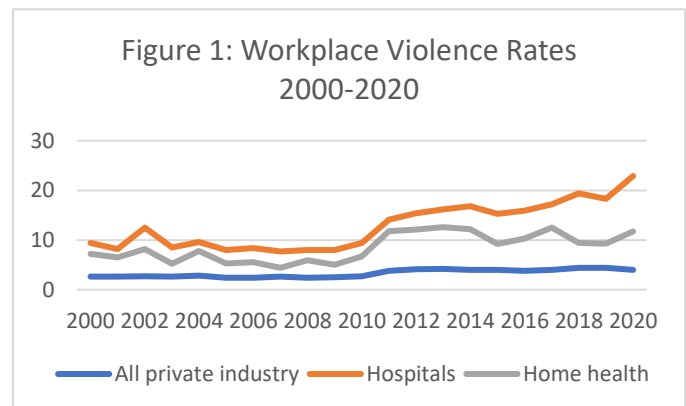


WORK SHOULDN'T HURT

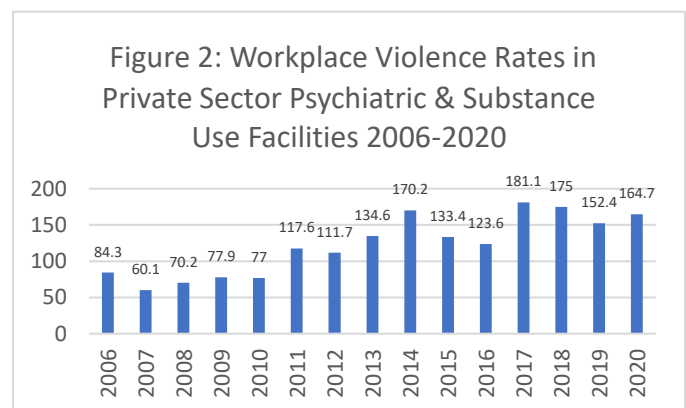
Workplace Violence in Healthcare: A Growing Problem

November 2022

Recent workplace homicides have brought attention to assaults on healthcare workers, but these high-profile events are only a fraction of the violence impacting healthcare workers daily. Healthcare workers are nearly five times more likely to be assaulted at work compared with other workers according to the Bureau of Labor Statistics. AFT Nurses and Health Professionals members have suffered serious threats, broken bones, concussions, symptoms of post-traumatic stress disorder, and other injuries.



Workplace violence in healthcare has been rising for many years and is getting much worse due to the staffing crisis and pandemic-related pressures. Between 2006 and 2020, the rate of injuries from workplace assaults jumped 173 percent in private hospitals, 95 percent in psychiatric and substance use facilities, and 63 percent in home health agencies. The rate of reported assaults climbed 25 percent in one year alone in 2020 (BLS). With staffing problems worsening, the number of healthcare workers assaulted at work will only continue to grow.



U.S. Department of Labor, Bureau of Labor Statistics, Survey of Injuries and Illnesses

The American Federation of Teachers is a union of 1.7 million professionals that champions fairness; democracy; economic opportunity; and high-quality public education, healthcare and public services for our students, their families and our communities. We are committed to advancing these principles through community engagement, organizing, collective bargaining and political activism, and especially through the work our members do.

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Violence Is Not Part of the Job: OSHA Must Protect HealthCare and Social Service Workers

The AFT has fought for enforceable worker protections from workplace violence for many years, pressing the Occupational Safety and Health Administration and Congress for action. OSHA first responded by issuing voluntary workplace violence prevention guidance for healthcare and social service employers in 1996.

In 2011, the agency instructed its inspectors on how to conduct workplace violence investigations in healthcare settings using the General Duty Clause, which is part of the Occupational Safety and Health Act. Unfortunately, the General Duty Clause has only been used to protect workers after truly severe workplace assaults have occurred. The AFT petitioned OSHA in 2016 for a specific standard that would require healthcare and social service employers to develop a comprehensive workplace violence prevention program in collaboration with frontline workers.

OSHA began work on an enforceable workplace violence standard late in the Obama administration, but little progress has been made on the rule. A bill, the Workplace Violence Prevention for Healthcare and Social Service Workers Act, would require OSHA to finalize the standard within a year. The bill has passed the House of Representatives twice but has languished in the Senate.

AFT NHP will not rest until OSHA issues a workplace violence standard to protect healthcare and social service workers. In the meantime, union leaders do have tools that can be used to reduce the risk of violence in the workplace. We encourage local leaders to use these to engage with management to develop comprehensive prevention programs. AFT NHP provides training to locals on these tools.

Seven years ago, I was punched in the head and then kicked in the stomach. I was in a dark hallway during a night shift with no security nearby. I was semi-conscious and seizing when my co-workers found me. This patient hurt other staff badly as well. I've suffered long-term injuries—a traumatic brain injury, loss of range of motion of my neck, loss of vision, memory issues, and, of course, I have been diagnosed with PTSD—something none of us is proud to admit to. I am on medications daily for the headaches that have not gone away. I had to return to work three months after my assault or my employer would have replaced me.

One year later, I was attacked again. The patient told me I was going to die. He was a boxer, and he charged at me behind the nurses' station. He was twice my size and half my age. There was no security—only me to fight for myself.—Barbara Walsh, AFT NHP psychiatric nurse

The Joint Commission Standard

As of January 2022, the Joint Commission requires accredited providers to create structured workplace violence prevention programs to meet accreditation requirements. For members in Joint Commission-accredited hospitals, critical access hospitals and home health operations, these standards offer an excellent opportunity to engage with the employer to bargain for a strong comprehensive workplace violence prevention program. The requirements are similar to the recommendations in OSHA's workplace violence guidance. They include:

- Developing reporting systems;
- Gathering and analyzing data and incidents of workplace violence;
- Using the data to identify trends and create mitigations;
- Training leaders and staff to recognize and report incidents of workplace violence and how to respond; and
- Creating a response program to provide support to victims and witnesses.

For more information, see:

[Nurses and Healthcare Professionals | AFT eLearning R3 Report Issue 30: Workplace Violence Prevention Standards | The Joint Commission Workplace Violence Prevention | The Joint Commission Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers \(osha.gov\)](#)

State Laws

Nine states—California, Connecticut, Illinois, Maine, Maryland, New Jersey, New York, Oregon and Washington—have passed laws requiring healthcare employers to develop workplace violence prevention programs. Several other states are considering similar bills. Although not all the laws are equally strong, they provide a basis for demanding that the employer develop a program to prevent violence in the workplace. Employers should develop site-specific risk assessments and solutions based on the available data. They must create reporting systems and encourage workers to report incidents. Most of the laws require management to get input from frontline workers and improve existing training.

For more information, see [Nurses and Healthcare Professionals | AFT eLearning](#).

The General Duty Clause

The General Duty Clause requires employers to provide a workplace free of recognized hazards likely to cause death or serious physical harm. While it is not as strong as a specific workplace violence standard, AFT NHP locals have successfully made complaints to OSHA following significant workplace violence incidents. If OSHA cites the employer, the charges and fine are usually reduced during the settlement process if the employer claims to be addressing the hazard. If a

complaint does not result in a citation, OSHA may issue a warning letter to the employer.

These results can be disappointing to union leaders and members. But any engagement with OSHA is a potential win for the union, even if it is only because the union is showing its power and OSHA is building a record on the employer. Having OSHA go into a facility to inspect it gives the union an opportunity to demand that the employer treat the issue seriously. It also gives the union a chance to communicate with members about health and safety efforts. Employers often work hard at getting a citation reduced during the settlement process so they can say that OSHA did not find the problem serious. The challenge for the union is to use whatever the result of OSHA's engagement is to push the employer and to communicate that message to members.

Joint Labor-Management Committees on Workplace Violence

We encourage local unions to negotiate for joint labor-management committees on workplace violence prevention, as well as on other health and safety concerns. To be as effective as possible, joint committees should provide a level playing ground for the union with management. This includes equal representation, release time and staffing support for union committee members; shared committee leadership roles; and equal opportunities to bring issues to the table.

Unions engaging with management in a joint committee should prepare for the joint meetings by getting training for committee representatives, making information requests, analyzing data in advance and developing a strategic plan.

Representatives on the committee should be empowered to work with management to develop,

implement and evaluate the workplace violence prevention program. These activities include reviewing the existing data, conducting site inspections and analyzing the root causes of violent incidents. AFT NHP provides training to foster strong local health and safety committees.

OSHA has excellent resources to help build a strong workplace violence prevention program. For more information, see:

[Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers \(osha.gov\)](#)
[Worker Safety in Hospitals—Preventing Workplace Violence in Healthcare | Occupational Safety and Health Administration \(osha.gov\)](#)

For more information, please contact the AFT health and safety team at: 4healthandsafety@aft.org

