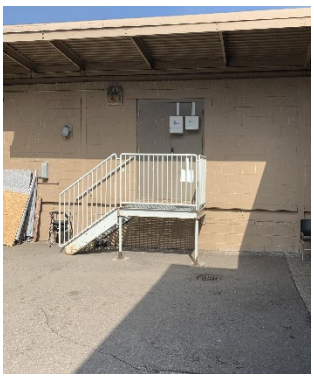

Figure 1. Side entrance of the building where the shooting occurred.

Mental Health Technician Dies as The Result of a Shooting

SUMMARY

A 30-year-old Mental Health Technician (MHT) died after being shot with a firearm multiple times during a confrontation outside of the clinic at which he worked. The clinic is an outpatient treatment facility for drug and alcohol addiction rehabilitation. This facility provides primary and dental care in addition to mental health services for its residents. Part of the facility is a Psychiatric Urgent Care Unit which is utilized by hospitals and police departments local to the area. The facility is staffed 24/7 and some patients stay overnight.

The confrontation occurred in the early afternoon outside of the building in a common outdoors area. The individual who attacked the MHT was known to the staff at the facility and had been banned from the facility due to previous behavior/incidents (some including violence.) The decedent and another MHT were called to escort the attacker off the premises, and in the altercation, both were shot. The decedent was shot in the hand, shoulder, and head. The other MHT was shot in the arm.

The facility, at the time of the incident, was an open campus and people were able to access and exit the facility without any identification check or screening of possessions, such as checking for weapons. A handheld metal detector wand had been available at the time of the incident but was rarely utilized. Staff members had (and continue to have) access to phones and radios to call for assistance when necessary. Panic buttons are also present in some locations. MHTs are the primary position to help other members of staff when assistance with de-escalation and/or physical restraint is required for a patient. At the time of the incident, MHTs were also the position to act as security for unauthorized visitors to the facility.

Physical altercations had occurred before this incident but were not common, according to employees. The decedent had one notable incident in 2021 where a patient had bitten the pinky finger off the decedent's hand. At the time of the shooting, the decedent had recently returned to work after being off for a period of time recovering from this prior injury.

After the shooting incident, the facility has ceased to be an open campus. The facility now regularly utilizes the outer perimeter gate which is visible in the satellite image below. (Figure 2) Additionally, the facility hired armed security officers to check the identification of anyone entering the premises and to respond to violence incidents. The facility also installed a mobile metal detector in the vestibule past the main entrance to the building. MHTs continue to handle the screening process of having individuals entering the facility walk through the metal detector and check their belongings.

All employees are now provided with training in Crisis Prevention Institute (CPI) De-escalation and in the "Handle with Care" behavior management system. This training is intended to be given during the orientation period for new hires and refreshed annually. However, prior to the incident not all employees were provided with this training. The decedent had received this training before the shooting and the other MHT involved in this incident also had received his CPI training prior to the incident.

REQUIREMENTS

Employers must:

- Furnish a place of employment that is free from recognized hazards that are likely to cause death or serious physical harm to an employee. See 408.1011 (a): Act 154

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RECOMMENDATIONS

MIFACE investigators concluded that, to help prevent similar occurrences, employers at psychiatric facilities should:

- Be aware that their facility may have an increased likelihood of physical assault against staff members. Managers of such facilities should develop and implement a comprehensive written workplace violence injury prevention program.
- Develop and implement a standard response outline for when unauthorized visitors, especially those with a history of violence, are present on the premises, including staff communication and specific training in responding to a potential active shooter.
- Take measures to ensure that individuals, who have previously been banned from the facility, are prevented from entering the facility grounds again, thereby removing the need for a confrontation.
- Develop and implement mechanisms for staff review of both verbal and physical escalating assault by patients, with mandatory, non-punitive reporting of such events. Ensure that these records are regularly reviewed by any staff member interacting with these patients to learn from previous incidents of violence.

CITATIONS

MIOSHA General Industry Safety and Health Division issued the following serious and other-than-serious citations at the conclusion of its investigation.

- Serious: 408.1011(a): Act 154 Michigan Occupational Safety and Health Act
  - An employer shall furnish to each employee, employment and a place of employment that is free from recognized hazards that are causing, or are likely to cause, death or serious physical harm to the employee.
- Other-than-serious: 408.22139(1): ADM Part 11, Recording and Reporting of Occupational Injuries and Illnesses
  - The employer did not report to MIOSHA within 8 hours an employee fatality that occurred on March 20, 2022.

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Figure 2. A satellite view of the facility grounds. A red box is drawn around the area at which the shooting occurred. A green arrow points to the (open) perimeter gate. A blue arrow points to the front entrance of the facility.

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