Healthcare Employees' Perceptions and Experiences of Workplace Violence
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Problem: Violence in the workplace is a global problem; however, workplace violence is especially problematic in the healthcare sector.

Evidence: Available data indicate an increase in violence in the healthcare workplace and nurses as frontline practitioners, often witness and/or are targets of workplace violence.

Strategy: Workplace violence was thought to be a system-wide problem at a Level I Trauma Center; therefore, the Trauma nursing staff and Public Safety Department partnered with a Nurse Researcher to mentor them for this study. The purpose of which was to determine employees’ perceptions and experiences of workplace violence and determine if safety-related interventions were indicated and effective.

Practice Change: Initial survey data were collected from December 2007 through January 2008 at an urban public medical facility, located in a high-crime area of Las Vegas, NV. Based on these initial data, several safety interventions were developed and implemented during the subsequent 20 months. Employees were surveyed in the same manner from December 2009 through January 2010 to evaluate the effects of the interventions.

Evaluation: A survey design was used; the survey items questioned perceptions of general workplace safety, personal and witnessed violence, security responses, available training, and administrative responses. Ranked/ordinal data were described using descriptive/frequency statistics and were analyzed between measurement points with the Wilcoxon-Mann-Whitney test. Appropriate sample size was determined by power analysis, indicating .80 - .90 power for an effect size of 0.5.

Results: Overall, violence in the workplace was perceived to have increased slightly between measurement points; however improvements, although not statistically significant were noted for most survey items following the interventions. Significant improvement (p 0.004) was noted in the survey item related to adequate administrative support.

Recommendations:
Safety interventions, based on the literature and institution-specific needs with ongoing analyses of effectiveness, is recommended.

Lessons Learned: While specific problems may be best identified by frontline practitioners, utilizing a researcher mentor is critical from the design through reporting stages of many evaluation/research projects.
Bibliography:


