

Workplace Violence Prevention in Health Care

This fact sheet gives an overview of the Cal/OSHA Violence Prevention in Health Care standard. Employers covered by this standard must establish, implement, and maintain an effective workplace violence prevention plan, maintain a violent incident log, and provide effective training to employees. Certain employers must also report violent incidents to Cal/OSHA.

Employers should review the full requirements in California Code of Regulations, title 8, section 3342 at www.dir.ca.gov/Title8/3342.html. For more information, see Cal/OSHA's "[Frequently Asked Questions about Workplace Violence Prevention in Health Care](http://www.dir.ca.gov/dosh/WPVPIHC_FAQs.html)" at www.dir.ca.gov/dosh/WPVPIHC_FAQs.html.

Health care facilities, services, and operations covered by the standard

- Health facilities. See subsection (b) for the kinds of facilities included in this definition
- Home health care and home-based hospice
- Emergency medical services and medical transport
- Drug treatment programs
- Outpatient medical services in correctional and detention settings

Creating a workplace violence prevention plan

Every covered employer is required to develop a workplace violence prevention plan. The plan must include procedures to identify and evaluate risk factors for workplace violence, correct hazards, prepare for workplace violence emergencies, and respond to and investigate violent incidents.

Employers must obtain the active involvement of employees and their representatives in developing, implementing, and reviewing their plan.

See subsection (c) for the full set of requirements.

Identifying risk factors for workplace violence

Environmental

- Employers with fixed workplaces must identify and evaluate environmental risk factors in each area of the establishment. Examples include work in isolated locations, poor lighting, and lack of escape routes. See subsection (c)(9)(A) for more examples.
- Home health care and home-based hospices must identify and evaluate environmental risk factors during intake and the initial visit and during subsequent visits

whenever there is a change in conditions. Subsection (c)(9)(B) lists some examples for these settings.

- Emergency medical services and medical transport services must establish procedures for communicating with dispatching authorities to identify any environmental risk factors present at the scene. See subsection (c)(9)(C).

Patients and other persons

- All employers must identify and evaluate patient-specific risk factors and assess visitors or other persons in the workplace who are not employees. Patient-specific factors include a patient's mental status and history of violence. See subsection (c)(10) for more examples.

Correcting workplace violence hazards

Employers must take specific measures to correct workplace violence hazards in a timely manner. See the full set of requirements in subsection (c)(11).



Examples of corrections (left to right): blinking alarm light, bubble mirror to see blind areas, personal alarm

Preparing for workplace violence emergencies

Employers must establish an effective response plan for actual or potential workplace violence emergencies, including mass casualty threats such as active shooters. The plan must include methods for evacuating or sheltering and procedures to warn employees of the

(Continued on next page)

situation and contact law enforcement. See additional requirements in subsection (c)(11)(I).

Responding to workplace violence incidents

Employers must provide immediate care or first aid to employees who have been injured, make trauma counseling available, conduct post-incident debriefing as soon as possible, and review possible causes of the incident. See the full set of requirements in subsection (c)(12).

Workplace violence prevention plans involving multiple employers

An employer in a multi-employer setting may have responsibility for the safety and health of employees other than their own. Similarly, in a “dual-employer” setting, where an employee has two employers at the same time, an employer may have responsibility for the safety and health of workers whom it does not employ directly or supervise directly.

Health care employers must coordinate with other employers to ensure that those employers and employees understand their respective roles in the plan. Procedures for training and violent incident reporting, investigation, and recording must include all employers’ employees. See subsection (c)(3).

Violent incident log requirements

Employers must maintain a log of all incidents of workplace violence even if the incident did not result in injury. The purpose of a violent incident log is to help employers and employees evaluate the effectiveness of the workplace violence prevention plan and identify unsafe conditions that need correcting. See subsection (d) for the information that must be recorded on the log.

Training employees

Employers must provide initial training to employees and additional training when new equipment or work practices are introduced or when a hazard is newly identified.

Employees who perform patient contact activities must also be given annual refresher training.

Employees assigned to respond to alarms and violent incidents or to confront or control persons exhibiting aggressive or violent behavior must be given additional training on how to safely handle such incidents.

See subsection (f) for the required content of the trainings and how they must be given.

Requirements for general acute care hospitals, acute psychiatric hospitals, and special hospitals to report violent incidents to Cal/OSHA

Hospitals must report workplace violence incidents meeting the following criteria to Cal/OSHA, regardless of whether any employees were injured:

- The use of physical force against an employee by a patient or a person accompanying a patient that results in, or has a high likelihood of resulting in, injury, psychological trauma, or stress. “Injury” includes any of the following:
 - Death
 - Days away from work
 - Restriction or transfer to another job
 - Medical treatment beyond first aid
 - Loss of consciousness
 - Significant injury or illness diagnosed by a physician or other licensed health care provider
- An incident involving the use of a firearm or other dangerous weapon, regardless of whether the employee sustains an injury.

Workplace violence incidents must be reported to Cal/OSHA within 72 hours, except the following, which must be reported within 24 hours:

- Incidents resulting in a fatality, inpatient hospitalization for more than 24 hours for other than observation, or an employee losing any member of the body or suffering any serious degree of permanent disfigurement
- Incidents involving the use of a firearm or other dangerous weapon
- Incidents where hospital personnel are exposed to a realistic possibility of death or serious physical harm

For instructions for hospitals on [reporting violent incidents](http://www.dir.ca.gov/dosh/workplace-violence-reporting-for-hospitals.html), go to www.dir.ca.gov/dosh/workplace-violence-reporting-for-hospitals.html.

NOTE: These reporting requirements are in addition to the requirement for all employers to immediately report a work-related death or serious injury or illness to Cal/OSHA. For instructions on [reporting a work-related death or serious injury or illness](http://www.dir.ca.gov/dosh/report-accident-or-injury.html), go to www.dir.ca.gov/dosh/report-accident-or-injury.html.

For free assistance regarding workplace violence prevention programs in health care, employers and employees may contact Cal/OSHA Consultation Services at (800) 963-9424 or InfoCons@dir.ca.gov.

October 2019

