



GAO Report: Additional Efforts Needed to Help Protect Healthcare Workers from Workplace Violence

Although healthcare facilities are perceived as a place to get well, the reality is that many workers employed in these facilities face an elevated risk of injury from violence—mostly originating from patients. The Government Accountability Office (GAO) was asked to examine the prevalence of workplace violence in healthcare facilities and review efforts by the Occupational Health and Safety Administration (OSHA) and states to address this problem.

Federal injury data show that the rate of workplace violence at healthcare facilities is high and the severity is intensifying; at some psychiatric facilities the rates of violence are extreme; and that many injuries can be prevented or mitigated through workplace violence prevention programs. Getting injured on the job should not be a part of anyone's job description.

Key Findings:

- Workplace violence is a serious concern for 15 million healthcare workers in the United States.
- In 2013, there were over 153,000 workers reporting assaults in healthcare facilities, and nearly 25,000 cases of violence that were severe enough to cause the healthcare employee to have a reportable days-away-from-work injury, according to the Bureau of Labor Statistics (BLS)—this last figure is up 12 percent compared with 2011.
- Psychiatric aides experience the highest rates of days-away-from-work injuries due to workplace violence. Nearly 6 percent of psychiatric aides employed in state facilities suffer this type of reportable injury each year. For aides in private's facilities, the rate is nearly 4.5 percent. The rates of days-away-from-work injuries for psychiatric aides employed in state facilities are 32 times higher than for state employees overall. For aides in the private sector, the rate of these types of injuries are 293 times higher.

Workplace Violence Can Be Prevented:

- GAO found that 4 out of 5 studies on violence prevention programs—including three studies of Veterans Administration hospitals that adopted a program—suggest that violence prevention programs can reduce the rate or severity of assaults.
- GAO examined nine states that have adopted a workplace violence prevention law or regulation. In California, the rate of assaults dropped in emergency rooms after the state adopted a law requiring hospitals to develop violence prevention programs.

OSHA's Current Efforts:

- OSHA has issued voluntary guidelines on preventing workplace violence in healthcare facilities, which include a risk assessment, employee engagement, flagging high risk patients, environmental controls (locks, escape routes, alarm buttons, etc.), record keeping and evaluation.

- OSHA has no standard that requires healthcare facilities to adopt a violence prevention program; instead it must fall back on the OSHA Act’s “general duty clause” for enforcement, which requires 4 elements of evidence that are complex to develop and sustain in these cases.
- From 1991 through October 2014, OSHA issued 18 general duty clause citations to healthcare employers for failing to address workplace violence; 13 of those citations were issued from 2012 through 2014, when OSHA implemented its National Emphasis Program targeting workplace violence in nursing and residential care facilities.
- OSHA officials acknowledged that it can be challenging to develop a general duty clause citation for workplace violence, and cited potential benefits of having a workplace violence prevention standard.
- OSHA inspectors can issue nonbinding hazard alert letters warning employers of a serious workplace violence safety concern. But currently, OSHA does not know whether employers have taken steps to address the safety hazards identified in such letters.

GAO’s Methodology:

- GAO studied three federal data sources on violence in healthcare facilities; reviewed 17 published surveys; evaluated peer reviewed literature on violence prevention programs; reviewed legislation adopted in nine states; evaluated OSHA’s current efforts and interviewed OSHA inspectors in all 10 regions; met with officials in five states that have violence prevention programs; and conducted roundtable discussions with healthcare workers in those five states (NY, MD, CA, DC and WA). GAO conducted this study over nearly two years.

GAO’s Three Recommendations:

- OSHA should improve training for inspectors on developing citations for workplace violence hazards.
- OSHA should follow-up on hazard alert letters to determine whether an employer has implemented steps to prevent workplace violence, or if a follow-up inspection is needed.
- OSHA should assess the results of its current efforts to determine whether additional action, including development of a standard, is needed.

Committee on Education and the Workforce Democrats’ Recommendations:

- OSHA needs to use *all* of the tools at its disposal to protect healthcare workers from preventable injury due to workplace violence. In addition to the GAO recommendations, this includes adopting an enforceable workplace violence prevention standard.

Far too many workers are risking their health and safety simply by reporting to work each day. Research shows that it is possible to reduce and mitigate the incidence of workplace violence in healthcare facilities. The Committee supports OSHA on its mission to help employers address these serious hazards.

The Governmental Accountability Office (GAO) report, *Additional Efforts Needed to Protect Healthcare Workers from Workplace Violence* (GAO-16-11) was requested by the Committee on Education and Workforce Democrats, including Ranking Member Robert C. “Bobby” Scott (VA-03), Representatives Joe Courtney (CT-02) and Frederica S. Wilson (FL-24), and Senator Patty Murray (D-WA), Ranking Member of the Senate Committee on Health, Education, Labor and Pensions (HELP).