

South Carolina Workplace Violence Collaborative

**2024
Data Report**



SCHA
SC HOSPITAL ASSOCIATION

ANTUM RISK

SC WORKPLACE VIOLENCE COLLABORATIVE

2024 ANNUAL DATA REPORT

Established in 2023, the South Carolina Workplace Violence Collaborative (SC WPVC) is a collective of SC healthcare facilities partnering to address the increased incidence of violence against healthcare workers. This report contains 2024 aggregate data submitted by participating SC healthcare organizations including acute care hospitals, physician practices, outpatient clinics, and rehabilitation centers. This voluntary program is supported by the South Carolina Hospital Association and Antum Risk.

SC WPVC PROGRAM GOALS

- Standardize the collection of workplace violence data.
- Develop strategies for violence prevention and intervention.
- Share innovative solutions and best practices.
- Inform statewide leaders and the public.

In the United States...

Healthcare workers are

5x

more likely to be assaulted than employees from other industries. ³

WPV costs US hospitals

\$18.65B

annually. ¹

82%

of nurses experienced WPV within the previous year. ²

In South Carolina...

7.24

WPV incidents reported per day by participating hospitals.

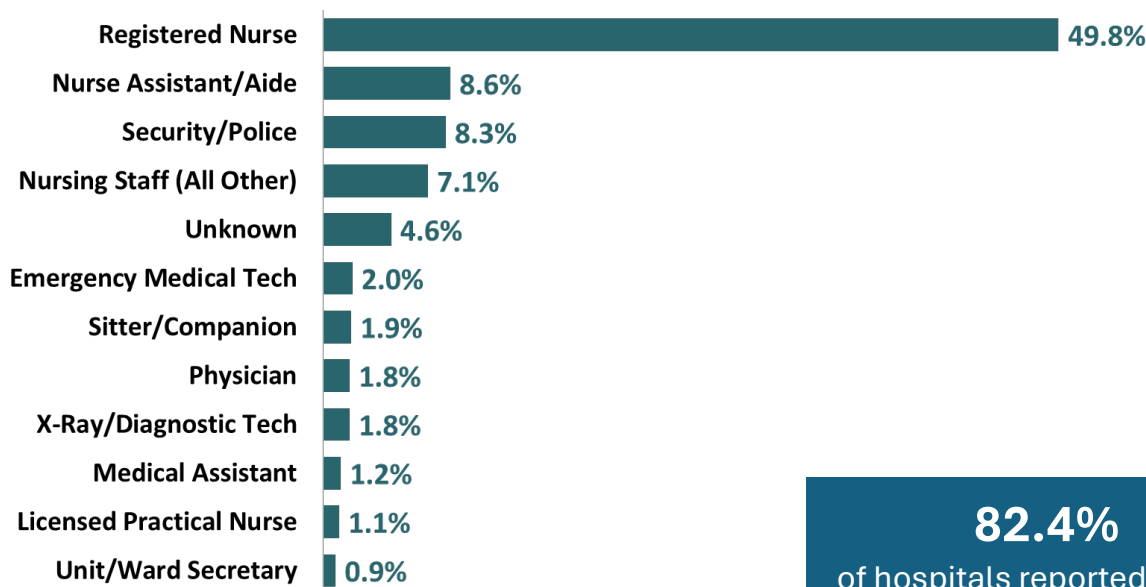
38

WPV incidents reported per 1,000 FTEs by participating hospitals.

78%

of SC acute care hospitals submitting data to the SC WPVC.

WPV Incidents by Position



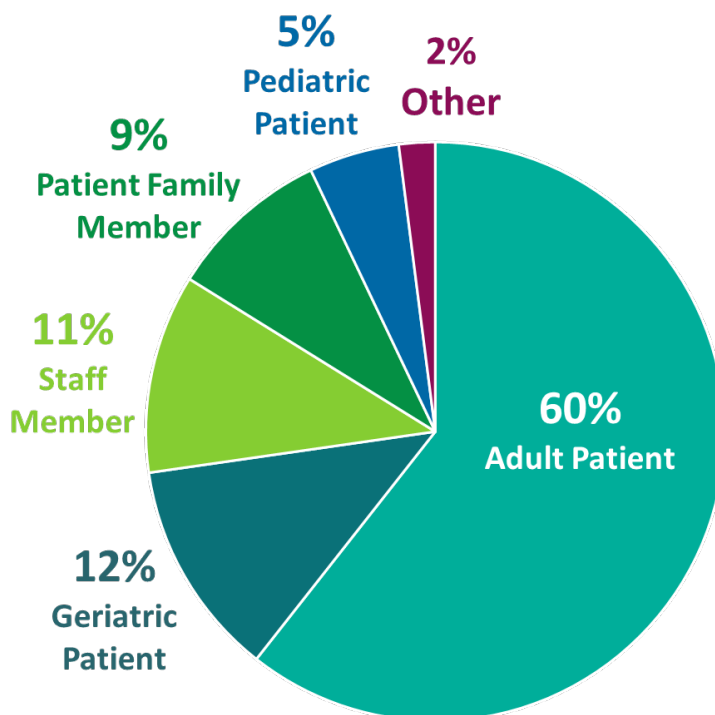
In both 2023 and 2024, patient care roles—particularly nursing and nursing support staff—experienced the highest number of workplace violence incidents, with patients as the predominant assailants. The 2024 data, strengthened by more participating organizations, revealed a broader distribution of affected positions, including increased reporting among security personnel, physicians, and ancillary staff, showing that workplace violence impacts a wider range of healthcare workers than in 2023.

82.4%
of hospitals reported that all affected staff members are debriefed upon the conclusion of an incident.

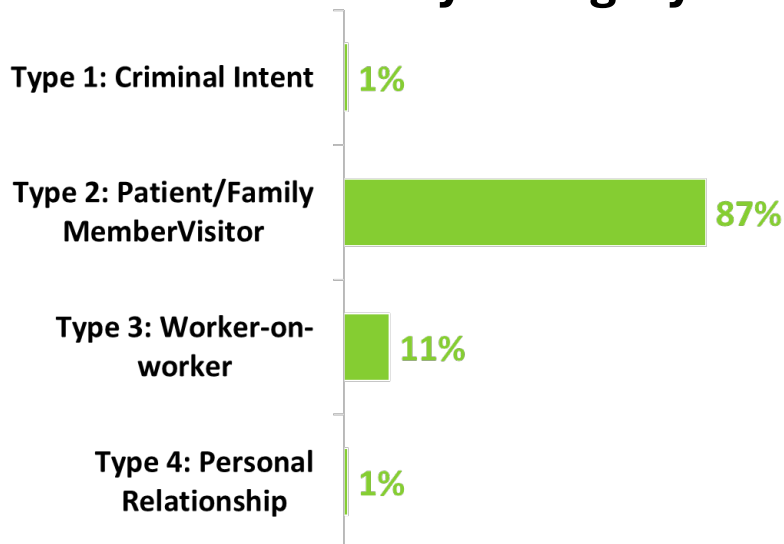
96.1%

of hospitals have a designated group of staff members who respond to a potential or actual violent event with the intent of resolving the situation.

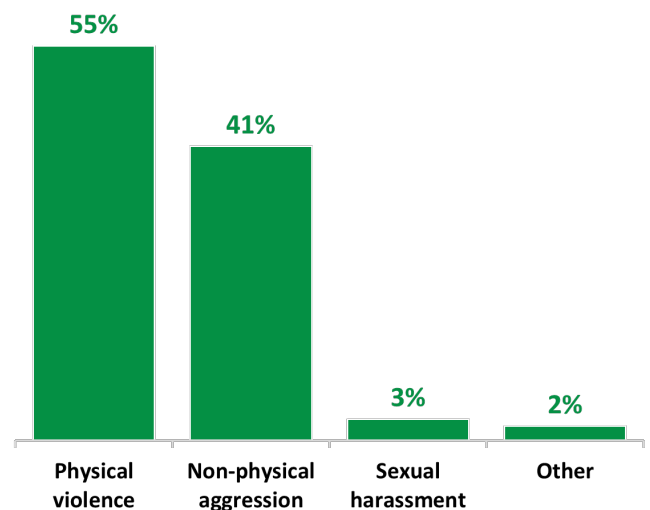
WPV Incidents by Assailant



WPV Incidents by Category



WPV Incidents by Type



Verbal threats and physical assaults accounted for the majority of reported workplace violence incidents in both 2023 and 2024, with a smaller proportion involving harassment, intimidation, or other disruptive behaviors. The 2024 data, strengthened by a larger number of participating organizations, showed a stronger predominance of Type 2 violence—perpetrated by patients or visitors with a legitimate relationship to the facility—while other types, including criminal intent and worker-on-worker incidents, were reported far less frequently. The prevalence of Type 2 incidents underscores the unique risks inherent to healthcare environments where staff interact with patients and families during stressful or high-emotion situations and reinforces the need for proactive de-escalation training and clear protocols to manage escalating behaviors before they result in harm. While physical violence is the leading type reported by participating hospitals to the SC Workplace Violence Collaborative, under-reporting of non-physical violence remains a challenge and hospital leaders should continue to engage with frontline staff to promote reporting and improve the incident reporting process.

96.1%

of hospitals reported that local law enforcement or other subject matter experts were consulted in the development of the WPV program.

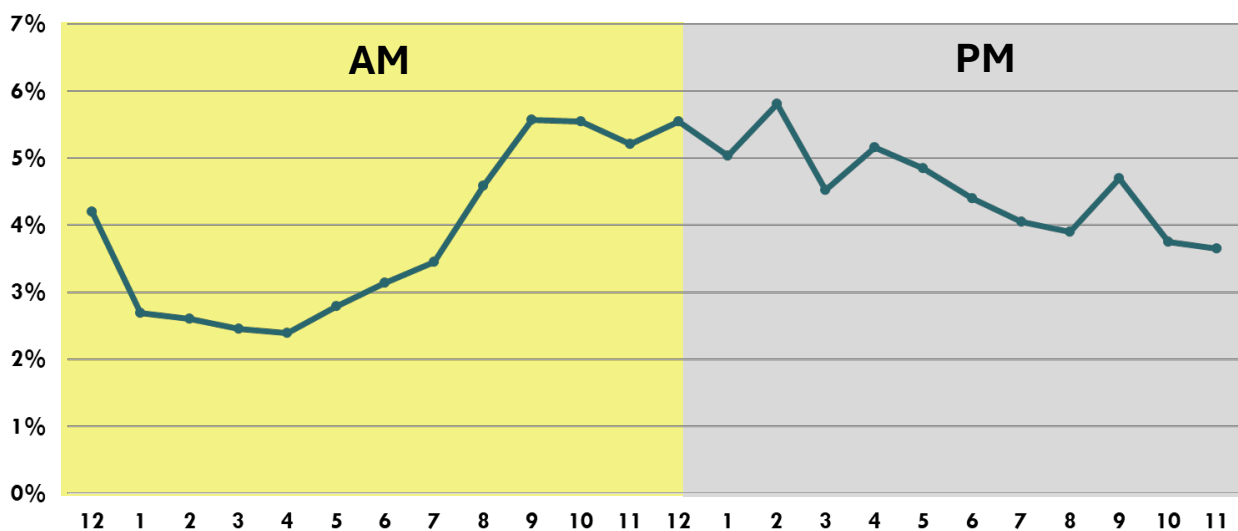
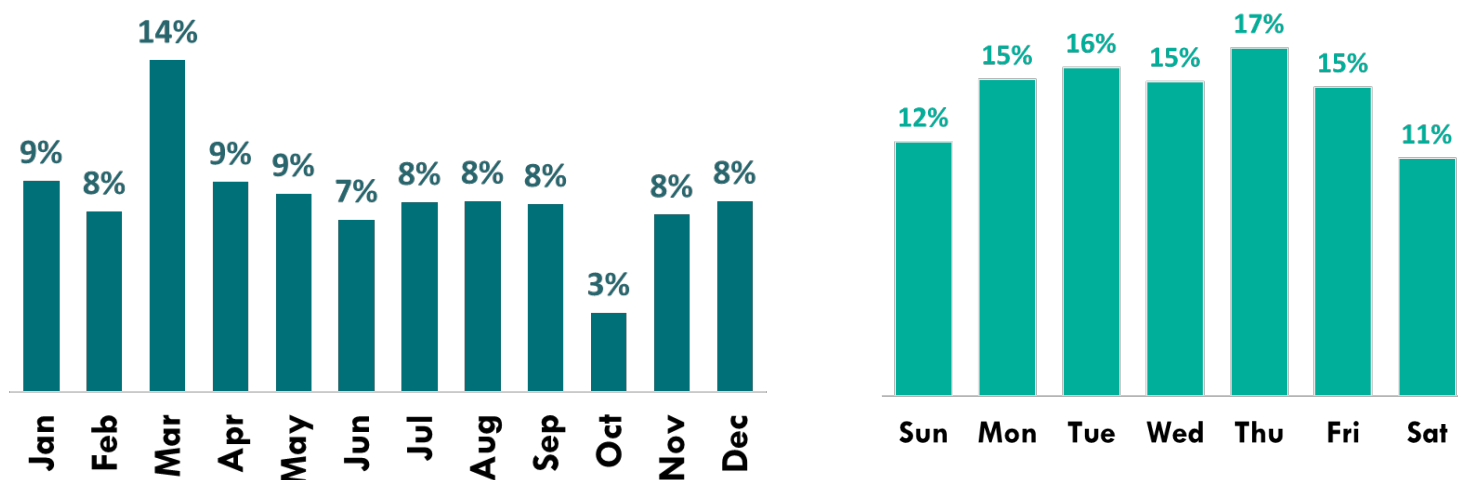
60.8%

of hospitals reported that the local prosecutor is made aware of all violent incidents at the facility that involve physical/ psychological injury.

52.9%

of hospitals reported that local law enforcement is invited to participate in WPV drills at least annually.

Workplace Violence Incidents by Month, Day, Time

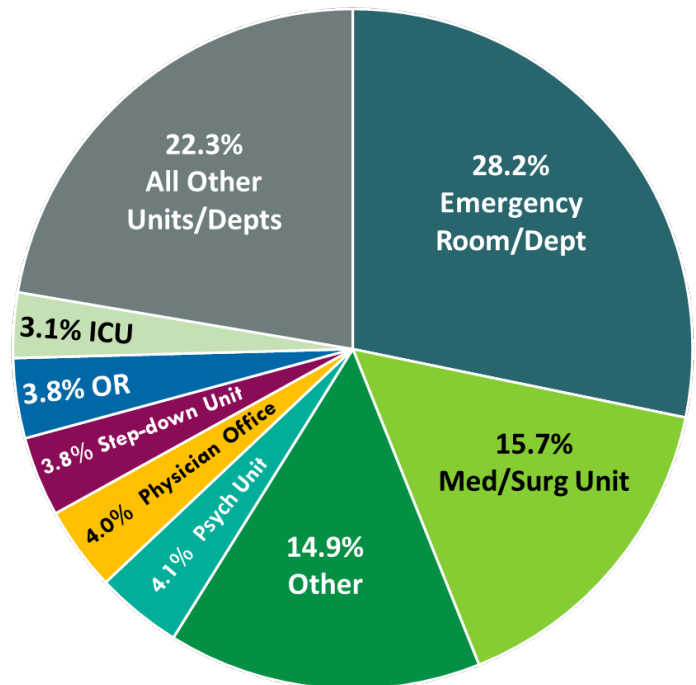


In 2024, workplace violence incidents were distributed more evenly across the calendar year, with only modest monthly fluctuations, while 2023 showed a pronounced late fall and winter spike, peaking in December. Weekly patterns in 2024 were more balanced compared to 2023's highs on Mondays and Fridays, and the time-of-day profile shifted from a 9 p.m.–1 a.m. concentration in 2023 to a broader spread during peak patient care hours such as treatments, visiting hours, and patient transitions. These differences likely reflect changes in staffing, patient flow, and care demands, underscoring the need for readiness across all shifts and seasons as well as the influence of a larger and more diverse data pool.

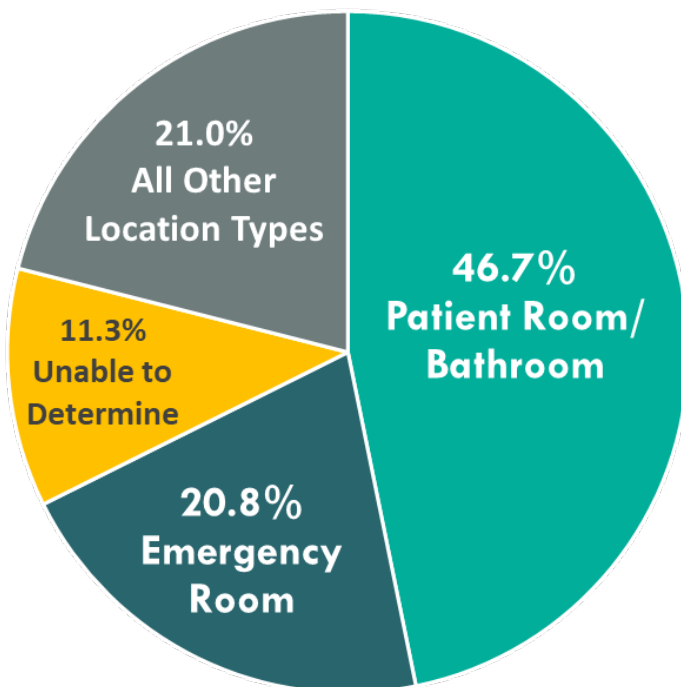
WHERE?

In 2024, workplace violence incidents occurred across a variety of hospital departments and units, with the highest concentrations in emergency departments and patient rooms—patterns consistent with 2023 findings. However, 2024 also showed a broader spread of incidents across behavioral health units, outpatient clinics, and other patient care areas. This shift underscores the need for prevention strategies that extend beyond traditionally high-risk areas to encompass all points of patient interaction.

WPV Incidents by Department/Unit



WPV Incidents by Location Type



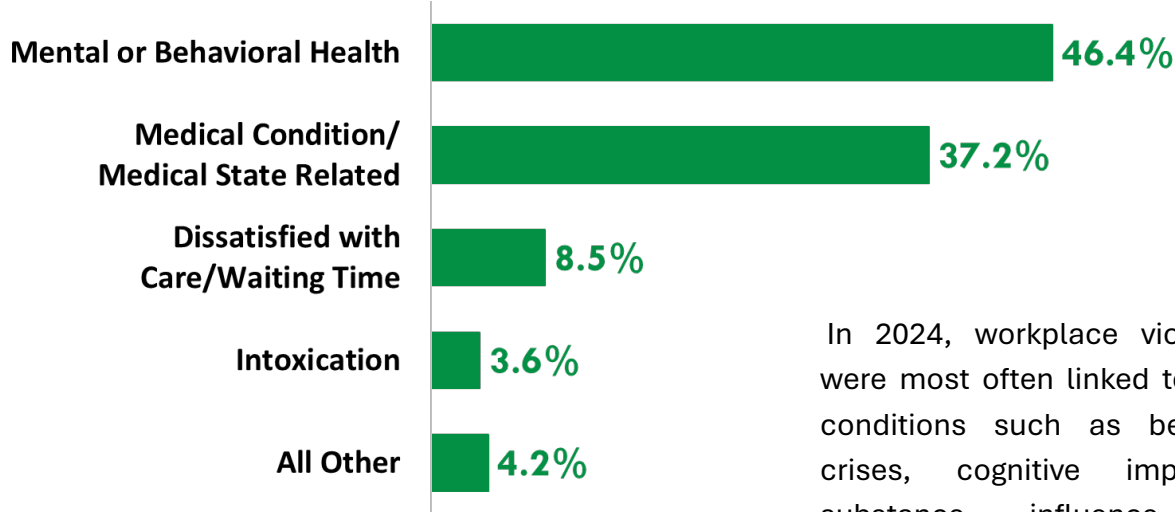
84.3%

of hospitals reported that staff in high-risk areas receive additional WPV training annually above what general employees receive.

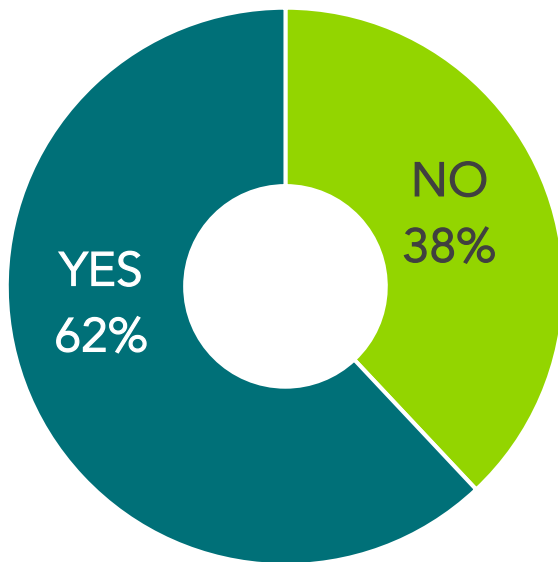
60.8%

of hospitals reported that WPV drills are conducted annually and involve staff from all levels of the organization.

WPV Incidents by Contributing Factors



Percentage of hospitals that display a patient's history of staff assault in EMR



In 2024, workplace violence incidents were most often linked to patient-related conditions such as behavioral health crises, cognitive impairments, and substance influence—factors also prominent in 2023. Environmental triggers, including high-stress care settings and overcrowding, as well as situational stressors like extended wait times or emotionally charged interactions, continued to play a notable role. From 2023 to 2024, there was an increase in the number hospital who reported that they are tracking patients with a history of staff assault. Additionally, SC hospitals are finding innovative ways to communicate the risk for potential violence using things like EMR alerts, color-coded signage on patient doors, and team huddles. A Workplace Violence Committee should routinely review patient “flags” to evaluate their continued appropriateness.

94.1%

of hospitals reported that their WPV program includes criteria for inclusion of an after-action review of incidents.

84.3%

of hospitals reported that after-action review is conducted with the responding staff members for all violent incidents.

IMPROVEMENT OPPORTUNITIES

1. Enhance communication and collaboration with local law enforcement to include regular meetings and participation in hospital workplace violence training and education.
2. Continue to explore ways to improve the process and promote the reporting of all types of workplace violence incidents.
3. Ensure that outstanding items from after-action reviews are tracked to completion.

Resources

- American Society for Health Care Risk Management, [Workplace Violence Toolkit](#): A readiness survey and checklist to ensure healthcare organizations are prepared to prevent violence against staff and a separate tool to have handy to address it if it happens.
- Hospital Association of Oregon, [Workplace Violence Prevention Toolkit](#): A comprehensive toolkit with resources and recommendations for the development and sustainability of a wide-ranging workplace violence program.
- Joint Commission International, [Workplace Violence Prevention Resources](#): The website includes resources for a Workplace Violence Prevention Program, Site Analysis, Data Collection, and Education & Training.
- Occupational Safety and Health Administration, [Workplace Violence](#): The website provides information on violence in the workplace, assessing the hazards in different settings and developing workplace violence prevention plans for individual worksites.
- South Carolina Hospital Association, [SC Safety and Security Webinar Series](#): Industry leaders discuss best practices and innovative strategies to enhance hospital safety.

**Thank you to the
SC healthcare
workers that
devote their lives
to healing others.**



The [Zero Harm Workplace Violence Priority Award](#) is given in partnership with Antum Risk and recognizes healthcare facilities who are embracing Zero Harm through the adoption of specific Workplace Violence prevention strategies.

Data Inclusion Criteria

Data included in this report is from January 1, 2024, to December 31, 2024, from SC healthcare facilities as part of the [SC Workplace Violence Collaborative](#) unless otherwise noted. Participating healthcare facilities have completed the required program components: Participation Agreement, Data Use Agreement, and Organizational Assessment. Some data has been removed due to incompleteness or duplication.

References

1. [The Burden of Violence to U.S. Hospitals](#). American Hospital Association, June 2, 2025.
2. [High and Rising Rates of Workplace Violence and Employer Failure to implement Effective Prevention Strategies is Contributing to the Staffing Crisis](#). National Nurses United, February 2024.
3. [Injuries, Illnesses, and Fatalities: Workplace Violence 2021-2022](#). US Bureau of Labor Statistics, October 8, 2024.
4. [South Carolina Workplace Violence Collaborative: 2023 Data Report](#). South Carolina Hospital Association, May 6, 2024.

About SCHA

SCHA is committed to making South Carolina one of the nation's healthiest states by helping our hospitals and health systems provide the best care possible. We advocate for sound healthcare policies and legislation, facilitate collaboration to tackle problems that none of us could solve alone, find and share innovations and best practices, and provide data, education, and business solutions to help our members better serve their patients and communities. Together, we are leading South Carolina to a better state of health. Learn more about SCHA at www.scha.org.

About Antum Risk

Originally founded in 1977 by South Carolina healthcare executives as a group workers' compensation self-insurance pool, we are a leading provider of workers' compensation coverage to the state's healthcare industry. Antum Risk provides innovative solutions, serving as an alternative to the commercial insurance market. Our offerings include group programs for workers' compensation, professional and general liability, and medical stop-loss. With more than 40 years in the healthcare claims and risk management industry, Antum Risk also provides a variety of risk management consulting services.





Our families work here.

Nuestras familias trabajan aquí

Please be kind

Por favor, sé amable.



Help Keep SC Hospital Workers Safe

Ayuda a proteger a los trabajadores hospitalarios de Carolina del Sur