Table 18. Groups Who Committed Types of Violence in Past 12 Months against FEC Nurses*

Violence Type	Patient	Family or Friend of Patient	Supervisor	Physician	Peer	Other	Threat Not Experienced
Threat (n=89)	41.6%	27%	4.5%	3.4%	-	-	50.6%
Sexual Harassment (n=84)	15.5%	2.4%	1.2%	10.7%	2.4%	-	72.6%
Verbal Abuse (n=92)	54.3%	30.4%	6.5%	14.1%	4.3%	-	33.7%
Physical Violence (n=86)	19.8%	4.7%	-	-	-	-	80.2%

^{*} Respondents could select more than one option, so totals do not add up to 100 percent.

Table 19. Groups Who Committed Types of Violence in Past 12 Months against Nursing Facility Nurses*

Violence Type	Patient	Family or Friend of Patient	Supervisor	Physician	Peer	Other	Threat Not Experienced
Threat (n=138)	42.8%	22.5%	11.6%	2.2%	10.1%	2.9%	44.9%
Sexual Harassment (n=124)	17.7%	4%	1.6%	-	4.8%	-	76.6%
Verbal Abuse (n=145)	54.5%	24.8%	14.5%	6.9%	17.9%	2.1%	28.3%
Physical Violence (n=126)	38.9%	1.6%	0.8%	-	0.8%	1.6%	57.9%

^{*} Respondents could select more than one option, so totals do not add up to 100 percent.

Table 20. Groups Who Committed Types of Violence in Past 12 Months against HHA Nurses* $\,$

Violence Type	Patient	Family or Friend of Patient	Supervisor	Physician	Peer	Other	Threat Not Experienced
Threat (n=121)	7.4%	10.7%	5.8%	1.7%	3.3%	0.8%	77.7%
Sexual Harassment (n=120) Verbal	5%	6.7%	-	-	-	1.7%	89.2%
Abuse (n=129)	14%	18.6%	6.2%	3.9%	5.4%	1.6%	63.6%
Physical Violence (n=121)	5%	0.8%	-	-	-	-	94.2%

^{*} Respondents could select more than one option, so totals do not add up to 100 percent.

Table 21. Groups Who Committed Types of Violence in Past 12 Months against Nurses in Other Facilities*

Violence Type	Patient	Family or Friend of Patient	Supervisor	Physician	Peer	Other	Threat Not Experienced
Threat	29.8%	17%	3.5%	5%	5%	0.7%	59.6%
(n=141) Sexual							
Harassment	19.6%	5.8%	1.4%	5.1%	5.1%	1.4%	73.2%
(n=138) Verbal							
Abuse	44.1%	23.4%	9%	18.6%	15.2%	-	35.9%
(n=145)							
Physical	20. 20/	2.00/		0.70/	1 40/		76.90/
Violence (n=138)	20.3%	2.9%	-	0.7%	1.4%	-	76.8%
(11-130)		. •			100		

^{*} Respondents could select more than one option, so totals do not add up to 100 percent.

Table 23. Number of Days Absent from Work as a Result of Most Recent Violent Event by Facility Type (n=998)

Facility Type	None	Less than 1 day	1 days to less than 3 days	3 days to less than 7 days	7 days to less than 14 days	14 days to less than 1 month	month to less than 3 months	3 months or more
Hospital	91.4%	2.2%	2.6%	0.9%	1.1%	0.7%	0.2%	0.7%
FEC	91.8%	1.2%	3.5%	-	1.2%	-	1.2%	1.2%
Nursing Facility	89.6%	0.7%	5.9%	3%	-	-	-	0.7%
ННА	90%	2.7%	2.7%	0.9%	-	1.8%	-	1.8%
Other	84.8%	2.3%	6.1%	3%	-	0.8%	0.8%	2.3%
Overall	90.2%	2%	3.6%	1.4%	0.7%	0.7%	0.3%	1.1%

Table 24. Changes in Work Situation as a Result of Most Recent Violent Event by Facility Type (n=985)

Type of Change*	Hospital	FEC	Nursing Facility	ННА	Other
No changes	81.2%	74.4%	71.8%	61.9%	72.5%
Quit your job	6.4%	14%	9.9%	20%	13.7%
Voluntary transfer to another location	3.6%	5.8%	4.6%	5.7%	2.3%
Involuntary transfer to another location	0.4%	1.2%	0.8%	-	-
Leave of absence	0.8%	-	-	-	2.3%
Restriction/modification of work activities	3.4%	2.3%	3.8%	5.7%	4.6%
Other	6.8%	5.8%	10.7%	7.6%	9.9%

^{*} Respondents could select more than one option, so totals do not add up to 100 percent.

Table 25. Reasons Nurses Did Not Report Most Recent Violent Episode through Organizational-Based Occurrence or Incident Reporting System by Facility Type (n=546)

Reason for Not Reporting*	Hospital	FEC	Nursing Facility	ННА	Other
My organization does not have an incident reporting system	2.3%	2.2%	7.2%	10.6%	6.5%
Not sure how to report	8.1%	6.5%	7.2%	14.9%	3.9%
Time constraints	11.4%	8.7%	1.4%	2.1%	6.5%
Process too complicated	10.7%	13%	4.3%	4.3%	7.8%
Lack of follow up/response from management	19.5%	34.8%	33.3%	14.9%	16.9%
Do not expect anything to change in the long-term	39.7%	54.3%	42%	36.2%	32.5%
Fear of lack of support from colleagues	10.7%	4.3%	15.9%	12.8%	15.6%
Fear of being blamed for the episode	12.1%	8.7%	14.5%	19.1%	13%
Too many episodes/too busy to report	14.3%	26.1%	7.2%	6.4%	14.3%
It is an accepted/expected part of the job	34.2%	56.5%	36.2%	12.8%	35.1%
Feel I can manage episode(s) effectively	32.9%	39.1%	15.9%	34%	15.6%
Feel patient was not responsible for their actions or had a diminished responsibility e.g. cognitively impaired, substance abuse, mental health issues, emotional distress	31.3%	30.4%	42%	36.2%	37.7%
Other	12.4%	4.3%	11.6%	17%	10.4%

^{*} Respondents could select more than one option, so totals do not add up to 100 percent.

Table 30. Perceived Safety of Responding Facilities

Facility Type	Facility Type Unsafe		Very Safe
Hospital	6.8%	40.3%	52.9%
FEC	2.9%	28.6%	68.6%
Nursing Facility	3.5%	27.0%	69.5%
ННА	4.2%	27.1%	68.8%

Table 31. Percent of Facilities that Have Implemented a Workplace Violence Policy

Hospital 77.8%
FEC 57.9%
Nursing Facility Type 70.7%

73.4%

Table 32. Types of Violent Incidents Nurses Are Required to Report*

Total

Facility Type	Verbal violence from patient or visitor	Verbal violence from staff or health care provider	Physical violence from patient or visitor	Physical violence from staff or health care provider	Incident reporting is not required
Hospital	89.3%	91.9%	94.9%	93.2%	1.3%
FEC	81.0%	95.2%	95.2%	95.2%	4.8%
Nursing Facility	79.6%	83.8%	82.9%	82.5%	12.1%
ННА	95.4%	92.7%	95.4%	97.2%	0.0%
Total	86.3%	88.9%	90.2%	89.7%	5.5%

^{*}Respondents could select more than one option, so totals do not add up to 100 percent.

Table 33. How Workplace Violence Policies Address Reporting of Physical Assaults to Law Enforcement

Facility Type	Encouraged	Required	Not addressed in the policy
Hospital	44.3%	33.8%	21.9%
FEC	47.6%	28.6%	23.8%
Nursing Facility	41.7%	48.8%	9.5%
ННА	30.5%	59.0%	10.5%
Total	40.9%	44.1%	14.9%

Table 34. Types of Violence against Nurses Tracked by Facilities

Facility Type	Incidents of verbal violence	Incidents of physical violence	Incidents of physical violence reported to law enforcement
Hospital	64.7%	85.0%	64.3%
FEC	48.6%	77.1%	68.6%
Nursing Facility	45.2%	54.5%	43.2%
ННА	62.0%	69.0%	55.6%
Total	55.8%	69.6%	54.6%

Table 35. How Facilities Evaluate Tracked Workplace Violence Data

Evaluation Strategy	% of Facilities
Designated individual, committee, or department	41.4%
Incident reports, logs, or tracking systems	23.8%
Investigating or following up on incidents	10.4%
Developing plans or taking action in response/intervention	9.5%
Assessing or identifying trends	9.5%
Other	5.5%

Table 36. Workplace Violence Costs Tracked by Organizations

1	·			
Type of Cost*	Hospital	FEC	Nursing Facility	ННА
My organization does not track costs related to workplace violence against nurses.	37.0%	51.4%	59.3%	52.1%
Workers' compensation	54.7%	37.1%	21.8%	16.9%
Absenteeism, accident or injury-related leave	41.3%	25.7%	20.7%	18.3%
Training or prevention costs	22.8%	20.0%	14.6%	20.4%
Property damage	25.4%	11.4%	7.1%	12.0%
Replacement workers	13.8%	5.7%	8.6%	13.4%
Third party insurance	7.2%	5.7%	15.0%	9.9%

Type of Cost*	Hospital	FEC	Nursing Facility	ННА
Other	4.0%	8.6%	6.8%	10.6%

^{*} Respondents could select more than one option, so totals do not add up to 100 percent.

Table 37. Respondents' Experiences Reporting Incidents of Workplace Violence

Experience*	Hospital	FEC	Nursing Facility	ННА	Total
I have not reported any incidents of workplace violence at my current place of employment.	58.5%	94.4%	86.2%	85.2%	76.0%
I have reported an incident(s) of workplace violence at my current place of employment and management has taken action on my report.	30.4%	2.8%	9.5%	10.6%	17.2%
I have reported an incident(s) of workplace violence at my current place of employment and I have been kept informed on the progress of actions taken to address my report.	10.4%	2.8%	3.9%	3.5%	6.2%
I have reported an incident(s) of workplace violence at my current place of employment and I have not heard back regarding my report.	0.7%	0%	0.3%	0.7%	0.5%

^{*} Respondents could select more than one option, so totals do not add up to 100 percent.

Table 38. Does Organization Offer Follow-up Support to Nurses Who are Subjected to Verbal or Physical Violence

Facility Type	Yes	No	I don't know/I am unsure
Hospital	76.8%	11.6%	11.6%
FEC	33.3%	41.7%	25.0%
Nursing Facility	49.8%	21.9%	28.3%
ННА	42.3%	32.4%	25.4%
Total	57.8%	20.9%	21.4%

Table 39. Components Included in Facilities' Workplace Violence Prevention Policies

Component*	Hospital	FEC	Nursing Facility	ННА	Total
Workplace violence training	85.8%	70.0%	80.5%	73.1%	80.9%
Assessment of work areas for risk factors	74.6%	50.0%	51.1%	65.7%	62.9%
Required reporting of incidents	84.5%	85.0%	77.5%	87.0%	82.2%
Investigation of reported incidents	90.5%	70.0%	89.6%	91.7%	89.7%
Other	3.9%	5.0%	1.7%	1.9%	2.7%

^{*} Respondents could select more than one option, so totals do not add up to 100 percent.

Table 42. Percent of Facilities Offering Refresher Training to Nurses by Training Type

Type of Training*	Hospital	FEC	Nursing Facility	ННА
Workplace violence awareness training	82.2%	57.6%	81.0%	61.6%
Training on proper techniques for de-escalation	74.0%	42.9%	74.6%	48.3%
Training on specific evasion techniques	65.4%	42.9%	62.8%	45.2%
Training on proper patient containment measures	65.1%	39.3%	68.1%	40.2%
Training on identifying characteristics associated with aggressive and violent behavior	75.0%	46.9%	78.8%	56.7%

^{*} Respondents could select more than one option, so totals do not add up to 100 percent.

Table 44. Most Successful Workplace Violence Prevention Strategies Used by Facilities

Prevention Strategy*	# of Facilities	% of Facilities
Staff training/education/awareness	266	37.9%
Present or rounding security personnel	60	8.6%
Restricted access	45	6.4%
Law enforcement involvement or availability	36	5.1%
Program or policy in place	35	5.0%
Assessing, limiting, or avoiding risky situations/patients	31	4.4%
Alarms and monitors (including panic buttons)	29	4.1%
Incident reporting/staff communication	29	4.1%
Chaperones (visiting in pairs)	28	4.0%
De-escalation techniques	18	2.6%
Use of emergency codes	16	2.3%
Cameras	15	2.1%
Other	93	13.3%

st Respondents could select more than one option, so totals do not add up to 100 percent.

Table 45. Does Organization Periodically Evaluate Effectiveness or Impact of Workplace Violence Program or Policy

Facility Type	Yes	No	I don't know/I am unsure
Hospital	70.5%	13.2%	16.2%
FEC	52.4%	14.3%	33.3%
Nursing Facility	54.7%	22.9%	22.4%
ННА	78.0%	11.0%	11.0%
Total	64.9%	16.7%	18.4%

Table 46. Elements of Workplace Violence Programs that Facilities Evaluate

Type of Cost*	Hospital	FEC	Nursing Facility	ННА
Number of violent incidents recorded	89.9%	90.9%	79.8%	90.4%

Type of Cost*	Hospital	FEC	Nursing Facility	ННА
Location or unit in which incident occurred	87.4%	27.3%	80.6%	75.9%
Injury severity result from incident	76.1%	45.5%	76.0%	73.5%
Time at which incident occurred	81.8%	36.4%	73.6%	69.9%
Nursing procedure being conducted at time of incident	47.8%	27.3%	72.9%	68.7%
Staffing level at time of incident	56.0%	45.5%	62.8%	36.1%
Perpetrator characteristics	37.1%	27.3%	53.5%	42.2%
Costs associated with incidents	57.9%	9.1%	37.2%	24.1%
Other	6.9%	9.1%	7.0%	4.8%

^{*} Respondents could select more than one option, so totals do not add up to 100 percent.

Table 47. Has Organization Changed Workplace Violence Program or Policy Based on Periodic Evaluation

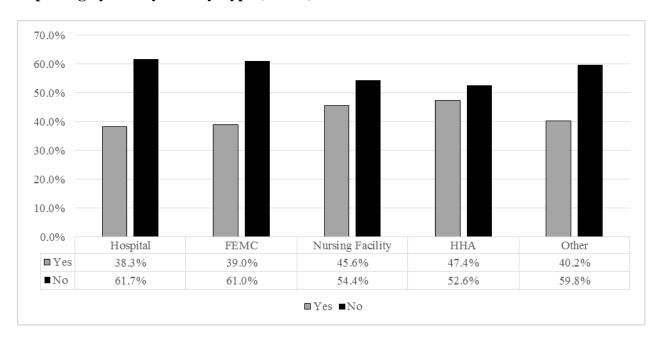
Facility Type	Yes	No	I don't know/I am unsure
Hospital	42.3%	38.7%	19.0%
FEC	5.0%	55.0%	40.0%
Nursing Facility	19.8%	63.4%	16.8%
ННА	14.7%	65.7%	19.6%
Total	26.7%	53.8%	19.5%

Table 48. Does Organization's Staffing Committee Consider Workplace Violence in Nurse Staffing Plans

Facility Type	Yes	No	I don't know/I am unsure	does not have a nurse staffing committee
Hospital	38.5%	40.2%	15.9%	5.4%
FEC	22.2%	2.8%	2.8%	72.2%
Nursing Facility	18.3%	10.3%	10.9%	60.6%
ННА	15.9%	5.5%	8.3%	70.3%
Total	25.6%	20.3%	11.9%	42.2%

Appendix B: Figures

Figure 1. Nurses Who Reported Most Recent Violent Incident through the Organization's Reporting System by Facility Type (N=935)



Appendix C: Project Design and Methods

Survey Development

The TCNWS advisory committee established a task force of subject matter experts to assist in the development and implementation of this study. The task force was comprised of representatives from the Texas Association for Home Care and Hospice, Texas Board of Nursing, Texas Emergency Nurses Association, Texas Health Care Association, Texas Hospital Association, Texas Nurses Association, as well as nurses from across the state who have backgrounds in the area of study.

The task force reviewed surveys obtained from the literature on workplace violence against nurses and developed questions for this project based on questions from a variety of sources. Both the individual nurse survey and facility survey adapted questions from the Minnesota Nurses' Survey⁷, the International Labour Office, International Council of Nurses, World Health Organization, and Public Services International Workplace Violence in the Health Sector Research Instruments⁸, The VENT Study: Violent in Emergency Nursing and Triage instrument⁹, and the Bureau of Labor Statistics' Survey of Workplace Violence Prevention¹⁰, Both the Individual Nurse Survey and Facility Survey were tested by nurses and nurse employers prior to implementation. Feedback from testers was incorporated into the final versions of the survey instruments.

The Individual Nurse Survey and Facility Survey instruments can be found in Appendices E and F, respectively.

Survey Population

Individual Nurse Survey

All RNs and VNs working in nursing full-time or part-time in a Texas inpatient or outpatient hospital, nursing facility, home health agency, or freestanding emergency medical facility were eligible to participate in the study. These nurses and their contact information were obtained through the Texas Board of Nursing's Licensure Renewal database downloaded in September 2015. Due to resource limitations, a sample that was proportional by a nurse's license type and employment setting was taken in lieu of a stratified sample.

A total of 215,680 nurses fit the eligibility criteria. 384 respondents were need for a representative sample. Assuming a 10 percent response rate, 3,850 nurses needed to be sampled. Due to resource limitations, we expanded the sample size by 1.75 to 7,759 nurses in lieu of

_

⁷ Center for Violence Prevention and Control, D. o. (n.d.). Minnesota Nurses' Survey. Minneapolis, Minnesota.

⁸ International Labour Office, International Council of Nurses, World Health Organization, and Public Services International. (2003). Workplace Violence in the Health Sector Country Case Studies Research Instruments. Geneva, Switzerland.

⁹ Pich, J. (2015). The Vent Study (Violence in Emergency Nursing and Triage in Austrialia). Australia: HNE Handover: For Nurses and Midwives.

¹⁰ U.S. Department of Labor, Bureau of Labor Statistics. (2005). Survey of Workplace Violence Prevention.

additional mail-outs to improve the response rate. After returned surveys were removed from the sample, the final sample size was 7,500 nurses. Table 1 in Appendix A shows the breakdown of nurses in the sample by license and facility type as well the number of returned surveys that led to the final sample of nurses who were contacted.

As of September 15, 2016, 1,114 nurses responded to the survey for a final response rate of 14.9 percent. Respondents were representative by facility type (χ_2 (3, N = 7,500) = 1.6, p = 0.649), but not by license type (χ_2 (1, N = 7,500) = 6.5, p = 0.011).

Facility Survey

The facility survey was administered in two parts. For hospitals and nurse facilities, facility survey was an addendum to the 2016 Nurse Staffing Studies. The Hospital and Long Term Care Nurse Staffing Studies are already established surveys that are sent to all Chief Nursing Officers/Directors of Nursing in these facilities. In an effort to minimize survey burden and limit confusion related to the various surveys being conducted by the TCNWS, the Workplace Violence Against Nurses Facility Survey was included at the end of the staffing studies for hospitals and long term care facilities. Home health agencies and freestanding emergency medical facilities received a stand-alone Workplace Violence Against Nurses facility survey. All hospitals, FECs, and nursing homes were surveyed. Only home health agencies with more than 250 nursing visits as of the most recent reporting date were surveyed. A total of 2,762 facilities were surveyed. Table 3 of the report shows the response rates by facility type.

Survey Distribution

Individual Nurse Survey

The individual nurse survey was conducted throughout the month of August 2016. A paper survey was mailed out the last week of July with a due date of August 31st. Two weeks ahead of the survey launch, nurses were sent a postcard informing them that they would receive a survey in the mail related to workplace violence. The week of July 25th, sampled nurses were mailed a 9x12 envelope that included a paper survey as well as a postage-paid, self-addressed return envelope. Nurses were contacted a third time the week of August 15th via a follow-up postcard thanking them for completing the survey and instructing them to contact us if they had not yet received the survey. All responses received by September 15, 2016 were included in the final dataset of responses.

Facility Survey

The facility survey was conducted between April and June 2016. Survey materials were first distributed by mail during the last week of March 2016. The materials were addressed to the Chief Nursing Officer of each hospital, Director of Nursing of each nursing facility, and the administrators of the home health agencies and freestanding emergency medical facilities. A link to the facility surveys was sent out by email on March 28, 2016, with an initial survey deadline of May 6, 2016. As a result of technical difficulties at the beginning of the data collection period, the survey deadline was extended through the end of June 2016.

In addition to the paper mailing and the emails that went to facilities, TCNWS staff contacted facilities by phone and sent the survey via fax to further encourage participation. The facility survey was hosted by Qualtrics, an online survey software. Respondents were strongly encouraged to complete the survey online; however, faxed, emailed, and mailed submissions were also accepted.

Project Marketing

Task force members were instrumental in raising awareness about the Workplace Violence Against Nurses Study. Several of the represented organizations included notices about the surveys in their newsletters, social media pages, and sent emails to their membership about this project.

Data Analysis

All data were analyzed using SPSS (version 22). Variables from both the individual and facility surveys were reported by employment setting. Frequency counts were conducted for each variable collected in the surveys.

Appendix D: Workplace Violence Against Nurses Study Taskforce Membership

Co-Chairs:

Elizabeth Sjoberg – Associate General Counsel, Texas Hospital Association and representing the Texas Center for Nursing Workforce Studies Advisory Committee

Cindy Zolnierek – Executive Director, Texas Nurses Association and representing the Texas Center for Nursing Workforce Studies Advisory Committee

Members:

Gloria Bean-Williams – Director of Clinical and Quality Services, Texas Health Care Association

Kristen Benton, MSN, RN – Director of Nursing, Texas Board of Nursing

Tammy Cupit, PhD, RN-BC – Director of Nursing Research, University of Texas Medical Branch

Sally Gillam, DNP, MAHS, RN, NEA-BC – Chief Nursing Officer, St. David's South Austin Medical Center

Rachel Hammon, RN, BSN – Executive Director, Texas Association for Home Care and Hospice

Mary Leblond, MSN, RN, CEN, CA-SANE, CP-SANE – President, Texas Emergency Nurses Association

Ellen Martin, MSN, RN – Texas Nurses Association

Christine Walker, MSN, MBA, NEA-BC – Doctoral Student, Texas Tech University

Appendix E: Individual Nurse Survey Instrument

Please indicate the level of nursing you are currently practicing: O LVN O RN O APRN
2. What is your gender? Female Male
3. How many years of nursing experience do you have?
4. In which county do you primarily practice nursing?
5. On average, how many hours per week did you spend providing primary care in the last month?
 6. In which type of facility did you work the most time in the past 12 months? Check one. Hospital – inpatient Hospital – outpatient Nursing home/long term care facility Home health agency Freestanding emergency medical facility I split my time equally between two or more types of facilities Other (please specify):
7. In which type of department/unit/area did you work the most time in the past 12 months? Check one. O Medical/Surgical Operating/Recovery Room Intensive Care Psychiatric/Behavioral Obstetric/Gynecologic Emergency Home Care Family Practice Occupational health Education/Research I split my time equally between two or more departments/units/areas
Other (please specify):

8. Wł	nat was your primary profession	al activity in	the 12 months	s prior to today'	s date? Check one.
0	Provided patient care				
0	Administration				
0	Supervised patient care				
0	Research				
0	Insurance/Utilization review				
0	Case management				
0	Teaching				
0	Telephone triage/health inform	nation			
0	I split my time equally between	n two or moi	re activities		
	Other (please specify):			_	
	ase indicate the types of workplanths. Select all that apply. I have not taken any workplace Workplace violence awarenes Training on techniques for detraining on specific evasion to Training on patient containme Training on assessing potentia Other (<i>Please specify in the betally to the property of t</i>	ce violence pass training escalation echniques ent measures al risk for vio	revention train		_
_	estions 10 and 11 are about work on this.	xplace violer	nce you have e	xperienced over	r the past 12
10.	In the past 12 months, how freq	uently did y	ou experience	these types of v	vorkplace violence?
		Never	Rarely	Occasionally	Frequently
		0 times	1-3 times	4-8 times	9 or more times

	1 10 101	rtarory	o cousionany	riequentij
	0 times	1-3 times	4-8 times	9 or more times
Threat	О	O	O	0
Sexual Harassment	О	O	O	0
Verbal Abuse	О	O	O	0
Physical Violence	0	O	O	O

11. In the past 12 months, please indicate the types of workplace violence committed against you by each of the following groups. Select all that apply.

	Patient	Family or Friend of Patient	Supervisor	Physician	Peer	Other	Not experienced
Threat							
Sexual							
Harassment							
Verbal Abuse							
Physical Violence							

Questions 12-13 are about workplace violence you have experienced over the course of your career.

12. Over the course of your career, how frequently did you experience these types of workplace violence?

	Never	Rarely	Occasionally	Frequently
	0 times	1-3 times	4-8 times	9 or more times
	0 times	per year	per year	per year
Threat	О	O	O	O
Sexual Harassment	О	O	О	O
Verbal Abuse	О	O	О	0
Physical Violence	O	O	О	О

13. Over the course of your career, please indicate the types of workplace violence committed against you by each of the following groups. Select all that apply.

	Patient	Family or Friend of Patient	Supervisor	Physician	Peer	Other	Not experienced
Threat							
Sexual Harassment							
Verbal Abuse							
Physical Violence							

Questions 14-18 are about the most recent violent event perpetrated against you in the workplace regardless of how long ago it occurred.

- 14. Please identify the category that most closely reflects the most recent violent action perpetrated against you in the workplace regardless of how long ago it occurred. Check one.
 - o Threat
 - o Sexual Harassment
 - Verbal Abuse
 - o Physical Violence
 - Not applicable I have not experienced violence in the workplace. (Skip to Question 19)
- 15. Please indicate the number of days you were absent from work as a result of this event. Check one.
 - o None
 - o Less than 1 day
 - o 1 day to less than 3 days
 - o 3 days to less than 7 days
 - o 7 days to less than 14 days
 - o 14 days to less than 1 month
 - o 1 month to less than 3 months
 - o 3 months or more

16. Indicate any changes in your work situation that occurred as a result of this event? Select all						
that apply.						
□ No changes□ Quit your job						
 □ Involuntary transfer to another location □ Leave of absence 						
 □ Leave of absence □ Restriction/modification of work activities 						
☐ Other (please specify in the box below)						
Under (piease specify in the box below)						
	_					
17. Did you report the incident through your organizational-based occurrence or incident						
reporting system?						
• Yes (Skip to Question 19)						
\circ No						
18. If you responded no to question 17, please indicate why you decided not to report this						
episode. Select all that apply.						
☐ My organization does not have an incident reporting system						
□ Not sure how to report						
☐ Time constraints						
□ Process too complicated						
☐ Lack of follow up/response from management						
☐ Do not expect anything to change in the long-term						
☐ Fear of lack of support from colleagues						
☐ Fear of being blamed for the episode						
☐ Too many episodes/too busy to report						
☐ It is an accepted/expected part of the job						
☐ Feel I can manage episode(s) effectively						
☐ Feel patient was not responsible for their actions or had a diminished responsibility e.g.						
cognitively impaired, substance abuse, mental health issues, emotional distress						
☐ Other (please specify in the box below):						
	_					

_	estions 19 - 20 are about your experience with workplace violence at your current ce of employment.
0 0 0	How would you rate your organization's level of safety as it relates to workplace violence? Not at all safe Slightly safe Somewhat safe Very safe Extremely safe
0 0	Slightly effective
	ditional Comments
Ple	ase use this space to make any comments related to workplace violence against nurses.

Appendix F: Employer Survey Instrument

For the purpose of this survey, workplace violence is defined as the intentional use of physical force or emotional abuse, against an employee, that results in physical or emotional injury and consequences. This includes physical assault, threat, sexual harassment, and verbal abuse.

1.	Ple	ease identify the type	of facility you represent.
		 Home health ag 	gency
		o Freestanding E	mergency Medical Center
		 Hospital 	
		o Long Term Car	e
2.	Ple	ease provide vour con	tact information for response tracking purposes only.
		Facility Name:	
		State License #:	
		Physical Address:	
		City:	
		State:	
		What is your aument	4:41.09
		What is your current	
		 Chief Nursing 	Officer/Director of Nursing
		 Facility Admin 	nistrator
		o Other (Please	specify):

- 3. Has your organization implemented a program or policy that includes prevention of workplace violence against nurses?
 - o Yes [continue to question 4]
 - o No [skip to question 11]
- 4. Please indicate the types of incidents this workplace violence prevention program or policy requires nurses to report. Select all that apply.
 - □ Verbal violence from patient or visitor
 - □ Verbal violence from staff or health care provider
 - ☐ Physical violence from patient or visitor
 - □ Physical violence from staff or health care provider
 - □ Incident reporting is not required

5.	Please indicate how this program or policy addresses reporting of physical assaults to law enforcement.
	 Reporting of physical assaults to law enforcement is encouraged. Reporting of physical assaults to law enforcement is required. Reporting of physical assaults to law enforcement is not addressed in the policy.
6.	Does your organization periodically evaluate the effectiveness or impact of this workplace violence program or policy?
	o Yes [continue to question 7]
	No [skip to question 8]I don't know/I am unsure [skip to question 8]
-	
/.	If you answered "Yes" to question 6, please indicate the elements of the workplace violence program or policy that are evaluated. Select all that apply.
	 □ Number of violent incidents recorded □ Costs associated with incidents (e.g. worker's compensation)
	☐ Costs associated with incidents (e.g. worker's compensation) ☐ Injury severity result from incident
	□ Location or unit in which incident occurred
	☐ Time at which incident occurred
	□ Perpetrator characteristics
	□ Nursing procedure being conducted at time of incident
	☐ Staffing level at time of incident
	☐ Other (Please specify):
8. I	Has your organization changed its program or policy based on these evaluations?
	o Yes
	o No
	o I don't know/I am unsure
9.	What is included in your organization's workplace violence prevention program or policy? Select all that apply.
	□ Workplace violence training
	☐ Assessment of work areas for risk factors
	Required reporting of incidents
	☐ Investigation of reported incidents
	☐ Other (Please specify):

10. Please indicate whether your organization's workplace violence prevention program or policy addresses training of the following staff types. Select all that apply.

	Clinical nursing staff	Non-clinical nursing staff
Required in all departments/ units	0	0
Required in specialty areas (e.g. ED, psych) only	0	0
Voluntary training only	0	0
Training unavailable	0	0

Training unavariable		U
11. Please indicate the types of workplace in your organization.	e violence prevention t	raining provided to nurses
☐ Workplace violence training is not pr	ovided.	
□ Workplace violence awareness traini	ng	
☐ Training on proper techniques for de-	escalation	
☐ Training on specific evasion technique	ies	
☐ Training on proper patient containme	nt measures	
☐ Training on identifying characteristic behavior	ics associated with aggr	ressive and violent
☐ Other (Please specify		
	٦	

12. Please indicate the refresher training offered to nurses in your organization.

	Refresher training is a repeat of original training content	Refresher training is a subset of original training	Refresher training is not offered
Workplace violence awareness training	0	0	0
Training on proper techniques for de- escalation	0	0	0
Training on specific evasion techniques	0	0	0
Training on proper patient containment measures	0	0	0
Training on identifying characteristics associated with aggressive and violent behavior	0	0	0

13. If your organization has a staffing committee, does it consider incidents of workplace violence in developing and evaluating nurse staffing plans?

	Yes No					
0	I don't know/I am unsure					
0	Not applicable - My organization does not have a nurse staffing committee					
14. Is follow-up support, such as counseling, made available to nurses in your organization who are subjected to verbal or physical violence?						
	o Yes					
	o No					
	o I don't know/I am unsure					
15. Please indicate whether your organization tracks any of the following types of violence against nurses. Select all that apply.						
	Incidents of verbal violence					
	Incidents of physical violence					
	Incidents of physical violence reported to law enforcement					
	My organization does not track incidents of verbal or physical violence					
	ease describe how your organization evaluates tracked data related to incidents of ollence against nurses as indicated in question 15.					
17. What strategies has your organization implemented to prevent or reduce workplace violence against nurses? Select all that apply.						
	Alarms and monitors (including panic buttons)					
	Staff training					
	Restricted access					
	Emergency response team					
	Present or rounding security personnel					
	Availability of escorts					
	Chaperones (visiting in pairs)					
	Personal protective equipment					
	Availability of restraints and policies for use					
	Reducing crowding					
	Exit strategies					
	Metal detectors					
	Other (please specify)					
19 Dla	assa describe the strategies implemented in your organization that have been most					
18. Please describe the strategies implemented in your organization that have been most successful in preventing workplace violence against nurses .						
	Tur in provening workplace violence against naises.					
10 Pi	and indicate the terms of costs related to recollect and the second of costs related to					
19. Please indicate the types of costs related to workplace violence against nurses your organization tracks. Select all that apply.						
OIE	zamzanon nacks. scien an mai appiy.					

□ My organurses.	nization does no	ot track cost	s related	to workpla	ace violence ag	gainst		
□ Workers'	□ Workers' compensation							
□ Third par	□ Third party insurance							
□ Absentee	□ Absenteeism, accident or injury-related leave							
□ Replacen	□ Replacement workers							
□ Property	•							
_	or prevention costs							
□ Other (ple	ease specify)							
	estions are about yours survey will only							
	you rate your organ	nization's level	of safety	as it relate to	o workplace vi	olence?		
	t all safe							
_	tly Safe							
	ewhat safe							
o Very								
o Extre	emely safe							
	about your most not place of employ	-	ce reporti	ng incidents	of workplace	violence		
	e not reported an oyment.	y incidents o	f workpla	ace violenc	e at my current	t place of		
o I hav								
emplo	re reported an incomment and I have ss my report.							
	e reported an inc oyment and I have					place of		
22. Please use th	ne space below to	make any con	nments re	lated to wor	kplace violenc	e against		
nurses.	•	•			-			

Appendix G: Limitations

Some individual nurse surveys contained errors or inconsistent responses. For example, multiple responses could be marked on questions asking for only one selection. One type of inconsistent response involved selecting a frequency of "never (0 times)" for a violence type in question 10 or question 12, but selecting one or more groups who committed the violence type in the following question instead of "not experienced." The opposite also occurred when respondents selected a frequency of violence greater than "never (0 times)," but indicated in the following question that violence was "not experienced." Some respondents selected "not applicable" for question 14, but answered one or more of questions 15 to 18, which were only applicable if a type of violence had been selected in question 14. Finally, some respondents selected reasons for not reporting the most recent violent incident in question 18 despite indicating in question 17 that the incident had been reported. The counts and percentages in this document include these and other types of inconsistent responses as they were entered in the surveys.