

Workplace Violence Prevention: Keeping Healthcare Workers and Patients Safe

A2 Quality Meeting
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It is just part of my job...

Workforce Safety Data

1. Health Care Workers 5 times more likely to be victims than other industries
2. 55.6% of ED nurses report physical and verbal violence
3. 57.6% of ED nurses rate safety of their ED at 5/10
4. 1/3 ED nurses consider leaving ED because of violence
5. Significant staff turnover with a \$60,000 to \$100,000 cost for RN replacement
6. Workplace violence often underreported because accept conditions as “part of the job” (65.6% to 86.1% victims did not report)

Nonfatal workplace violence injuries with days away from work, 2005 – 2014

	All Private Industry	Healthcare/Social Assistance	Healthcare	Healthcare Percentage
2005	14560	9510	7990	54.9
2006	15970	9640	8320	52.1
2007	16840	9950	8420	50.0
2008	16330	10060	8780	53.8
2009	15450	10040	8680	56.2
2010	16910	11370	9740	57.6
2011	11690	8180	7150	61.2
2012	12780	9170	7970	62.4
2013	13800	10450	9220	66.8
2014	15980	11100	9050	56.6
10 Year Totals	135750	89960	77330	57.0

Bureau of Labor Statistics, Table R4. Detailed industry by selected **events or exposures**, 2005-2014. http://www.bls.gov/iif/oshcdnew2013.htm#Resource_Table_categories_-_2013

Who perpetrates most of the violence against healthcare workers?

- Patients
- Family members
- Visitors
- Co-workers – Lateral/horizontal violence



Emerging Best Practices in Workforce Safety

- **Olympic Medical Center**
 - Safe Rooms
 - Security Sweeps
 - Room beds bolted down

- **EvergreenHealth**
 - Code White: before code green
 - Active Shooter Training – run, hide, fight

- **Mary Bridge Children's Center and Health Network**
 - Clear message to “Protect Yourself First!” – Employee support critical

- **Whitman Hospital and Medical Center**
 - Contract with local law enforcement



This is posted in a hospital.

Yours can do it too.

A sign doesn't stop an individual from assaulting staff.

However, this sign does communicate support from administration.



On-line Workplace Violence Prevention Course

Content from today's presentation is:

AVAILABLE NOW

FREE COURSE

FREE CEUs

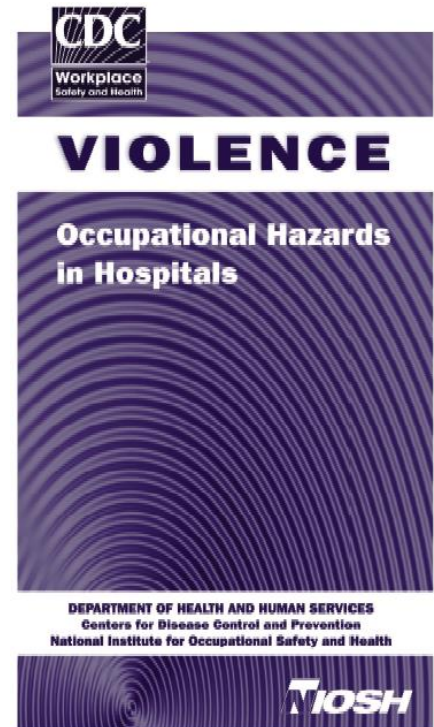
http://www.cdc.gov/niosh/topics/violence/training_nurses.html





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

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Data Submission

- Use of standard workers' compensation "loss runs"
 - Easily available from insurance carriers or third party administrators (w/ WSHA assistance)
 - More accurate than OSHA logs and include the cost component
 - Allows identification of focus injury causes also related to patient safety
 - No claimant names or social security numbers are requested and all data is confidential
 - **Patient Handling**
 - **Aggressive Behavior**
 - **Slips and Falls**
- Hours worked
 - Necessary to calculate injury rates and account for different hospital size/exposure
- Timeline
 - Baseline data will be requested at the onset of the project
 - **2014 through Q3 2016**
 - Quarterly data submission requested throughout the project
 - **First quarterly submission due mid-January 2017**

Data Output

- Frequency Rate
 - Workers' Compensation **Claims** per 100 FTEs
- Severity Rate
 - Workers' Compensation **Costs** per 100 FTEs
- Calculated at the Aggregate Level and the Member Level for....
 - All claims
 - Patient Handling
 - Aggressive Behavior
 - Slips and Falls
- Custom Data Analysis for Members
 - Assistance with return on investment calculations
 - Help members focus on primary cost drivers

Members Can Compare Their Data to the Aggregate but
Individual Hospital Data Remains Confidential