



Workplace violence prevention at Minnesota's hospitals and health systems

Hospitals should be places of safety and healing for caregivers, patients and visitors. That's why Minnesota's hospitals and health systems have been enhancing violence prevention and response plans and training health care staff since 2013.

- Hospitals and health systems take this issue very seriously and are striving to build a culture where violence or aggressive behavior is not considered "part of the job."
- Hospitals and health systems encourage and support employees in reporting violence or assaults.
- Minnesota's hospitals and health systems have increased the amount of training, including de-escalation techniques, for employees.
- Hospitals and health systems have developed interdisciplinary workplace violence prevention committees within their organizations with representation from front-line staff, leaders, security staff and others.
- Hospitals and health systems have procedures in place to assess aggressive patients and to respond to security and safety threats in real time.

Hospitals and health systems are actively partnering to develop and enhance workplace violence prevention practices, plans, tools and resources.

In 2013, a public-private coalition of health care stakeholders including the Minnesota Hospital Association (MHA), the Minnesota Department of Health (MDH), the Minnesota Medical Association, the Minnesota Nurses Association (MNA), Care Providers of Minnesota, LeadingAge Minnesota and a number of health care facilities throughout the state was

Hospitals and health systems are continually working to improve hospital safety for staff, patients and visitors.

Hospitals take this work very seriously and have committed both funding and leadership attention to address this issue. New efforts to prevent and reduce violence in the hospital setting include:

- Participation by 100% of MHA member hospitals and health systems in the gap analysis on workplace violence prevention.
- Encouraging all incidents of violence to be reported, including verbal harassment of staff by patients.
- Quarterly or monthly reviews of incidences of violence with safety committees that include care team members.
- Root cause analyses of incidences of violence that result in employee injuries.
- Significant new funding for security staffing and facility redesign to improve staff safety.
- Using patient risk assessment tools to proactively identify potentially violent patients and sharing these assessments with staff. Promising early results show that these tools are working to reduce incidents.

formed to provide resources to hospitals, long-term care facilities, clinics and other facilities to help identify risks for violence and put effective prevention and response strategies in place. In 2014, this stakeholder group published a [gap analysis](#) on workplace violence prevention that was disseminated to all Minnesota hospitals and health systems.

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In 2015, the Minnesota Legislature passed a [law](#), with the support of MHA, that hospitals must design and implement preparedness and incident response plans for violence that takes place on their premises and provide training for employees upon new hire and annually thereafter.

In 2016, MHA, MDH and the Minnesota Sheriffs' Association formed the Health Care and Law Enforcement Coalition to improve collaboration when patients are involved with law enforcement. The coalition is an effort of a broad-based stakeholder group, including hospital security, police departments, county sheriff offices and hospital EMS, to build relationships and improve collaboration between health care and law enforcement organizations. The coalition created a [road map](#) of best practices and compiled resources that provide leadership and direct care staff with tools to build relationships and improve collaboration between health care and law enforcement.