POSITION STATEMENT

Preventing Workplace Violence: The Occupational and Environmental Health Nurse Role

INTRODUCTION

Workplace violence (WPV), a significant occupational health and safety issue, occurs when workers experience:

- verbal abuse/ bullying/ horizontal violence/ intimidation
- physical threat
- physical assault,
- sexual assault and/or
- homicide.

Homicide is the fourth leading cause of work-related death in the U.S., and the leading cause of work-related death for female workers (OSHA). The Bureau of Labor Statistics estimates that approximately 2 million workers report being victims of WPV annually, with a large proportion of these events involving non-fatal WPV. Based on an employer survey by BLS (2005), as well as other studies (Pompeii et al., In Press), negative worker responses to WPV include:

- increased stress and fears of becoming a victim
- more likely to experience fear and anxiety at work
- self-blame
- carrying weapons for self-protection at work
- less trust of management and coworkers
- decreased job satisfaction
- more likely to consider changing jobs or leaving their profession.

Employers are adversely affected by WPV through:

- increased health care and workers' compensation costs
- increased legal and security costs
- increased worker turnover
- increased absenteeism
- decreased productivity.

The Bureau of Labor Statistics (2012) acknowledges that a substantial number of non-fatal WPV events go unreported by workers. Furthermore, the nature of many events do not meet the reporting criteria for conventional occupational surveillance systems, such as the OSHA log or workers' compensation, resulting in estimates that do not reflect the true magnitude of the problem (Pompeii et al.). Improved surveillance efforts for non-fatal WPV have been recommended (Peek-Asa et al., 2001) for purposes of:

- Better defining non-fatal WPV incurred by workers
- Developing WPV prevention strategies

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- Educating management and workers about WPV prevention and intervention

- Evaluating interventions to reduce the risk of WPV.

Differences in the WPV perpetrator profile, perpetrator motives, and differences in workplace characteristics should be considered when developing WPV prevention strategies. Defined WPV Types (I through IV) (Howard, 1996; Peek-Asa et al.) can be used to guide OHNs in the development of prevention strategies targeted for specific circumstances and work environments.

Violence Types

- Type I: the perpetrator has no legitimate business relationship with the workplace and enters to carry out a criminal act (e.g., robbery)

- Type II: the perpetrator is a customer receiving services from a company (e.g., patient in hospital)

- Type III: the perpetrator is employed by the company (e.g., worker-on-worker)

- Type IV: the perpetrator has no legitimate business with the workplace, but has a personal relationship with a worker (e.g., domestic violence at the workplace).

RATIONAL AND SUPPORTING INFORMATION

The occupational and environmental health nurse (OHN) is a highly qualified health care professional who possesses the knowledge and experience to collaboratively develop, manage, and implement a WPV prevention program using primary, secondary, and tertiary prevention strategies. The development and implementation of these prevention strategies should be based on the type(s) of WPV.

Primary Prevention
To prevent workplace violence from occurring:

- Conduct a risk assessment

- Define WPV through a worksite reporting/surveillance system designed to capture the four types of WPV

- Implement WPV prevention policies (zero-tolerance) that address the four types of WPV. This policy should also guide workers and managers on where to report these events

- Ensure hiring practices support workplace violence prevention policies (e.g., background checks)

- Establish a visitor policy to manage individual's access to and within the workplace

- Conduct periodic walk-through surveys to assess the physical work environment and recommend needed engineering controls (e.g., lighting, surveillance cameras, badge access, cell phones, alarm systems)

- Train workers on conflict resolution and non-violent crisis intervention

- Annually, train managers and workers on established WPV policies and procedures

- Create a "culture of awareness" to increase reporting of minor events and suspicious behaviors.

Secondary Prevention
Early detection of workplace violence by identifying and eliminating incivility before it results in violent behavior:

- Develop procedures for workers and managers to follow when a WPV event occurs. Assure procedures address each of the four types of WPV

- Screen the company for risk factors

  - Review injury/illness records, insurance records, and workers' compensation claims to identify patterns of assaults

  - Worker questionnaire or survey to identify potential for violent incidents or the need for improved security measures

  - Surveys should be conducted at least annually to identify new or previously unnoticed risk factors and deficiencies or failures in work practices, procedures or controls

  - Feedback and follow-up should be part of the review process.

- Strategies to reduce risk factors include (but are not limited to)

  - Engineering controls; i.e., Physical separation of workers from customers, install and maintain alarm systems, other

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security devices, install bright, effective lighting, and panic buttons

- Administrative and work practice controls; i.e., state clearly to workers that violence is not permitted or tolerated, report all incidents of violence, establish liaison with local police

- Worker training; i.e., report all assaults or threats to supervisor or manager, use properly trained security officers to deal with aggressive behavior.

Tertiary Prevention
Addresses the worker and/or workplace, when an incident has already occurred:

- Conduct post WPV event investigations that include security personnel, the victimized worker(s) and their manager(s)

- Monitor incident trends by type or circumstance, institute corrective actions, and modify existing WPV prevention policies based on findings from the WPV surveillance system and post-event investigations

- Provide health care and an Employee Assistance Program for victimized workers and their family members

- Report violent incident to local police promptly

- Provide legal counseling

- Process workers' compensation claims.

CONCLUSION

Although a decline in work-related homicides has occurred over the past decade, it remains the leading cause of work-related death for female workers. The prevalence of non-fatal WPV is not adequately measured through conventional occupational health surveillance methods, in addition to workers under-reporting these types of events. Commitment from employers is essential to adequately measure the scope of non-fatal violence in the workplace. The implementation of reporting mechanisms that foster the capture of these types of events is necessary for purposes of developing informed targeted prevention strategies, as well as testing their effectiveness. The OHN is an intricate part of the occupational safety and health team that must address this serious public health issue.

RESOURCES:

U.S. Department of Labor, Occupational Safety and Health Administration. (n.d.). *Workplace Violence Prevention Programs*. Retrieved from http://www.osha.gov/SLTC/workplaceviolence/evaluation.html

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Revised 10/00, 1/13 (AAOHN Practice Committee)

Reviewed 6/02, 6/03, 8/04, 12/12 (AAOHN Practice Committee)

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