



Workers Safety: Workplace Violence

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Objectives Understanding!

Objectives:

- Recognize risk factors
- Prevention strategies
- Identify Safety Tools
- Understanding Reporting Requirements

Workplace Violence in Healthcare Settings

Bureau of Labor Statistics (BLS) data show that between 15,000 and 25,000 assaults, which resulted in days away from work have been reported annually over the last ten years. Two-thirds of these injuries were in the healthcare setting each year. During the same time, workplace homicides have ranged from 400 to 600 annually.



Workplace Violence in Healthcare Settings

- However, data from a number of sources provide a measure of the extent of the problem and the impact on clinicians. Bureau of Labor Statistics data from 2000 show that “48 percent of all non-fatal occupational assaults and violent acts occurred in health care and social services” settings.⁵ A Department of Justice survey for 1993 to 1999⁶ states “[t]he average annual rate for non-fatal violent crime for all occupations is 12.6 per 1,000 workers. The average rate for physicians is 16.2; for nurses, 21.9; for mental health professionals, 68.2; and for mental health custodial workers, 69...Of psychiatrists responding to surveys, the average rate during their careers was 40%.”
- Additionally, a significant percentage of medical residents are assaulted by patients. “Surveys of psychiatric residents found an assault rate ranging from 19% to 64%; rates of repeated assaults ranged from 10% to 31%.”⁶ One survey of psychiatric residents found that the problem of patient violence directed at residents is “significant” and “many residents do not report incidents to program directors or to security, and ... some respondents said they had been so severely affected by a violent incident that it caused them to reconsider their choice of specialty.”⁷



Is it Part of the Job?

Violence is NOT part of your job

verbal threats
stalking
cyber-stalking
sabotage
swearing
intimidation
physical threats
name calling
screaming
yelling
pranks
hitting
throwing objects
slapping
scratching
excluding
insinuation
domestic violence
rude gestures
vandalism
assault
biting
ostracism
sexual harassment
hazing
kicking
rumours
innuendo
grabbing
hair pulling
choking
punching
bullying
attacks
inappropriate comments



endworkplaceviolence.ca



What is Workplace Violence?

- Workplace violence ranges from offensive or threatening language to homicide. National Institute for Occupational Safety and Health (NIOSH) defines workplace violence as violent acts (including physical assaults and threats of assaults) directed toward persons at work or on duty.

Examples of violence include the following:

- **Threats:** Expressions of intent to cause harm, including verbal threats, threatening body language, and written threats.
- **Physical assaults:** Attacks ranging from slapping, pushing and beating to rape, homicide, and the use of weapons such as firearms, bombs, or knives.
- **Muggings:** Aggravated assaults, usually conducted by surprise and with intent to rob.



Examples of Workplace Violence



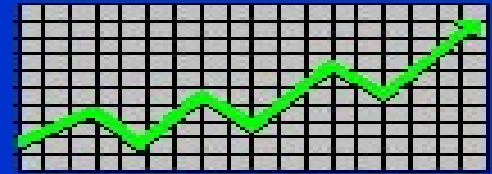
Beatings	Psychological Traumas
Stabbings	Threats or Obscene Phone Calls
Suicides	Intimidation
Shootings	Harassment of any Nature
Rapes	Being Followed or Shouted at
Near-Suicides	Bullying

Types of Workplace Violence

Violence by Stranger's	Violence by Co-workers
Violence by Customers (patients, patient families/friends, vendors)	Violence by Personal Relationships

Data

Statistics



- Most common was simple assaults: 1.5 million a year
- Aggravated assaults: 396,000
- Rapes and sexual assaults: 51,000
- Robberies: 84,000
- Homicides: nearly 1,000

Cont'd

Economic Impact of Workplace Violence

- Cost 500,000 employees 1,175,100 lost work days each year
- Lost wages: \$55 million annually
- Lost productivity, legal expenses, property damage, diminished public image, increased security: \$ billions \$



Cont'd

Assaults and Homicides



Workplace Violence in Healthcare Settings

Workplace violence:

- Exposed to many safety and health hazards
- At high risk for experiencing violence in the workplace
- Hospital workers are assaulted at rates 4 times the average for other private-sector industries

Who is at risk?

Although anyone working in a hospital may become a victim of violence, physicians, residents, nurses and aides who have the most direct contact with patients are at higher risk.

Other hospital personnel at increased risk of violence include emergency response personnel, hospital safety officers, and all health care providers.



What are the effects of violence?

- The effects of violence can range in intensity and include the following:
- Minor physical injuries
- Serious physical injuries
- Temporary and permanent physical disability
- Psychological trauma
- Death



Violence may also have negative organizational outcomes such as low worker morale, increased job stress, increased worker turnover, reduced trust of management and coworkers, and a hostile working environment.

What are the risk factors for violence?



The risk factors for violence vary from hospital to hospital depending on location, size, and type of care. Common risk factors for hospital violence include the following:

- Working directly with volatile people, especially, if they are under the influence of drugs or alcohol or have a history of violence or certain psychotic diagnoses
- Working when understaffed-especially during meal times and visiting hours
- Emergency Rooms
- Geriatric Units
- Transporting patients
- Long waits for service
- Overcrowded, uncomfortable waiting rooms

Additional Risk Factors

- Access to Fire Arms
- Unrestricted movement of the public
- Working Alone
- Inadequate Security Areas, (poorly lite areas)
- Unrestricted movement of the public
- Lack of staff training and policies for preventing and managing crises with potentially volatile patients

Prevention: OSHA Workers Safety Plan Components

1. Management commitment and employee participation.

- Leadership [HRETHEN ChangePackage CultureofSafety.pdf](#),
- Policies, Procedures and Plans
- Committees



Prevention: Cont'd

2. Worksite analysis.

- Risk Analysis
- Gap Analysis

[preventingviolenceinhealthcaregapanalysis.pdf](#)

Prevention: Cont'd

3. Hazard prevention and control,

- Hazardous Vulnerability Analysis

[Copy of Community HVA.xlsm](#);

[Copy of kp incident log_hva_template.xlsb](#)



Prevention: Cont'd

4. Safety and health training

- Education



Prevention: Cont'd

5. Recordkeeping and program evaluation

- Incident Reports
- Data and Data Reporting [worker safety fact sheet.pdf](#); <https://www.hretcds.org/>
- Evaluation

Full Time definitions

The term "[full-time equivalent](#)" refers to the full-time equivalent of a company's part-time employees. It is often used to calculate the size of a company based on hours worked by all W-2 employees.

- The number of full-time equivalent employees (FTEs) is equal to the company's full-time employees plus full-time equivalent part-time employees rounded to the lowest whole number.
- To calculate the number of FTEs, the company should do the following:
- First, the company should determine the number of full-time employees (i.e. those working 30 or more hours per week).
- To calculate the full-time equivalent of part-time employees, a company should add the number of hours worked by part-time employees and divide the total by 120.
- The sum of the full-time employees and the full-time equivalent of the part-time employees is the number used to determine whether a company is an applicable large employer.

Definition of Full-Time Employee

- Full-time employee is, for a calendar month, an employee employed on average at least 30 hours of service per week..



Abatement Methods

- Implementing Engineering Controls
 - Locking all unused doors
 - Bright, effective Lighting

- Administrative Controls
 - Staff training
 - Establish/Training on security and communications systems/protocols

HRET-HIIN

Data

- Fact Sheet

Reporting- Monthly

- <https://www.hretcds.org/MeasureSelect.aspx>

Guide

- <http://www.hret-hiin.org/topics/culture-of-safety.shtml>

Resources

- Webinars, List Serve and tools



Summary

- No universal strategy exists to prevent violence
- Risk factors vary from facility to facility
- Develop multidisciplinary committees to identify risks
- Develop Work Place Violence Prevention Plan
- Staff should Actively participate in safety training programs
- Report Data

Recap!

- Recognize Risk Factors
- Prevention Strategies
- Identify Safety Tools
- Understanding Reporting Requirements



Resources

- https://www.osha.gov/OshDoc/Directive_pdf/CPL_02-01-058.pdf
- <https://www.osha.gov/Publications/osha3148.pdf>
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3638847/>
- <https://www.cdc.gov/niosh/docs/2002-101/default.html>
- <https://www.osha.gov/dte/library/wp-violence/healthcare/slide19.html>
- <http://bcfed.ca/campaigns/endworkplaceviolence>

Questions!



Thank you,

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