



Workplace Violence

workplace
violence

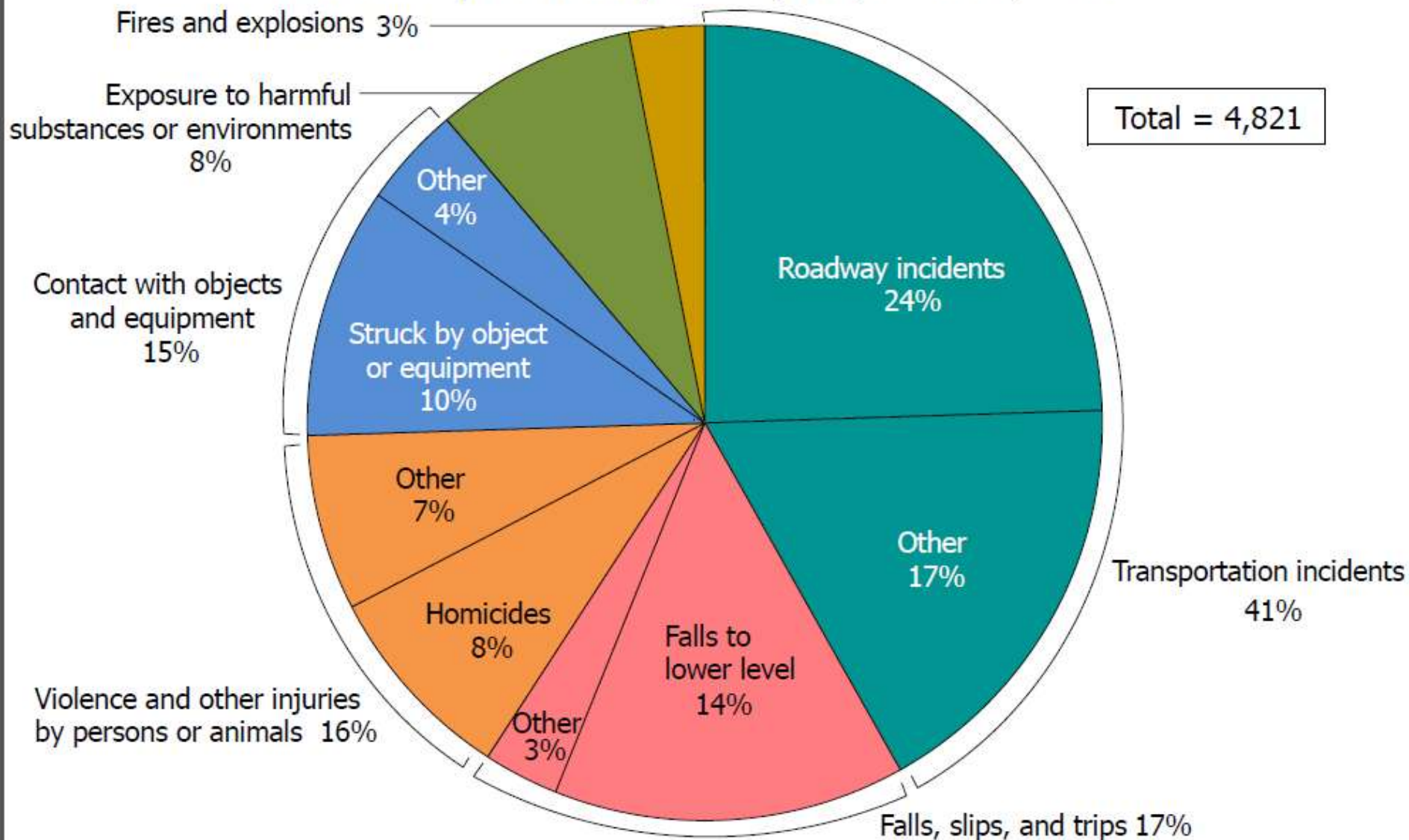
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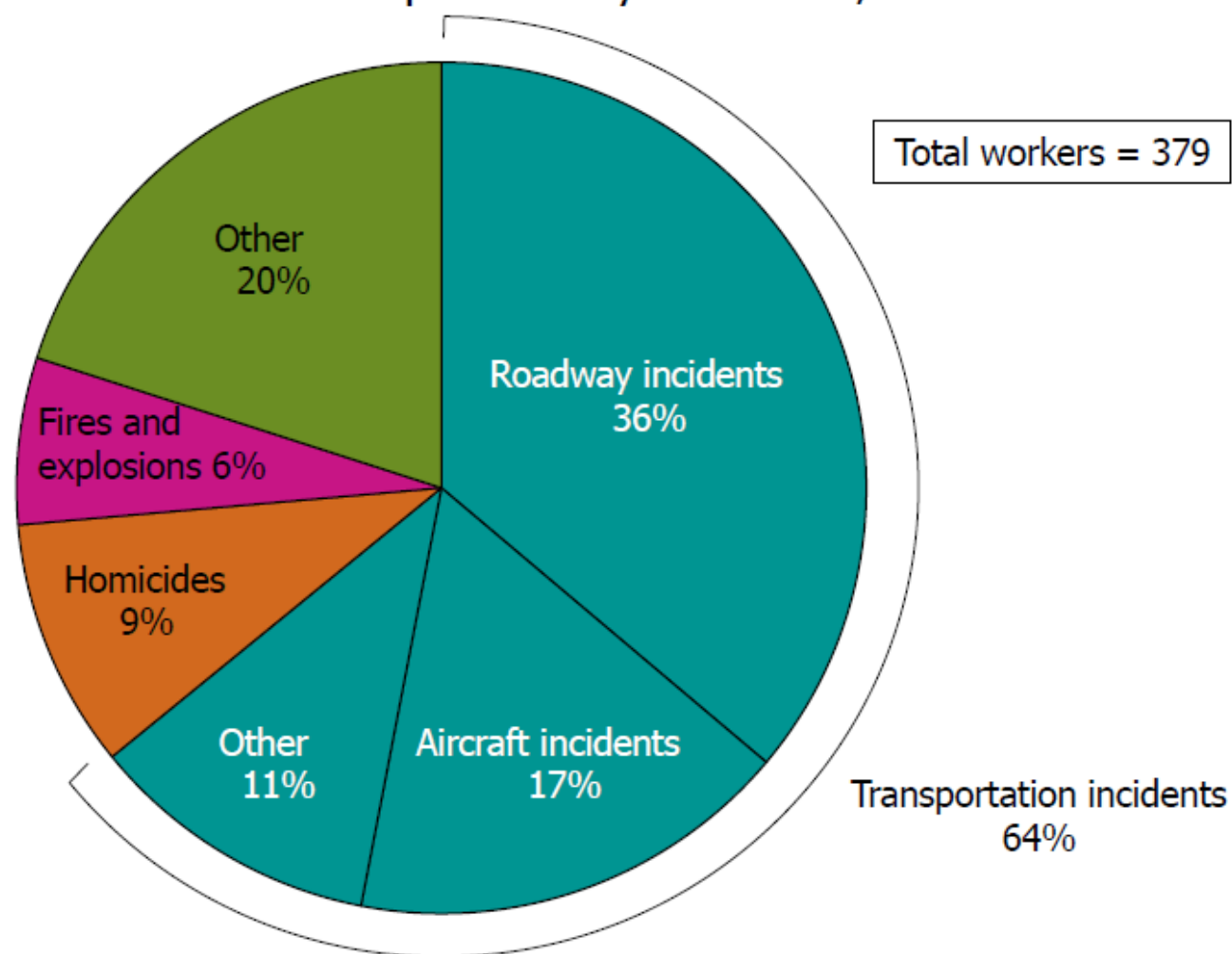
<http://www.cbc.ca/news/canada/british-columbia/pam-owen-beaten-mental-health-worker-doesn-t-blame-attacker-1.2741195>

Fatal occupational injuries by major event, 2014



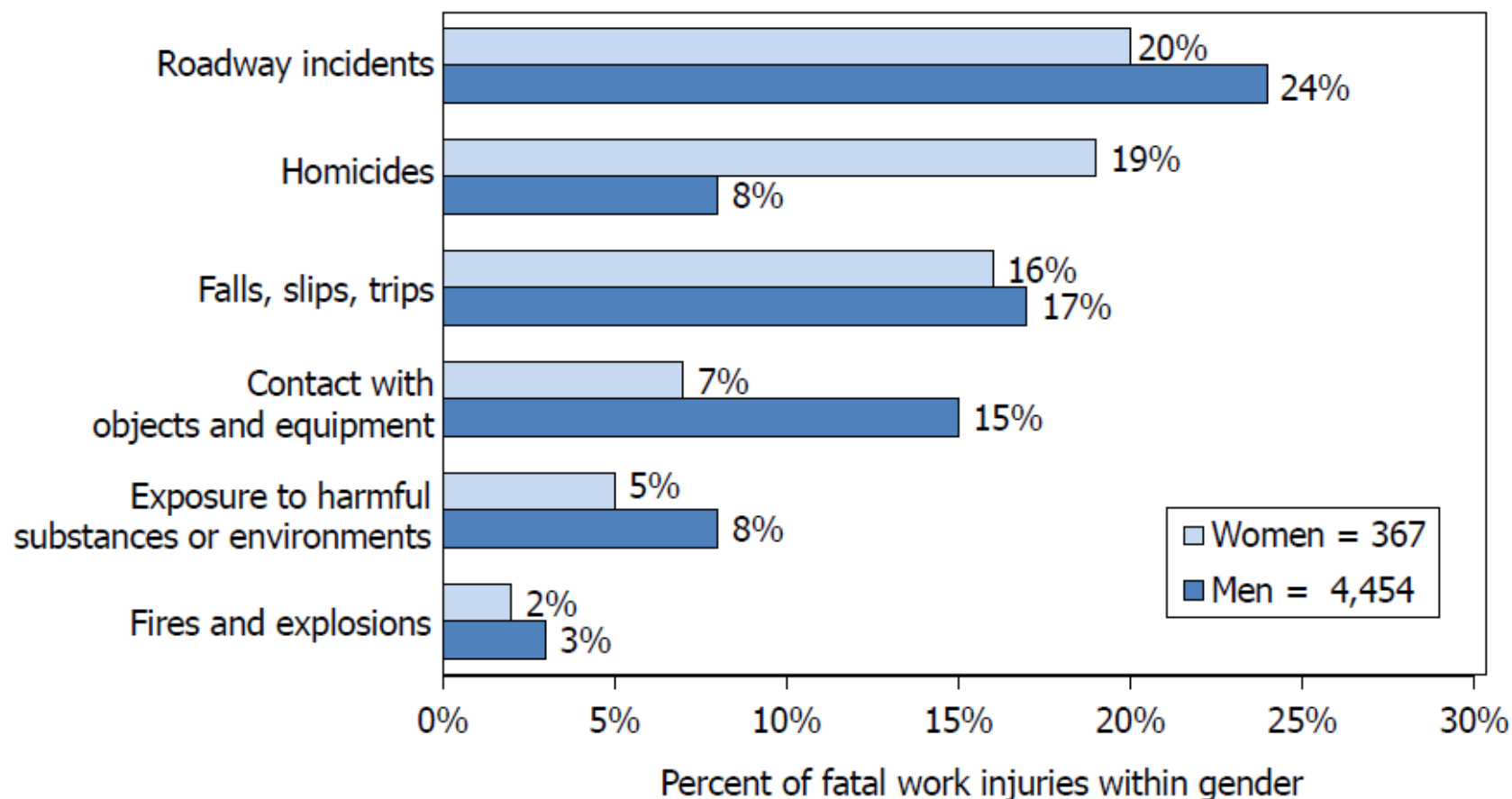
More fatal work injuries resulted from transportation incidents than from any other event in 2014. Roadway incidents alone accounted for nearly one out of every four fatal work injuries.

How workers died in multiple-fatality incidents, 2014



A total of 166 multiple-fatality incidents occurred in 2014 (incidents in which more than one worker was killed). Transportation incidents were responsible for nearly two-thirds of the workers killed in multiple-fatality incidents. Homicides accounted for the second highest number of workers lost in multiple-fatality incidents.

Distribution of fatal injury events by gender of worker, 2014



Women experienced a higher proportion of fatal injuries due to homicide relative to men. Men incurred a higher proportion of injuries from roadway incidents, contact with objects and equipment, and exposure to harmful substances or environments. Men and women experienced similar proportions of fatal injuries from falls, slips, and trips and from fires and explosions.

Healthcare workers face significant risks of job-related violence



While under **20%** of
all workplace injuries
happen to healthcare
workers...



Healthcare workers
suffer **50%** of all
assaults.

Source: Bureau of Labor Statistics



Definition

Workplace violence is defined as
violent acts (including physical
assaults and threats of assaults)
directed toward persons at work or
on duty





Workplace Violence

Is Workplace Violence a police
matter?

Or is it a Safety and Health concern?



Workplace Violence

Yes, WPV is a police matter.

Yes, WPV is a Safety and Health
matter.



Types of Workplace Violence

Classifications of workplace violence describe the relationship between the perpetrator and the target of workplace violence:

Type 1—Criminal Intent

Type 2—Customer/Client/Patients

Type 3—Co-worker

Type 4—Personal





General Risk Factors

- Exchange money with the public
- Deliver passengers, goods, or services
- Work alone or in small groups during late night or early morning hours
- Work in high-crime areas
- Work in community settings and homes experiencing extensive contact with the public



Healthcare Risk Factors

- Working directly with people who have:
 - A history of violence,
 - Abuse drugs or alcohol, and
 - Are gang members
- Transportation of patients and clients
- Working alone in a facility or in patients/clients homes
- Poor environmental design
 - Areas where vision is blocked
 - Areas where escape is blocked



Healthcare

Organizational Risk Factors

- Lack of facility policies and staff training on recognizing and managing violent behavior
- Working when understaffed, especially during visiting and mealtime hours
- High worker turnover
- Inadequate security and mental health personnel onsite



Healthcare

Organizational Risk Factors

- Long waits in overcrowded, uncomfortable waiting rooms
- Unrestricted movement of the public in clinics and hospitals
- Perception that violence is tolerated and that it will not be reported to the police or that employees can press charges



Continuum

» Violence

» Threats of Violence

» Bad Behavior

» Good Behavior



Workplace Violence Continuum

- Common non-physical acts such as incivility, bullying, gestures, expressions
- Verbal threats
- Less common physical acts such as battery, aggravated assault
- Homicide
- Acts of terrorism





Comprehensive WPV Prevention Program

- A policy statement for potential violence in the workplace
- Management Commitment and Employee Participation
- A workplace violence hazard/risk assessment and security analysis
- Development of workplace violence controls
- Training program
- A recordkeeping/reporting system



Comprehensive WPV Prevention Program

Policy statement for potential violence in the workplace

- Clearly communicate the WPV policy
- Clearly communicate and be prepared to enforce consequences for WPV
- “Zero-tolerance” may not be a good policy if consequences are not clearly communicated and enforced



Comprehensive WPV Prevention Program

Management Commitment and Worker Participation

- Effective management leadership begins by recognizing that WPV is a safety and health hazard
- Through involvement and feedback, workers can provide useful information to design, implement and evaluate the WPV program



Comprehensive WPV Prevention Program

Worksite Analysis and Hazard Identification

- Worksite analysis is a step-by-step assessment of the workplace
- The team can include maintenance, operations, EAP, security, S&H, legal, and HR staff
- Includes walk-through, interviews/surveys, and records analysis and review



Comprehensive WPV Prevention Program

Hazard Prevention and Control

- Once the hazards are identified in the worksite analysis, control measures should be put in place
- Substitution, Engineering Controls, Administrative/Work practice Controls
- During-incident Controls
- Post-incident Controls
- Investigation of Incidents



Comprehensive WPV Prevention Program

Training

- De-escalation training
- “Universal precautions” for violence
- Facility WPV program
- Risk factors
- Engineering and Administrative/Work practice controls



Comprehensive WPV Prevention Program

Training

- Plan for in-progress events
 - Alarm
 - Availability and Responsibility of People providing Assistance
 - Communication
 - Role of Police and other Emergency Responders
- Reporting and Recordkeeping
- Post-incident care including legal assistance
- Drills



Comprehensive WPV Prevention Program

Recordkeeping and Review

- 300 and 301
- Near misses
- Other logs: violence, daily, police reports, security, HR
- Medical/Worker's comp records
- Information on patients with a history of violence, drug/alcohol abuse, other risk factors



Comprehensive WPV Prevention Program

Recordkeeping and Review

- Reporting of incidents
- Post-incident reports and root cause analysis
- Training records
- Minutes of safety meetings, hazard analysis, and corrective actions
- Annual review



UNITED STATES DEPARTMENT OF LABOR

OCCUPATIONAL SAFETY & HEALTH ADMINISTRATION



OSHA INSTRUCTION

U.S. DEPARTMENT OF LABOR

Occupational Safety and Health Administration

DIRECTIVE NUMBER: CPL 02-01-052

EFFECTIVE DATE: September 8, 2011

SUBJECT: Enforcement Procedures for Investigating or Inspecting Workplace Violence Incidents

ABSTRACT

Purpose: This instruction establishes general policy guidance and procedures for field offices to apply when conducting inspections in response to incidents of workplace violence.

Scope: OSHA-wide.



Purpose

Provide general policies and procedures that apply:

- When workplace violence is identified
- When responding to incidents of workplace violence
- When inspecting workplaces in high risk industries



OSHA-Identified High-Risk Industries

Late-Night Retail

Convenience stores, liquor stores,
gas stations

At risk because of:

Exchange of money, 24 hour
operation, solo work, sale of
alcohol





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OCCUPATIONAL SAFETY & HEALTH ADMINISTRATION

OSHA-Identified High-Risk Industries

Healthcare and Social Service

hospitals, psychiatric facilities, community mental health, drug abuse clinics, pharmacies, community care facilities, residential facilities, long term care facilities

Protecting: physicians, nurses, pharmacists, therapists, technicians, home healthcare workers, social and welfare workers, and other workers who work in these settings



Wallace, 36, was at Mass Eye and Ear for a scheduled appointment when he attacked the two men escorting him, authorities said.

JOHN TILMACK/AP

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Types of Workplace Violence

Classifications of workplace violence describe the relationship between the perpetrator and the target of workplace violence:

Type 1 Criminal Intent – **OSHA Identified HIGH RISK**

Type 2 Customer/Client/Patients – **OSHA Identified
HIGH RISK**

Type 3 Co-worker

Type 4 Personal





When Does OSHA Inspect?

May Inspect for:

- ✓ Complaint
- ✓ Referral
- ✓ Fatality
- ✓ Catastrophic event

Usually do inspection for:

- ✓ Complaint in retail, healthcare, social svcs
- ✓ Referral in retail, healthcare, social svcs
- ✓ Fatality - All
- ✓ Catastrophic event – All





When Does OSHA Inspect?

May inspect for:

- ✓ Programmed Inspection
 - healthcare and social service settings (nursing home NEP)
 - late-night retail establishments





When Does OSHA take action?

May do Non-formal for:

- ✓ Co-worker on co-worker violence
- ✓ Domestic violence that spills into the workplace

Instruct complainant to call Law Enforcement:

- ✓ When a crime has been committed
- ✓ If they are in danger call 911
- ✓ If they are the victim of a crime



*Note: OSHA does not investigate crimes!



When Does OSHA take action?

According to the directive:

“An inspection generally shall not be considered in response to co-worker or personal threats of violence”

These instances should be referred to the local police, EEO, NLRB, or OSHA’s Office of Whistleblower Protection



Scenarios for OSHA Action

A patient in the psychiatric ward attacks a nurse at a local hospital:

Known risk factors? Yes

Industry and/or Employer Recognition of Hazard?

Yes

Is there a Feasible Means of Abatement? Yes

INSPECT!



Scenarios for OSHA Action

A disgruntled acquaintance stabs (injures) an employee of a bookstore in a low crime area at work, the bookstore and adjacent business have never been robbed:

Known risk factors? No

Industry and/or Employer Recognition of Hazard?
No

Is there a Feasible Means of Abatement? No

DO NOT INSPECT! (But maybe do non-formal)



Scenarios for OSHA Action

A shooting has been reported at a local grocery store:

Known risk factors? Maybe

Industry and/or Employer Recognition of Hazard?

Maybe

Is there a Feasible Means of Abatement? Maybe

INSPECT based on AD Discretion!



When does OSHA issue Citations?

- Section 5(a)(1) General Duty Clause; or
- 29 CFR 1904 Recording and Reporting Occupational Injuries and Illnesses
- 29 CFR 1910.151 Medical Services and First Aid
- 29 CFR 1926.23 First Aid and Medical Attention
- 29 CFR 1926.35 Employee Emergency Action Plans





Elements of a 5a1 Citation

- A Serious WPV hazard exists and the employer failed to keep its workplace free of hazards to which employees were exposed
- There is Industry and Employer Recognition (knowledge) of the WPV hazard
- The Hazard caused or was likely to cause Death or Serious Physical Harm
- There are Feasible Abatement Methods available to address the WPV hazard



Examples of Cases w/Citations

371 Bed Hospital, 2600 Employees

- OSHA received a Complaint followed by a shooting
- Previous inspection more than 5 years prior, OSHA issued a Hazard Alert Letter
- Employees had been punched, kicked, stabbed resulting in serious injuries including broken bones
- 5 years prior to inspection: 25 cases with 212 restricted duty days and 399 days away from work; 119 non-recordable cases (144 cases in 5 years)



Examples of Cases w/Citations

100 Bed Psychiatric Hospital, 700 Employees

- OSHA received a Complaint
- Employees had been punched, kicked, stabbed, sexually assaulted, almost strangled, resulting in serious injuries including broken bones
- 18 months prior to inspection: 778 assaults at the hospital



Occupational Safety & Health Administration

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SAFETY AND HEALTH TOPICS

workplace violence



Risk Factors

Prevention Programs

Training & Other Resources

Enforcement

Safety and Health Topics ▾

This workplace violence website provides information on the extent of violence in the workplace, assessing the hazards in different settings and developing workplace violence prevention plans for individual worksites.

What is workplace violence?

Workplace violence is any act or threat of physical violence, harassment, intimidation, or other threatening disruptive behavior that occurs at the work site. It ranges from threats and verbal abuse to physical assaults and even homicide. It can affect and involve employees, clients, customers and visitors. Homicide is currently the fourth-leading cause of fatal occupational injuries in the United States. According to the Bureau of Labor Statistics Census of Fatal Occupational Injuries (CFOI), of the 4,679 fatal workplace injuries that occurred in the United States in 2014, 403 were workplace homicides. [\[More...\]](#) However it manifests itself, workplace violence is a major concern for employers and employees nationwide.

Who is at risk of workplace violence?

Nearly 2 million American workers report having been victims of workplace violence each year. Unfortunately, many more cases go unreported. Research has identified factors that may increase the risk of violence for some workers at certain worksites. Such factors include exchanging money with the public and working with volatile, unstable people. Working alone or in isolated areas may also contribute to the potential for violence. Providing services and care, and working where alcohol is served may also impact the likelihood of violence. Additionally, time of day and location of work, such as working late at night or in areas with high crime rates, are also risk factors that should be considered when addressing issues of workplace violence. Among those with higher-risk are workers who exchange money with the public, delivery drivers, healthcare professionals, public service workers, customer service agents, law enforcement personnel, and those who work alone or in

Highlights

- **Updated** [Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers*](#) ([EPUB**](#) | [MOBI**](#)). OSHA Publication 3148, (2015).
- **New** [Worker Safety in Hospitals: Caring for our Caregivers, Preventing Workplace Violence in Healthcare](#). OSHA, (2015).
- [Enforcement Procedures for Investigating or Inspecting Workplace Violence Incidents](#). OSHA Directive CPL 02-01-052, (September 8, 2011).
- [Preventing Violence Against Taxi and For-Hire Drivers*](#). OSHA Fact Sheet, (April 2010).
- [Recommendations for Workplace Violence Prevention Programs in Late-Night Retail Establishments*](#). OSHA Publication 3153, (2009).

Resources

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OCCUPATIONAL SAFETY & HEALTH ADMINISTRATION

News Release

U.S. Department of Labor

U.S. Department of Labor | June 30, 2016

US Department of Labor announces new rules to adjust civil penalty amounts

WASHINGTON - In 2015, Congress passed the Federal Civil Penalties Inflation Adjustment Act Improvements Act to advance the effectiveness of civil monetary penalties and to maintain their deterrent effect. The new law directs agencies to adjust their penalties for inflation each year using a much more straightforward method than previously available, and requires agencies to publish "catch up" rules this summer to make up for lost time since the last adjustments.

As a result, the U.S. Department of Labor announced today two interim final rules to adjust its penalties for inflation based on the last time each penalty was increased.

"Civil penalties should be a credible deterrent that influences behavior far and wide," said [U.S. Secretary of Labor Thomas E. Perez](#). "Adjusting our penalties to keep pace with the cost of living can lead to significant benefits for workers and can level the playing field responsible employers who should not have to compete with those who don't follow the law."

The [first rule will cover the vast majority of penalties](#) assessed by the department's [Employee Benefits Security Administration](#), [Mine Safety and Health Administration](#), [Occupational Safety and Health Administration](#), [Office of Workers' Compensation Programs](#), and [Wage and Hour Division](#). The [second rule will be issued jointly](#) with the Department of Homeland Security to adjust penalties associated with the H-2B temporary guest worker program.

Under the 2015 law, agencies are directed to publish interim final rules by July 1, 2016. The department will accept public comments for 45 days to inform the publication of any final rule.

The new method will adjust penalties for inflation, though the amount of the increase is capped at 150 percent of the existing penalty amount. The baseline is the last increase other than for inflation. The new civil penalty amounts are applicable only to civil penalties assessed after Aug. 1, 2016, whose associated violations occurred after Nov. 2, 2015.

The rules published under the 2015 law will modernize some penalties that have long lost ground to inflation:

- OSHA's maximum penalties, which have not been raised since 1990, will increase by 78 percent. The top penalty for serious violations will rise from \$7,000 to \$12,471. The maximum penalty for willful or repeated violations will increase from \$70,000 to \$124,709.
- OWCP's penalty for failure to report termination of payments made under the Longshore and Harbor Workers' Compensation Act, has only increased \$10 since 1927, and will rise from \$110 to \$275.
- WHD's penalty for willful violations of the minimum wage and overtime provisions of the Fair Labor Standards Act will increase from \$1,100 to \$1,894.

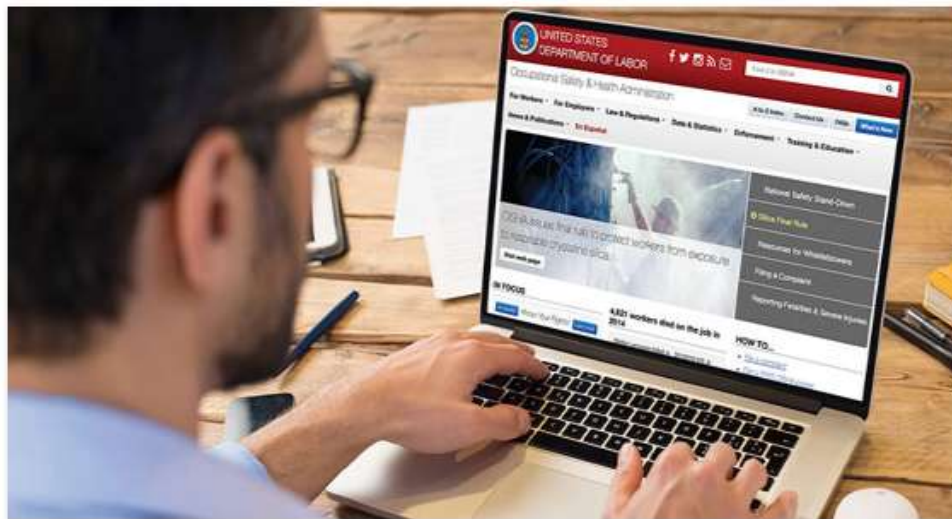
A [Fact Sheet on the Labor Department's interim rule is available here](#). A list of each agency's individual penalty adjustments is [available here](#).

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OCCUPATIONAL SAFETY & HEALTH ADMINISTRATION



Improved Injury Tracking

Under a new rule, employers will soon be required to electronically submit certain records of workplace injuries, some of which will be posted to the OSHA website. Learn about coming deadlines and procedures.

OSHA is [delaying enforcement](#) of the anti-retaliation provisions in its [new injury and illness tracking rule](#) to conduct additional outreach and provide educational materials and guidance for employers. Originally scheduled to begin Aug. 10, 2016, enforcement will now begin Nov. 1, 2016. Under the rule, employers are required to inform workers of their right to report work-related injuries and illnesses without fear of retaliation; implement procedures for reporting injuries and illnesses that are reasonable and do not deter workers from reporting; and employers are prohibited from retaliating against workers for reporting injuries and illnesses.





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OCCUPATIONAL SAFETY & HEALTH ADMINISTRATION



Report a fatality or severe injury

All employers must notify OSHA when an employee is killed on the job or suffers a work-related hospitalization, amputation, or loss of an eye. Know the deadlines and required reporting procedures.



The right to a safe and healthful workplace

Workers have the right to be safe on the job and to speak up if they are concerned about hazardous conditions. Contact OSHA to learn more or to ask for an inspection.