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Violence against healthcare workers: A workforce challenge and patient safety concern

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The Buzz This Week

Earlier this year, the Emergency Care Research Institute released its annual report of the top 10 patient safety concerns for 2023. Leading the list was pediatric mental health, covered in a previous edition of Chartis Top Reads. Listed second: violence against healthcare workers, which has been increasing for the past 10 years. Since the COVID-19 pandemic began, there has been an acute uptick in violent incidences directed at hospital staff.

Per the National Nurses United April 2022 survey, 48% of hospital nurses reported an increase in workplace violence, up from 22% in the March 2021 survey. A disturbing 82% of nurses reported having experienced at least one violent workplace incident in the past year. A 2022 survey conducted by the American College of Emergency Physicians found that nearly half of emergency physicians believe the rate of violence in emergency departments has greatly increased over the past 5 years, and 90% believe it negatively impacts patient care. Violence in the workplace is 5 times more likely to occur in a hospital setting than in other workplaces. In 2018, federal data showed that healthcare workers accounted for 73% of all nonfatal injuries resulting from workplace violence. These numbers may underrepresent the true rate of violence in healthcare settings, as victims of patient assaults do not always report incidents, and there has long been the notion that these experiences are part of the job.

This year, several bills to address this growing problem have been introduced and/or passed at both the federal and state levels. In April, Congress introduced the Workplace Violence Prevention for Healthcare and Social Service Workers Act, which would “mandate that the federal Occupational Safety and Health Administration, create a federal standard requiring healthcare and social service employers to develop and implement comprehensive workplace violence prevention plans.” In May, governors in Georgia and New

Jersey signed into law increased penalties for those who commit violent acts against healthcare professionals. Georgia's new law also allows hospitals to create their own police forces.

In fact, nearly 40 states have laws that establish or increase penalties for assaults on healthcare workers, while a smaller number of states have laws that allow the creation of hospital-based police forces, where officers could carry firearms, make arrests, and would be more trained to handle workplace violence non-certified officers like security guards.

Why It Matters

Violence committed by patients against healthcare workers is yet another workforce challenge facing healthcare organizations, adding to staffing shortages and rising rates of burnout. These entities are taking more pointed approaches to address the issue, in part guided by standards and recommendations from the Centers for Medicare and Medicaid Services and The Joint Commission.

One approach is to put preventive measures in place. These include identifying the primary issues that contribute to patient outbursts such as lack of adequate staffing and long wait times, forming a trained behavioral emergency response team, and developing appropriate response processes that not only ensure the mental and physical safety of employees but also patients and their families.

Another growing practice is to establish a formal patient code of conduct, which makes clear the behavioral standards by which patients and families need to adhere and would give healthcare organizations the option to refuse services if those standards are not met.

Finally, some entities are adding more security/police personnel to handle incidents if and when they occur, as well as increased penalties for violent offenders. However, some believe stronger punitive initiatives may cause more harm than good, for example, given trends in discrimination against Black individuals, undocumented immigrants, and/or members of other marginalized communities, as well as the tendency to disproportionately criminalize people from those groups. There is some evidence that suggests Black patients are disproportionately charged and cited for violent incidents; there is limited research on the effectiveness of hospital police forces in reducing violence in healthcare facilities.

Regardless of which approach is taken—whether it be preventive measures and/or stronger ways to enforce or punish acts of violence—addressing violence against healthcare workers should be a top priority for every healthcare organization. It is also important to remember that because patients and families typically seek hospital care at times of crisis, emotions and tempers can be elevated and rational thinking may be constrained. Healthcare workers find themselves in a difficult position where the stakes are higher, needing to treat and care for the patients in crisis without the luxury of refusing service to hostile or aggressive individuals. As such, healthcare workers must have adequate training to de-escalate potentially violent situations, helping to ensure a safe environment for themselves and their colleagues, while also providing empathetic support to patients and families.

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