



Building a Safe Workplace and Community

Mitigating the Risk of Violence

The American Hospital Association's Hospitals Against Violence (HAV) initiative hosted the American Society for Health Care Risk Management (ASHRM) for a facilitated dialogue to explore challenges and current strategies to mitigate the risk of violence. The discussion fostered an exchange of ideas and solutions that informed this issue brief and accompanying case studies.

Introduction

In 2021, HAV developed the [Building a Safe Workplace and Community](#) framework to guide health care leaders in their efforts to prevent and mitigate violence. This issue brief examines risk mitigation and marks the first in a series that expand on each domain of the framework: culture of safety, violence intervention, trauma support and risk mitigation.

This issue brief is an outgrowth of a series of discussions between hospital and risk management leaders. The brief shares considerations when assessing potential risks, strategies to mitigating violence and insights on making the care environment safer.



Background

Violence in health care settings is a complex issue and an ongoing public health concern. Hospitals and health systems across the country are faced with a significant increase of violence and incivility in the workplace and against the health care workforce. During the COVID-19 pandemic, health care workers reported an increase in threats and assaults, which can have a devastating impact on access and delivery of patient care.¹ Adding to the individual and collective trauma are the repeated violent acts plaguing our communities and overwhelming our health care system and workforce.

DEFINITIONS TO KNOW

Workplace Violence

ACCORDING TO:

- **Occupational Safety and Health Administration (OSHA):** Workplace violence is any act or threat of physical violence, harassment, intimidation, or other threatening disruptive behavior that occurs at the work site. It can affect and involve workers, clients, customers and visitors.
- **CDC's National Institute for Occupational Safety and Health:** Violent acts (including physical assaults and threats of assaults) directed toward persons at work or on duty. Examples of violence include threats, which are expressions of intent to cause harm, including verbal threats, threatening body language and written threats.
- **The Joint Commission:** 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.

Risk Assessment

A part of the overarching process of risk management that identifies, analyzes and evaluates risks that may have a negative influence on health care organizations' quality and safety of care delivered.

Threat Assessment

A behavior-based inquiry process that helps organizations respond to a threat of targeted violence and identify those who may be moving toward an intentional harmful event; it is a multi-disciplinary approach to identifying, assessing and mitigating concerns of intentional violence.²

Enterprise risk management encompasses the entire organizational care setting (inpatient, outpatient services, outpatient offices, freestanding labs and urgent care settings, long-term care, home health and others) and administrative processes with the goal of mitigating risks, identifying types of hazard prevention and risk control measures necessary to avoid or mitigate security incidents. A role of the risk professional is to proactively and systemically identify, assess, mitigate and prevent risk to improve safety for all.³

As health care leaders consider the implementation or enhancement of existing organizational risk management practices to mitigate the risk of violence, consideration needs to be given to continuous review and updating of existing tools and interventions. For example, according to the American Society for Healthcare Risk Management (ASHRM), “Traditional risk management is no longer sufficient to sustain organizational success in an environment of transforming health care delivery and payment. Enterprise risk management provides a more comprehensive, holistic approach that can help hospitals, health systems and their boards better anticipate, recognize and address the myriad risks associated with the increased complexity of transformational change.” See [ASHRM ERM Quick Reference Tool](#).

Assessing Risk

A risk assessment is based on research and data on the prevalence of violent incidents in particular populations, as well as individual factors that are associated with disruptive and violent behaviors. A variety of risk assessment tools exist to evaluate individuals and situations for potential violence, enabling the health care workforce to share a common frame of reference and understanding.

Event reporting is essential to the organization’s ability to mitigate the risk of violence. Leaders play a role in fostering a culture of safety and risk awareness that encourages reporting incidents of violence, intimidation or threats; promotes the use of a consolidated security/event incident reporting system and established categories; and sponsors the implementation of evidence-based safety technologies.

Risk assessment and threat assessments are often used interchangeably, but each are significantly different. A risk assessment is evidenced-based practices based on a processes that identify the organization’s historical and current risks as well as future risks. This risk identification process allows risk controls to be put in place. However, both risk and threat assessment



EVIDENCE-BASED RISK ASSESSMENT TOOLS^{4,5}

- [ASHRM’s Facility Workplace Violence Risk Assessment Tool](#)
- [Brøset Violence Checklist](#)
- [Triage Tool](#)
- [Indicator for Violent Behavior](#)
- [Danger Assessment Tool](#)
- [Dynamic Appraisal of Situational Aggression](#)

Safety Strategies that Worked

NewYork-Presbyterian Hospital

EMR flagging and behavioral health response training reduces violence at New York health system

NewYork-Presbyterian leaders balance traditional security and emergency management processes with information technology infrastructure. With 11 hospitals and 47,000 employees, the New York City-based health system’s security professionals are continuously identifying new and innovative strategies, including electronic medical record flagging, behavioral risk assessment and mass casualty event training, to prevent and mitigate workplace violence incidents.

teams are a multidisciplinary rapid response group and part of a comprehensive workplace violence prevention program. The four key components of a risk assessment are 1) identify the risk; 2) analyze the risk; 3) control, transfer or mitigate the risk; and 4) monitor risk control measures.

A threat assessment is the process of gathering information to decide the potential for violence. Its use is prevalent in other industries, but its adoption is slow within health care organizations. In a health care organization, a threat assessment program begins by creating an interdisciplinary team, including members of the clinical team, operations, safety and security, risk management, human resources and communications. The four key components of a threat assessment process are 1) creating the threat assessment team; 2) identification of a potential threat; 3) investigation; and 4) mitigation and management of the threat.

Mitigating Risk

Mitigating the risk of violence begins with the acceptance that risks of violence exist in all health care settings. Risk professionals and administrative leadership need to adopt a multi-pronged approach and work collaboratively with all stakeholders and outside partners, including but not limited to state and local police, county agencies and others.⁶

Most important are the people working in health care facilities. All staff should be empowered to enforce policies and report any incidents of violence.⁷ Leaders can empower staff through clear and consistent communication, following up on any reported incidents and by providing trauma support for any team members affected by violence.

Workplace violence prevention program procedures should be readily available and include input from leaders, staff, patients and visitors. Categories of workplace violence that may be included in trainings are interpersonal violence, active shooter and de-escalation training.



SECURITY STRATEGIES CONSIDERATIONS

- Access control
- Hospital-based police departments
- Interdisciplinary stakeholder committees and workgroups
- Canines/K-9
- Documenting and flagging for potential or historical violent or disruptive behavior
- Threat assessment teams
- De-escalation training — to include simulation training
- Staff duress alarms
- Surveillance security technology and equipment, including body cameras
- Metal detection systems
- Mass notification systems
- Visitor identification policies

Safety Strategies that Worked

Bristol Health

Leveraging community partnerships to take a stand against hospital violence

Bristol Health decreased workplace violence by upgrading their incident reporting system, boosting prevention education and supporting employees. Bristol leaders forged an organization-wide culture of safety. They meticulously track data to help prevent future incidents and have gained crucial support from local stakeholders and policymakers, ultimately inspiring conversations about community-wide policy changes.

In addition, security technologies are striving to meet the demand to improve safety in our communities. Hospital and health system leaders are evaluating the various security technologies, available resources and potential impact to patient care.

Improving the Environment

Health care leaders strive to create a safe, trusted and healing environment for all. Efforts to mitigate the risk of workplace violence contributes to improving a team-based response in moments of crisis, encourages trust in reporting and improves the physical and psychological safety of all internal and external stakeholders. Assigning an executive sponsor(s) to champion the workplace violence organizational focus and how the organization identifies and manages violence or threats of violence is strongly encouraged for success.

A place for leadership to begin this work is reinforcing that safety is a priority and commit to the short- and long-term needs of those affected by violence. A good starting point is the creation or review of a workplace violence prevention program policy and related procedures.

A key stakeholder group in improving safety in hospitals and health systems are the trustees. It is important to the overall violence prevention strategy to meaningfully engage trustees by sharing data and incidents, request input on safety-related initiatives and utilize the board to connect with the community to find shared solutions.⁸

We must all work together to make the health care environment safer.

Safety
Strategies
that
Worked

Inova
Health
System

Multidisciplinary teams reduce violence at Inova Health System

Inova leaders formed a multidisciplinary team to evaluate current data, develop employee engagement strategies and ensure system-wide buy-in. As a result, safety leaders have reduced the severity and frequency of injuries in Inova's emergency departments, behavioral health units and across the system.

Resources

AHA Resources

- [Building a Safe Workplace and Community: A Framework for Hospital and Health System Leadership](#)
- **Case Studies**
 - [Bristol Health](#)
 - [Inova Health System](#)
 - [NewYork-Presbyterian](#)
- [ASHRM Workplace Violence Toolkit](#)
- [American Organization for Nursing Leadership and Emergency Nurses Association Guiding Principles: Mitigating Violence in Health Care](#)
- [American Organization for Nursing Leadership and Emergency Nurses Association Toolkit for Mitigating Violence in the Workplace](#)
- [AHA Trustee Services and ASHRM - Enterprise Risk Management for Health Care Boards: Leveraging the Value](#)
- [The CLEAR Field Guide for Emergency Preparedness](#)
- [Creating Safer Workplaces: A guide to mitigating violence in health care settings, a collaboration between AHA and the International Association for Health Care Security and Safety](#)

National Resources

- [International Association of Healthcare Security and Safety. Threat Assessment Strategies to Mitigate Violence in Healthcare](#)
- [International Association of Healthcare Security and Safety and the Security Industry Association. Mitigating the Risk of Workplace Violence in Health Care Settings. August 2017](#)
- [Massachusetts Hospital Association's Security Guidance: Developing Healthcare Safety & Violence Prevention Programs within Hospitals](#)
- [Oregon Association of Hospitals and Health Systems](#)
- [Public Services Health and Safety Association Workplace Violence Risk Assessment Toolkit for Acute Care](#)

Sources

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In fall 2022, ASHRM met with the AHA's Hospitals Against Violence Advisory Group — comprised of clinicians and hospital leaders from across the nation, along with experts within the AHA — to develop this issue brief.

Special thanks to the contributors.

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