



# Rising violence in health care settings

## Why and how employers need to take control



Workplace violence is not new, but a powerful combination of circumstances has led to a troubling uptick in violent incidents at health care facilities across the country. In these settings, violence is five times more likely than in other sectors.<sup>1</sup> That's just a small sampling – evidence of underreporting means the problem is actually far worse.

Violent incidents can involve any combination of employees; criminal outsiders; patients and residents; and family members. Leaders at hospitals, medical centers, nursing homes and other facilities need to understand and mitigate risks to protect their staff, patients, or residents, and avoid costly consequences.



In 2018  
**9,436 incidents**  
were reported at  
**365 U.S. hospitals.<sup>2</sup>**

## Why is risk especially high now?

Put them together, and the social trends outlined below are contributing to escalating workplace violence:

- COVID-19 certainly has both exacerbated existing sources of violence and opened up new areas of confrontation between health care providers, patient families and the general public.
- The national opioid crisis has led to a rise in drug theft that can turn violent.
- A shortage of mental health resources – combined with increasing pressure on these resources – means more patients wind up in crisis in hospital emergency rooms.
- Hospital environments can trigger fear of illness and pain, which in turn may unleash aggression. Long wait times and overcrowding can exacerbate aggravation.
- Patients in health care settings may be experiencing conditions that increase agitation and aggression, such as head injury, withdrawal, or dementia.

Recognizing a need for action, the U.S House of Representatives passed the Workplace Violence Prevention for Health Care and Social Service Workers Act (H.R. 1195).

The bill requires employers to provide annual training and education to employees; maintain detailed records of workplace violence risk, hazard assessments and violent incidents; and

submit annual summaries of such incidents to the Secretary of Labor. We have also provided steps to help you reduce the threat of violence at your facility.

## What's at stake for hospitals and other facilities?

For health care employers, the damage of workplace violence goes deeper than physical harm. It can also:

- Increase the likelihood of enacting workers compensation benefits, which can be costly
- Increase liability risks, including professional, general and premises liability
- Create staffing issues when injured workers stay home
- Make it harder to retain employees due to stress, burnout, fear, and more
- Decreased job satisfaction, a high turnover rate, low productivity, and an increase in error frequency by staff which can increase risk profile for professional liability. Studies have shown that employee turnover spikes after violent incidents up to 10%.<sup>4</sup>
- Compromise reputation and create public relations challenges around worker and patient safety



### Healthcare hot spots

**Behavioral health units and long term care facilities** are at the most increased risk. In fact, perpetrators most commonly have a diagnosis of psychosis, substance-use disorders, or dementia.<sup>3</sup> Often aggravated by a lack of resources.

**Labor and delivery units:** Access to this space and exposure to domestic disputes increase the risk of incidents.

**Emergency departments:** Open access to the public, and exposure to gang violence and behavioral issues bump up risk.

**Home health and community outreach:** Risks to workers increase when delivering care in homes, in the community, or any less-controlled environment.

1 U.S. Department of Labor, OSHA, Preventing Workplace Violence in Healthcare (<https://www.bls.gov/iif/oshwc/foi/workplace-violence-healthcare-2018.htm>); accessed April 8, 2020.

2 Kaiser Health News, Patient-Induced Trauma: Hospitals Learn to Defuse Violence, December 6, 2019

3 "Workplace Violence against Health Care Workers in the United States" | Author: James P. Phillips | Publication: The New England Journal of Medicine | Publisher: Massachusetts Medical Society | Date: Apr 28, 2016

4 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8103077/>

# Taking action:

## Strategies that boost workplace safety

The good news is there's a lot you can do to lower the risk of workplace violence at your facility. And as your insurance partners, we're committed to helping you every step of the way, starting with advice and resources.

### 1 Put a workplace violence plan in place. [Download our complete plan.](#)

### 2 Educate employees.

- See detailed recommendations in our workplace violence plan (link above). We also recommend the online class Workplace Violence Prevention for Nurses, offered by NIOSH.
- Teach staff the run-hide-fight strategy,<sup>5</sup> and hold annual refresher trainings. Start with these videos for hospitals and offices from the U.S. Department of Homeland Security.
- Encourage staff to report suspicious behavior and incident reports to security staff.

### 3 Prepare your facilities.

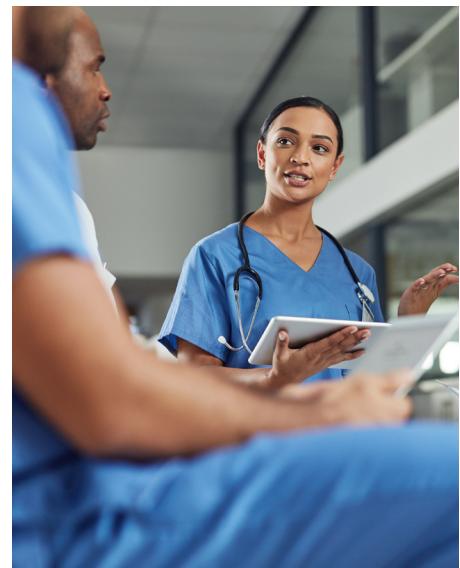
- Install signage stating your weapons policy, disclosing surveillance cameras, and including emergency contacts
- Implement a weapons screening program, especially for behavioral health patients; consider using metal detectors
- Set up badge-access checkpoints throughout, and between units
- Limit access to buildings and monitor entrances after hours
- Install first-responder kits throughout (include security badges, maps and radios)
- Designate safe locations/rooms in each unit
- Install cameras in public areas
- Provide breakaway name tag lanyards for all staff
- Install panic buttons in key areas; explore IDs with built-in panic buttons

### 4 Conduct periodic background checks on staff.

### 5 Work with experienced partners.

- Work with your broker and insurer to ensure you have adequate coverage in place in the event of an act of workplace violence
- In a crisis event, your insurer will step up to help you recover. Make sure they have the broad resources and understand the depth of support needed, including:
  - I. Experienced claims handlers who have experience with workplace violence and violent event response protocols
  - II. Grief counseling resources to help employees, patients, and residents cope with trauma and loss
  - III. Public relations expertise to manage reputational damage

Contact your underwriter today to make your workplace safer and minimize your risk.



### Nurses: Frequent frontline victims

**Patients cause 80% of violent incidents in health care.<sup>2</sup>**

Because nurses interact with patients most, they're most vulnerable.

**25%**

have been assaulted on the job<sup>6</sup>

**41%**

have experienced bullying, incivility, or workplace violence<sup>7</sup>

**80%**

of ER nurses say they've been assaulted on the job<sup>8</sup>

**66%**

worry about the impact of their jobs on their health<sup>7</sup>

<sup>5</sup> U.S. Department of Homeland Security, CISA Action Guide, Security Awareness for Hospitals & Healthcare Facilities.

<sup>6</sup> AMN 2019 Survey of Registered Nurses, amnhealthcare.com; accessed December 20, 2019.

<sup>7</sup> American Nurses Association ([nursingworld.org/practice-policy/work-environment/end-nurse-abuse/](https://nursingworld.org/practice-policy/work-environment/end-nurse-abuse/)); accessed Dec. 20, 2019.

<sup>8</sup> <https://www.emergencyphysicians.org/press-releases/2018/10-2-2018-violence-in-emergency-departments-is--increasing-harming-patients-new-research-finds>



This document provides a general description of this program and/or service. See your policy, service contract, or program documentation for actual terms and conditions. Insurance is underwritten by Liberty Mutual Insurance Company or its affiliates or subsidiaries.

© 2022 Liberty Mutual Insurance, 175 Berkeley Street, Boston, MA 02116. 61\_5443 06/22