INVESTIGATION/RESEARCH  Stop Work-Related Assaults in the Health Care Setting

Between 2012 and 2018, 48 health care workers in Michigan were assaulted at work and hospitalized or treated in the emergency department for a skull fracture; one of whom died. Another four health care workers were shot and killed at work. There were nine other health care workers who were hospitalized for injuries such as a leg fracture or a stabbing that were identified because workers’ compensation was the payer. The number of health care workers injured from assaults at work identified is incomplete since bruises/contusions, fractures of arms/legs and concussions treated in the emergency department are not known. Examples of the work-related assaults that occurred:

- A female direct care worker at a group home in her 70’s died from complications of being struck on her face by a pre-teen resident.
- A male pharmacist in his 30s died from multiple gunshot wounds during an altercation with a customer.
- A female employee of a hospital in her 40’s fell and fractured her leg while restraining a combative patient.
- A male security guard at a hospital in his 50’s was punched in the face by a patient.
- A female registered nurse at a hospital in her 20’s sustained a nasal fracture after being hit in the nose and forehead by a patient.
- A female employee at a psychiatric hospital in her 50’s was punched in the face by a psychiatric patient who she was discharging home.

IN ORDER TO PREVENT SIMILAR INCIDENTS IN THE FUTURE

- Health care employers should use a multidisciplinary team to conduct a risk assessment specific to workplace violence risks in their organization. Based on the risk assessment results, the employer should develop and implement a workplace violence prevention plan (WVPP) to minimize or eliminate safety and security risks.
- Health care employers should provide employee training on the WVPP as well as strategies to recognize and manage escalating hostile and assaultive behaviors from patients, clients, visitors, or staff.
- Health care employers should encourage reporting of workplace violence incidents, keep records, investigate and evaluate an incident, and when appropriate, modify their violence prevention program to ensure effectiveness.
- Health care workers should understand the “universal precautions for violence” concept - violence should be expected but can be avoided or mitigated through preparation. Violent behavior may be something a patient can’t control (e.g. dementia, behavioral issue). Staff should not make excuses when an incident occurs – the incident should be reported. Workplace violence should not be considered “part of the job”!
- Get Involved! Health care employees should identify, assess, and report any procedures and/or operations connected with their specific tasks/positions that contribute to hazards related to workplace violence.

DID YOU KNOW?

- The average age of assaulted workers with skull fractures was 41; the median age was 39; 65% were women
- Workers’ Compensation was the expected payer for 70% of the skull fractures

Guidelines for Preventing Workplace Violence for Health Care and Social Workers:

Preventing Violence in the Health Care Setting:
http://www.jointcommission.org/assets/1/18/sea_45.pdf

Workplace Violence Prevention for Nurses:
http://www.cdc.gov/niosh/topics/violence/training_nurses.html

Emergency Nurses’ Association: Workplace Violence Toolkit