

HOME CARE BRIEFING®

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Violence Prevention in Home Healthcare: Ensuring Safe Client Care Environments

Home healthcare workers and personal care aides are often subject to serious and even life-threatening risks when they enter clients' homes and communities to render care. The unfamiliar nature of the home care environment presents significant risk exposures in the form of concealed weapons, illicit drug use and/or tendencies by clients and family members toward violent behavior. In addition, home healthcare workers may experience threats of robbery, theft and vandalism in communities where clients reside.

Workplace violence is a legitimate occupational hazard for healthcare workers. It is defined by the National Institute for Occupational Safety and Health (NIOSH) as "violent acts (including physical assaults and threats of assaults) directed towards persons at work or on duty."¹ Workplace violence is also associated with a host of other acts, ranging from verbal abuse and sexual harassment to intimidation and even homicide. Home healthcare providers are not immune to these threats. In fact, according to a study of home healthcare workers published in 2015, 61.3 percent of respondents experienced at least one act of workplace violence or sexual harassment in the year prior to the study.² More specifically, the percentage of adverse encounters included:

- 50.3 percent verbal aggression, e.g., offensive, hostile, intimidating and/or threatening language.
- 26.9 percent physical aggression, e.g., threatening gestures, throwing of objects and/or being cornered or prevented from leaving.
- 25.7 percent sexual harassment, e.g., intrusive questioning, sexual propositions and/or "hands-off" offenses such as exhibitionism and voyeurism.
- 23.6 percent acts of violence, e.g., hitting, spitting, firing a gun, or damaging personal property.
- 12.8 percent sexual aggression, e.g., imposing on personal boundaries, physical restraint and/or sexual assault.

In an effort to promote the safety and security of all healthcare workers, the Occupational and Safety Health Administration recently released "[Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers](#)," which encourage employers to establish a workplace violence prevention program (VPP) and track their progress toward reducing work-related assaults. According to the guidelines, an effective VPP should focus on development of processes and procedures appropriate for the size and complexity of the healthcare business, while also being adaptable to specific situations. The VPP should address the potential need for home healthcare providers to resolve violent, or potentially violent, situations without the availability of immediate assistance from co-workers or law enforcement. A VPP also should expressly state a zero-tolerance policy toward violence in any form, including verbal harassment and intimidation.

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¹ See [Violence: Occupational Hazards in Hospitals](#), from NIOSH. Updated June 6, 2014.

² The study focused on 1,214 female respondents. Female caregivers were selected because they comprise about 86 percent of the homecare workforce in the state where the study was conducted. See Hanson, G. et al. "[Workplace Violence Against Homecare Workers and Its Relationship With Workers Health Outcomes: A Cross-sectional Study](#)." *BMC Public Health*, January 2015, volume 15:11.

Because home healthcare workers are primarily dependent on their own skills to safely defend themselves from acts of violence and aggression, staff training represents an essential component of a VPP. Staff members should receive training at regular intervals in order to recognize potentially violent situations, diffuse their impact and ensure swift reporting of incident facts through established channels. Knowledge of the following mitigating measures may help staff avoid the occurrence of workplace violence:

- **Requesting daytime visits and working with a partner,** whenever clinically possible.
- **Notifying employers of visit locations and schedules,** including the anticipated time when visits will end.
- **Verifying the correct location of assignments** and confirming proper and safe directions to clients' residences.
- **Evaluating high crime areas** and traveling with an escort, if necessary.
- **Securing valuables in the trunk of a vehicle,** including all healthcare equipment, supplies and personal belongings.
- **Adhering to safety precautions when en route to visits,** such as driving with windows up and doors locked, parking in well-lit and open areas, and checking surroundings before exiting a vehicle. Staff members should be advised to remain in their vehicles and contact a manager and/or law enforcement if they notice anything that may threaten their security.
- **Utilizing basic safety precautions during visits,** including staying alert, assessing the environment, watching for signs of impending violence – e.g., verbal aggression, threatening body language, signs of drug or alcohol abuse, and the presence of weapons – and maintaining an open pathway for exit, if needed.
- **Defusing or avoiding anger,** including speaking to clients in a calm and respectful manner, avoiding giving directives or orders, acknowledging clients' feelings or frustrations, moving in a slow manner and keeping a respectful distance.

- **Asking abusers to stop their behavior** and removing oneself from a situation if verbal assaults or inappropriate actions continue.
- **Ensuring access to a cell phone** and calling 911 when necessary.
- **Reporting risk hazards in the home environment,** including unsecured weapons or signs of drug abuse or other illicit activity.
- **Trusting personal judgment** and removing oneself from unsafe or threatening situations.

Protecting caregivers from violence is a major responsibility of home health leadership. By thoroughly assessing hazards, enacting and enforcing zero-tolerance policies, implementing environmental and procedural controls, and providing ongoing staff training, organizations can significantly enhance workplace safety and legal defensibility.

QUICK LINKS

- [Best Practices for Preventing Violence in Home Health](#), issued by the International Association for Healthcare Security and Safety Foundation. December 2016.
- Gross, N. et al. ["Workplace Violence Prevention Policies in Home Health and Hospice Care Agencies."](#) *The Online Journal for Issues in Nursing*, January 2013, volume 18:1.
- [Hazard Review: Occupational Hazards in Home Healthcare](#), issued by the National Institute for Occupational Safety and Health (NIOSH). January 2010.
- [How to Prevent Violence on the Job](#), issued by NIOSH. February 2012.



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