

# Violence in Washington Workplaces, 2000-2005

Michael Foley and Eddy Rauser

Safety & Health Assessment and Research for Prevention (SHARP) Program

Washington State Department of Labor and Industries

## Executive Summary

---

This study reports the levels and trends of workplace injuries related to assaults and violence over the period from 2000 through 2005. Three sources of data on injuries resulting from violence and assault were used: the Federal government's Census of Fatal Occupational Injuries (CFOI) and the Survey of Occupational Injuries and Illnesses, both produced by the Bureau of Labor Statistics (BLS). These are supplemented by data on workers' compensation claims related to assaults and violence collected by Washington State Department of Labor and Industries. The objectives of this document are to describe occupational and industrial groups at elevated risk of workplace violence and assault, to compare the State of Washington to the nation as a whole, to describe recent trends in these risks and to suggest where preventive efforts might best be targeted.

For the period as a whole, homicide was the fifth leading cause of workplace deaths in Washington State, at 7% of all fatal workplace injuries, an average of six such cases per year. There was a marked decline in the number of homicides from that reported in the 2002 SHARP violence report. The circumstances of these incidents were consistent with well-known risk factors for workplace homicides: most were committed by a person unknown to the victim or by a customer or client. Most of the victims worked in retail trade, security services or transit.

This is in striking contrast to the circumstances in which non-fatal workplace assaults occur. The majority of non-fatal injuries occur in a setting where the victim and attacker are in a custodial or client-caregiver relationship, such as in health care or social services.

For non-fatal injuries related to assaults and violence, the BLS Survey estimates there was an annual average of 776 lost workday assault-related injuries in Washington State for the period 2000 through 2005. In addition, assault-related injury rates were substantially higher for public sector workers than for those in the private sector and rates for public-sector workers appear to be rising after an initial decline in this period.

Workers' compensation data for both the State Fund and self-insured employers show that from 2000 to 2005 there was an annual average of at least 2,094 claims related to assaults and violence at workplaces, or about 12 claims per 10,000 full time workers. Within the State Fund alone there was a decrease of approximately 12% in the number of all accepted violence-related claims from the average for the period 1995 through 2000.

For State Fund and self-insured employers combined there was an annual average of 698 claims resulting in at least four lost workdays. This is an increase of 9% over this period as compared to the period 1995-2000.

Claims data also shows Health Care and Social Assistance to be the highest risk major industry, followed by Public Administration and Educational Services. The riskiest occupations were in health-care, social-services, security services and education.

Over the long term, claims rates for assault have generally declined. For the State Fund, in 1992 the rate was 20.2 violence-related claims per 10,000 full-time equivalent workers (FTEs). This was followed by a plateau at around 15.1 from 1996 through 2000, followed by a resumed downward trend to 11.2 claims per 10,000 FTE by 2005. This decline is slightly more rapid than that for State Fund claims overall. Therefore the share of violence-related claims in the total fell from 1.5% in 2000 to 1.3% of all State Fund claims in 2005.

In Health Care and Social Assistance violence-related State Fund claims rates have dropped 35% since 2000. However, Psychiatric and Substance Abuse Hospitals have seen an increase of over 81% in their assault-related claims rates during the period 2000-2005. This industry already had the highest violence-related claims rate at the start of this period. The claims rate for this industry, at 986 claims per 10,000 FTEs in 2005, was 88 times higher than the rate for all industries.

Apart from psychiatric facilities, the top five highest risk industries all showed substantial decreases in their claims rates over the period. Moreover, this trend was found throughout the industries comprising the top twenty. Among those showing a substantial decrease in claims rate were: Nursing Care Facilities, Vocational Rehabilitation Services, Administration of Human Resource

Programs and Home Health Care Services.

Nurses' aides and orderlies, police officers, health aides, psychiatric aides, social workers and private security guards were the occupations with the greatest number of assaults, according to the workers compensation claims data. Health- and social service-related occupations accounted for approximately half of all assault-related claims over the entire period.

While progress has been made in most of the highest hazard industries within the Healthcare and Social Assistance sector, the number of violent incidents in workplaces is still unacceptably high, and the trend in psychiatric facilities is particularly disturbing.

Certain occupations and industries are at higher risk because they involve the exchange of money, face-to-face transactions with the public, working alone or working at night. Other industries are at higher risk for violence because they combine these risks with working with impaired or constrained populations. In each case, there are predictable and controllable risk factors which increase the likelihood of assault.

Prevention strategies such as hazard assessment, maintaining adequate staffing levels, environmental (building layout) controls, and de-escalation training, are important ways to control these risk factors in each of these work settings.