Society of Trauma Nurses
Position Statement
Workplace Violence

Definition

Workplace violence encompasses a myriad of behaviors, ranging from bullying, disruptive and intimidating behavior to physical assault and abuse. For the purpose of this statement, workplace violence will be defined utilizing the NIOSH definition: “violent acts, including physical assaults and threats of assault, directed toward persons at work or on duty” (Jenkins, 1996)

Background

Health care workers (HCW’s), specifically nurses, have had a history of considering physical and verbal assault and abuse as an attribute that is simply characteristic of the job. Signing on the dotted line to become a trauma nurse means that you simply “deal” with the abuse. Organizations have had a history of tolerance for this behavior and varying levels of commitment to eliminate workplace violence. A culture of tolerance can exist in the workplace and a lack of commitment by leadership to take a position on adhering to optimal workplace violence strategies has halted progress toward eliminating this cultural phenomenon. Experiences with violence may be considered badges of honor. Peers may view individuals who have the act addressed as “soft” or “weak”. (Fredrick, 2014; McEwen & Dumpel, 2012; Powley, 2013; Strickler, 2013; Waschgler, Ruiz-Hernández, Llor-Esteban, & García-Izquierdo, 2013; Wolf, Delao, & Perhats, 2014)

Legislation and public policy addressing this complex issue is limited and currently no federal standard requires workplace violence protections. As of June 2012, thirty acts of violence towards HCWs are considered a misdemeanor or felony in 30 states; however, many others have zero laws (APNA Taskforce on Workplace Violence, 2008; Lipscomb & London, 2015; Papa & Venella, 2013).

Statement of the problem

Trauma nurses are at significantly high risk for workplace violence. Trauma nurses see the results of violence in both patients and the patient’s families. The stress of the event may be brought into the hospital setting impacting HCWs, making workplace violence a major concern for employers and employees nationwide. Approximately 2 million citizens annually are reported as being victims of workplace violence in all industries. The number is thought to be higher as many go unreported. Healthcare professionals are at an increasingly high risk of workplace violence. Trauma nurses work, in high stress/high risk situations, with volatile, unstable people, and in areas with high crime rates.

Relevant supporting facts, data and references: According to the Bureau of Labor Statistics, 27% of fatalities in healthcare and social service settings occurring in 2013 were due to assaults and violent acts. (Occupational Safety and Health Administration, 2015) To date, research has been unable to demonstrate clear or predictable causes of workplace violence, making it difficult to identify who will become violent, although, recent work is underway to develop screening methods (Bresler & Gaskell,
Recommendations have been made to mitigate the risks of workplace violence and include the following.

- Zero tolerance policy
- Comprehensive workplace violence prevention program
- An assessment strategy (flagging system) to identify persons of potential violence.
- Active legislation and public policy advocacy
- Evidenced Based Training in recognition and de-escalation
- Establish Personal Safety Training Programs
- Invest in infrastructure: video surveillance, extra lighting, alarm systems and minimize access by outsiders through identification badges, electronic keys and security guards.
- Reporting/Trending/Analytic system for workplace violence/compliance monitoring
- Code of Conduct for staff, patients and visitors
- Use best practice models (magnet status, employer of choice)
- Establishment of a behavioral emergency response team to address disruptive behaviors
- Utilize established toolkits
- Offer debriefing sessions and post-traumatic counseling services to victims of violent episodes
- Fosters nurse based research that improves nursing practice with regard to workplace violence.
- Collaborate with other organizations to develop effective strategies to eliminate/mitigate workplace violence.

**Conclusion**

Workplace violence significantly impacts all HCWs, especially those working in volatile settings such as trauma care. To continue providing care to the trauma population, employees and organizations must establish policies and procedures to prevent workplace violence, mainly recognizing its existence and having zero tolerance for its occurrence. Trauma nurses, hospitals and professional organizations must advocate for laws that make violence against HCW a crime. More research is needed to develop screening tools and target based interventions to prevent violence in the workplace.

**Position Statement**

The Society of Trauma Nurses is committed to a workplace free of violence. Our alliance, affiliation and collaboration with other nursing associations allow our members to connect with the resources and advocacy initiatives of the broader nursing community. STN supports legislation and policies that create a safe work environment such as increased penalties for those convicted of assaults of HCWs and the establishment of violence prevention programs.

It is our belief that all trauma nurses have a responsibility to identify workplace violence concerns, to report those concerns and to participate in the solutions of these issues.
Resources


Standard LD.03.01.01. Leaders create and maintain a culture of safety and quality throughout the organization. www.jointcommission.org


The American Nurses Association. www.nursingworld.org


References


http://search.ebscohost.com/login.aspx?direct=true&db=c8h&AN=2012184733&site=eds-live

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Authored and Reviewed by the
Karen E. Doyle, MBA, MS, RN, NEA-BC
Paul Thurman, MS, RN, ACNPC, CCNS, CCRN