



WORKPLACE VIOLENCE PREVENTION FACTSHEET

December 2005

The goal of a workplace violence prevention program is clear- zero injuries and incidents. This goal requires effort and involvement of all members of the workplace. An active health and safety committee is critical in any workplace injury or illness prevention program.

1. What is Workplace Violence?

The National Institute for Occupational Safety and Health (NIOSH) defines workplace violence as, “any physical assault, threatening behavior or verbal abuse that occurs in the work setting.”

2. How serious is the problem?

Homicide is the 3rd leading cause of death on the job for men and the leading cause of death on the job for women. For the period 1993-1999, the U. S. Bureau of Labor Statistics estimates that roughly 800 workers were murdered on the job each year. For the same period, the U.S. Department of Justice’s Crime Victims Survey estimates that 1.7 million workers per year were victims of non-fatal assaults. This estimate does not, however, include violent threats.

In addition to the pain and suffering of their physical injuries, victims of violent attacks often suffer from post traumatic stress disorder (PTSD), a serious condition that is common among combat veterans and victims of terrorism, rape, and other violent acts. Even without PTSD, victims may suffer other emotional problems, including depression, fear, insomnia, nightmares, and disturbed relationships with family, friends, and co-workers.

It is important to realize that the stress of working in a potentially violent workplace can be extremely damaging as well.

3. Who is at risk?

A dangerous myth is that workplace violence is random and unpredictable, and therefore nothing can be done to prevent it. Most violent acts are at least somewhat predictable, based on a whole range of job and workplace risk factors.

According to NIOSH, “most nonfatal workplace assaults occur in service settings such as hospitals, nursing homes, and social service agencies.” The Occupational Safety and Health Administration (OSHA) states that workers who are at increased risk include those who:

- Work in community settings and homes;
- Deliver passengers, goods, or services;
- Work alone or in small groups;
- Work late at night or early in the morning;

- Work in high-crime areas; and
- Exchange money with the public.

Thousands of PEF members work in these high-risk settings. On a daily basis, institutional workers are threatened or assaulted by patients. PEF members deal with some of the most difficult populations in our society such as the incarcerated, drug addicts and alcoholics, and the mentally ill.

4. What can be done?

Every worksite should have a clear and comprehensive workplace violence prevention program, particularly those workplaces that are potentially at increased risk (section 3, above). As with other health and safety programs, the critical elements of an effective violence prevention program can be divided into five areas:

- **Management commitment and employee involvement**

Top management must first send a clear signal that they take workplace violence seriously and that they are interested in identifying and solving the problem. They must then commit the necessary resources and personnel to developing and implementing an ongoing prevention program. Frontline workers, who are closest to the problem, should be included in all aspects of the program. A process including management, employees, and union representatives should then work together to develop and implement an effective program. This can be done through existing committee structures such as health and safety or labor-management committees, although a dedicated, specific workplace violence committee or task force is less likely to be sidetracked by other issues.

- **Worksite analysis**

A comprehensive analysis should be conducted by the committee, using additional resources as necessary. This analysis should include:

- ⇒ **reviewing all available data** including DOSH 900 logs, incident reports;
- ⇒ **talking to staff** in all areas of the facility, in all job titles, and on all shifts;
- ⇒ **examining the physical environment** for hazards such as dark or isolated halls or rooms, furniture that can be used as a weapon, etc.;
- ⇒ **job organizational factors** such as staffing levels, working alone, organizational policies and procedures, and the utilization and effectiveness of existing security measures.

- **Hazard prevention and control**

Based on the findings from the worksite analysis, the committee should develop a comprehensive list of potential changes that could improve workplace safety. Some examples of those changes include:

- **engineering controls** such as panic buttons, metal detectors, adequate lighting, mirrors;
- **administrative and work practice controls** including providing adequate staffing in all areas for every work shift, written violence prevention policies, staff training, and developing a relationship with the local police;
- **post-incident response** beginning with reporting and logging all incidents and threats and filing police reports for significant incidents or threats. Systems should be in place for

providing prompt medical care and support to injured workers. Many agencies and the Statewide Employee Assistance Program have developed “critical incident response” programs;

- **investigate all incidents thoroughly**, including an examination of the physical environment, what activities were being performed at the time and immediately prior to the incident, and what measures should be implemented to prevent a recurrence.

- **Safety and health training**

A training program based on the risks and circumstances of the particular workplace should be developed and provided to all employees. Refresher training should be offered at least annually. The training should be participative, to ensure that it is relevant for all staff and that staff comprehend the material.

Clear organizational accountability for safety and health policies, tasks, and conditions is critical. Individuals must understand their roles and be trained to carry them out. Accountability must be maintained, even through difficult periods of downsizing and organizational change.

- **Recordkeeping and program evaluation**

All violent incidents and threats should be logged into a central system. Staff must be encouraged to use the system. Data from the system should be reviewed and analyzed by the workplace violence committee on a regular basis. The whole workplace violence prevention program should be reviewed and evaluated on a regular basis, at least annually. Any changes to clientele, work organization, staffing levels, building layout, etc. should be considered. A system should be in place to insure that recommended corrective changes have been fully considered and implemented, if feasible. If not implemented, clear and legitimate reasons should be provided.

5. How do I get more information?

PEF has compiled a comprehensive list of resources on workplace violence prevention. Visit our webpage at www.pef.org, click on “Health and Safety” in the left column, then select “Workplace violence prevention resource list” from the list of topics.

Remember! Violence at the workplace is a serious problem, and should be identified, assessed, and controlled, just like any other workplace hazard. If you are concerned about violence at work, talk to your co-workers, health and safety committee, union representatives, and employer.

Upon request, the PEF Health & Safety Department will provide other factsheets, standards, regulations, and other resources. Contact us at 518-785-1900, ext. 254 or 1-800-342-4306, ext. 254. Also, visit our webpage at www.pef.org.

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