

# Workplace Violence Prevention Program

CapRAC Healthcare Coalition Meeting  
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**WW2E Tenets**

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**WW2E Behaviors**

**WakeWay<sup>2</sup> Excellence**



**WakeMed**   
 WakeMed Health & Hospitals

# Workplace Violence in Healthcare

- US Bureau of Labor Statistics
  - Steady increases in healthcare statistics each year for over a decade
  - Healthcare and social service workers are 5 x more likely to experience workplace violence than all other workers
  - Healthcare workers comprise 73% of all nonfatal workplace illnesses and injuries requiring days away from work

# Workplace Violence Impacts

- Workplace violence incidents are significantly underreported
  - Common reasons given for not reporting
    - “It is just a part of my job”
    - “No one is going to do anything about it”
- Workplace violence incidents can
  - Impair and affect patient care
  - Lead staff to psychological distress, job dissatisfaction, absenteeism, high turnover, and higher costs

# Workplace Violence

## The Joint Commission Definition

*“An act or threat occurring at the workplace that can include any of the following: verbal, nonverbal, written, or physical aggression; threatening, intimidating, harassing, or humiliating words or actions; bullying; sabotage; sexual harassment; physical assaults; or other behaviors of concern involving staff, licensed practitioners, patients, or visitors.”*

# Workplace Violence Prevention

## The Joint Commission Standards

- Effective as of January 2022
  - Environment of Care Safety and Security Management Program Chapter
    - Annual assessment and action plans
    - Monitoring, internal reporting, investigations of incidents
  - Human Resources Chapter
    - Training, education, and staff support resources
  - Leadership Chapter
    - Designate a program leader and multidisciplinary team
    - Program reporting to governing body

# Workplace Violence Prevention

## The Joint Commission Standards

- Environment of Care Safety and Security Management Program Chapter

### **EC.02.01.01 EP 17**

The hospital conducts an annual worksite analysis related to its workplace violence prevention program. The hospital takes actions to mitigate or resolve the workplace violence safety and security risks based upon findings from the analysis. Note: A worksite analysis includes a proactive analysis of the worksite, an investigation of the hospital's workplace violence incidents, and an analysis of how the program's policies and procedures, training, education, and environmental design reflect best practices and conform to applicable laws and regulations. (See also EC.04.01.01, EP 1)

# Workplace Violence Prevention

## The Joint Commission Standards

- Environment of Care Safety and Security Management Program Chapter

### EC.04.01.01 EP 1-6

The hospital establishes a process(es) for continually monitoring, internally reporting, and investigating the following:

- Injuries to patients or others within the hospital's facilities
- Occupational illnesses and staff injuries
- Incidents of damage to its property or the property of others
- Safety and security incidents involving patients, staff, or others within its facilities, including those related to workplace violence
- Hazardous materials and waste spills and exposures
- Fire safety management problems, deficiencies, and failures
- Medical or laboratory equipment management problems, failures, and use errors
- Utility systems management problems, failures, or use errors



# Workplace Violence Prevention

## The Joint Commission Standards

- Environment of Care Safety and Security Management Program Chapter

### **EC.04.01.03 EP 1**

The hospital takes action on the identified opportunities to resolve environmental safety issues.

# Workplace Violence Prevention

## The Joint Commission Standards

- Human Resources Chapter

HR.01.05.03 EP 9

As part of its workplace violence prevention program, the hospital provides training, education, and resources (at time of hire, annually, and whenever changes occur regarding the workplace violence prevention program) to leadership, staff, and licensed practitioners. The hospital determines what aspects of training are appropriate for individuals based on their roles and responsibilities. The training, education, and resources address prevention, recognition, response, and reporting of workplace violence as follows:

- What constitutes workplace violence
- Education on the roles and responsibilities of leadership, clinical staff, security personnel, and external law enforcement
- Training in de-escalation, nonphysical intervention skills, physical intervention techniques, and response to emergency incidents
- The reporting process for workplace violence incidents (See also LD.03.01.01, EP

# Workplace Violence Prevention

## The Joint Commission Standards

- Leadership Chapter

LD.03.01.01 EP 9

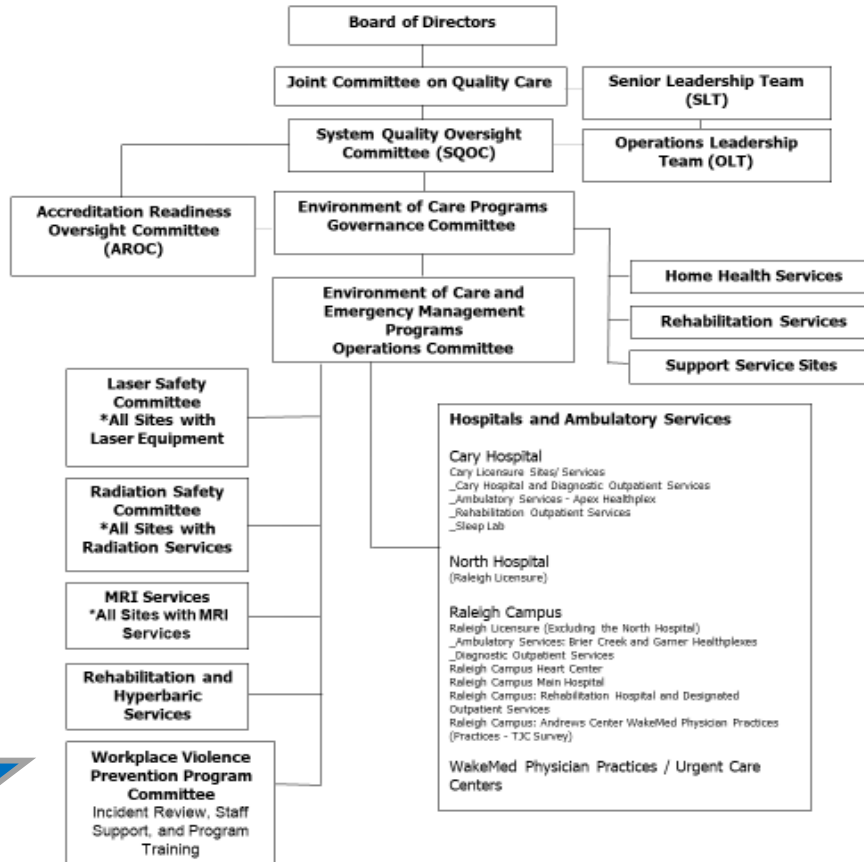
The hospital has a workplace violence prevention program led by a designated individual and developed by a multidisciplinary team that includes the following:

- Policies and procedures to prevent and respond to workplace violence
- A process to report incidents in order to analyze incidents and trends
- A process for follow up and support to victims and witnesses affected by workplace violence, including trauma and psychological counseling, if necessary
- Reporting of workplace violence incidents to the governing body (See also HR.01.05.03, EP 29)

# Workplace Violence Prevention Program Structure

Parent Policy: <a href="#">Environment of Care Governance</a>	Title: <b>CRG EC Governance - Org Chart</b>	Attachment Effective Date: 03/04/2022
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Environment of Care Programs Reporting Structure Organizational Chart



Prepared by: TEAM LDR, ENV HEALTH & SAFETY  
 Approved by: Chair Environment of Care Governance Committee

No: 3840



Printed copies are for reference only. Please refer to the electronic copy for the latest version.

# Workplace Violence Prevention Program (WVPP) Leadership

Barb Bisset: Chair, WVPP Operations Committee and Staff Support Committee

David Brock: Co-Chair, WVPP Operations Committee

Sarah Crowley: Mental Health & Well Being WVPP Leader

Dale Hill: Chair, WVPP Training Committee

Susan McFarland: Human Resources WVPP Leader

Marcy van Schagen, Chair, WVPP Incident Review Committee

Betsy Seymour, Risk Management & Patient Safety WVPP Leader

# Workplace Violence Prevention Program

## Incident Review Committee

- RL Solution Reporting Changes
- Incident Report Summary
- Incident Review Committee meeting weekly to review incidents
- Starting detailed data trending for identification of opportunities to strengthen program

# Workplace Violence Prevention Program Assessments

- Campus Police Site Assessments
- Consultants currently performing assessments of critical infrastructures and cybersecurity
- Staff Support Task Force evaluating support resources
- Training assessment (survey and focused groups) conducted in the Spring, 2022
  - Training Committee currently evaluating training program options and developing training policy for all levels of staff
- Staff Surveys

# **Workplace Violence Prevention Program Department Resources**

## Workplace Violence Prevention Program Plan

- CRG Violence Prevention - Domestic Violence  
Wake County Resources
- CRG Violence Prevention - Personal Safety Plan
- CRG Violence Prevention - Identifying Workplace  
Violence
- CRG Violence Prevention, Preparedness,  
Response and Recovery
- CRG Violence Prevention - Staff Protection  
Measures





## Security Threat Response Plan

SECURITY THREAT	RESPONSE & ACTION
<p><b>Immediate Danger of Harm</b></p> <ul style="list-style-type: none"> <li>Individual shows behaviors that pose an immediate threat of physical harm and/or may have immediate access to a weapon. Weapons include any instrument that has the potential and is capable of producing fear, physical harm, bodily injury and/or death, and includes guns, knives, bats, or items such as IV poles, siderails or glass.</li> </ul>	<ul style="list-style-type: none"> <li><b>Hospitals &amp; Healthplexes:</b> Activate security panic alarm if available and notify Campus Police of <b>Immediate Security Threat</b> at ext. 03333.</li> <li><b>All Other Sites:</b> Activate security panic alarm if available, call 911 and then call ext. 03333 to notify Campus Police of <b>Immediate Security Threat</b>.</li> <li>Immediately remove yourself and others from area of threat.</li> <li>Campus Police is in charge of the scene, and will determine when it is safe for others to enter the area.</li> <li>Be prepared to provide details of the situation to law enforcement.</li> <li>Get medical care for the injured.</li> <li>If an employee was injured, complete an Occupational Health Injury Report.</li> <li>Complete an incident report in RL Solutions.</li> </ul>
<p><b>Not Immediate Danger of Harm</b></p> <ul style="list-style-type: none"> <li>An individual is making threats, but is not showing signs of escalating behaviors and does not have immediate access to a weapon or to persons within range to cause harm.</li> </ul>	<ul style="list-style-type: none"> <li>Report the concern to department management with details of threat.</li> <li>Department management notifies Campus Police and Clinical Administrator.</li> <li>Immediately write down details of incident (location, date, time, offender description, behavior, witnesses, etc.).</li> <li>Complete an Incident Report in RL Solutions.</li> </ul>

# Workplace Violence Prevention Program Department Resources

### Quick Tips

- Reporting Threats:** Anyone recognizing early warning signs of violence, witnessing threats of violence or threatening acts, or being made aware of threats, is to immediately report the incident. (Examples: In-person verbal confrontation, telephone calls, text messages, emails, letters, social media, suspicious packages, individuals with guns or other weapons, active shooter, bomb threat, hostage situations, etc.)
- The overhead announcement will state:** "Security Alert: Immediate Danger of Harm in (name of department). Get out of the area of danger. Secure departments." Remove people from the area of threat if it is safe to do so.
- Patient Care:** When the individual making the threat is a patient, and staff feel unsafe in continuing care of that patient, please engage the Clinical Administrator, who will engage other leaders to determine the plan for the continuation of care of the patient.

Campus Police:  
919-350-3333  
Raleigh Clinical Administrator:  
919-350-1259  
Cary Clinical Administrator:  
919-350-2100  
North Clinical Administrator  
919-350-4385

# Workplace Violence Prevention Program Department Resources

## Safe Areas

<p style="text-align: center;"><b>Fire</b></p> <p><b>In areas where oxygen is not being used: RACE</b>  <b>R: Rescue</b> all persons in the immediate area from harm.  <b>A: Alert</b> others:  <ul style="list-style-type: none"> <li>• Call for help from employees in the area.</li> <li>• Pull the fire alarm pull station.</li> <li>• Call the emergency number for your site.</li> </ul> <b>C: Contain</b> the fire by closing the doors.  <b>E: Extinguish</b> the fire or prepare to evacuate to the fire safe area of refuge, if necessary.</p> <p><b>In areas where oxygen is being used: ECAR</b>  <b>E: Extinguish</b> the fire.  <b>C: Contain</b> the fire by removing any burnt material and turn off the oxygen source.  <b>A: Alert</b> others:  <ul style="list-style-type: none"> <li>• Call for help from staff in the area.</li> <li>• Pull the fire pull station.</li> <li>• Call the emergency number for your site.</li> </ul> <b>R: Rescue</b> persons in immediate threat of danger and prepare to evacuate.</p>	<p style="text-align: center;"><b>Internal Flooding or Major Infrastructure Damage to Building</b></p> <p>Report all building leaks and/or other noted damage to your supervisor, who needs to report it to Facility Services.</p> <ul style="list-style-type: none"> <li>• Rescue persons if it is safe to do so. Do <u>not</u> enter the affected area, unless cleared to do so by responders.</li> <li>• Alert others by doing the following: <ul style="list-style-type: none"> <li>◦ Call for help from staff in the area.</li> </ul> </li> <li>• Caution must be used when moving in the damaged area. There may be water, sewer, debris, glass, or other hazards present.</li> <li>• Prepare to evacuate to the building safe area of refuge, if necessary.</li> </ul> <p style="text-align: center;"><b>Building or Infrastructure Damage Safe Area of Refuge</b></p> <p>Facility Services, in coordination with the emergency responders for the incident, confirms the safe area(s) of refuge.</p>	<p style="text-align: center;"><b>Tornado Warning</b></p> <p><b>The tornado funnel has been seen in the immediate area or is detected by weather radar.</b></p> <p style="text-align: center;"><b>Persons Who Can Walk</b></p> <ul style="list-style-type: none"> <li>• Place shoes on patients and move all persons who can walk to the identified tornado safe area of refuge.</li> <li>• Quickly move things out of the tornado safe area of refuge that could cause harm.</li> <li>• Instruct all persons to get close to the floor and to use their arms to cover their heads and necks.</li> <li>• Use pillows, blankets, coats, or clothing as cover, if available. Direct adults to provide cover for infants and children.</li> <li>• Stay in the safe area until the tornado warning has been announced as being cleared.</li> </ul> <p style="text-align: center;"><b>Patients Who Cannot Walk Who Are Located in Rooms With Windows</b></p> <ul style="list-style-type: none"> <li>• Lightly cover patients' heads with a blanket.</li> <li>• Turn the head of the bed away from the windows.</li> <li>• Close drapes, privacy curtains and door.</li> <li>• Staff is to go to the department/building tornado safe area of refuge if the assigned patients' condition allows the patient to be alone.</li> <li>• As soon as the warning is cancelled, immediately return to the patients' rooms to assess the situation.</li> </ul>
<p style="text-align: center;"><b>Fire Safe Area of Refuge</b></p> <p>The department's fire safe area of refuge depends on the construction and occupancy rating of the building. Know the rating of the building.</p> <ul style="list-style-type: none"> <li>• <b>Healthcare Occupancy</b> – move to the other side of the fire doors, away from the origin of fire.</li> <li>• <b>Ambulatory Occupancy</b> – move to the other side of the fire doors, away from the origin of fire.</li> <li>• <b>Business Occupancy</b> – report to the fire safe area of refuge located outside of the building or if there is a higher rated building (e.g. hospital), one may evacuate to that building.</li> </ul>	<p style="text-align: center;"><b>Chemical Spill</b></p> <p><b>R: Rescue</b> persons in danger; move all persons out of the immediate area.  <b>A: Avoid</b> contact with the chemical.  <b>F: Find</b> the Safety Data Sheet (SDS online).  <b>T: Telephone</b> the Communications Center Operator at ext. 02222</p> <p>If it is a major spill, prepare to evacuate the department to a chemical safe area of refuge. Safe Area will be determined by the Chemical Response Team.</p>	<p style="text-align: center;"><b>High Risk Security Threat Incidents (Active Shooter, Bomb Threat, Civil Disturbance, Hostage, Immediate Threat of Harm )</b></p> <ul style="list-style-type: none"> <li>• Remove all persons from the immediate area of threat, if it is safe to do so.</li> <li>• Call the emergency number for your site.</li> <li>• If it is safe to do so: <ul style="list-style-type: none"> <li>◦ Prevent persons from entering the area of risk.</li> <li>◦ Quickly secure the entrances and exits to the area.</li> </ul> </li> <li>• Move to a safe area of refuge. <ul style="list-style-type: none"> <li>◦ If possible, persons in safe area are to: <ul style="list-style-type: none"> <li>▪ Barricade the entrance.</li> <li>▪ Turn off the lights.</li> <li>▪ Put cell phones ringers on silent.</li> <li>▪ Text reliable person telling them your location and number of persons in the safe area.</li> <li>▪ Request information be communicated to law enforcement.</li> </ul> </li> </ul> </li> </ul>

# Workplace Violence Prevention Program Department Resources

Staff Support

**WORKPLACE RESOURCES**



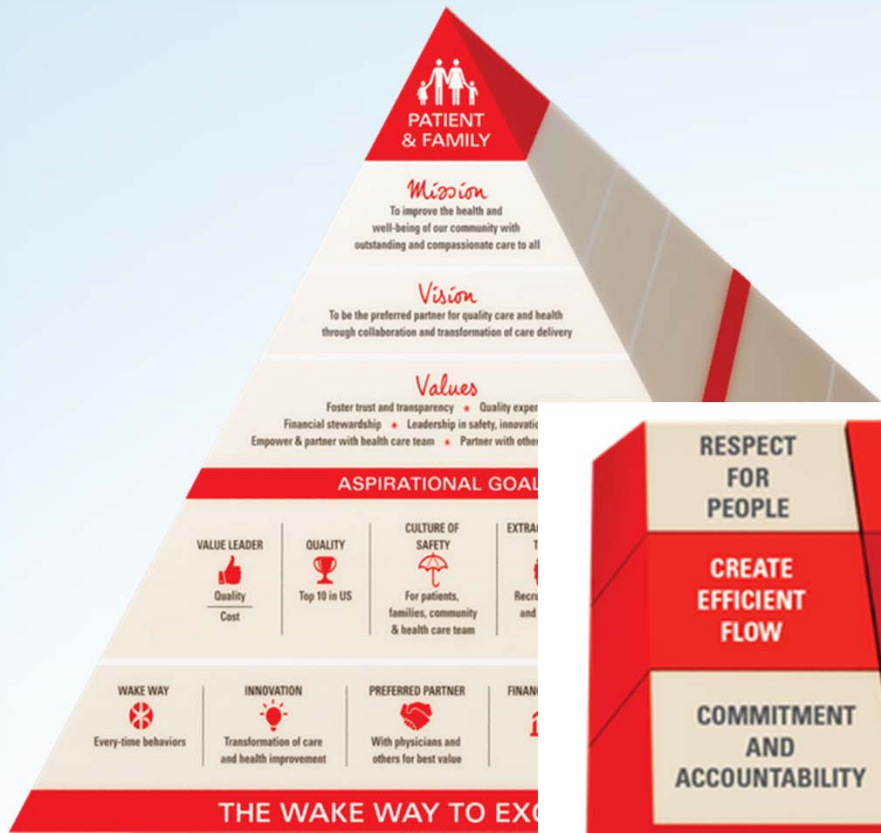
Pocket Guide to Coping  
with Stressful Workplace Incidents

# Summary and Next Steps

- Workplace Violence Prevention Program Committees to continue actions as identified on the program's Strategic Performance Improvement Plans
- Marketing & Communications Weekly Topics
- Department Leadership to continue to provide resources and support to staff

# Resources

- Occupational Safety and Health Administration, United States Department of Labor. (2016). "OSHA 3148-06R 2016: Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers."  
<https://www.osha.gov/Publications/osha3148.pdf>
- Occupational Safety and Health Administration, United States Department of Labor. (2015). "Preventing workplace violence: A roadmap for healthcare facilities."  
<https://www.osha.gov/Publications/OSHA3827.pdf>
- The Joint Commission, Workplace Violence Prevention Standards, R3 Report / Requirement, Rationale, Reference, Issue 30, June 18<sup>th</sup> 2021
- The Joint Commission Accreditation Manual for Hospitals Environment of Care, Human Resources and Leadership Chapters, January 2022, <https://edition.jcrinc.com/MainContent.aspx>
- US Bureau of Labor Statistics <https://www.bls.gov/iif/oshwc/cfoi/workplace-violence-healthcare-2018.htm>



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