Workplace violence is a recognized hazard in the healthcare sector that can take a toll on employees. Healthcare facilities serve the public, which increases their exposure to workplace episodes.

Healthcare workers have a 20 percent higher rate of on-the-job assaults than all other workers combined. There are likely to be more incidents involving aggression or threats that go unreported because the healthcare worker believes it to be part of the job or has compassion for the aggressor.

In part, the high rate of injuries is related to the nature of the work; healthcare employees work with patients and families who may have mental health conditions or are under the influence of alcohol and drugs. Healthcare workers may work alone, be understaffed, or lack training to de-escalate potentially violent situations. Healthcare organizations may be open 24 hours, seven days a week, so security is often a concern. Internally, coworkers may also create a hostile environment, subjecting healthcare workers to verbal, disruptive, or threatening behavior.

On top of adding to a stressful work environment, workplace injuries can result in lost work days and staffing shortages, compounding the problem and affecting morale. According to a recent OSHA report, “Assaults comprise 10 to 11 percent of workplace injuries involving days away from work, as compared to 3 percent of injuries of all private sector employees.”

What can be done to mitigate this issue?

The National Institute for Occupational Safety and Health (NIOSH) recommends that all hospitals develop a comprehensive violence prevention program. There is no universal strategy to prevent violence, but a comprehensive approach can help mitigate risks.

The initial step is to conduct a workplace assessment, including a walkthrough of the workplace environment, evaluation of existing security measures, review of employee screening, training of staff in reporting of incidents and workplace violence prevention, review of safety practices, and analysis of past incidents organization-wide. Involvement of leadership is crucial to a successful program.

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Many hospitals are evaluating their exposures to risk. In the event of an active shooter incident, an organization may be liable if an appropriate safety program has not been implemented. All hospitals have insurance programs that address general liability and workers’ compensation. However, healthcare entities need to address the potential gaps in coverage that may exist. Should a healthcare organization choose to transfer this exposure via an insurance policy or make the decision to self-insure?

Examples of common insurance policies (and how they would respond to a workplace incident) include:

1. Workers’ compensation insurance normally will pay for employee injuries, including medical costs.

2. Any involved third party’s own medical benefits coverage will normally cover third-party injuries, such as guests, patients, or others that are injured on your premises. However, most general liability policies assist with legal fees for defense and medical costs, if liability is directed to your facility.

These policies are designed to provide defense and indemnity for an organization in the event of a workplace violence incident.

Where are potential gaps in coverage? Most property policies do not include workplace violence under their list of perils. Therefore, if a workplace violence incident occurs and results in damaged or destroyed property, most property policies would not afford coverage. Also, if a healthcare facility loses revenue due to either the loss of reputation or downtime associated with reconstruction or relocation, most property policies would not respond.

Additionally, there can be associated expenses that are not covered by traditional general liability and workers’ compensation policies, including:

- independent crises management consulting and public relations assistance,
- independent forensic analysis,
- reimbursement for rewards paid to informants who assist in the arrest and conviction of responsible parties,
- expense for dealing with a stalking threat,
- victim employees’ salaries and replacement employees’ expenses,
- medical, cosmetic, mental health, and dental expenses for victims,
- other rehabilitation costs for insured persons and their relatives.

Workplace violence insurance policies were constructed to fill the coverage gaps and offer an alternative to self-insuring. In addition, workplace violence programs can offer healthcare entities valuable resources from their insurance broker partner that can assist them in both prevention and an organized response.

Regardless of the deployed strategy to mitigate or transfer the associated risks, understanding what your current policies would cover in a catastrophic event and determining whether to self-insure or purchase insurance are critical to developing a comprehensive risk management plan.