



PREVENTING AND MANAGING WORKPLACE VIOLENCE AGAINST NURSES

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Abstract:

Workplace violence against nurses is a pervasive issue with significant implications for both individual nurses and healthcare organizations. This abstract explores strategies for preventing and managing workplace violence against nurses. It examines the various forms of violence experienced by nurses, including physical, verbal, and psychological abuse, and identifies key factors contributing to the prevalence of violence in healthcare settings. Additionally, the abstract discusses proactive measures that healthcare organizations can implement to address workplace violence, such as establishing clear policies and protocols, providing comprehensive training programs, and fostering a supportive work environment. Furthermore, it emphasizes the importance of robust reporting mechanisms and effective incident management procedures in responding to and mitigating the impacts of workplace violence. By prioritizing prevention and management efforts, healthcare organizations can create safer work environments for nurses and ensure the delivery of high-quality care to patients.

Keywords: Workplace violence, Nurses, Healthcare settings, Prevention strategies, Intervention measures, Occupational safety

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Introduction:

In the healthcare sector, nurses play a pivotal role in providing essential care and support to patients. However, alongside their dedication to their profession, nurses often face significant challenges, including the threat of workplace violence. Workplace violence against nurses has become a pressing issue globally, with serious implications for both the well-being of healthcare professionals and the quality of patient care.

Workplace violence against nurses is a critical issue that not only affects the well-being of healthcare professionals but also undermines the quality of patient care and organizational effectiveness. Nurses play a fundamental role in healthcare delivery, often working in high-stress environments where they encounter a range of emotions and situations. Unfortunately, they also face a heightened risk of experiencing violence in the workplace, whether it be physical, verbal, or emotional.

Health workers are at high risk of violence all over the world. Between 8% and 38% of health workers suffer physical violence at some point in their careers. Many more are threatened or exposed to verbal aggression [1]. Most violence is perpetrated by patients and visitors. Also, in disaster and conflict situations, health workers may become the targets of collective or political violence. Categories of health workers most at risk include nurses and other staff directly involved in patient care, emergency room staff and paramedics [2].

By understanding the scope and severity of workplace violence against nurses, healthcare stakeholders can work collaboratively to implement proactive measures and create safe environments conducive to optimal patient care delivery and nurse well-being. This paper will explore current challenges, existing interventions, and recommendations for future action to mitigate the risks and consequences of workplace violence in nursing settings.

Forms of Workplace Violence Against Nurses:

There is a lack of evidence about the long-term psychic consequences of violence towards HCWs in EDs; in fact, many authors revealed that among HCWs both forms of violence, physical and nonphysical, were significantly correlated, in the short-term period, with symptoms of burnout (emotional exhaustion, depersonalization and inefficacy) and with experience distressing emotions [3].

Workplace violence against nurses encompasses a range of harmful behaviors that can occur in healthcare settings. These forms of violence can be physical, verbal, or psychological in nature, and

they pose significant risks to the well-being and safety of nurses. Some common forms of workplace violence against nurses include [4]:

1. **Physical Violence:** This involves any intentional use of physical force against a nurse that results in injury or harm. Physical violence can include acts such as hitting, punching, kicking, scratching, or pushing. It often occurs during interactions with patients, their family members, or even other healthcare staff.
2. **Verbal Abuse:** Verbal abuse involves the use of words or language that is intended to intimidate, belittle, humiliate, or threaten a nurse. This can include shouting, yelling, swearing, name-calling, or making derogatory remarks. Verbal abuse can have a profound impact on a nurse's emotional well-being and may contribute to feelings of stress, anxiety, and burnout.
3. **Psychological Harassment:** Psychological harassment refers to behaviors that are intended to undermine, intimidate, or manipulate a nurse psychologically. This can include actions such as spreading rumors, gossiping, withholding information, or engaging in bullying or mobbing behaviors. Psychological harassment can have long-term effects on a nurse's mental health and can create a hostile work environment.
4. **Sexual Harassment:** Sexual harassment involves unwelcome sexual advances, requests for sexual favors, or other verbal, non-verbal, or physical conduct of a sexual nature that creates a hostile or intimidating work environment. Nurses may experience sexual harassment from patients, coworkers, or supervisors, and it can have serious implications for their emotional well-being and job satisfaction.
5. **Threats and Intimidation:** Threats and intimidation involve explicit or implicit expressions of harm or coercion directed toward a nurse. This can include threats of physical violence, threats of termination or retaliation, or other forms of intimidation designed to exert control or power over the nurse. Threats and intimidation can create a climate of fear and insecurity, making it difficult for nurses to perform their duties effectively.

The researchers thought that workplace violence against nurses takes many forms and can have serious consequences for the individuals involved as well as the overall functioning of healthcare organizations. Addressing and preventing workplace violence requires a comprehensive approach that includes proactive measures to promote a culture of respect, support, and safety for all healthcare workers.

Types of Workplace Violence

The traditional press most often covers workplace violence incidents that yield devastating results, such as gun violence or homicide in healthcare settings. However, it is important to understand that workplace violence can take many forms, ranging from commonplace occurrences of verbal abuse to more serious acts of physical violence. Most incidents of workplace violence are verbal in nature; however, other types of incidents can include assault, battery, stalking, and sexual harassment [5].

Perpetrators of workplace violence can vary, and violence can occur from patients toward healthcare staff or between coworkers. The most common type of violence in healthcare settings is violence from patients, families, or visitors toward healthcare staff. According to a 2019 survey on healthcare crime, about 78% of aggravated assaults and 88% of all assaults that occurred in hospitals were from patients and families toward healthcare workers. Horizontal violence that occurs between coworkers may include personal bullying, job-related bullying, and intimidation. Factors that lead to bullying among staff may include lack of experience or role conflicts, work overload, and insufficient support from management [6].

In addition to varying by type and perpetrator, workplace violence can vary across care settings. For example, emergency departments and psychiatric units are more likely to experience workplace violence than other care settings. While some units or departments may experience a higher incidence of violence than others, workplace violence can impact all healthcare settings and is not limited to one particular area of care.

NIOSH classifies workplace violence into four basic types. Types II and III are the most common in the health care industry. (Types I and IV are not addressed in this position statement.)

- Type I: Involves “criminal intent.” In this type of workplace violence, “individuals with criminal intent have no relationship to the business or its employees.”
- Type II: Involves a customer, client, or patient. In this type, an “individual has a relationship with the business and becomes violent while receiving services.”
- Type III: Violence involves a “worker-on-worker” relationship and includes “employees who attack or threaten another employee.”
- Type IV: Violence involves personal relationships. It includes “individuals who have interpersonal relationships with the intended target but no relationship to the business” [7].

Factors Contributing to Workplace Violence:

Workplace violence against healthcare workers (HCWs) is a major challenge to HCWs’ workplace safety and health worldwide, involving significant consequences to the victims, patients, and healthcare organizations. Workplace violence is a multifaceted issue influenced by various factors that interact to create environments where aggression and conflict may arise. One significant contributing factor is the prevalence of high-stress environments, such as those found in healthcare, law enforcement, and customer service roles. In these settings, the pressure to meet demands and navigate challenging situations can escalate tensions and increase the risk of violent incidents. Additionally, understaffing and excessive workloads exacerbate stress levels, leaving employees feeling overwhelmed and less equipped to manage confrontations effectively. When resources are limited, the likelihood of frustration and conflict among staff and with clients or customers is heightened, potentially leading to violent encounters.

Violence in healthcare settings can lead to adverse events for patients including falls and medical and medication errors and negatively affects patient outcomes. The resulting decrease in quality of care and negative experiences of care may deter people from accessing care. [8] Workplace violence can also increase direct and indirect financial costs and qualitative and human cost. These include but are not limited to decreased productivity, absenteeism, loss of expertise, impact on staff morale, loss of organizational /institutional reputation and decreased safety and welfare of staff and patients [9].

These factors included a lack of structured reporting mechanisms, inaction on behalf of management despite reporting, ill-defined workplace violence prevention policies, and a lack of engagement by certain stakeholders [10].

Inadequate training and support further compound the risk of workplace violence. Employees may lack the necessary skills and knowledge to effectively de-escalate situations or handle aggressive behavior, increasing the likelihood of confrontations escalating into violence. Moreover, the absence of sufficient support from management or colleagues during challenging situations can leave employees feeling isolated and vulnerable, exacerbating feelings of stress and anxiety. Insufficient training and support perpetuate a cycle of unpreparedness, making it difficult to address and prevent workplace violence effectively.

Social and cultural factors also play a significant role in shaping attitudes and behaviors related to violence in the workplace. Cultural norms and

societal attitudes towards aggression, authority, and conflict resolution influence how individuals interact in professional settings. In some cultures, aggression may be more tolerated or even encouraged, contributing to a higher prevalence of workplace violence. Moreover, economic disparities and social inequalities can exacerbate feelings of frustration, resentment, and hopelessness, increasing the likelihood of aggressive behavior among employees experiencing financial hardship or personal stressors [9].

We believe that access to weapons within the workplace can escalate conflicts and pose significant safety risks. Whether employees have easy access to firearms or improvised weapons, the presence of weapons can increase the severity of violent incidents and undermine efforts to maintain a safe work environment. Additionally, a history of violence in the workplace can perpetuate a cycle of aggression, emboldening aggressors and creating a culture where violent behavior is normalized. Addressing workplace violence requires a comprehensive approach that considers these underlying factors and implements strategies to promote a culture of respect, support, and safety for all employees.

The effect of Workplace Violence on Nurses:

Workplace violence exerts significant impacts on nurses across various dimensions, encompassing physical, emotional, and professional realms. Physically, nurses may suffer injuries ranging from minor bruises to severe trauma as a result of violent incidents. These injuries not only compromise their immediate health but can also lead to prolonged absence from work and potential long-term health consequences. Emotionally, nurses experience profound distress, including fear, anxiety, and trauma, following violent encounters. Such emotional turmoil can manifest in symptoms of post-traumatic stress disorder (PTSD), impacting their mental well-being and diminishing their overall job satisfaction. Moreover, workplace violence can impair nurses' professional performance, compromising patient safety and quality of care. Nurses may find it challenging to concentrate, make sound clinical judgments, or communicate effectively with patients and colleagues amidst the aftermath of violent incidents, contributing to decreased job satisfaction and increased turnover rates [11].

The prevalence of workplace violence contributes to a detrimental organizational culture within healthcare settings. Trust and morale among staff are eroded, replaced by a climate of fear and mistrust. Healthcare organizations that fail to

address or tolerate workplace violence risk damaging their reputation and ability to recruit and retain qualified nursing staff. High levels of absenteeism and turnover exacerbate staffing shortages, leading to increased workload pressures on remaining staff and compromising the continuity of care for patients. Thus, it becomes imperative for healthcare organizations to prioritize prevention, support, and accountability to create safe and supportive work environments that safeguard the well-being of nurses and ensure optimal patient care delivery [6].

Moreover, the adverse consequences stemming from the pervasive violence within healthcare sectors profoundly affect the provision of healthcare services. These consequences include a deterioration in the quality of care provided, heightened rates of absenteeism among staff, and healthcare workers opting to exit the field altogether [2].

Situational prevention theory for nurses

Situational Prevention Theory (SPT) is a framework primarily used in the field of criminology and crime prevention. However, its principles can be adapted and applied to various contexts, including nursing. Nurses might apply Situational Prevention Theory by these ways [12], [13]:

1. **Understanding Situational Factors:** Nurses can analyze the specific situations or contexts in healthcare settings that contribute to risks or vulnerabilities for patients. This might include examining factors such as the layout of the healthcare facility, staffing levels, patient demographics, and environmental factors.
2. **Identifying Risk Factors:** Nurses can identify potential risk factors that could lead to adverse events or patient harm. This might involve assessing patient histories, clinical conditions, medication regimens, and any other factors that could increase the likelihood of negative outcomes.
3. **Targeting Specific Problems:** Based on their understanding of situational factors and risk factors, nurses can develop targeted interventions to address specific problems. This might involve implementing protocols to prevent medication errors, improving communication among healthcare teams, or implementing fall prevention strategies.
4. **Increasing Surveillance and Monitoring:** Nurses can increase surveillance and monitoring efforts to detect potential problems early on and intervene before they escalate. This might involve implementing protocols for regular patient assessments, using technology such as

electronic health records to track patient progress, or implementing systems for reporting and responding to adverse events.

5. **Environmental Design:** Nurses can advocate for changes in the design of healthcare environments to reduce opportunities for harm. This might involve advocating for better lighting, signage, and security measures to improve patient safety and reduce the risk of accidents or violence.
6. **Collaboration and Communication:** Nurses can work collaboratively with other healthcare professionals, patients, and families to identify and address situational factors that contribute to risks. This might involve interdisciplinary team meetings, patient safety huddles, and open communication channels to share concerns and implement solutions.

By applying the principles of Situational Prevention Theory, nurses can play a proactive role in identifying and addressing situational factors that contribute to risks in healthcare settings, ultimately improving patient safety and outcomes.

Strategies for Preventing Workplace Violence:

As in hospital wards workers may experience different forms of violence, specific training and preparation is required. Procedures should include ward-appropriate and detailed approaches for the management of violence based on department characteristics in terms of structure and patients [2]. To effectively address workplace violence to create a safer healthcare environment for patients, families, and providers, it is imperative to implement interventions at both the organizational and individual levels. When reviewing the effectiveness of violence prevention training for nurses, research has found that these trainings lead to increased confidence and improved communication skills. However, the trainings are ineffective as standalone methods to reduce workplace violence without additional organizational interventions [15].

At the organizational level, it's crucial for leaders to proactively tackle obstacles hindering the reporting of workplace violence incidents. This proactive approach is essential for gaining a comprehensive understanding of, and effectively addressing, such issues to prevent their recurrence. Instances of underreporting may stem from healthcare workers' acceptance of violence as an inherent risk in their profession, skepticism regarding the consequences for perpetrators, apprehension about potential reprisals from reporting, or the absence of user-friendly reporting mechanisms. By implementing user-friendly

reporting systems and demonstrating unwavering support and decisive action, leaders can dismantle these barriers, alleviate the reporting burden on healthcare staff, and mitigate the risk of burnout [16].

The Joint Commission recommends that, in addition to addressing barriers to reporting, healthcare leaders should make it clear that it is the organization, rather than the victims of violence, that is responsible for addressing workplace violence. At the organizational level, leaders should cultivate safer work environments by developing clear workplace violence protocols and taking steps to address issues such as staffing shortages and turnover. The Joint Commission also recommends that healthcare organizations capture and track workplace violence incidences from all available sources, including databases used for insurance, security, human resources, and employee surveys, and use this data to inform quality improvement initiatives to reduce incidences of workplace violence. These initiatives may involve changes to the physical work environment, such as enhanced security and better exit routes, as well as changes to work practices or administrative procedures, such as developing workplace violence response teams and providing adequate mental health support on-site [17].

Creating a culture of safety within organizations is also crucial to addressing horizontal violence and bullying in the healthcare workplace. It is critical for organizations to establish and enforce a zero-tolerance policy towards bullying, as tolerance of bullying at the organizational level is closely related to bullying prevalence. By implementing anti-bullying interventions, such as manager training, teambuilding exercises, and clear reporting systems, organizations can enhance allyship, communication, empowerment, and trust among healthcare staff, thus creating a safer work environment for patients and staff alike [18].

Addressing workplace violence requires a multifaceted approach that involves implementing various strategies at organizational levels. Leaders play a pivotal role in fostering a culture of safety, support, and accountability within the workplace. One key strategy is to create clear policies and protocols that outline expectations for behavior and consequences for violence. These policies should emphasize a zero-tolerance approach to workplace violence and ensure that all employees understand their rights and responsibilities regarding reporting incidents [17].

Additionally, providing comprehensive training programs is essential for equipping employees with the skills and knowledge to recognize, de-escalate, and report potentially violent situations. Training

should cover topics such as conflict resolution, communication techniques, and self-defense strategies, empowering employees to effectively handle challenging situations while prioritizing their safety.

Another crucial aspect of addressing workplace violence is to establish robust reporting mechanisms that are easily accessible and confidential. Employees should feel comfortable reporting incidents without fear of retaliation and trust that their concerns will be taken seriously and addressed promptly. Implementing anonymous reporting options can further encourage reporting and help identify patterns of violence within the organization [12]. Furthermore, leaders must actively foster a supportive and inclusive work environment where employees feel valued, respected, and empowered to speak up against violence. This involves promoting open communication channels, conducting regular check-ins with staff to assess their well-being, and providing resources and support services for those affected by violence.

Interventions for Managing Workplace Violence:

Managing workplace violence requires a multifaceted approach encompassing preventive measures, employee training, policy development, and intervention strategies. A crucial initial step is establishing a Workplace Violence Prevention Policy that defines violence, outlines prohibited behaviors, and establishes clear reporting procedures. This policy should be widely disseminated, ensuring all employees understand their roles and responsibilities in maintaining a safe work environment. Analysis of the different types of WPV revealed that both verbal and physical violence incidents decreased after the intervention [18].

Conducting regular risk assessments is essential to identify potential sources of violence. Implementing security measures such as access controls, surveillance systems, and panic buttons can help mitigate these risks. Additionally, providing comprehensive employee training is vital. This includes educating staff on recognizing warning signs, conflict resolution techniques, and de-escalation strategies. Increasing awareness about maintaining a respectful workplace culture can also help prevent violence [19].

Effective conflict resolution strategies are crucial for managing workplace violence. Managers and employees should be trained in active listening, empathy, and negotiation skills. Creating a workplace layout that minimizes opportunities for violence, such as ensuring clear lines of sight and

adequate lighting, is essential. Environmental modifications like installing barriers or protective glass can further enhance security.

Offering Employee Assistance Programs (EAPs) can provide confidential counseling and support services for employees dealing with personal or work-related issues that may contribute to violence. Establishing emergency response plans with clear procedures for responding to violent incidents is essential. These plans should include evacuation routes, communication protocols, and coordination with law enforcement [20].

Fostering a supportive workplace culture that promotes respect and inclusivity is paramount. Employees should feel encouraged to speak up about concerns, and channels for reporting incidents of harassment or violence should be readily available. Enforcing a zero-tolerance policy for workplace violence and promptly investigating reported incidents is crucial. Taking appropriate disciplinary action against perpetrators sends a clear message that violence will not be tolerated.

Continuous monitoring and evaluation of the workplace violence prevention program are necessary. This involves reviewing incident reports, gathering feedback from employees, and assessing the effectiveness of security measures. Making adjustments as needed to address emerging threats or gaps in the system ensures ongoing protection for employees and maintains a safe work environment [21].

Creating a Culture of Safety in Healthcare Organizations:

Establishing a culture of safety within healthcare organizations is paramount to ensuring the well-being of both patients and staff. This involves fostering an environment where safety is prioritized, valued, and ingrained in every aspect of organizational operations. One key aspect of creating a culture of safety is promoting open communication channels where staff feel empowered to voice concerns, report incidents, and share ideas for improvement without fear of retribution. Leadership plays a crucial role in setting the tone for safety culture by demonstrating a commitment to safety through their actions, decisions, and communication.

First and foremost, strong leadership commitment is essential. Leaders must demonstrate a clear dedication to safety by prioritizing safety initiatives, allocating resources, and actively participating in safety-related activities. Their visible support sets the tone for the entire organization and underscores the importance of safety as a core value [22]. Clear and open communication channels are critical for fostering a

culture of safety. Staff should feel empowered to voice safety concerns, report incidents, and share information without fear of reprisal. Establishing trust and transparency encourages collaboration and enables effective problem-solving.

Comprehensive staff training and education are fundamental components of a safety culture. Healthcare workers must receive ongoing training on safety protocols, infection control practices, and patient handling techniques to ensure they are equipped with the necessary knowledge and skills to provide safe care [23]. Empowering frontline staff to actively participate in safety improvement initiatives is essential. Involving employees in decision-making processes and soliciting their input on safety-related matters fosters a sense of ownership and accountability, driving continuous improvement. Promoting the reporting of near misses, errors, and adverse events is crucial for identifying systemic issues and implementing corrective actions. Implementing anonymous reporting systems and emphasizing the importance of learning from mistakes encourages a culture of continuous learning and improvement [24].

Regular safety audits and assessments help identify potential hazards, assess compliance with safety standards, and implement corrective measures proactively. Continuous monitoring and feedback mechanisms ensure sustained progress and enable organizations to adapt to evolving challenges. Adopting evidence-based practices endorsed by reputable organizations enhances the effectiveness and safety of healthcare delivery. Engaging patients and their families in safety initiatives promotes a collaborative approach to care and emphasizes the importance of patient involvement in their own safety [20].

Providing adequate staffing levels, resources, and support systems for healthcare workers is essential for mitigating workplace stress and burnout, which can compromise patient safety. Establishing a culture of support and well-being contributes to a positive work environment and enhances overall safety [25].

By implementing these strategies consistently and comprehensively, healthcare organizations can cultivate a culture of safety that prioritizes the well-being of both patients and staff. This commitment to safety not only improves the quality of care but also reduces the occurrence of adverse events, ultimately enhancing patient outcomes and staff satisfaction.

Conclusion:

By addressing workplace violence against nurses comprehensively, healthcare organizations can safeguard the well-being of their staff, enhance

patient safety, and promote a culture of respect and professionalism in the workplace. Through collaborative efforts involving healthcare providers, policymakers, and other stakeholders, we can work towards creating environments where nurses can fulfill their essential roles without fear of violence or harm.

Creating a culture of safety within healthcare organizations is not merely a goal but a necessity to ensure the delivery of high-quality care and the well-being of patients and staff alike. By prioritizing safety in every aspect of organizational operations, from leadership practices to staff training and communication, healthcare organizations can foster an environment where safety is valued, promoted, and upheld as a core principle. Through open communication channels, comprehensive training programs, and a commitment to continuous improvement, organizations can empower staff to contribute to a safer work environment and actively participate in identifying and addressing potential risks and hazards. Ultimately, by working together to create a culture of safety, healthcare organizations can enhance patient outcomes, improve staff morale and retention, and establish themselves as leaders in promoting safety and excellence in healthcare delivery.

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