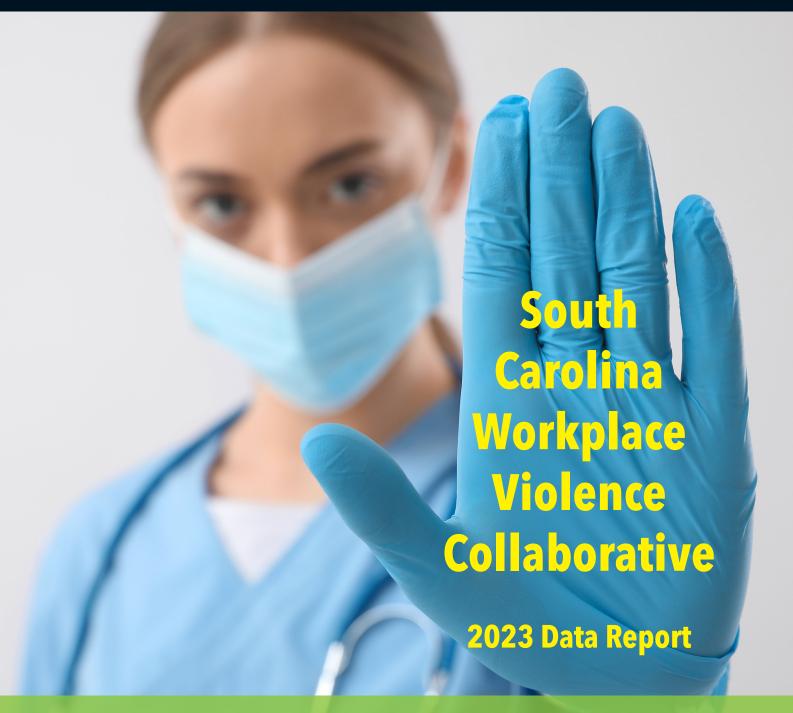
We make that vow to you.



Make that vow to us.







SCHA ANTUM RISK

Help Keep SC Hospital Workers Safe



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SOUTH CAROLINA WORKPLACE VIOLENCE COLLABORATIVE

2023 DATA REPORT

ESTABLISHED IN 2023, THE SOUTH CAROLINA
WORKPLACE VIOLENCE COLLABORATIVE IS A
COLLECTIVE OF SC HEALTHCARE FACILITIES
PARTNERING TO ADDRESS THE INCREASED
INCIDENCE OF VIOLENCE AGAINST HEALTHCARE
WORKERS. THIS REPORT CONTAINS AGGREGATE
DATA SUBMITTED BY 48 SC HEALTHCARE
FACILITIES INCLUDING ACUTE CARE HOSPITALS,
PHYSICIAN PRACTICES, OUTPATIENT CLINICS,
AND REHABILITATION CENTERS IN 2023. FOR
STANDARDIZATION PURPOSES, ONLY INCIDENTS OF
PHYSICAL VIOLENCE ARE INCLUDED. THIS VOLUNTARY
PROGRAM IS SUPPORTED BY THE SOUTH CAROLINA

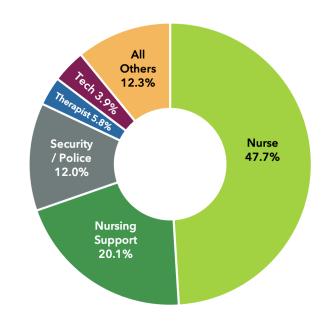
HOSPITAL ASSOCIATION AND ANTUM RISK.

In 2020, healthcare workers accounted for 76% of all nonfatal workplace injuries due to violence. The Bureau of Labor Statistics estimates that healthcare workers are five times more likely to experience workplace violence than any other professions. Additionally, the healthcare industry presents unique challenges that may increase the risk of violence, such as patients in mental health crisis or under the influence of drugs, as well as the hands-on nature of the required work. Workplace violence takes a physical and emotional toll on staff members as well as a financial toll on the healthcare industry. The formation of the SC Workplace Violence Collaborative is the crucial first step to begin identifying where the challenges lie and how to develop actional strategies for improvement.

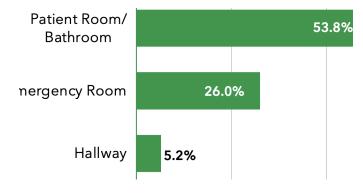
PROGRAM GOALS

- Standardize the collection of workplace violence data.
- Develop strategies for violence prevention and intervention.
- Share innovative solutions and best practices.
- Inform statewide leaders and the public.

What types of healthcare workers were assaulted?



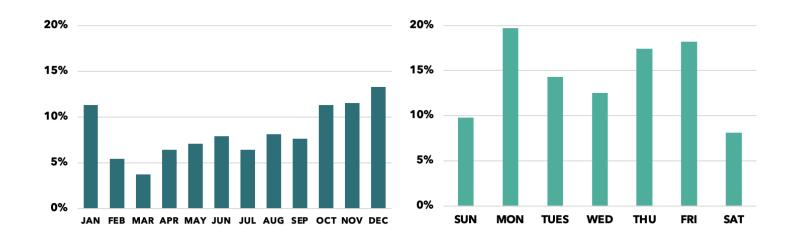
Where did physically violent events happen?

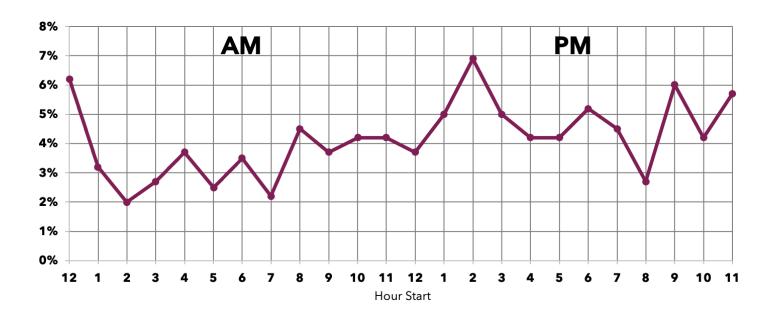


In 2023, SC Healthcare workers predominantly experienced incidents of violence in patient rooms or bathrooms and the Emergency Room. The type of healthcare workers most likely to be involved in workplace violent events were Nurses (RN, LPN), with staff in Nursing Support roles (CNA, PCT, etc.) and Security Officers/Police rounding out the top three.

WHEN DID WORKPLACE VIOLENCE INCIDENTS HAPPEN IN 2023?

Percentage of Occurrences by Month, Day, and Time





Healthcare workers provide supportive care to patients at all hours of the day and night which provides a large window of opportunity for violence. In 2023, staff assaults appeared to be the highest in the late Fall and Winter months, with a peak in December and then sharp drop in February and March. Data surrounding the days and times that have the greatest potential for violence showed that Mondays and Fridays were the highest

days of the week and that assaults were most common between 9 p.m. and 1 a.m. In general, it appears that more staff assaults happened in the evening, then dropped off in the early morning hours before beginning to rise again after seven AM. "Violence often takes place during times of high activity and interaction with patients, such as at mealtimes and during visiting hours and patient transportation." ⁵

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Among reporting hospitals...

75%

"All staff trained in how to recognize potentially violent behavior."

58%

"Patients/Visitors are educated on their roles/responsibilitie s with the Workplace Violence 67%

"Staff In high-risk areas receive training beyond general staff training."

42%

"Contract staff are trained in their roles/responsibilitie s with the Workplace Violence 50%

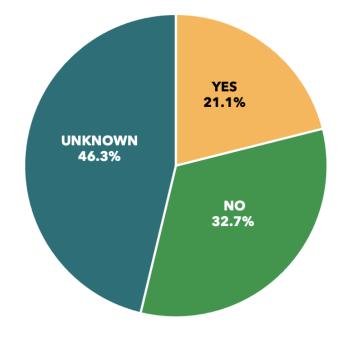
"All patients are assessed for agitation level."

33%

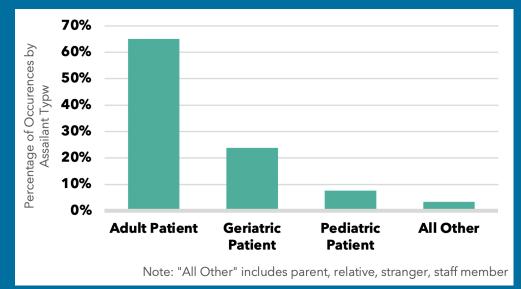
"Information regarding history of staff assault is prominently displayed."

SC healthcare facilities have done a great job developing their workplace violence programs, but there are several areas that have room for improvement. Only 42% of hospitals reported that contract staff are trained on their roles and responsibilities within the workplace violence program and just over half said that patients and visitors receive education. Education and Training should include all staff members from every level of the organization as well as patients and visitors.³ Violence prevention is also an area that could be improved, with just half of the hospitals reporting that all their patients are assessed for agitation level. One-third of hospitals reported that patients with a history of violence against staff members are identified in some way. 21% of incidents involved an assailant with a known history of staff violence. Healthcare facilities should consider establishing a system that identifies patients with a known history of violence against staff.4

Did the assailants have a known history of violence



WHO COMMITTED THE ACTS OF PHYSICAL VIOLENCE?



Data showed that adult patients were the ones most likely to perpetrate violence towards healthcare team members, causing two-thirds of all staff assaults.

KEY TAKEAWAYS

- Improvement opportunities exist for education, training, and communication for team members at all levels within the organization as well as patients and visitors.
- Identify patients with a known history of violence against staff. Incidents should be reviewed and escalated per organizational policy.
- While much attention is placed on violence prevention strategies in the ER, a similar focus should be directed toward how incidents transpire in patient rooms/bathrooms.







AnMed's Canine Companions Boost Security

Many hospitals are taking an innovative approach to bolstering workplace security. AnMed is finding that specially trained canine companions can play a vital role in fortifying safety measures with their unique blend of deterrence, detection, and human support. Their mere presence can discourage trespassers, vandals, and individuals with malicious intent.

When the AnMed system implemented South Carolina's first Hospital Security K9 Team in 2020, they saw a reduction in emergency department security related incidents by as much as 50%. And the staff's perception of their personal safety improved by as much as 80% when a K9 unit was working. At least 70% of their time is spent posted in the ED.

AnMed's security team and leadership team worked together to integrate dogs into their security measures. They currently have two handlers (Steve and Ben) and two K9s (Raven and Cees).

"Having Raven always makes me feel safer," reports Shana Turner, an Emergency Department nurse. "I always feel more comfortable when I call security and Raven is there. My patients even like seeing her [too]—dogs just have a way of making people feel better and more comfortable."

The dogs undergo rigorous training tailored to the unique challenges of healthcare environments. Handlers receive specialized training as well, fostering a strong bond between the canine and human members of the security team. Integration with existing security measures ensures a seamless collaboration that maximizes the effectiveness of the entire security apparatus.

Using security dogs represents a forwardthinking approach to fortifying healthcare institutions against security threats.

BEST PRACTICES

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License Plate Readers Help Protect LMC Workforce

Justin McClarrie, Director of Public Safety for Lexington Medical Center (LMC), understands the importance of having the right tools for safety, security and emergency preparedness. With workplace violence rising at healthcare facilities nationwide, LMC's public safety team added an innovative license plate reader (LPR) system to their toolkit.

The LPR technology provides early detection when people who are potential security risks drive onto the campus. Integration with the South Carolina Law Enforcement Division (SLED) National Crime Information Center alerts the security team to stolen vehicles or vehicles associated with wanted individuals. The team can also create an internal "hot list" of license plates associated with domestic situations involving employees or criminal activity.

To ensure compliance with privacy expectations, LMC has implemented measures to ensure that collected data is used solely for security and operational purposes. They also clearly communicate with patients, visitors, and staff about the purpose of the technology and how data will be handled.

"The License Plate Reader system is an important part of LMC's Violence Prevention program. The system allows our Public Safety team to proactively monitor any concerning individuals coming on the main campus that have been flagged for situations like trespass notice or potential domestic violence issues," explains Bootsie Wynne, Assistant Director & HR Business Partner. "While we may not need it often, as an HR professional, it gives me confidence knowing that LMC has this additional tool to supplement our protection services."

MUSC Health Black River Medical Center Designed with Security in Mind

When MUSC Health broke ground in 2021 for a new rural hospital to serve Lower Florence and Williamsburg counties, it created an opportunity to design a facility with today's safety and security priorities in mind. The security systems at MUSC Health Black River Medical Center - which replaced hospitals in Lake City and Kingstree - help safeguard staff, patients and visitors without sacrificing access or convenience, according to Executive Director Allen Abernethy.

A key decision was to have only one public entrance; the others require badge access. A single vestibule provides access to the emergency department, surgery and outpatient wings, each having its own waiting area. Having a single registration team also helps with staffing efficiencies and patient flow, he said, noting that in year one - which saw more than 22,000 ED patients - the average wait time was 12 minutes from door to

triage, 30 minutes from door to doctor, and 42 minutes from door to bed.

Other enhancements include a state-of-theart camera system and a 24/7 visible security presence, something neither legacy hospital had. An automated control board controls doors to every space that has limited access and allows for lockdowns if needed.

"Safety is always an important factor when designing a hospital. Our challenge was to marry safety with customer service and convenience," Abernethy said. "Involving staff and the Patient-Family Advisory Committee in programmatic decisions helped ensure that the facility would be welcoming as well as safe. The folks who were going to be working here had a major role in designing the facility."



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BEST PRACTICES

McLeod Health partners with Fourth Circuit Solicitor

Hospital safety and security has been a concern for years and McLeod Health is making it a priority to strengthen partnerships with local law enforcement and prosecutors to ensure a safer environment for patients, staff and visitors. Following an event at a McLeod Health facility that led to a traumatic injury for a staff member, hospital leadership and security reached out to the Fourth Circuit Solicitor's Office.

What followed was a roundtable discussion, led by a team from McLeod Health, that included the local magistrate and law enforcement. The message from McLeod was clear. This happens too often. We want to pursue charges. We need your help. The message was received and now the health system has established an ongoing collaborative relationship with law enforcement, prosecutors, and the judicial branch.

As a follow-up, a review and response team was created which includes quality, safety, and security leaders from McLeod Health, along with the assistant solicitor. The team meets quarterly to review incidents, trends, specific cases, and other critical issues. This partnership has created awareness of this issue and meaningful steps to improve the process of prosecuting those who deliberately assault healthcare professionals.

While the data helps tell the story, it is key to foster local relationships with law enforcement and judicial officials to ensure these cases are treated appropriately. Hospitals are finding effective ways to bring attention to the issue of violence and aggression in healthcare settings, and that includes community partnerships.



In this age of wearable smart devices, help for just about anything is a tap or two away. So, it's not surprising that Prisma Health team members are finding that their "panic button" badges dramatically speed response to potential security threats. The badges allow staff members to send a discreet alert to security with two simple taps. Additionally, subscribed personnel within a designated range receive notifications, enabling them to aid before security arrives, if needed.

The badges, provided through a partnership with Commure Strongline, were incorporated into the system's security program on the recommendation of its workplace safety task force, which gathered input from staff and nursing leaders. The project began as a pilot in three Prisma Health hospitals in November 2022 and was later established in all acute care facilities. More than 20,000 Prisma Health team members, including nurses and physicians, have been equipped with these badges. New team members in public-facing areas receive them during onboarding.

The swift response time has garnered widespread satisfaction among staff, with many expressing appreciation for the remarkable efficiency witnessed in real-time. It outpaces any previously employed method for speed, which enhances security and instills a heightened sense of protection for staff.

Because of possible concerns about location monitoring, wearing badges is voluntary. But the majority of staff are actively participating. They know that in responding to security as well as medical emergencies, minutes count.

Data Inclusion and Exclusion Criteria

Data included in this report is from SC healthcare facilities that submitted a Participation Agreement, Data Use Agreement, and Organizational Assessment as part of the program requirements. Due to variations with the types of workplace violence events that were submitted, only incidents of physical violence were used. Submissions with missing components were excluded.

References:

- 1. Bureau of Labor Statistics (2020). TABLE R4. Number of nonfatal occupational injuries and illnesses involving days away from work by industry and selected events or exposures leading to injury or illness, private industry, 2020. Retrieved from https://www.bls.gov/iif/nonfatal-injuries-and-illnesses-tables/case-and-demographic-characteristics-table-r4-2020.htm.
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- 3. Occupational Safety and Health Administration. (n.d.) Healthcare Workplace Violence. Retrieved from https://www.osha.gov/healthcare/workplace-violence/.
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- 5. Centers for Disease Control and Prevention (2002). Violence Occupational Hazards in Hospitals. Retrieved from https://www.cdc.gov/niosh/docs/2002-101/pdfs/2002-101.pdf?id=10.26616/NIOSHPUB2002101.

About SCHA

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SCHA is committed to making South Carolina one of the nation's healthiest states by helping our hospitals and health systems provide the best care possible. We advocate for sounds healthcare policies and legislation, facilitate collaboration to tackle problems that none of us could solve alone, find and share innovations and best practices, and provide data, education, and business solutions to help our members better serve their patients and communities. Together, we are leading South Carolina to a better state of health. Learn more about SCHA at www.scha.org.

About Antum Risk

Originally founded in 1977 by South Carolina healthcare executives as a group workers' compensation self-insurance pool, we are a leading provider of workers' compensation coverage to the state's healthcare industry. Antum Risk provides innovative solutions, serving as an alternative to the commercial insurance market. Our offerings include group programs for workers' compensation, professional and general liability, and medical stop-loss. With more than 40 years in the healthcare claims and risk management industry, Antum Risk also provides a variety of risk management consulting services.



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