

Violence in the workplace(hospital nursing department)plan of action



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One of the most extensive of the research efforts in nursing workplace violence was published at the beginning of the year. The researchers concluded that nurses are vulnerable to violence and the urgency of developing interventions (Estryn-Behar et al, 2008). Raiford (1999) that functional approaches in human resource management do not recognize fully the human dimensions at work and thus, provides limited insights or competencies to manage personal conflicts. Since majority of research point to work settings as the most critical venue for violence, intervention must be conducted in this setting and manpower development programs.

The proposed program to respond to the issue of workplace violence in nursing, workshop will be conducted among the nursing staff. There are four main components of the interventions: assessment, program development, implementation and evaluation. The whole program will consist of three months for assessment and dry runs, twelve sessions during a period of six months and three months for the evaluation of the program. Successful outcomes for the intervention will be established at 50% decrease in reported cases of violent behavior among nursing staff and satisfaction rating of 75% from participants.

Assessment will determine where conflicts or violence occurs between nursing staff. The dry-runs will be evaluated as they are completed and will serve as reinforcement to workshop strategies. The program development will involve nursing managers, human resource development consultants and staff representatives. The implementation of the programs will be initiated with a series of three work shop sessions with eight to ten participants. Participants will be chosen at random among the population defined as most vulnerable or susceptible to conflicts that led to violence.

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The issue of violence either against or by nursing professionals has a considerable impact to society not just health care. Current legislation emphasizes the responsibility of administrators and managers to create safe and secure working environments. According to the National Institute for Occupational Safety and Health (NIOSH) (2002), the safety and well-being of nursing professionals directly affects the quality, delivery and value of health services. Though the workplace safety statutes have been in place to address the issue in the industry, the NIOSH (2002) saw it fit to develop specific legislation for the nursing profession in consideration of the professional exposure to risk, stress and violence.

Case in point: growing multicultural diversity in nursing staff would increase communication, training and team requirements (Clements et al, 2005). In particular, there is a need to develop teamwork enhancement programs since the majority of cases of violence reported have been associated with the breakdown of team communication and work relationships (Estryn-Behar, 2008). The development of the interventions will also enhance health institutions protection against co-liability for workplace injuries, enhance service operations and access to nursing service potentials.

Violence in the workplace is a recognized public concern: “ Workplace violence is now recognized as a specific category of violent crime that calls for distinct responses from employers, law enforcement, and the community” (U. S. Department of Justice and the Federal Bureau of Investigation, 2004, p. 12). Thus, the interventions that have to be developed should be reflective of the social and professional effect of the issue. Manpower demands in the nursing profession have prompted the development of research regarding employment recruitment and retention.

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In the course of a number of researches, it was revealed that violence in the workplace has among the most significant factors adversely influencing job satisfaction and performance.

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