



Effective Solutions and Risk Management Strategies to Mitigate Workplace Violence

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PRESENTATION AGENDA

- Recognize the prevalence of workplace violence in healthcare
- Identify the various types of violence
- Discuss the unique challenges in healthcare
- Identify contributing factors to violence and the view of the providers
- Examine the role(s) of the healthcare entity in the face of violence
- Identify risk management and mitigation recommendations



Workplace Violence in Healthcare: Prevalence

Types of Violence

PREVALENCE: STATISTICS



- Occupational Safety and Health Administration (OSHA), approximately 75 percent of nearly 25,000 workplace assaults reported annually occurred in healthcare and social service settings
- The National Crime Victimization Survey showed health care workers have a 20 percent higher chance of being the victim of workplace violence than other workers
- Bureau of Labor Statistics (BLS) data show that violence-related injuries are four times more likely to cause health care workers to take time off from work than other kinds of injuries
- The Joint Commission's (TJCs) Sentinel Event Alert #59; April 2018 identified violence of homicide, sexual assault, or physical assault of hospital staff members

<https://www.securityindustry.org/wp-content/uploads/2017/11/Workplace-Violence-In-Health-Care-Settings-IAHSS.pdf>;

<https://www.bjs.gov/index.cfm?ty=pbdetail&iid=2377>

https://www.jointcommission.org/assets/1/18/SEA_59_Workplace_violence_4_13_18_FINAL.pdf

WHAT IS WORKPLACE VIOLENCE?



- The CDC 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.”
- Intention: Control or cause, or is capable of causing, death or serious bodily injury to oneself or others, or damage to property
- *Verbal, written, or physical aggression; abusive behavior toward authority, intimidating or harassing behavior, and threats*
- OSHA defines the role of the employer: Occupational Safety and Health Act of 1970 General Duty Clause Section 5 (a)(1)

<https://www.reliasmedia.com/articles/140324-enough-is-enough-osh-a-to-issue-regulation-on-violence>

<https://www.cdc.gov/niosh/topics/violence/>

TYPES OF VIOLENCE



Violence: Types

- Type I: Violence by Strangers
- Type II: Violence by Patients
- Type III: Violence by Co-Workers
- Type IV: Violence by Personal Relationship: Domestic



Unique Challenges in Healthcare

Contributing Factors to Violence

Unique Challenges in Healthcare

- Culture of Healthcare
- Underreporting and acceptance of workplace violence
- Vulnerable areas in the workplace

CONTRIBUTING FACTORS TO VIOLENCE



Common Contributing Factors OSHA and TJC:

- Lack of training and policies for staff
- Perception that violence is tolerated and reporting incidents will have no effect
- Inadequate security staff
- Unrestricted public access
- Working with people with a history of violence or altered mental status or under the influence of drugs
- Poor environment design that may block vision or escape routes
- Working alone; understaffing in general, and especially during meal times and visiting hours
- Long wait times and overcrowded waiting rooms



Strategic Approach

Risk Management & Mitigation Strategies

- Define the culture of the organization
 - What is the organization’s tolerance for violence in the healthcare work space?
 - How does the organization define violence?
- Workplace Violence Prevention Program (multidisciplinary approach)
 - Risk Manager; Patient Safety Officer; Safety Manager
 - C-suite
 - Security and Security Committee
 - Management /Supervisors
 - Employees
 - Post incident leaders
 - Therapeutic strategists; post incident “debriefing”; reporting to regulatory bodies/authorities
 - Supportive resources for staff

Assessment Exterior

- Building surveillance
- Eliminate hiding areas in places surrounding the building
- Exit and Entrance doors; windows

Assessment Interior

- Security/controlled access to work areas
- Employees must visibly display employee ID badges at all time
- Visitor sign-in with proper visitor badges
- Mounted area mirrors
- Training: know signs and symptoms of an aggravated person; know the routes to escape

Assessment of the Environment of Care

- Evacuation and Lockdown areas
- Identify vulnerable areas versus “Safe Zones” “Shelter in Place”
- Remove access to sharp objects from the view that can be used as a weapon
- Code words recognized by coworkers to indicate you may need assistance
- Include Periodic Risk Assessments as Include assessment for the potential vulnerabilities
- Encourage staff to have environmental awareness of surroundings

- Healthcare Workplace Violence Prevention Act: proposed in 2018
 - Healthcare workers in inpatient facilities were five to twelve times more likely to encounter a non-fatal workplace violence than all other workers (2016, GAO)
 - Direct OSHA to create a standard that would require healthcare entities to develop and implement facility and unit specific workplace violence prevention plans
 - The Bill stresses prevention, training and worker participation
 - Healthcare Entity: Assess and correct environmental risk factors, patient specific risk factors, staffing and security system sufficiency

RISK MANAGEMENT STRATEGIES



- Healthcare entities/providers should have an Emergency Preparedness plan; Workplace Violence Prevention considerations should be included
- Data: metrics used to trend the frequency and severity of violence
- Develop quality improvement initiatives to reduce incidents of workplace violence
- Recognize and understand your mandated reporting requirements with respect to violent encounters.
- Train all staff including security: response to emergency codes; survey staff
- Maintain collaborative relationship with local law enforcement
- Remember resources and support services for the Second Victim
- Evaluate the physical environment and actively evaluate the environment of care

RESOURCES



- The Security Industry Association (SIA) Health Care Security Interest Group and International Association for Healthcare Security & Safety Foundation (IAHSSA): <https://www.securityindustry.org/wp-content/uploads/2017/11/Workplace-Violence-In-Health-Care-Settings-IAHSS.pdf>
- The Joint Commission (TJC): Sentinel Event Alert (sea), Issue 59: Physical and Verbal Violence Against Health Care: https://www.jointcommission.org/assets/1/18/SEA_59_Workplace_violence_4_13_18_FINAL.pdf
- American College of Emergency Physicians (ACEP): Violence in Emergency Departments is increasing, harming patients, New research finds. Drs. Terry Kowalenko, Vidor Friedman and Leigh Vinocur present scientific data on emergency department violence at a press conference at ACEP18 in San Diego. <https://www.beckershospitalreview.com/quality/nearly-8-in-10-er-physicians-say-violence-affects-patient-care.html>
- Understanding the Challenge-OSHA: <https://www.osha.gov/Publications/OSHA3826.pdf>
- Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers: <https://www.osha.gov/Publications/osha3148.pdf>
- Lawmakers seek OSHA standard on workplace violence prevention in health care. March 2018; Safety +Health The official Magazine of the National Safety Council (NSC) Congress & Expo: <https://www.safetyandhealthmagazine.com/articles/16776-lawmakers-seek-osha-standard-on-workplace-violence-prevention-in-health-care>
- Workplace Violence Risk Assessment Toolkit for Acute Care: <https://www.pshsa.ca/wp-content/uploads/2017/05/VPRASAEN0417-Workplace-Violence-Risk-Assessment-Acute-Care-Toolkit-V1.1-2017.04.25.pdf>
- Centers for Disease Control NIOSH: <https://www.cdc.gov/niosh/topics/violence/>
- ASHRM: http://www.ashrm.org/resources/workplace_violence/index.dhtml

