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The reporting and consequences of workplace violence in six Ontario hospitals

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IWH Speaker Series

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Workplace Violence Prevention

Best Practices

Measurement

Tools & Resources

Background

Best Practices



Created on October 31, 2017

"Insanity is doing things the way we've always done them and expecting different results."

Albert Einstein

Number of workplace violence incidents (overall) is a **new mandatory** indicator for the Quality Improvement Plans (QIPs). This indicator measures the number of workplace violence incidents against hospital workers. The *Occupational Health and Safety Act, 1990* defines workplace violence as the exercise or attempted exercise of physical force by a person against a worker that causes or could cause physical injury, and/or a statement(s) or behaviour(s) that could be interpreted as a threat to exercise physical force against a worker in the workplace.



Technical specifications for the mandatory indicator of the number of workplace violence incidents

Unit of Measurement: Number of workplace violence incidents reported by hospital workers within a 12 month period

Workplace violence: As defined under the Ontario Occupational Health and Safety Act

Data Source: In house data collection: The number of reported workplace violence incidents through each organisation's internal reporting mechanisms.



Workplace violence under the Ontario Occupational Health and Safety Act

- the exercise of physical force by a person against a worker, in a workplace, that causes or could cause physical injury to the worker,
- an attempt to exercise physical force against a worker, in a workplace, that could cause physical injury to the worker,
- a statement or behaviour that it is reasonable for a worker to interpret as a threat to exercise physical force against the worker, in a workplace, that could cause physical injury to the worker.

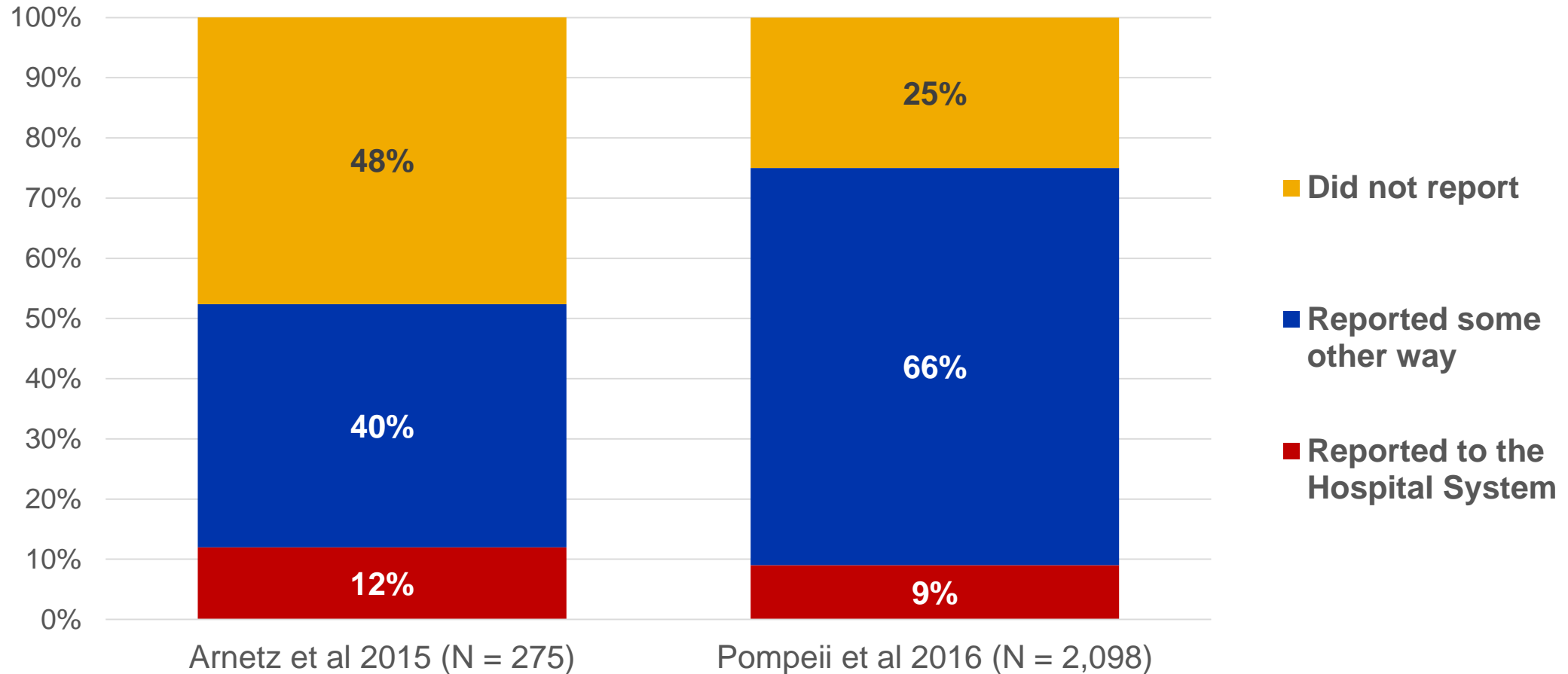
Source: Ontario Occupational Health and Safety Act

Hospital reporting systems as an method to monitor workplace violence

	Arnetz et al (2015)	Pompeii et al (2016)
Target population	Employees in 42 hospital units within seven hospitals in Mid-west United States (approximately 15,000 employees).	Two large hospital systems in Texas and North Carolina (approximately 11,000 employees)
Num invited to participate	2,010	11,000
Response rate (N)	22% (N=446)	49% (N=5,385)
Types of violence examined	All Types (violence or aggression)	Type II only (patient/visitor) (assaults, attempted assault and threats)
Experienced violence	62%	39%



Hospital reporting systems as an method to monitor workplace violence





Objective

Working together with six Ontario hospitals we sought to:

- Estimate self-reported rates of different types of workplace violence in the previous 12 months
- Understand how many of these incidents were reported to the hospital system
- Examine perceptions of workplace violence prevention activities at each hospital

For the most serious incident we also wanted to know

- More about the incident and the consequences of the incident
- If it was reported to the hospital system
- Reasons for not reporting to the hospital system



Study timeline

- **Nov 2016 – March 2017:** Engagement with each hospital concerning study objectives and survey content
- **March 2017:** Ethics application submitted to U of T
- **May – June 2017:** Additional survey modifications following feedback from hospital representatives
- **June 2017:** Ethics applications submitted to each of the six hospitals (approved between August and September)
- **Late October to late Nov 2017:** Survey launched at each hospital
- **Jan 2018:** Surveys closed

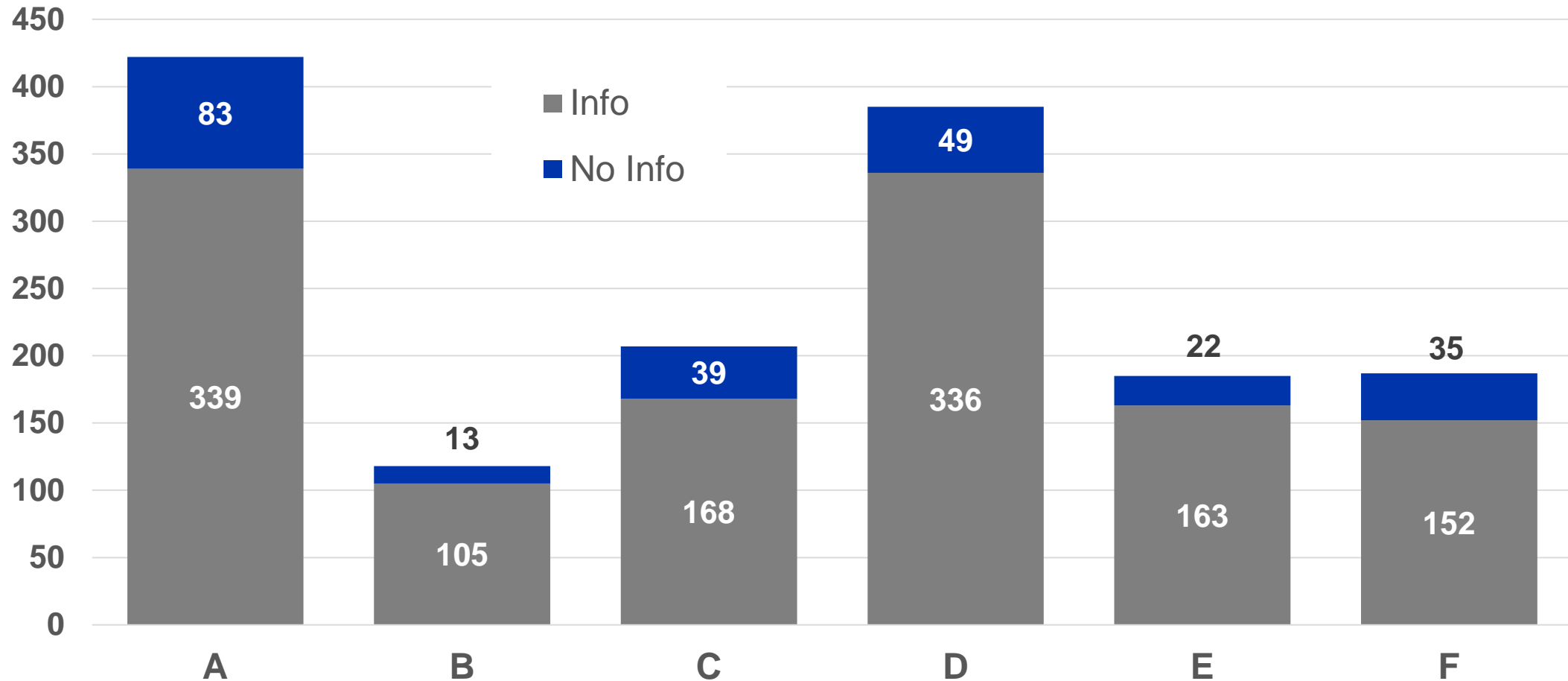


Survey content

- **Part One:** Experience of WPV and reporting
 - **Part Two:** Details on most serious WPV event
 - **Part Three:** Workplace violence prevention and demographic, occupational information
-
- All surveys done online, following a mass email to staff at each hospital

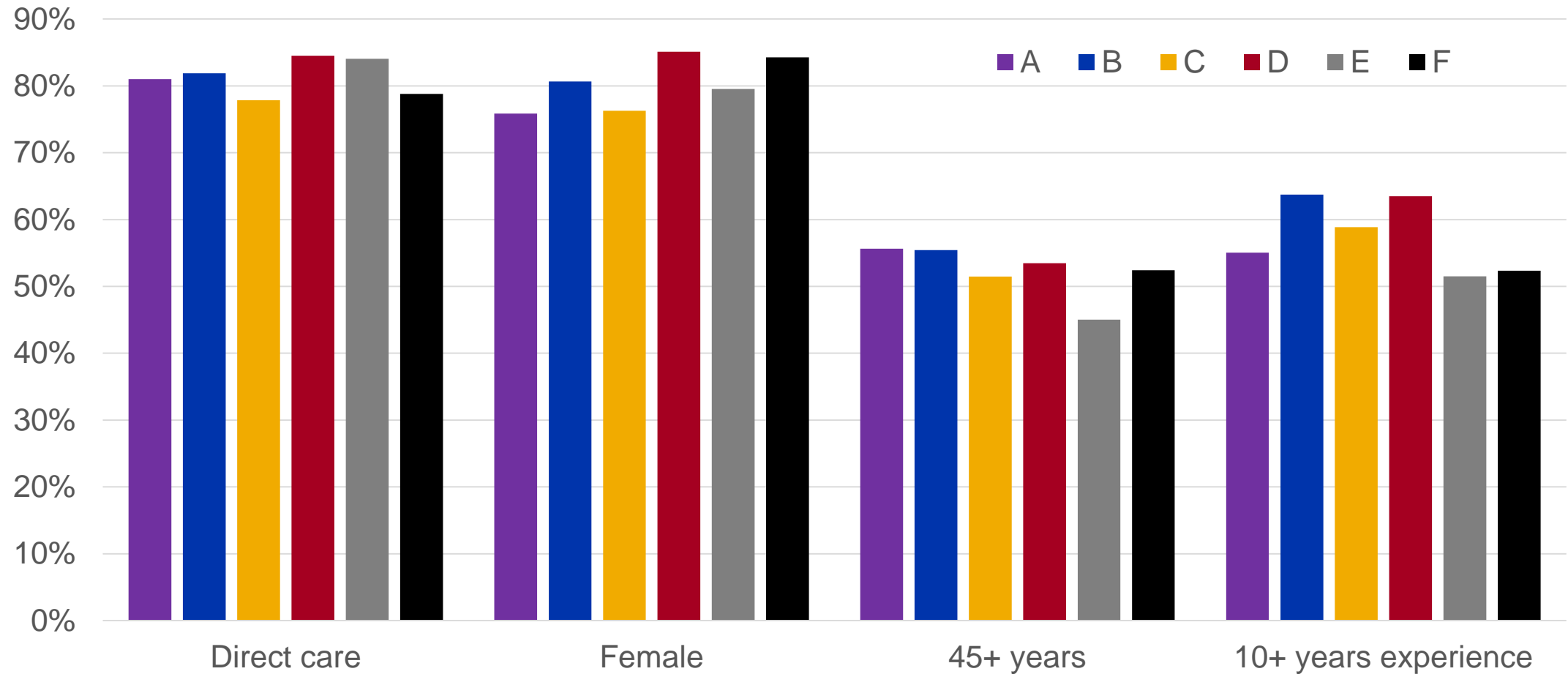


Part One: Sample size per hospital (N = 1,564; 1,323 (85%) with some data)



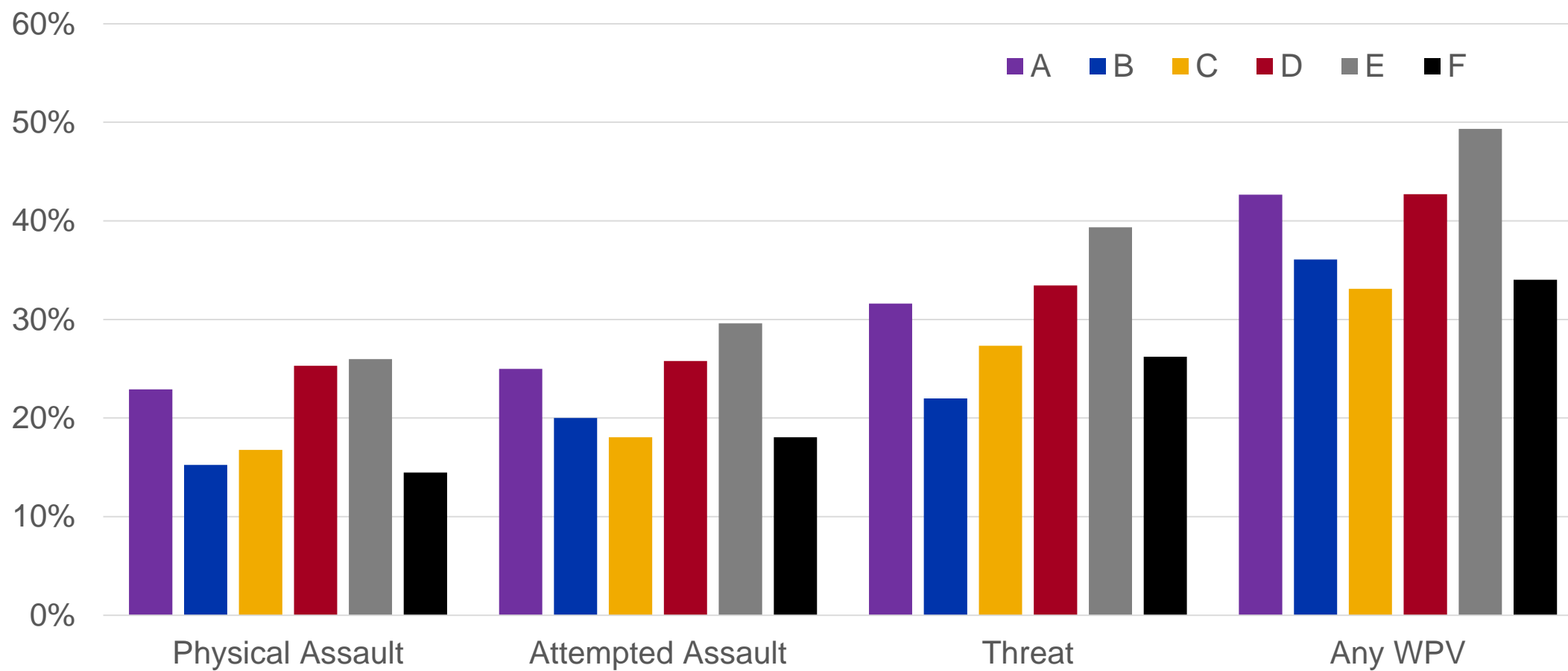


No differences in respondent demographics and direct care work across hospitals



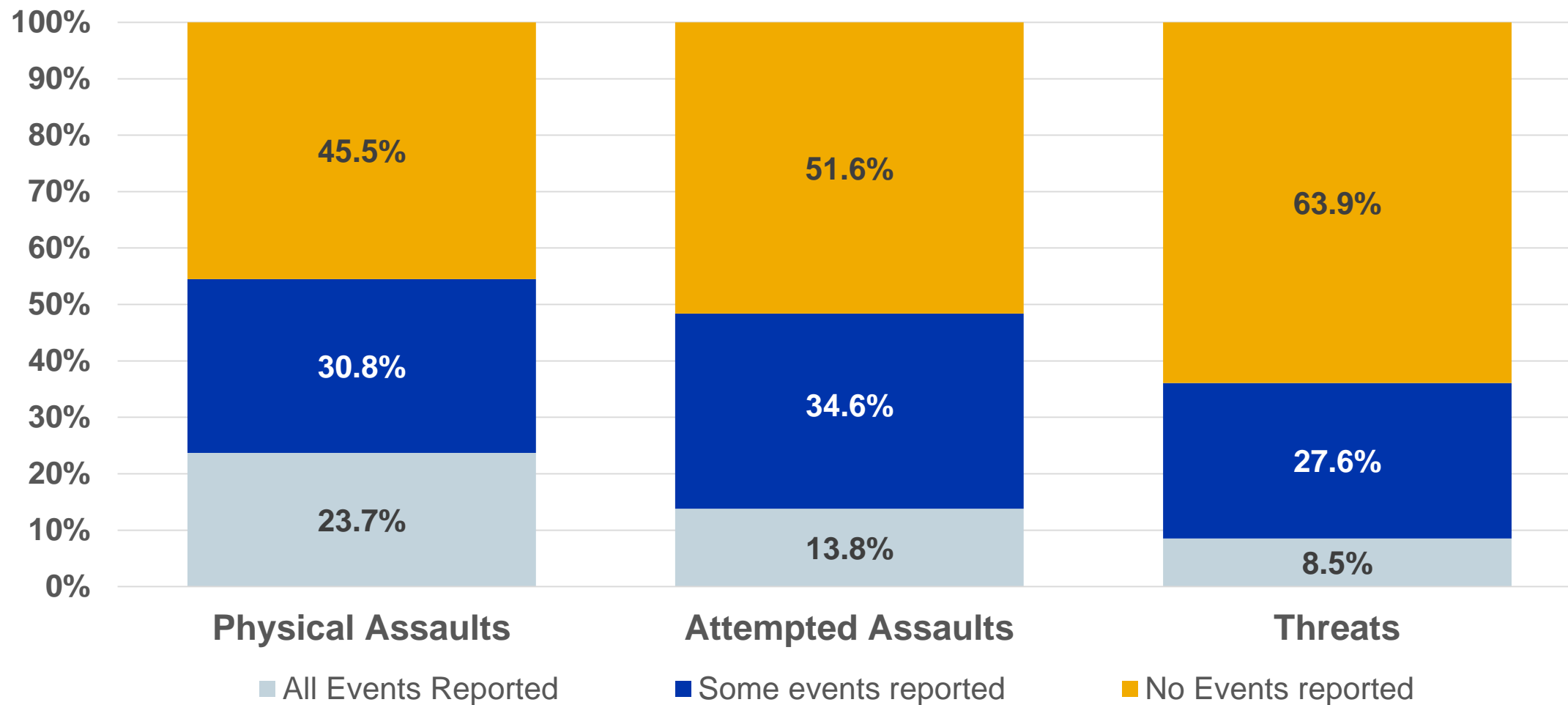


Proportion of respondents who experienced workplace violence (past 12 months) by type and hospital



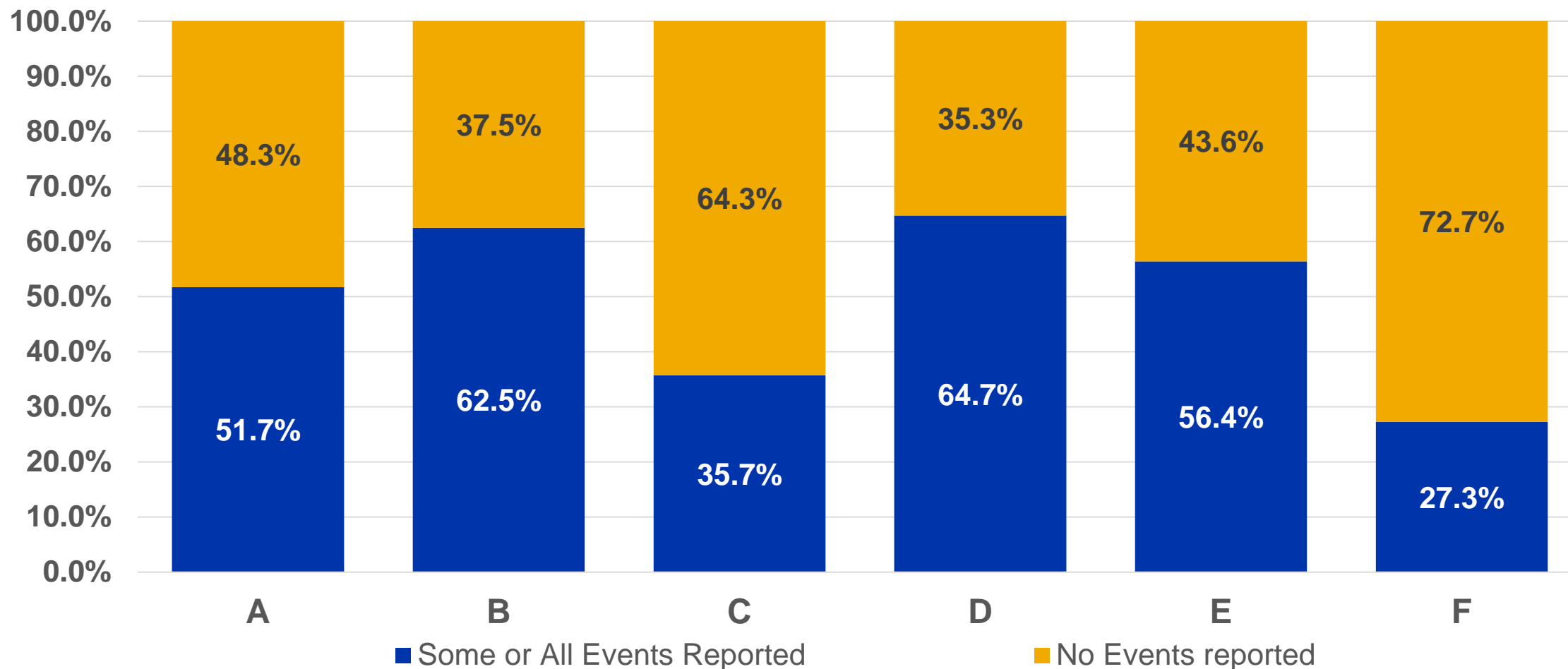


Reporting of different WPV types (all hospitals)



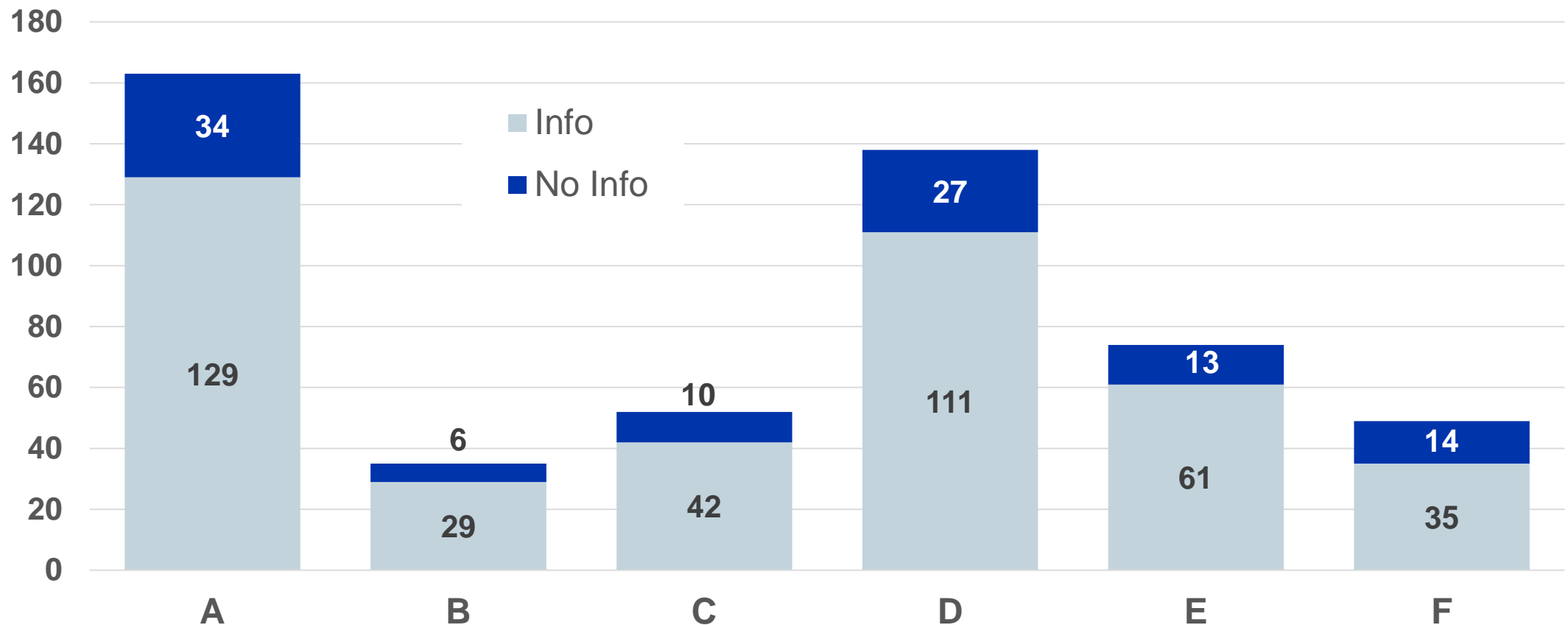


Reporting of physical assaults by hospital



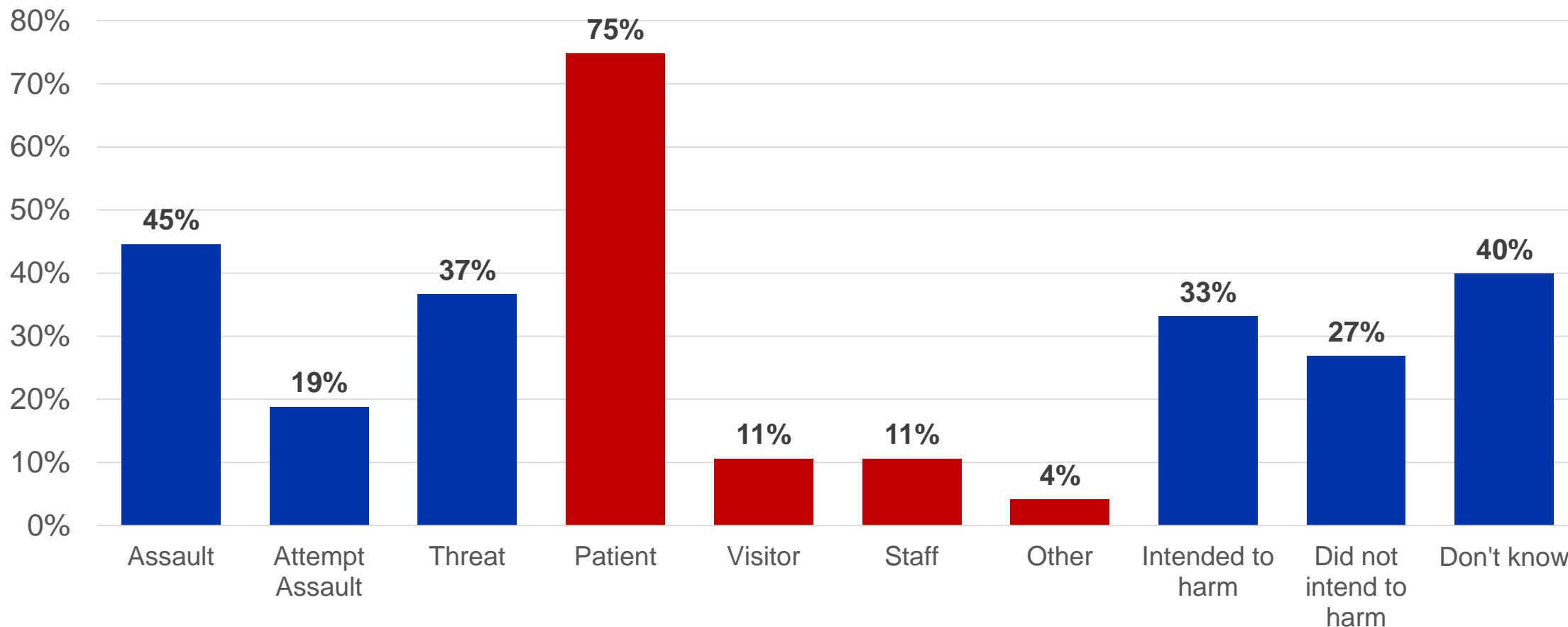


Part Two: Sample size per hospital for most serious WPV incident (N = 511; 419 (82%) with some data)



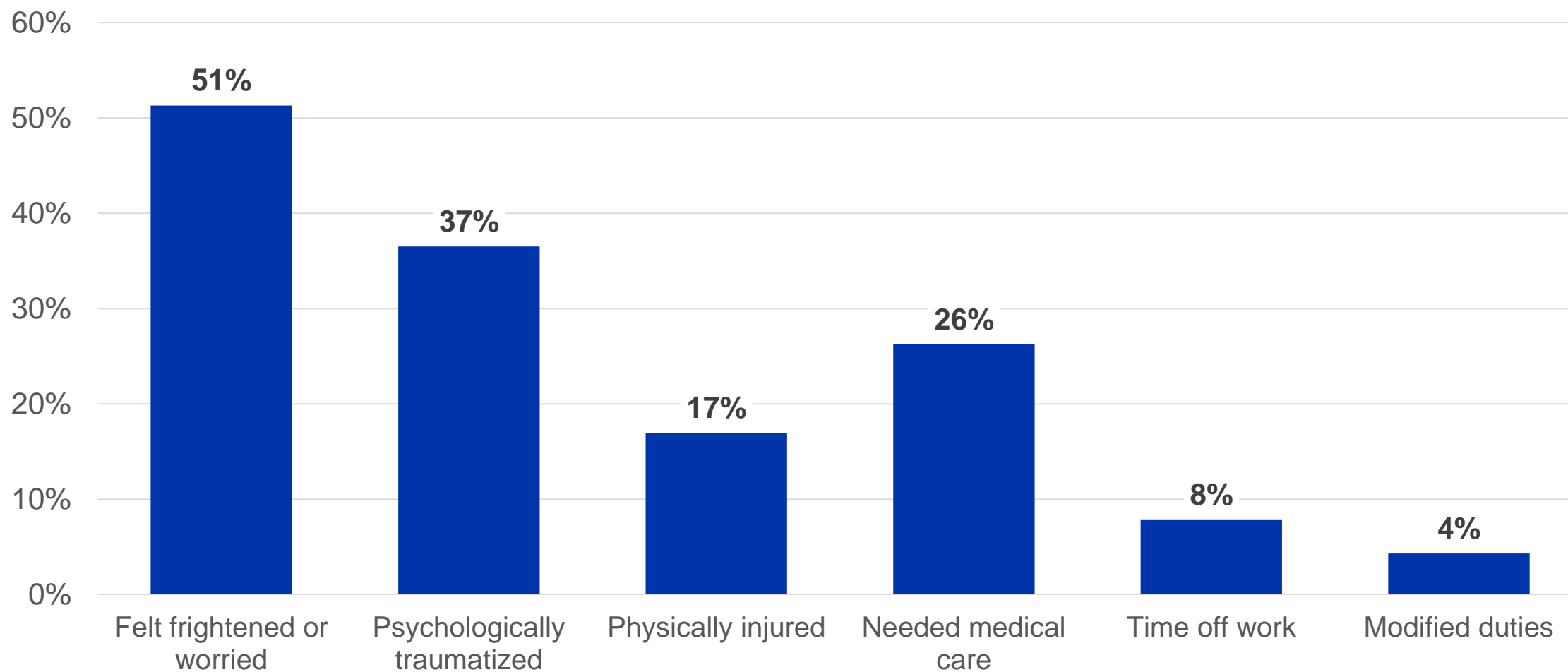


Types of most serious WPV incidents reported (N = 419)





Consequences of workplace violence





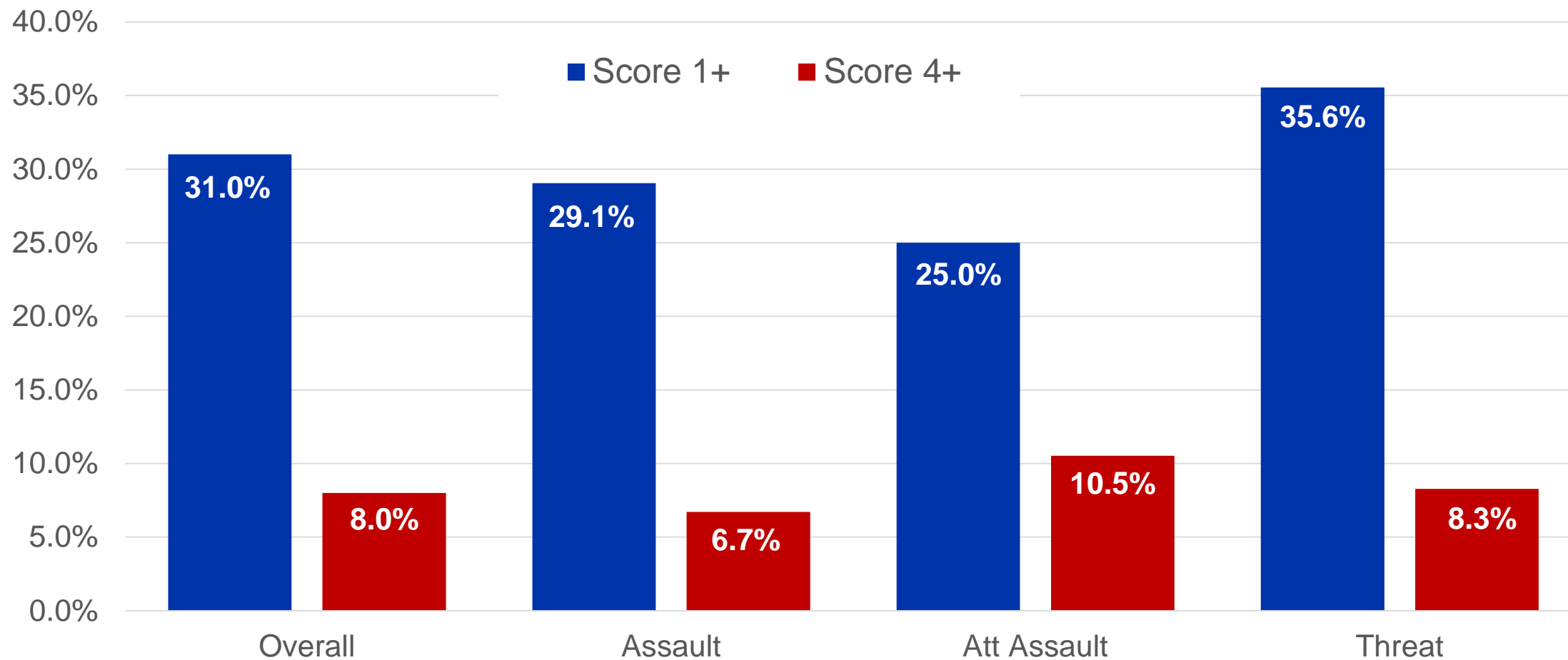
Short Screening Scale for PTSD

Because of this event, did any of the following situations occur?

1. You avoided being reminded of the experience by staying away from certain places, people or activities
2. You lost interest in activities that were once important and enjoyable
3. You began to feel more isolated or distant from other people
4. You found it hard to have love or affection for other people
5. You began to feel that there was no point in planning for the future
6. You had more trouble than usual falling asleep or staying asleep
7. You became jumpy or easily startled by ordinary noises or movements?

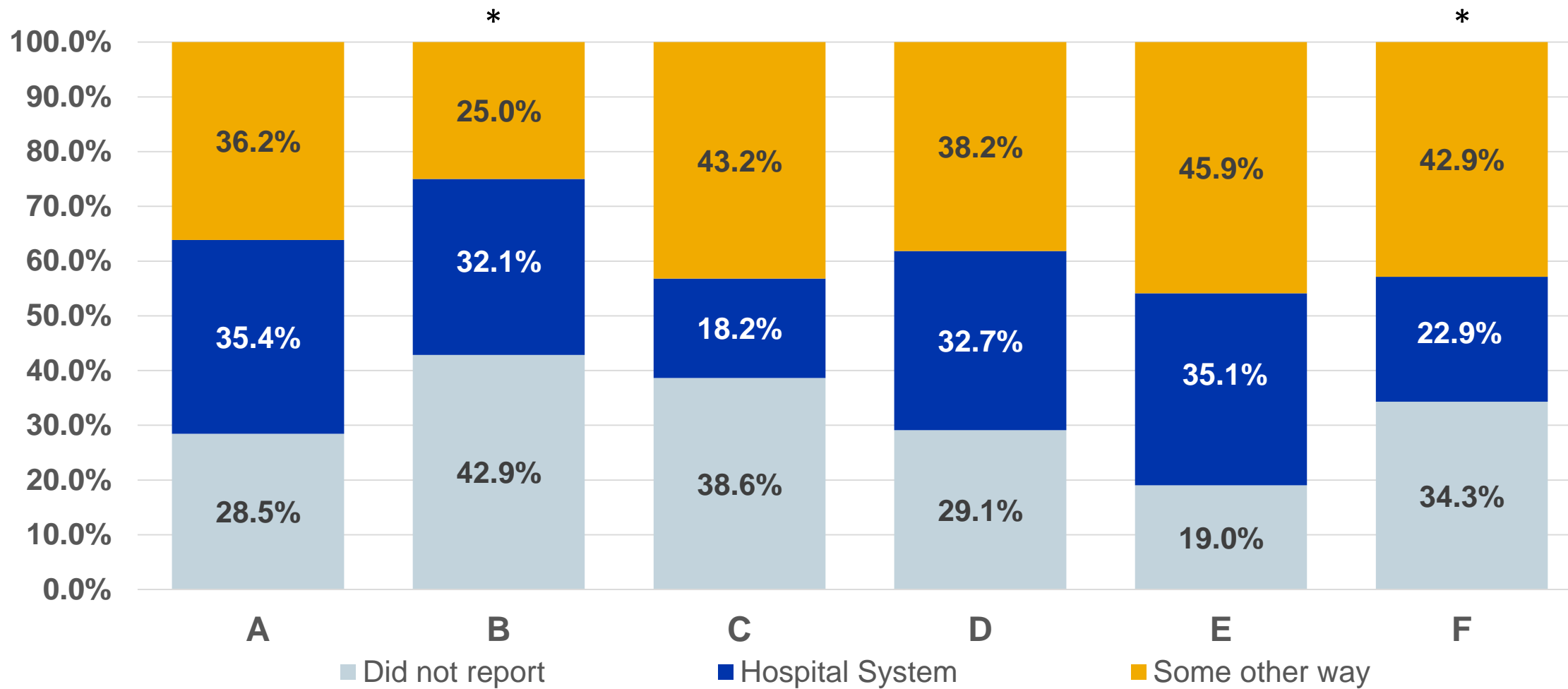


Short Screening Scale for PTSD Score by violence type



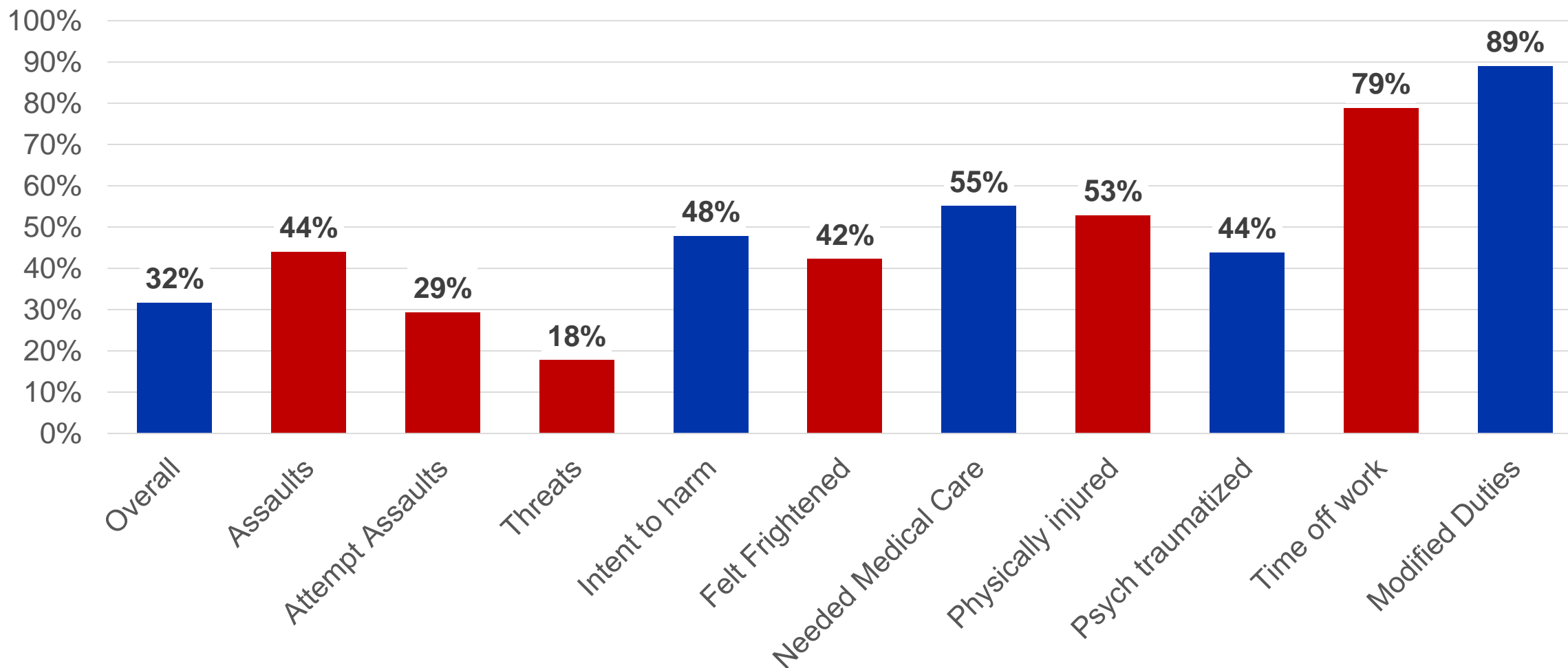


How did you report this event?



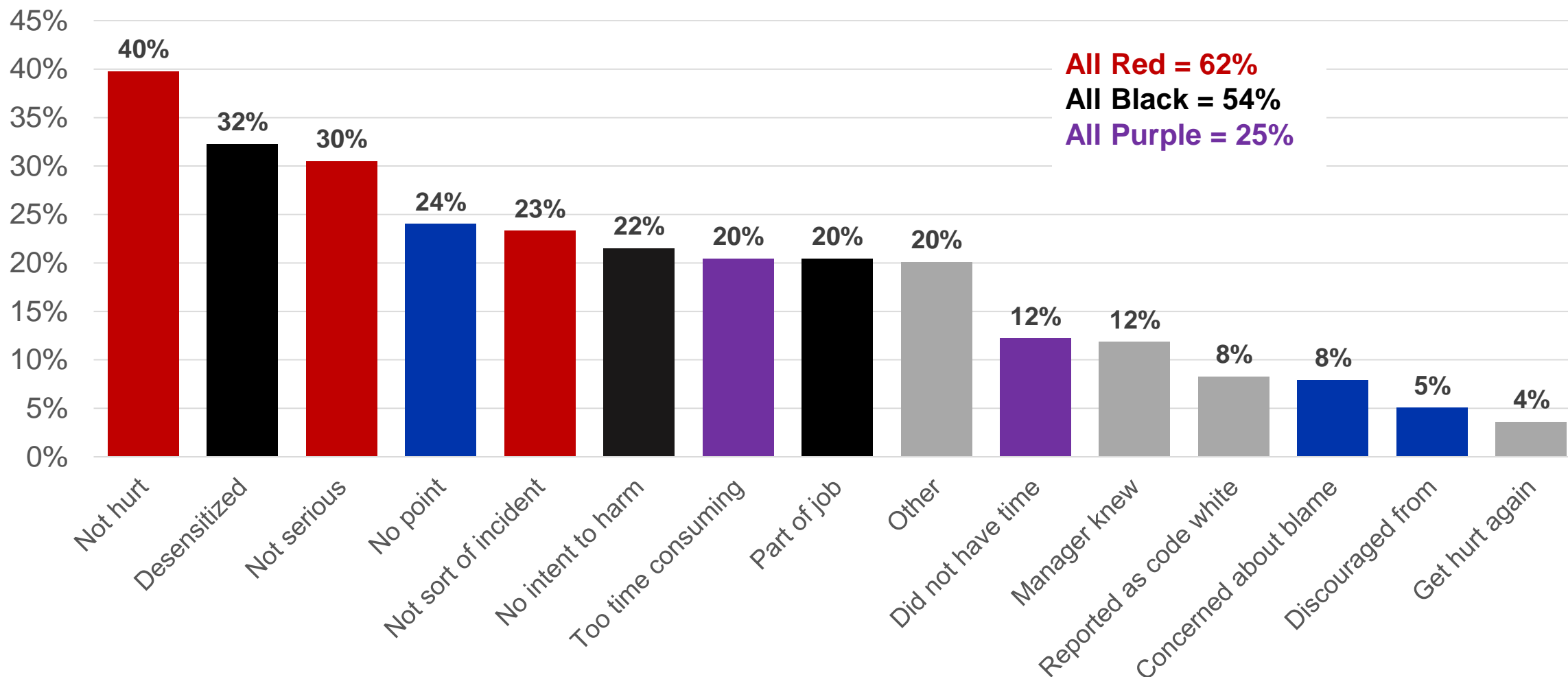


Proportion reporting to the hospital system by WPV subgroups



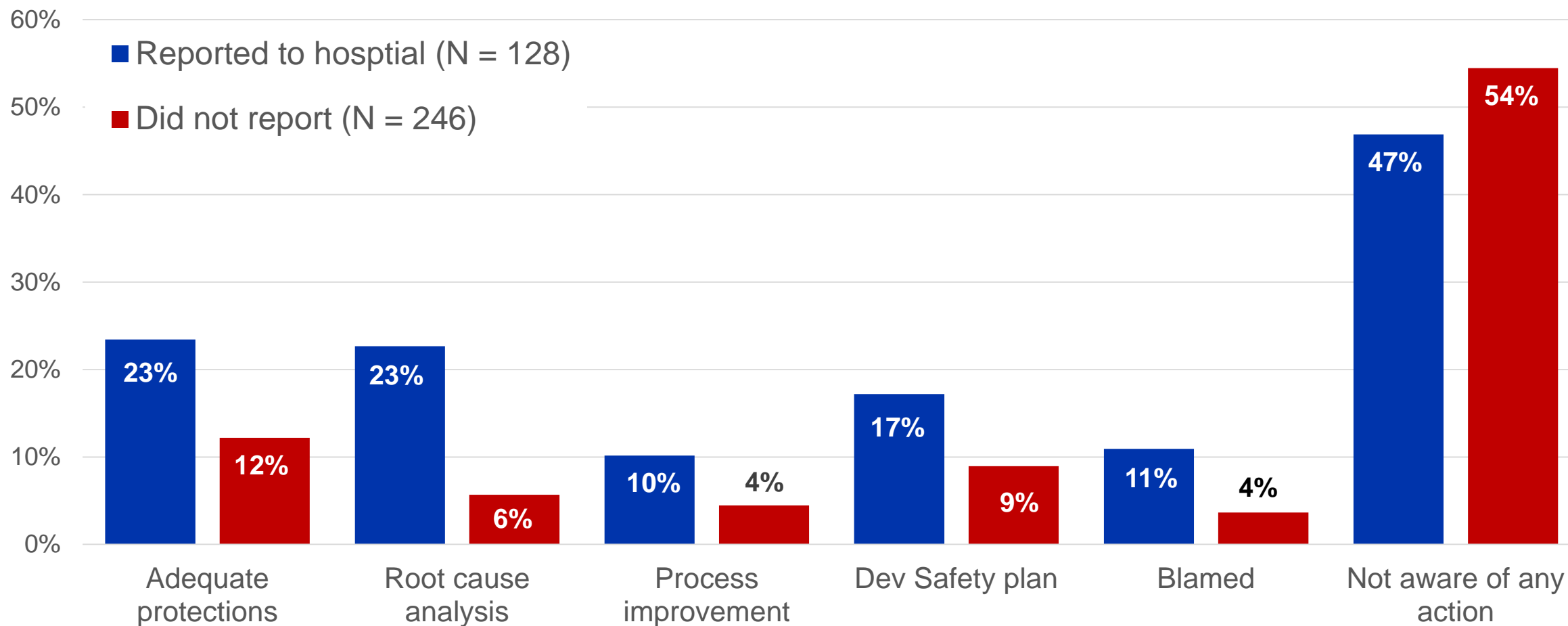


Main reason for not reporting (to hospital system). Multiple responses allowed.





What corrective action was taken as a result (N = 374)? Multiple responses allowed





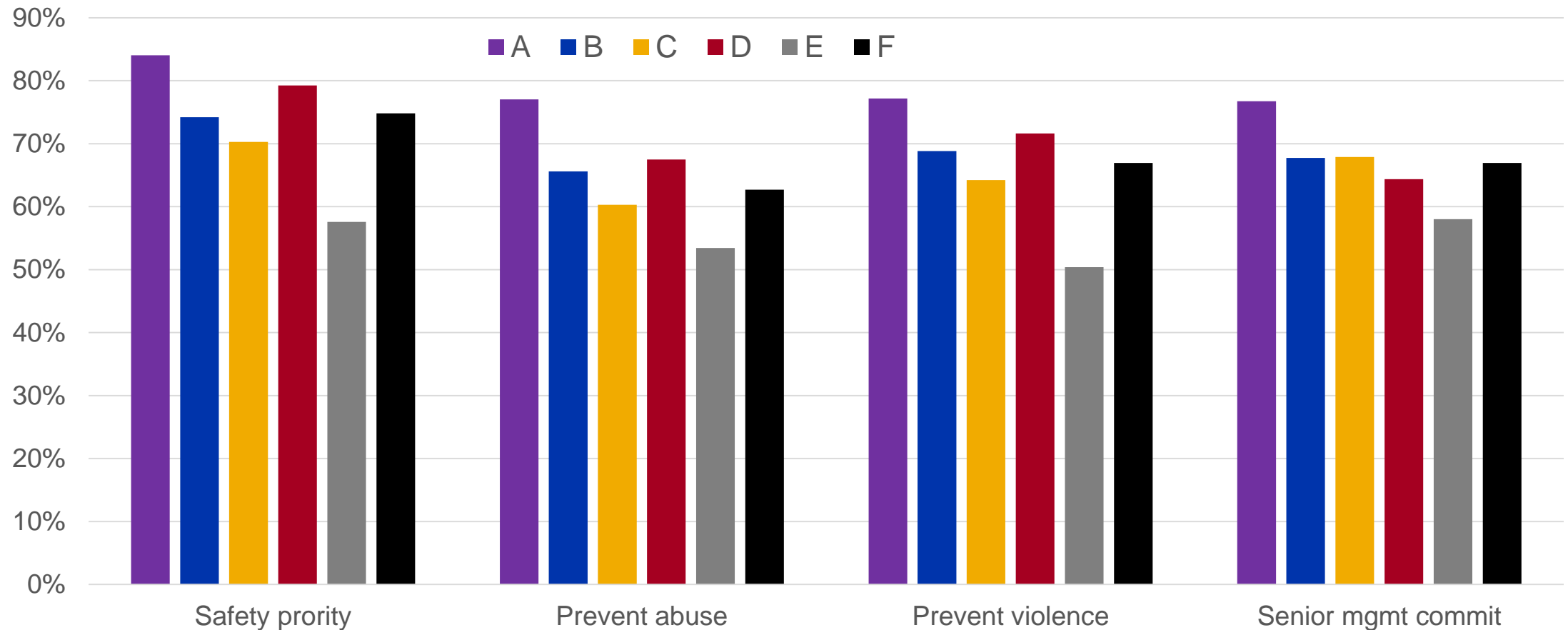
Perceptions of WPV prevention (N = 1,111)

Please indicate the extent to which you agree with the following statements

1. Violence Prevention is a safety priority
2. My organisation takes effective action to prevent abuse
3. My organisation takes effective action to prevent violence
4. Senior managers are committed to providing a safe and healthy workplace
5. The people I work with treat me with respect
6. I know that I can report issues related to WPV to my manager and action to protect me and others will be taken
7. My hospital takes effective action after violence occurs

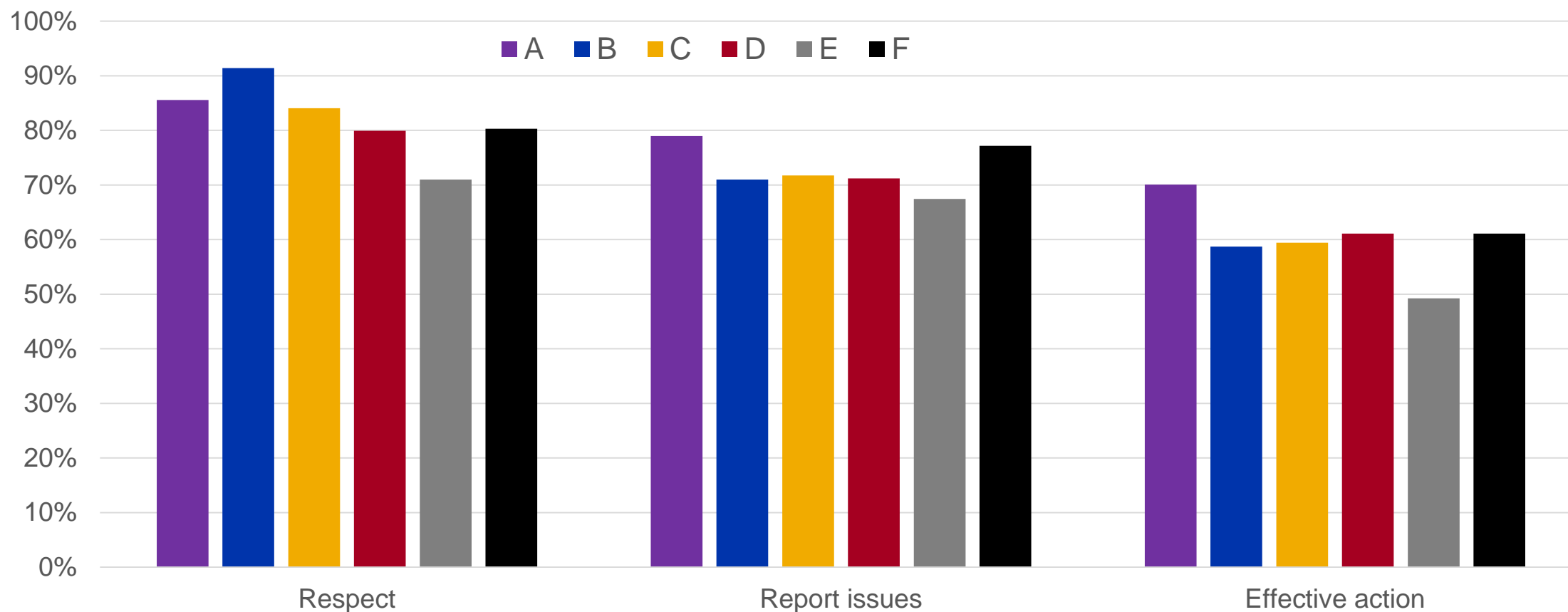


Proportion agree with each question by hospital (N = 1,111)



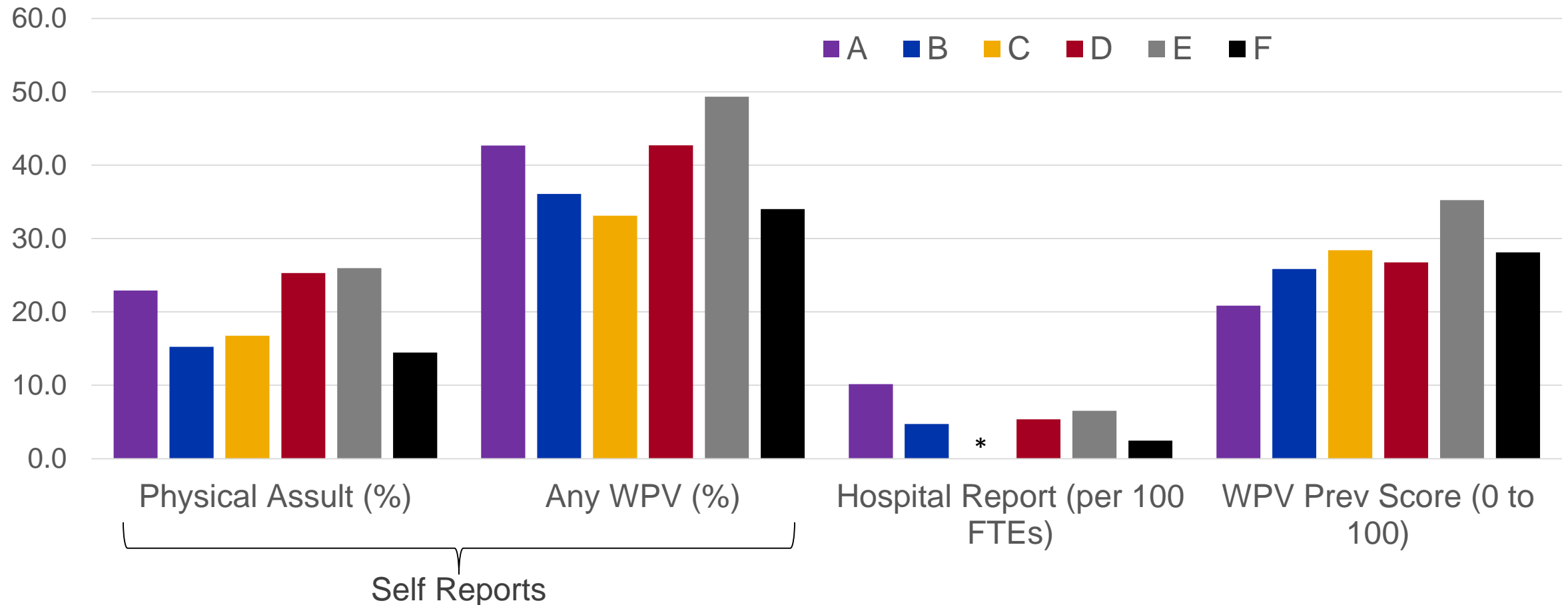


Proportion agree with each question by hospital (N = 1,111)





Different measures of workplace violence prevention performance across hospitals (higher scores = worse performance)





Strengths and limitations

Strengths

- First study to examine WPV reporting in hospitals in Ontario
- Breath of information collected
- Confirms results from other studies in the US (both in rates or reporting and reasons for not reporting)

Weaknesses

- Low response rate
- Unable to assess potentially important differences between hospitals (low sample size in some hospitals)



Key Messages

- Underreporting of workplace violence is substantial and differs across six hospitals that are similar in other respects (e.g. size, reporting systems)
- Key reasons for non-reporting include not being hurt/seriousness, being desensitised, and feeling nothing happens as a result
- Relationship between self-report WPV, hospital recorded WPV and perceptions of WPV prevention activities are complex
- More research will larger samples (number of participants and number of hospitals) is required
- Recommend caution and care in the use of hospital reports of WPV as a KPI for WPV prevention in the short term



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