

Workplace Violence in Nebraska: What's Going On?

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Overview:

- National Statistics
- Nebraska Hospital Statistics
- Definitions
- De-escalation training
- Next steps

National Statistics:

- According to the Occupational Safety and Health Administration (OSHA), healthcare workers are **four times** more likely to experience workplace violence than workers in private industry on average. The Bureau of Labor Statistics (BLS) reported that in 2018, the rate of violence-related injuries in the healthcare and social assistance sector was 15.4 per 10,000 full-time workers, significantly higher than the rate for all private industries combined, which was 1.7 per 10,000 full-time workers.
- A study published in the New England Journal of Medicine found that approximately **75% of all workplace assaults** reported annually in the United States occur in healthcare and social service settings. Nurses are particularly vulnerable, with the **highest rates of nonfatal assaults** compared to workers in other occupations.

National Statistics:

- The American Nurses Association (ANA) reports that nurses who experience workplace violence are at increased risk of developing psychological issues such as anxiety, depression, and PTSD. A survey by the Emergency Nurses Association (ENA) found that 25% of emergency department nurses had symptoms of PTSD related to their work environment.
- Workplace violence in healthcare results in significant financial costs to healthcare institutions. According to OSHA, the annual cost of violence-related injuries to the healthcare industry is estimated to be **more than \$2 billion**, including medical expenses, lost productivity, and workers' compensation claims.
- It's important to note that workplace violence in healthcare is widely underreported. According to the ANA, only about 20% of nurses who experience workplace violence report the incident. Underreporting can be due to factors such as a lack of reporting mechanisms, fear of retaliation, and the normalization of violence as part of the job.

National Statistics:

80%

of Emergency Medical Services personnel have been attacked by patients.

2nd

Homicide is the second leading cause of workplace death for home healthcare workers.

78%

of Emergency Department physicians and

100%

of Emergency Department nurses have experienced violence from patients within the last year.

70%

of all staff working in a psychiatric setting report being assaulted annually

59%

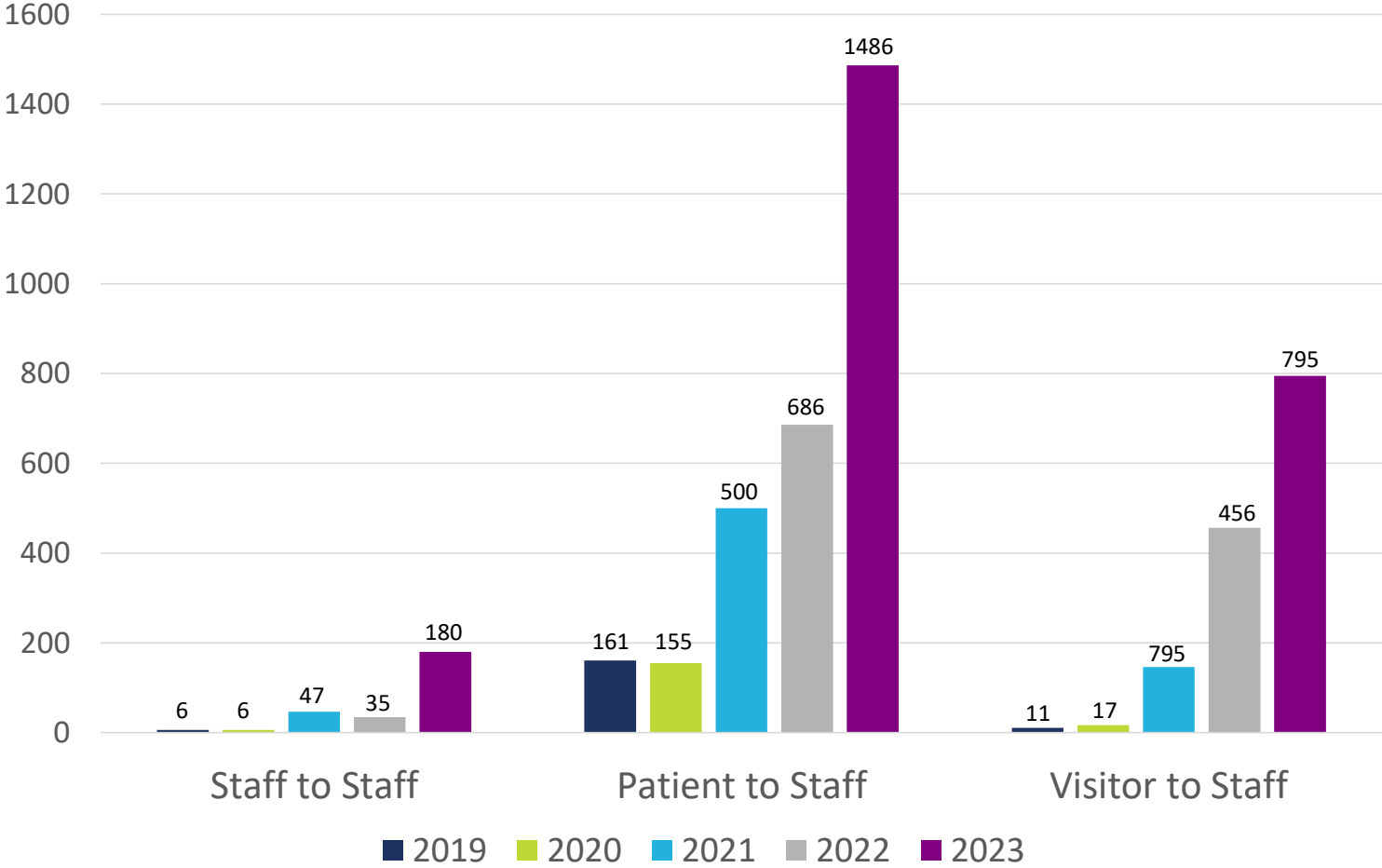
of nursing aides at nursing homes with dementia units report being assaulted by patients weekly and 16% report being assaulted daily.

46%

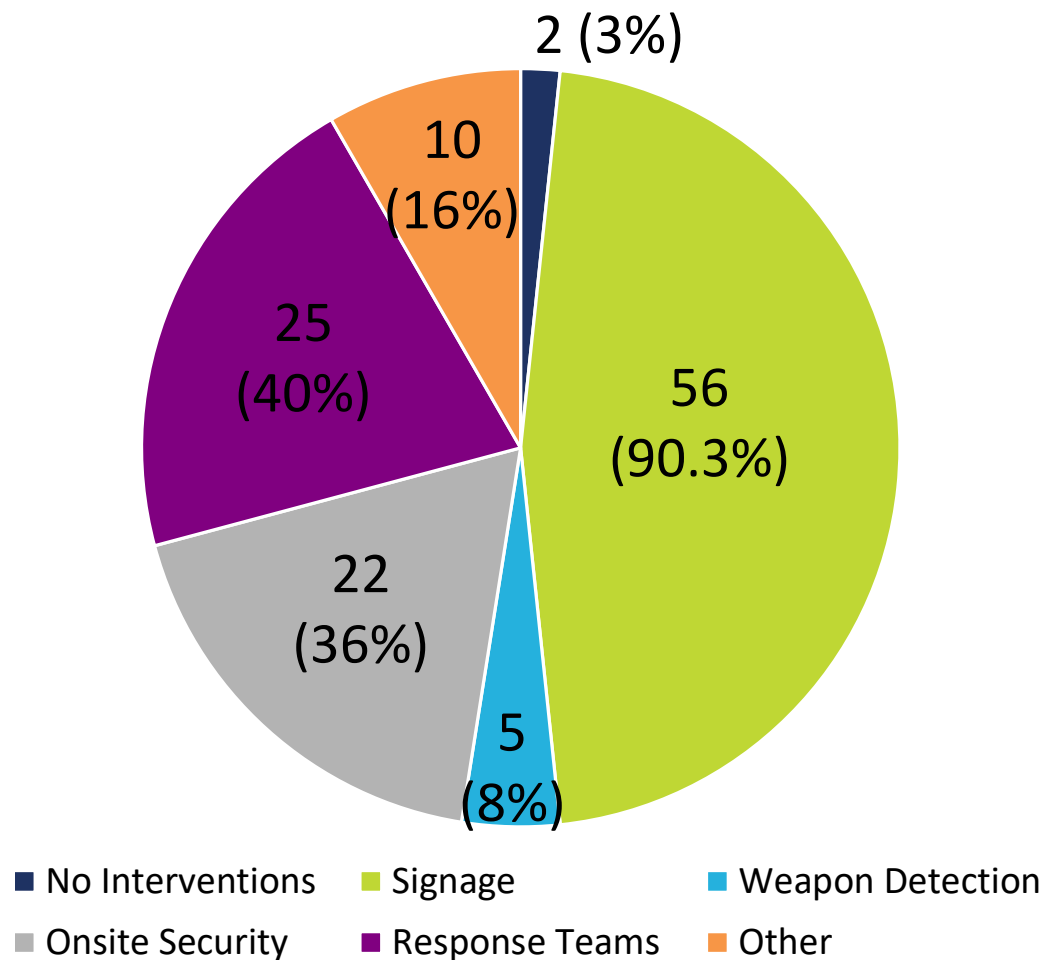
of nurses reported some form of workplace violence during their five most recent shifts.

Of 62 Nebraska hospital responses...

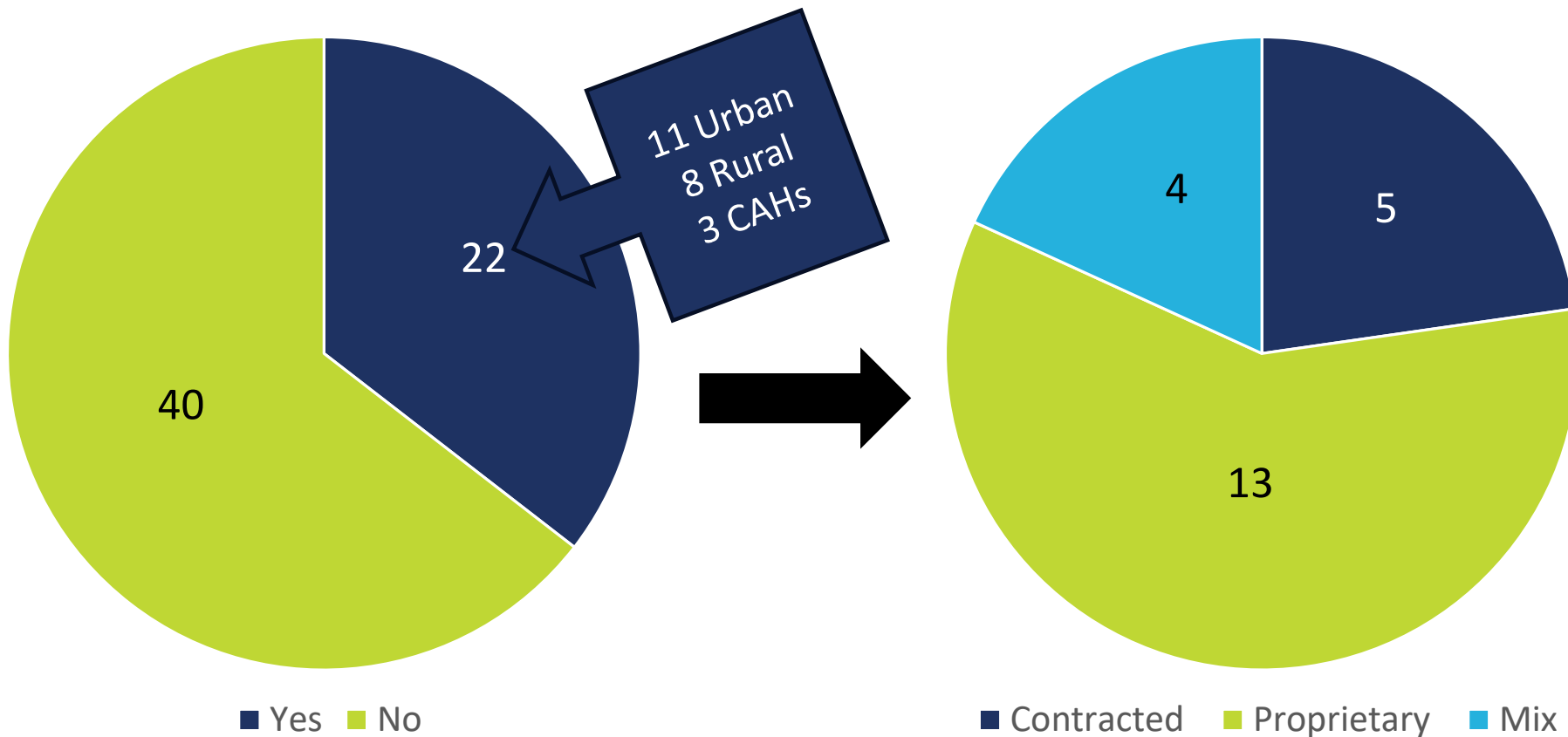
Workplace Violence Statistics



Interventions in the Hospital



Use of Security in the Hospitals



Categories of Workplace Violence

**CATEGORY
1**

Involves "criminal intent." In this type of workplace violence, individuals with criminal intent have no relationship to the hospital or its employees.

**CATEGORY
2**

Involves a customer, client, or patient. In this type of workplace violence, an individual has a relationship with the hospital and becomes violent while receiving services. This would include patients, their family members and visitors. This type of violence is the most common in healthcare settings.

**CATEGORY
3**

Involves a "worker-on-worker" relationship and includes employees who attack or threaten another employee. This violence is commonly referred to as lateral or horizontal violence.

**CATEGORY
4**

Involves personal relationships. It includes individuals who have personal relationships with the intended target but no relationship to the hospital. The perpetrator has a relationship with the employee outside of work.

De-escalation Training

NHA | NEBRASKA
HOSPITALS



Peaceful Leaders Academy
A Pollack Peacebuilding Company



De-escalation Training:

- De-escalation training equips healthcare workers with effective communication techniques to defuse tense situations. By learning how to actively listen, empathize, and communicate calmly and assertively, healthcare professionals can often prevent situations from escalating into violence.
- De-escalation training teaches healthcare workers to recognize the warning signs of potential violence and intervene early. By addressing conflicts or aggressive behaviors proactively, healthcare professionals can often prevent situations from escalating to the point of violence.
- Effective de-escalation techniques can help healthcare workers avoid the need for physical restraint or seclusion, which can further agitate patients and escalate tensions. By using verbal and non-verbal techniques to calm patients and manage their behavior, healthcare professionals can often achieve better outcomes without resorting to restrictive measures.
- By equipping healthcare workers with the skills to effectively manage and de-escalate potentially violent situations, de-escalation training contributes to a safer environment for both staff and patients. When conflicts are resolved peacefully, the risk of injury to healthcare workers and patients is significantly reduced.
- De-escalation training empowers healthcare workers with the knowledge and confidence to handle challenging situations effectively. Feeling equipped to manage conflicts and aggression can improve job satisfaction and morale among healthcare professionals, leading to a more positive work environment overall.

Next Steps:

- Evaluation:
 - Surveying
 - Tracking interventions

- Education:
 - Updating the toolkit
 - Reviewing de-escalation training

- Advocacy;
 - Review state statute and recommend changes
 - External messaging

Addressing Workplace Violence in our Hospitals

A Toolkit for healthcare professionals



Nebraska State Statute:

28-929.01.

Assault on an emergency care provider or a health care professional; terms, defined.

For purposes of sections 28-929, 28-929.02, 28-930, 28-931, and 28-931.01:

(1) Emergency care provider means (a) an emergency medical responder; (b) an emergency medical technician; (c) an advanced emergency medical technician; (d) a community paramedic; (e) a critical care paramedic; or (f) a paramedic, as those persons are licensed and classified under the Emergency Medical Services Practice Act;

(2) Health care professional means a physician or other health care practitioner who is licensed, certified, or registered to perform specified health services consistent with state law who practices at a hospital or a health clinic;

(3) Health clinic has the definition found in section 71-416; and

(4) Hospital has the definition found in section 71-419.

28-929.02.

Assault on a health care professional; hospital and health clinic; sign required.

Every hospital and health clinic shall display at all times in a prominent place a printed sign with a minimum height of twenty inches and a minimum width of fourteen inches, with each letter to be a minimum of one-fourth inch in height, which shall read as follows:

WARNING: ASSAULTING A HEALTH CARE PROFESSIONAL WHO IS ENGAGED IN THE PERFORMANCE OF HIS OR HER OFFICIAL DUTIES, INCLUDING STRIKING A HEALTH CARE PROFESSIONAL WITH ANY BODILY FLUID, IS A SERIOUS CRIME WHICH MAY BE PUNISHABLE AS A FELONY.

Final Thoughts:

- Workplace Violence in Healthcare is on the rise.
- Violence in Nebraska Hospitals has doubled in the last year.
- Violence is drastically underreported.
- Most Nebraska Hospitals do NOT have on-site security and rely on local law enforcement.
- De-escalation training is inconsistent across Nebraska Hospitals.
- Review policies and exercise “angry person” in all areas of the facility!
- Physical Security Grant Opportunity: <https://www.fema.gov/grants/preparedness/nonprofit-security>

Questions?

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