AONL™
American Organization for Nursing Leadership

ENA
EMERGENCY NURSES ASSOCIATION

AONL & ENA GUIDING PRINCIPLES

Mitigating Violence in the Workplace

Introduction

Workplace violence is an increasingly recognized safety issue in the health care profession. The Joint Commission defines workplace violence as "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."[1] Workplace incidents of violence covers all forms, violence, bullying and aggression or VBA. Bowie's typology of violence provides a useful framework comprised of the following four types: Type 1: Intrusive (e.g., robbers, active shooters); Type 2: Consumer (e.g., patients, visitors); Type 3: Relational (e.g., peers, colleagues); Type 4: Organizational (e.g., systems).[2]

The most recent data from the U.S. Bureau of Labor Statistics[3] indicates an increasing trend in violent incidents in the health care sector from 2011 to 2018, with almost three quarters (73%) of all nonfatal injuries and illnesses requiring days away from work occurring among health care workers. Compared to private industry, workers in hospital settings were eight times more likely to experience nonfatal violence-related injuries from other persons (22.8 vs. 2.9 incidents per 10,000 full-time workers). A 2019–2020 survey (n = 6000) by the American Nurses Association found that workplace violence and bullying were two of the top 12 significant risks that nurses reported experiencing at work. Nurses experienced verbal and nonverbal aggression from authority figures (23%) and peers (31%), as well as verbal and/or physical threats by a patient or patient's family member (35%).

According to the American Hospital Association,[4] 60% of surveyed hospitals implemented workplace violence prevention initiatives as of 2022. The American Organization for Nursing Leadership and the Emergency Nurses Association remain committed to providing evidence-based guidance to assist hospitals and health systems in the mitigation of all types of workplace violence. It is essential nurse and hospital leaders recognize workplace violence is the result of overlapping layers of intrusive, consumer, relational and organizational violence. Using a multi-pronged approach, effective solutions address all forms of violence and build a foundation to support a culture of safety where health care professionals, patients and visitors feel safe.

1 The Joint Commission (2022) R3 Report Issue 30: Workplace Violence Prevention Standards. https://www.jointcommission.org/standards/r3-report/r3-report-issue-30-workplace-violence-prevention-standards/#.YklhcC3MK3B

2 Bowie, V. (2002). Defining violence at work: a new typology. Violence at work: Causes, patterns and prevention. http://handle.uws.edu.au:8081/1959.7/21923

3 U.S. Bureau of Labor Statistics. Fact Sheet | Workplace Violence in Healthcare, 2018. (April 2020) https://www.bls.gov/iif/oshwc/cfoi/workplace-violence-healthcare-2018.htm

4 American Hospital Association. 2020 AHA Annual Survey: Violence Prevention Initiatives. https://www.aha.org/system/files/media/file/2021/06/HAVhope_2021_infographic.pdf

AONL and ENA developed these guiding principles to assist nurse leaders in systematically implementing measures to decrease and mitigate violence within the health care environment, including high-risk areas such as the emergency department. ENA research indicates emergency nurses experience VBA in their workplaces with wide-ranging effects on their personal and professional lives. In a 2020 study of work-related stress among U.S. emergency nurses during the first three months of the COVID-19 pandemic, emergency nurses demonstrated high levels of secondary traumatic stress from cumulative secondary trauma, compounded by bullying and organizational violence. Previous ENA studies found where ED administrators and managers were committed to addressing workplace violence emergency nurses were less likely to experience consumer violence. Additionally, nurses who reported little or no exposure to bullying were less likely to report intentions to leave their job.

The guiding principles and priorities listed below include evidence-based steps to systematically reduce and mitigate workplace violence.

Guiding Principles

1. Organizations should use **evidence-based strategies** to address all aspects of workplace violence.

2. Address workplace violence with **comprehensive solutions** from establishing a zero-tolerance workplace to recognizing the intersecting layers of intrusive, consumer, relational and organizational violence.

3. Mitigate workplace violence by **establishing support** from human resources, nursing staff, legal services, security, risk management and other areas of staffing support.

4. **Promote a culture of safety** to create a healthy work environment, which leads to improved job satisfaction, less absenteeism, reduced turnover and nurse retention.

5. Effective workplace violence prevention requires **commitment and action from interprofessional teams** including leadership, staff, patients and visitors.

6. **Everyone in the organization is accountable** for upholding foundational standards of non-violent behavior, regardless of position or discipline.

7. Encourage the health care team to **identify and address violence in the workplace**.

8. **Create a culture of nonviolence** through intention, commitment and collaboration from everyone in an organization.

9. **Address workplace violence** to increase the effectiveness of nurse-delivered care and patient care experience.

Five Priority Focus Areas

1. Foundational behaviors to make this framework work:

- Respectful communication, including active listening.
- Mutual respect demonstrated by all (i.e., members of the interprofessional team, patients, visitors and administrators).
- Honesty, trust and beneficence.

2. Essential elements of a zero-tolerance framework:

- Encompasses all forms of violence
- Supported and observed by an organization's board and C-Suite to ensure an organizational and cultural shift
- Adopts clearly defined policies, procedures and consequences equally understood and observed by every person in the organization (i.e., board, leadership, interprofessional team, staff, patients and visitors)
- Establishes a designated individual and interprofessional team responsible for policy enactment and resolution of conflicts and infractions
- Prohibits violence, regardless of role or position of authority (i.e., the standard of behavior is the same for physicians, nurses, staff and administration)

3. Essential elements to ensure ownership and accountability:

- Personal accountability, meaning everyone in the organization is responsible for reporting and responding to incidents of violence
- Zero-tolerance policy is developed with input from staff at every level in the organization, thus ensuring staff co-own the process and expectations
- Clearly defined universal standards of nonviolent behavior with every person in the organization, including patients and visitors, held equally accountable
- A structure to report incidents of violence immediately using equitable, nonpunitive and accessible procedures, ensuring options of anonymity, immediate enforcement of the zero-tolerance policy and appropriate incident response

4. Essential elements of training and education on violence in the health care workplace:

- Organizational and personal readiness to learn violence risk reduction skills and preventive practices
- Readily accessible, evidence-based and organizationally supported tools and interventions
- Skilled and experienced facilitators who understand the nursing profession and specific issues affecting the occurrence of violence in the health care workplace
- Training on early recognition and de-escalation of workplace violence including ongoing risk assessments, threat management, implementation of evidence-based strategies, evaluation of violence incidents and response effectiveness
- Health care specific case studies with simulations to demonstrate recognition of risk, appropriate actions and effective response in situations of violence

5. Outcome metrics of the program's success:

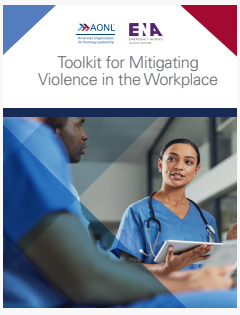
- Decreased incidence of workplace violence and associated harm (e.g., number and type of injuries, days away from work)
- Improvements in risk assessment analyses to demonstrate timely investigation of violence incidents, successful implementation of mitigation policies and procedures, and ongoing training and education.
- Improvements in collection and reporting of violence incidents including injury data, where and when incident occurred, who was involved, the response and outcome.
- Evaluate data to track program outcomes, measure effectiveness and modify accordingly.
- Improvements in scores on staff and Hospital Consumer Assessment of Healthcare Providers and Systems Patients' Perspectives of Care Surveys or HCAHPS.
- Improvements in staff and leadership's confidence in the use of de-escalation and conflict resolution techniques.

About the American Organization for Nursing Leadership

As the national professional organization of more than 11,000 nurse leaders, AONL is the voice of nursing leadership. Our membership encompasses nurse leaders working in hospitals, health systems, academia and other care settings across the care continuum. Since 1967, the organization has led the field of nursing leadership through professional development, advocacy and research that advances nursing leadership practice and patient care. AONL is an affiliate of the American Hospital Association. For more information, visit www.AONL.org,

About the Emergency Nurses Association

ENA is the premier professional nursing association dedicated to defining the future of emergency nursing through advocacy, education, research, innovation, and leadership. Founded in 1970, ENA has proven to be an indispensable resource to the global emergency nursing community. With more than 50,000 members worldwide, ENA advocates for patient safety, develops industry-leading practice standards and guidelines, and guides emergency healthcare public policy. ENA members have expertise in triage, patient care, disaster preparedness, and all aspects of emergency care. Additional information is available at www.ena.org.



Download the AONL-ENA Toolkit for Mitigating Violence in the Workplace

The toolkit's resources and tools provide an easy step-by-step procedure for customizing a violence prevention plan that will meet the needs of your health care facility.

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