March 13, 2017

Ms. Lyn Penniman
OSHA Directorate of Standards and Guidance
Occupational Safety and Health Administration (OSHA)
U.S. Department of Labor
Attention: OSHA-2016-0014
200 Constitution Ave., NW
Washington, DC 20210
Electronic Submission: http://www.regulation.gov

Re: Request for Information (RFI): OSHA Docket no. 2016-0014, RIN 1218-AD 08, Prevention of Workplace Violence in Healthcare and Social Assistance

Dear Ms. Penniman:

The National Association of Social Workers (NASW) provides comments on the Occupational Safety and Health Administration’s Request for Information: OSHA Prevention of Workplace Violence in Healthcare and Social Assistance.

The NASW submits comments on behalf of more than 125,000 professional social workers across the United States. There are about 650,000 social workers in the United States working in many types of settings with individuals, families and communities. According to the Bureau of Labor Statistics, 33% of professional social workers were employed in health care settings in 2014, including hospitals, ambulatory services, and nursing facilities. Clinical social workers are the largest group of providers of mental health services.

Social workers serve vulnerable populations and those with serious, chronic physical and mental conditions. As a critical workforce for underserved people that have often been disconnected from health and mental health care, social workers are at times subject to unpredictable situations and environments.

In recognition of safety issues that impact social workers in particular, the NASW published Guidelines for Social Worker Safety in the Workplace to educate policymakers, organizational leaders and individual social workers on this issue (https://www.socialworkers.org/practice/naswstandards/safetystandards2013.pdf).

In response to OSHA’s Request for Information, NASW recommends that workplace settings:

- Foster environments where clients are treated with dignity and in a respectful manner.
- Require safety awareness training for all employees, from clinicians to front desk staff, to elevate competency in safety procedures.
• Provide adequate staffing levels and have staff available to accompany one another when appropriate, particularly during field work and home visits.
• Document incidents of violence in the organization and create a culture that is open to discussing and analyzing incidents. Use real-life examples to teach and train staff.
• Provide on-site crisis intervention services to those employees who encounter violence in the workplace.
• Track verbal threats of violence/intimidation, in addition to physical acts, and require that clinical staff evaluate the severity and risk of each incident.
• Conduct thorough assessments with relevant historical information and risk factors for violence when working with any individual client or group, including history of violence, access to weapons, mental illness, substance use etc.
• Convene an interdisciplinary committee of staff members to review incidents and consider engagement of peer/consumer advocates to contribute to understanding the factors impacting incidents.

Sincerely,

Angelo McClain, PhD, LICSW
Chief Executive Officer