

WORKPLACE VIOLENCE PREVENTION

Nellie J. Brown, MS, CIH

January 31, 2019

How well is your workplace addressing violence prevention?* Let's start with your workplace's definition: "workplace violence" brings to mind fights, physical or sexual attacks, murder, property damage, or arson; and certainly acts of terrorism. Does your policy include the unauthorized possession of firearms, explosives, or other weapons at work? Does your program's policy cover verbal as well as physical issues? OSHA and NIOSH have recommended including verbal harassment and threats -- face-to-face, in writing, or electronically -- as these are not only problems in themselves, but also could escalate to other forms of violence.

Next, let's use OSHA's recommended program elements to critique your workplace's program. Have the risk factors for your workplace been identified? (OSHA has more detailed prevention guidelines for health care and social services organizations (recently updated), late-night retail establishments and taxicab drivers.)

- Has a site inspection been done? How easily can anyone enter your building(s) or reach private, rather than public, areas of your facilities? Are your entrances/exits and parking areas well-lighted? Do you have barriers where employees are handling money? Even look at your desktop, are there any items usable as weapons (scissors, letter-opener)?
- Have you been surveyed? Were you asked about violent incidents (reported or unreported), as well as your concerns about risks, whether you work on-site or in the field? So often, people won't talk about these things -- so an anonymous survey may work best. Surveys can reveal items that people accepted as "part of the job" or which could have created the impression that they couldn't handle their job. People may open up about upsetting situations such as finding the body of a co-worker who committed suicide; or experiencing unwitnessed harassment by a nasty bully.
- Has a records review been done? This can reveal past incidents, patterns or trends in Workers' Compensation reports, police reports, security problems, or insurance reports -- not only injuries, but also health problems (such as high blood pressure) from stressful situations or property damage.

Does your prevention strategy address a range of potential perpetrators?

- *Type I: criminal acts* -- These are strangers who have no legitimate business in that workplace. Nationally, about 79 percent of workplace homicides occur during criminal acts such as robberies. (Typically, these are smaller, more local news stories compared to the "disgruntled worker" headlines.) This category includes terrorism, robbery, property damage, arson, and sabotage, as well as an employee being assaulted (including sexually).

- *Type II: customer, client, patient, inmate* – In this case, the perpetrator has a legitimate relationship with the workplace, but becomes violent during a business transaction or when being cared for as a patient or inmate. And, yes, these could also involve out-of-control people with dementia, drug/alcohol problems, or severe pain.
- *Type III: employees* -- Only about 9 percent of violent acts are committed by workers such as co-workers, the boss, or former workers.
- *Type IV: personal relationship* – A violent act can happen at the workplace simply because the perpetrator, who couldn't reach the victim otherwise, knew where the victim worked. This is the most common scenario for women killed at work.

How does your workplace handle domestic violence? What if you are granted an Order of Protection which mentions your employer's property, an employee, or a person working at an employer-owned location? Does your policy require you to notify your employer about it? It may be helpful for a victim of domestic violence to notify the employer so that workplace procedures could be put in place to protect a potential victim.

What about attacks by animals? Imagine going onto someone's property to make repairs, read a utility meter, or take a blood sample from a house-bound patient and have a dog become defensive or even purposely set upon you. Does your policy require the pet owner to shut the animal in a separate room or restrain it? Then, if this is not done, could you re-schedule the work?

Does your program address the risk factors which NIOSH has identified as common threads running through cases of workplace violence?

- interacting with the public
- exchanging money
- delivering services or goods
- working late at night or during early morning hours
- working alone
- guarding valuables or property
- dealing with violent people or volatile situations

After uncovering risks and hazards for your workplace, what should be done to address them? The hierarchy of controls can be used here, just as for any other health and safety problem. These are some examples:

- Elimination of the hazard
 - moving a water meter to the outside of a building so that a worker doesn't have to go inside and face the dog or be chased off the property by an occupant with a gun
- Substitution for a lesser hazard

- training a house-bound patient to send in blood pressure data electronically
- Engineering Controls
 - lighting and visibility, especially at doors and in parking areas
 - video monitoring
 - barriers, especially at countertops when exchanging money
 - lockable bathrooms for staff
 - controlled access; alarms on doors
 - panic buttons in offices
 - automatic vehicle locators for field workers
- Administrative Controls
 - training: how to recognize early warning signs of potential violence; how to defuse confrontation (of course, good communication skills can't solve all problems)
 - work practices & policies, such as eliminating long customer wait times that make people annoyed or angry
 - buddy system, rather than working alone; an escort to your car
- Personal protective equipment – unfortunately, for most jobs, there's not a lot to be done at this level (most people won't be doing their jobs while wearing body armor)
 - personal alarms
 - clothing with identifiers
 - ID badges

Are violence incident reports being filled out, and not just for physical assaults but also for verbal threats or harassment? Also, take a look at the content needed on your violence report form. Beyond basic incident information, is there a need to protect privacy? For example, upon request, the victim's name could be removed from copies of the report if sensitive or protected issues are involved, such as a sexual assault, HIV infection, needlestick injury, or mental illness. If you fill out an incident report, does your program's policy protect you against retaliation? Retaliation is discrimination against you because you filed a concern or made a charge of workplace violence or testified, assisted, or participated in any manner in an investigation, proceeding or hearing about violence. It can include denial of a promotion or a raise. And, for someone who engages in retaliation, what is the penalty?

What happens to incident reports? Does your employer investigate each one, remedy the problem (including for future prevention), and report back to employees on the results – such as improvements to security, a change in work practices, or a disciplinary action (even if details are kept confidential)?

Of course, the unpredictable can still happen, so does your workplace help people to recover from violent incidents? Every crisis leaves its mark. Forgetfulness can be a

tempting reaction; but this means that deep wounds could be left which may never heal, for the victim and/or others. (“If I had been at work that day, I would have been the victim.”) Does your workplace have a recovery plan, perhaps through your EAP program? This can help you to recover faster and stay healthier (as well as be more productive on the job).

* While OSHA covers private workplaces, check your state to see if there are local requirements on this topic; for example, New York has state laws on workplace violence prevention: one regulation covers public sector employees except in schools, the other regulation deals specifically with schools.

The information in this fact sheet was originally developed for The Center for Occupational & Environmental Medicine at the Erie County Medical Center (ECMC), 462 Grider St., Buffalo, NY 14215. The fact sheet is licenced under a [Creative Commons Attribution-NoDerivatives 4.0 International \(CC BY-ND 4.0\) licence](https://creativecommons.org/licenses/by-nd/4.0/).

