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A Conversation with the National Quality Partners™ Action Team to Prevent Healthcare Workplace Violence

Capstone Webinar

June 15, 2020

Welcome

National Quality Forum Welcome



Shantanu Agrawal, MD, MPhil
President & CEO, National Quality Forum



OUR MISSION

To be the trusted
voice driving measurable
health improvements

OUR VISION

Every person experiences
high value care and
optimal health outcomes

OUR VALUES

Collaboration •
Leadership • Passion •
Excellence • Integrity

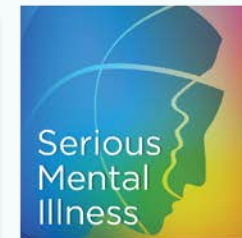
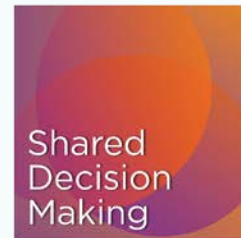
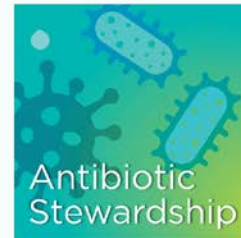


National Quality Partners (NQP)



NQP works to impact health and healthcare quality through collaboration and partnership that catalyzes action and accelerates improvement

NQP Initiatives and Action Team Topics



An Overview: Healthcare Workplace Violence

- The National Institute for Occupational Safety and Health (NIOSH) defines workplace violence as “any physical assault, threatening behavioral, or verbal abuse directed towards persons at work or on duty”¹
- 71% of all nonfatal workplace violence occurs in healthcare settings ²
- Healthcare workplace violence has far-reaching impacts and costs, including:
 - ▣ Physical harm, emotional harm, and stress-related illnesses (e.g., PTSD and burnout)
 - ▣ Decreased staff morale and increased employee absenteeism
 - ▣ Medical expenses, litigation costs, and worker compensation payments
 - ▣ Property and equipment damage
 - ▣ Unfavorable image and perception of the organization

¹ National Institute for Occupational Safety and Health (NIOSH). Occupational violence website. <https://www.cdc.gov/niosh/topics/violence/default.html>. Last accessed February 2020.

² Occupational Safety and Health Administration (OSHA). Workplace Violence Prevention and Related Goals: The Big Picture. Washington, DC: OSHA; 2015
<https://www.osha.gov/Publications/OSHA3828.pdf>. Last accessed February 2020.

NQP Action Team to Prevent Healthcare Workplace Violence

- NQF launched the NQP Action Team to Prevent Healthcare Workplace Violence in October 2019
- The NQP Action Team includes 27 diverse member organizations representing nearly every sector of healthcare

Preventing
Healthcare
Workplace
Violence

NQP Action Team Goal:

To collaborate and share strategies on preventing, reporting, and rooting out healthcare workplace violence across the nation

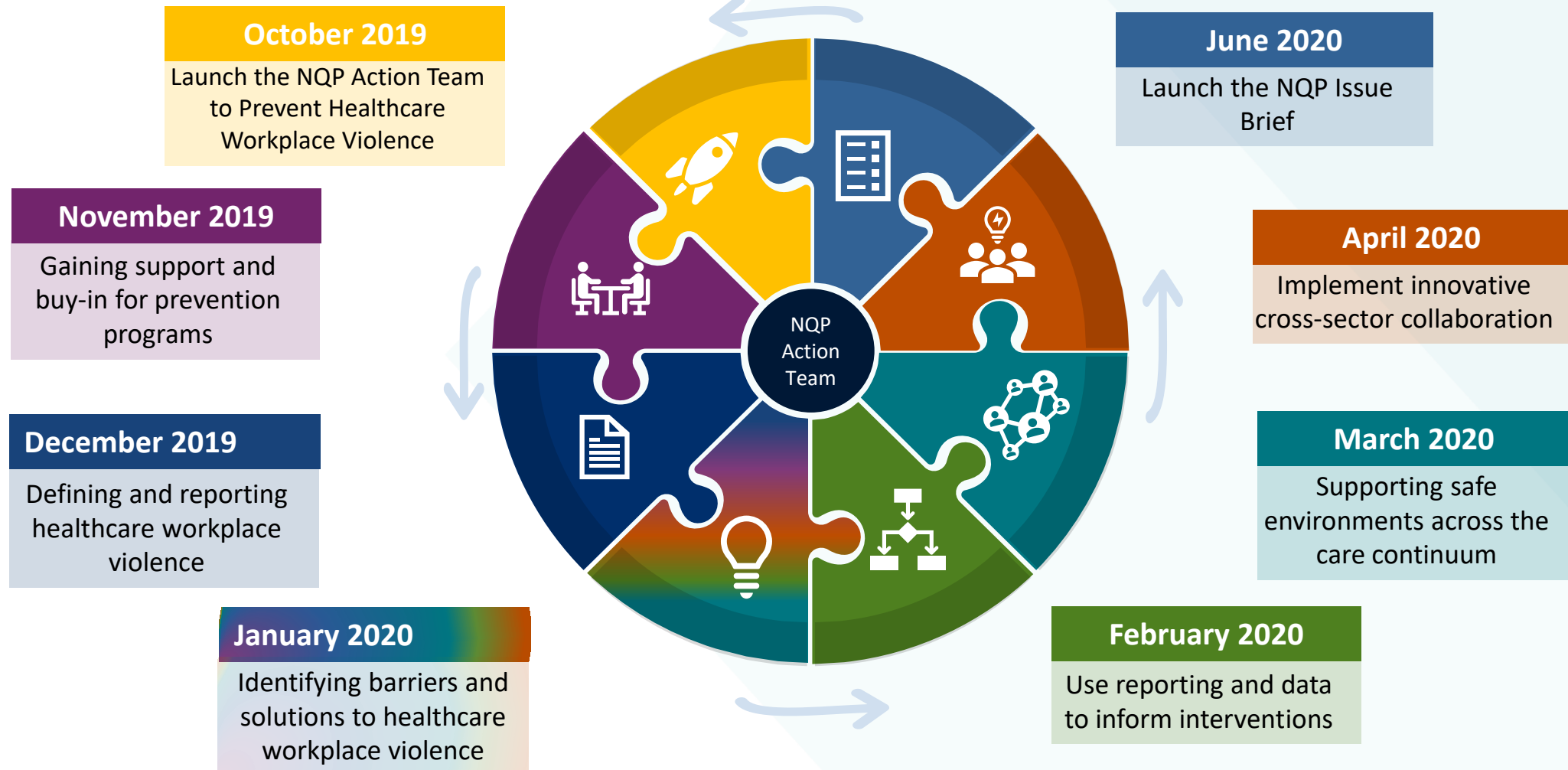
NQP Preventing Healthcare Workplace Violence Action Team Members

- American Association for Physician Leadership
- American College of Emergency Physicians
- American Hospital Association
- American Nurses Association
- American Psychiatric Nurses Association
- American Society of Health-System Pharmacists
- American Urological Association
- Centers for Disease Control and Prevention
- Centers for Medicare and Medicaid Services
- City of Hope
- Cleveland Clinic
- Emergency Nurses Association
- Encompass Health Corporation
- Geisinger Health System
- Greater New York Hospital Association
- Health Resources and Services Administration
- Homewatch CareGivers, LLC
- Humana Inc.
- Intermountain Healthcare
- MHA Keystone Center for Patient Safety & Quality
- Partners Behavioral Health Management
- Patient & Family Centered Care Partners, Inc.
- Scripps Health
- The Joint Commission
- Trinity Health
- Veterans Health Administration
- Virginia Mason Medical Center



Action Team Accomplishments Since October

Sharing Best Practices



NQP Action Team to Prevent Healthcare Workplace Violence

Issue Brief



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ISSUE BRIEF

NATIONAL QUALITY PARTNERS™
Action Team to Prevent Healthcare Workplace Violence

With 71% of all nonfatal workplace violence occurring in healthcare settings, healthcare workers are four times more likely to experience violence at work compared to those in the private industry (e.g., construction, retail, manufacturing).¹

Workplace violence, as defined by the National Institute for Occupational Safety and Health (NIOSH), is “any physical assault, threatening behavior, or verbal abuse directed towards persons at work or on duty.”² In healthcare, this violence can stem from encounters between staff and patients and/or their families; aggression or harassment from co-workers; or the intrusion of community violence, such as domestic violence, into the workplace. Workplace violence comes at a high cost for healthcare workers, healthcare organizations, and patients. Healthcare workers may experience physical and emotional harm, stress-related illnesses, and burnout. Organizations may face direct costs in the form of litigation expenses, medical expenses, and worker compensation, in addition to indirect costs related to low staff morale, employee absenteeism, training and re-training, and negative impacts to an organization’s reputation.^{3,4,5} Patients also feel the impacts of violence, as when healthcare workplace violence occurs, it means the safety of the worker is at stake and thus the quality of care for the patient may be diminished.

Despite the significant impact healthcare workplace violence has on healthcare workers and organizations, workplace violence often goes unreported,⁶ prevention initiatives and research are broadly underfunded,⁸ and evidence-based solutions are unrecognized by patients, healthcare workers, leaders, and policymakers.⁹

The healthcare industry faces unique challenges that contribute to the persistence of healthcare workplace violence, including the overwhelming perception that violence is simply “part of the job” and that patient safety comes before a healthcare workers’ own safety, which may result in a conflicted care provider.¹⁰ These contributing factors have led to a culture where workplace violence goes unrecognized or is misunderstood by many healthcare workers and leaders, and where approximately half of both physical and non-physical violence incidents go unreported.¹¹ In certain settings, such as behavioral health units, long-term care facilities, and emergency departments, the rate of underreporting can be even higher.¹² Current reporting efforts by healthcare workers are often thwarted by the limited and cumbersome incident reporting processes, the absence of workforce education and support, and a belief that reporting will not result in effective system changes to stop future violent acts.¹³ Underreporting and lack of awareness of what acts constitute workplace violence prevents healthcare workers and organizations from understanding the true magnitude of the problem, and leads to uncertainty around how to implement meaningful interventions to create safer workplaces.¹⁴

To amplify the need for change and improve the safety of the healthcare workforce, the National Quality Forum (NQF) convened the National Quality Partners™ (NQP) Action Team to Prevent Healthcare Workplace Violence in October 2019.

The NQP Action Team brought together 28 of NQF’s member organizations, representing health systems, patient advocacy organizations, federal agencies, payers, professional societies, quality improvement, measurement and research organizations, and home and community-based services. The goal of the NQP Action Team was to identify and coalesce around action-oriented strategies that support a shared vision to prevent, report, and root out healthcare workplace violence.

The NQP Action Team to Prevent Healthcare Workplace Violence encourages diverse stakeholders, including patients, healthcare workers and leaders, researchers, policymakers, and community members across and beyond healthcare to work together to remove barriers

Workplace violence prevention programs (faceted and all-encompassing in their measure, intervene, and prevent workplace violence) should be a byproduct of any, multistakeholder design that includes patients and their visitors, healthcare leaders of the organization.

port, and root out healthcare workplace violence. The NQP Action Team has identified four key healthcare organizations, community and other leaders in healthcare can take:

RDIZE DEFINITIONS AND DATA COLLECTION

Standardize a universal definition for workplace violence that captures verbal, emotional, and physical assaults.

Implement a simple, comprehensive internal reporting system that allows for actionable interventions and provides a health system level reporting repository that allows for tracking and data analysis across systems, regions.

EDUCATE AND SHARE DATA

Use data to cultivate and raise awareness of the need for a culture of safety that values healthcare worker safety and the value of patients of workplace violence.

Identify and analyze the root causes for workplace violence and actions that are perceived as violence by healthcare workers, and co-design solutions for workplace interventions that include the voices of patients, families, and caregivers.

Implement follow-up activities and interventions, and close the loop to communicate about incidents, or near misses, resulted in changes.

Conduct research to understand data, trends, and factors, and effective solutions to address workplace violence.

ENHANCE SAFETY

Conduct evidence-based research to advance policies, and voluntary accreditation as levers to improve the management of resources.

impact of healthcare workplace violence

- Communicate with and engage internal security departments and external law enforcement as partners in the violence prevention program
- Collaborate with the community, advocacy groups, and leaders to raise awareness, identify opportunities for partnership, and promote closed-loop communication to prevent and address incidents

Strong leadership, an organizational commitment to workplace safety, incident reporting, data collection, and transparency are key to fostering an organization that prioritizes the safety of its healthcare workforce and promotes a culture of safety. Standardizing definitions and data collection, analyzing and sharing the data, investing in safety, and collaborating and scaling efforts are critical actions to prevent violence in healthcare settings and prioritize the safety of this important workforce. A culture of safety must extend to those who work in healthcare, and concerted efforts must be made to understand, address, and prevent the incidents of violence that are occurring in healthcare today. Healthcare stakeholders and organizations must promote the safety of patients while simultaneously strengthening and supporting the safety of its workforce by committing to a culture focused on prevention, response, and follow-up.

ARE WORKPLACE VIOLENCE

P Action Team to Prevent Healthcare Workplace Violence for work.

Greater New York Hospital Association Jenna Mandel-Ricci	Patient & Family Centered Care Partners, Inc. Dorothy Winingham
Health Resources and Services Administration Michael Weaver	Patient & Family Centered Care Partners, Inc. Jan Sladkowski
HomeWatch CareGivers, LLC Jennifer Ramona	Scopus Health Chris Van Gorder
Humana Inc. Laura Kinney	The Joint Commission Barbara Braun
Intermountain Healthcare Dave Miner	Trinity Health Diane Moritz
NIH Keystone Center for Patient Safety & Quality Brittany Bogan	Veterans Health Administration Lynn Van Hise
Partners Behavioral Health Management Renee Colson	Virginia Mason Medical Center Charleen Tachibana

JUNE 2020



Key Challenges

The NQP Action Team identified priority challenges for stakeholders to address:

- Limited integration between patient safety and worker safety culture
- Inconsistent definitions and standards
- Limited reporting and data collection infrastructure
- Lack of understanding or awareness
- Competing priorities
- Insufficient funding and research
- Limited mechanisms to support accountability

Issue Brief Recommendations

To prevent, report, and root out healthcare workplace violence, the NQP Action Team has identified four key strategies that healthcare organizations, community stakeholders, and other leaders in healthcare can take:

- 1 Standardize Definitions and Data Collection
- 2 Analyze and Share Data
- 3 Invest in Safety
- 4 Collaborate and Scale Efforts

NQP Action Team Panel Discussion

Action Team Panel



Janet Schuster

*Chief Nursing Officer, Cleveland Clinic
Lutheran Hospital
NQP Action Team Co-chair*



Gordon Gillespie

*Board of Directors Member,
Emergency Nurses Association*



Dave Miner

*Executive Operations Director –
Environment of Care, Intermountain
Healthcare*



Lynn Van Male

*Director, Veterans Health
Administration (VHA) Workplace
Violence Prevention Program, US
Department of Veterans Affairs*



Moderated by Peter Angood

*President and CEO, American
Association for Physician Leadership
NQP Action Team Co-chair*



Preventing Healthcare Workplace Violence

2019 NQP Leadership Consortium Priority

3 PRIORITY FOR ACTION: PREVENTING HEALTHCARE WORKPLACE VIOLENCE

Problem: Healthcare workplace violence—both physical and emotional—jeopardizes the health and well-being of staff and patients.

Healthcare workers are at an increased risk of workplace violence, with incidents of serious violence occurring four times more often in healthcare than in private industry.⁵ Over 20 percent of registered nurses and nursing students reported being physically assaulted, and over 50 percent reported being verbally abused.⁵ Healthcare workplace violence can stem from encounters between staff and patients and/or their families, aggression or harassment from co-workers, or the intrusion of community violence into the workplace. As healthcare workers increasingly face physical and emotional threats, healthcare organizations must protect them from the sources of harm that infringe upon the stability and sustainability of this critical workforce.

NQP Opportunity for Action: Stimulate shared learning to identify practices that strengthen safety, security, and civility in the healthcare workplace.

NQP is uniquely positioned to elevate national awareness of the need to improve healthcare workplace safety and promote a culture of respect in healthcare environments. The NQP Leadership Consortium recommends the exploration of innovative programs that support safe healthcare work environments. Programs should include strategies that protect staff, patients, and families from community threats, as well as those that address workplace harassment, bullying, and incivility. Best practices that promote physical and emotional safety, and processes for reporting and rooting out these safety issues, may be helpful in promoting better work environments. Additional opportunities exist for exploring state-level efforts to protect the healthcare workforce from unnecessary workplace violence. Potential deliverables for sharing these programs and best practices could include a learning collaborative or a webinar series.

NQP Action Team Panel Discussion

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Moderated by Peter Angood

*President and CEO, American
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NQP Action Team Panel Discussion

Audience Q&A



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*President and CEO, American
Association for Physician Leadership
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Please add your questions for the Panel to the chat box

Next Steps

NQP Action Team to Prevent Healthcare Workplace Violence Issue Brief is Available Now!

- Download and share the NQP Action Team to Prevent Healthcare Workplace Violence Issue Brief on the [NQF Website](https://www.qualityforum.org/Issue_Briefs/Action_Team_to_Prevent_Healthcare_Workplace_Violence_Issue_Brief.aspx)



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