

Workplace Violence Prevention Training

Annual Report 2025

Supporting safety in health care with data
that drives prevention.



Empowering Workplace Violence Prevention in Health Care

The Current Health Care Environment

Workplace violence in health care has reached alarming levels, with devastating impacts on workforce safety, staffing, and labor costs. This troubling trend is a reality that health care workers face daily, putting their safety, well-being, and morale at risk.

Many health care professionals are at their breaking point, with 37.2% considering leaving the field due to the mental and physical strain caused by violence. Over 19% have changed or left their jobs and 4.1% of health care workers have already left the profession entirely.

These numbers are fueling a national staffing crisis with losses totaling between \$3.9M to \$5.8M annually per facility. The financial burden continues to grow as organizations face mounting pressure to retain staff and improve care.

Now more than ever, health care organizations must act. Too many organizations are struggling to implement effective, long-term strategies due to lack of resources, insufficient data, and the absence of comprehensive de-escalation training. That's where Crisis Prevention Institute (CPI) comes in.

Each day, nurses, technicians, and care staff walk into their workplaces ready to provide care and critical support. And yet, too many walk out as victims of violence—physically injured, emotionally shaken, or morally exhausted.

Every incident of workplace violence impacts real people—caregivers, colleagues, those they serve. A call to protect everyone involved is a call to lead differently and act decisively.

The 2025 Workplace Violence Prevention Training Annual Report offers a clear look at the current state of workplace violence in health care—and a call to action for leaders. It also provides a framework to enable your workplace violence prevention committees to benchmark actionable training solutions.

The consequences of inaction are clear: increased turnover, burnout, reputational damage, and rising financial and operational strain. But there's also a powerful opportunity to shift the narrative. When we invest in prevention, we not only reduce harm and financial burden—we restore confidence, strengthen culture, and create environments where staff and patients feel safe.

CPI is more than a training provider—we're a partner in prevention. We work alongside health systems to deliver evidence-based programs that empower staff to navigate crisis moments with confidence, empathy, and control. Every implementation is tailored to your structure, culture, and workforce—ensuring it aligns with your system and supports your people.

The time to act is now, and the cost of waiting is too high. Let's lead the change, together.



Tony Jace
Chief Executive Officer
Crisis Prevention Institute
April 2025

Methodology

From January to December 2024, we conducted a 10-question survey online and at industry tradeshows, collecting responses from health care professionals across the U.S. and Canada to assess workplace safety and preparedness.

Survey Sample Profile



514

Health care professionals recruited



50 beds

Respondents' median hospital size



8 years

Median time respondents have worked in health care



+/- 3.6%

Margin of error, at the 90% confidence level



Watch for this icon throughout the report to find tips on how training and effective policies can help prevent workplace violence.

Indexes

This data allowed us to capture respondents' feelings around the safety of their workplace and their organization's preparedness to resolve conflicts. These insights translated into two indexes and a third that reflects their combined average:

- **Safe Workplace Index (SWI):** Assesses responses to feelings around workplace safety.
- **Workplace Preparedness Index (WPI):** Assesses responses to current workplace preparedness.
- **Workplace Violence Prevention Index (WVPI):** The average of an organization's SWI and WPI scores.

We collected all responses on a 1-4 scale and later transposed them to a 0-100 scale. This helped break each index into four benchmarks:

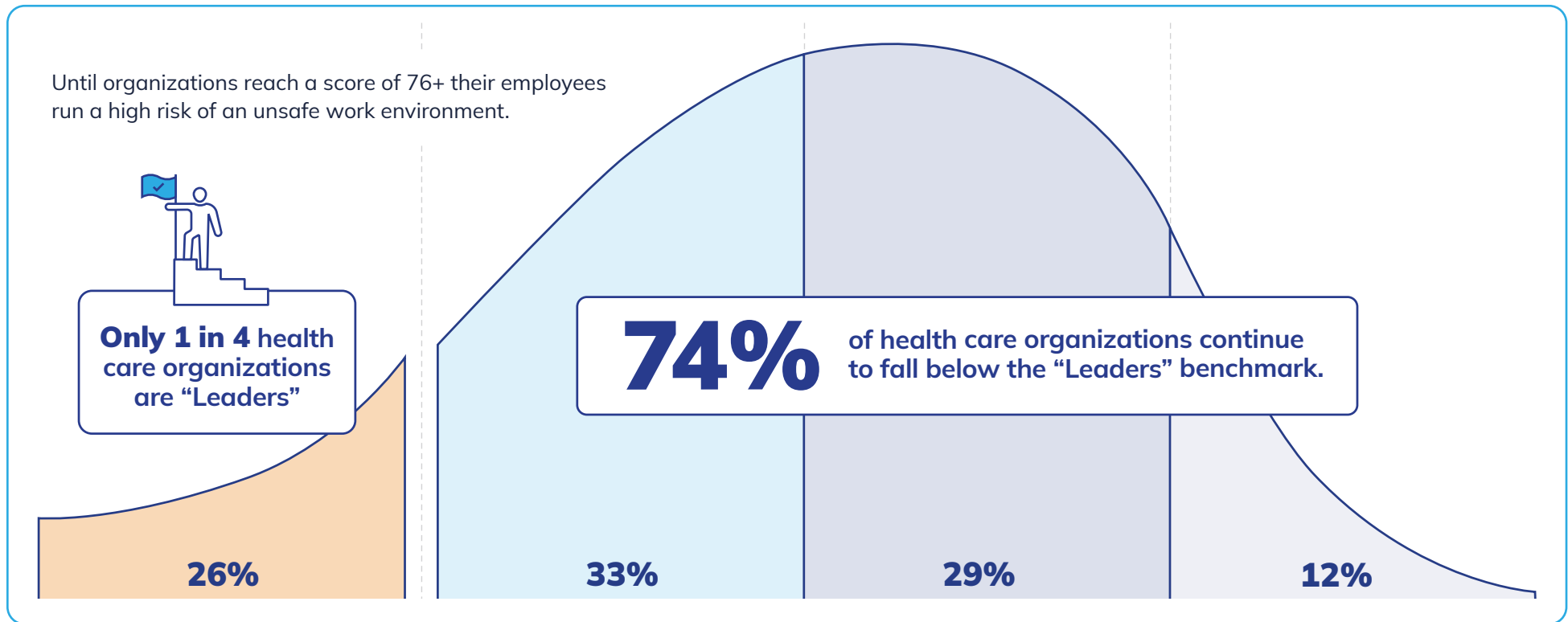
1. **Leaders:** 76-100
2. **Above Average:** 51-75
3. **Below Average:** 26-50
4. **Laggards:** 0-25

These benchmarks within the 0-100 scale were devised to group results and create an Index Score relative to other health care organizations. **A score of 76+ indicates an effective and sustainable workplace violence prevention program.** This structure enables health care organizations to pinpoint gaps and prioritize interventions at the system level.

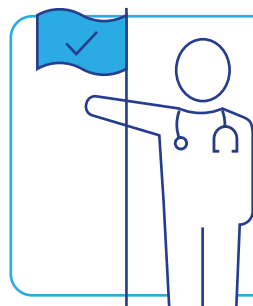
Executive Summary

Most organizations are risking an unsafe work environment.

Only 1 in 4 health care organizations are “Leaders” (earning a score of 76+) in workplace violence prevention training.



Organizations with established workplace violence prevention policies and frequent training have more confidence in their staff feeling safe.



Over half of Leaders (58%) in training effectiveness (WPI) are Leaders in workplace safety feelings.



Nearly 9 in 10 Laggards in training effectiveness feel they have unsafe workplace environments.

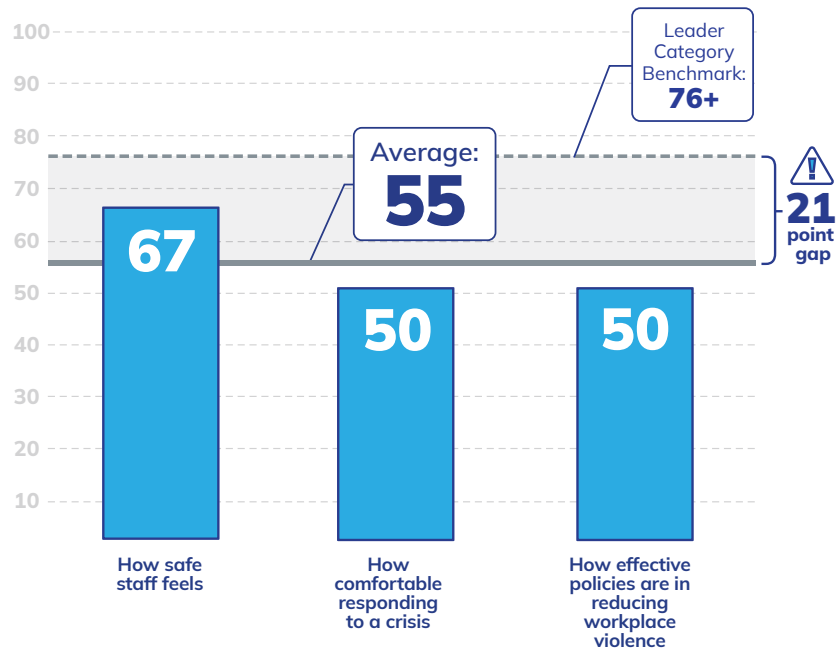
Executive Summary

Organizations continue to have notable gaps in their safety and preparedness.

Staff perceptions of workplace safety and crisis preparedness are consistently falling short of the standards set by leading health care organizations—highlighting a growing disconnect between expectations and reality.

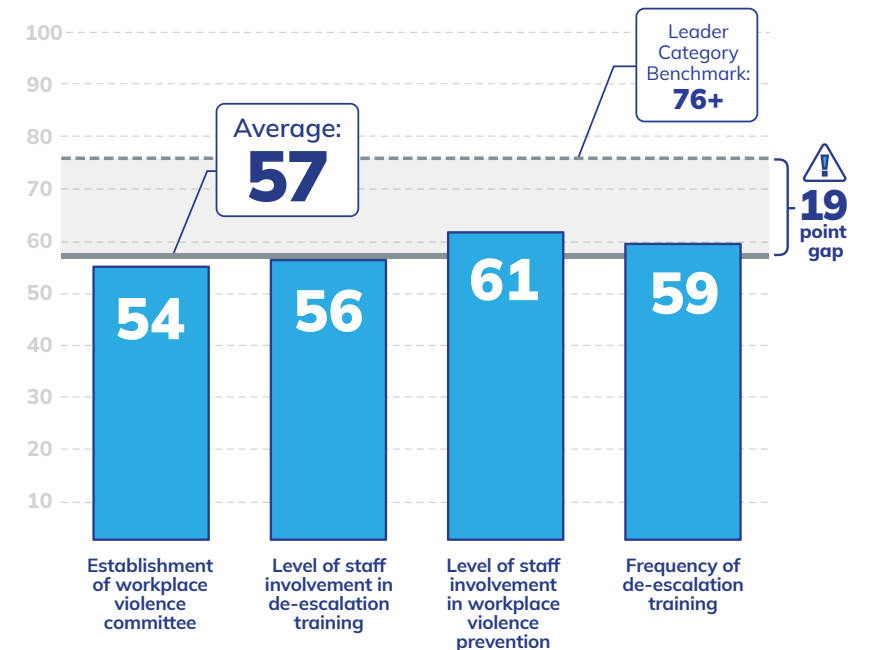
Components of Safety Workplace Index (SWI)

When assessing feelings around workplace safety, the industry as a whole falls **21 points short of the Leaders benchmark**, with a Safety Workplace Index (SWI) score of 55.



Components of Workplace Preparedness Index (WPI)

The industry's Workplace Preparedness Index (WPI) score of 57 shows a similar miss in preparedness in handling crises, landing **19 points below the Leaders benchmark**.



How Does Your Organization Compare?

Take our 10-question Workplace Violence Prevention Training Index survey to see how your workplace compares and gather new data to identify ways to enhance safety for your health care teams and their patients. CrisisPrevention.com/GetScore

Executive Summary

Why workplace violence prevention efforts fall short.

While there have been modest improvements in reducing injuries within health care settings, progress has lagged behind the significant strides made in other industries.

So, why does workplace violence remain such a persistent challenge in health care? And why haven't organizational efforts led to more substantial change? To start, let's look at the contributing factors listed that make workplace violence in health care such a complex issue.



Violence prevention is not embedded in the organizational culture.



Policies and procedures are either lacking or ineffective.



Many staff members are unaware of the scope and risks of workplace violence.



De-escalation skills are often underdeveloped due to insufficient training.



Patient populations with elevated risk require specialized approaches that are often not in place.

The extensive number of variables makes combating violence a moving target in health care, due to the nature of the industry.



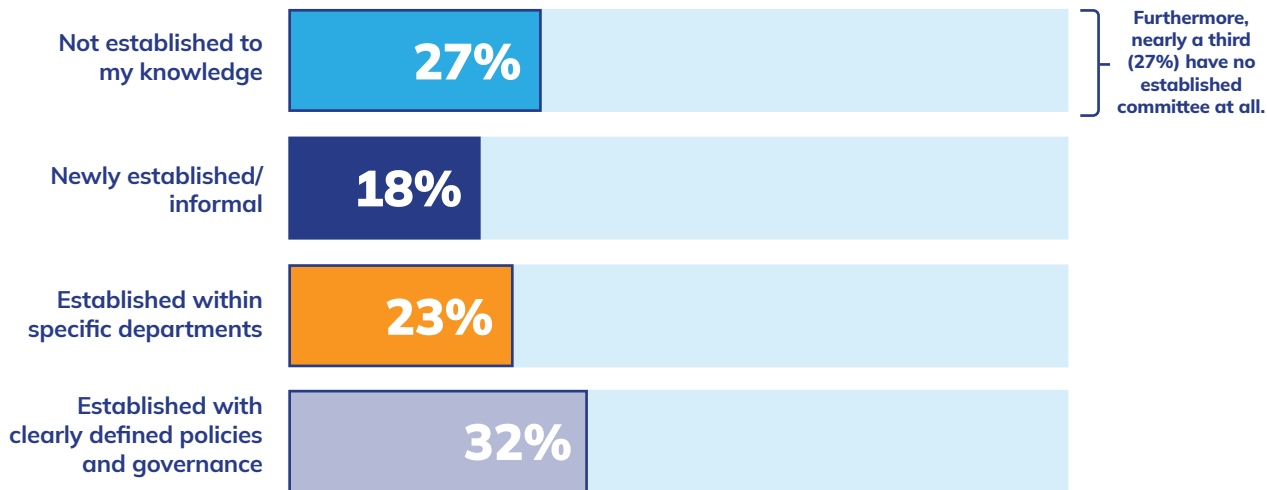
Prioritizing the consistent implementation of workplace violence prevention policies and training programs remains essential. **As part of the commitment to making a positive impact with workplace violence prevention efforts, organizations must remain open to the idea of a cultural shift.** A system-wide investment in these efforts helps foster an environment where all staff feel confident and prepared to prevent, identify, and effectively de-escalate workplace violence.

Key Research Findings

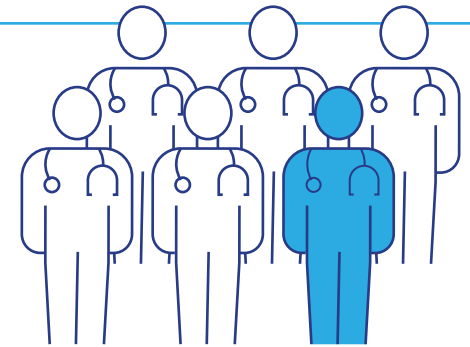
Many health systems lack a workplace violence prevention committee with clear policies, leaving staff feeling unsafe at work.

More than 6 in 10 (68%)

do not have an established workplace violence prevention committee with clearly defined policies and governance.



Staff safety can be compromised when there's no clear governance or dedicated committee to lead workplace violence prevention efforts.



1 in 6 health care professionals (16%) believe their staff feel very or mostly unsafe at work.



An active workplace violence prevention committee brings an organization's workplace violence prevention program to life by both driving training and establishing effective strategies to monitor and improve efforts.

The committee actively develops and rolls out prevention programs and policies, ensures compliance with workplace safety regulations, and recommends targeted training to keep staff informed and prepared.

Key Research Findings

Many health systems have yet to clearly define violence prevention roles for staff and continue to lack confidence in their policies' effectiveness.

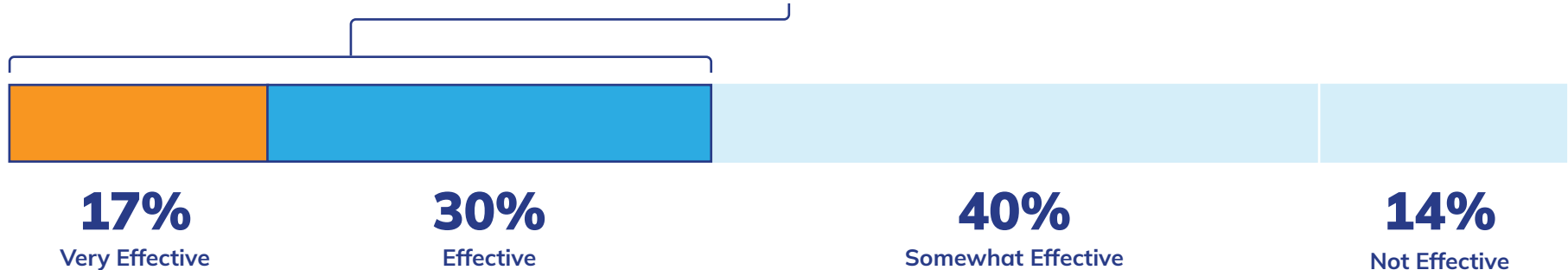
Almost half (45%)

of organizations do not have clearly defined roles for all staff.



Less than half (47%)

believe their workplace violence policies are effective or very effective.

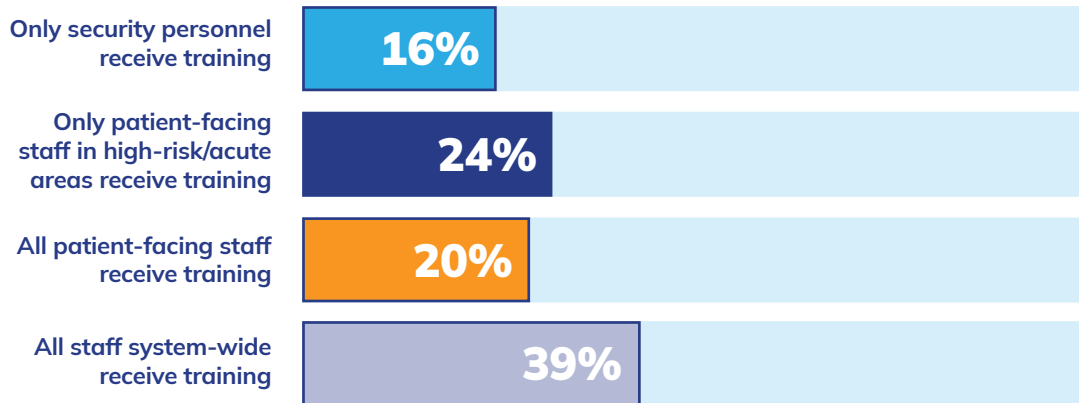


Establishing clearly defined roles across the entire system is essential to the success of a workplace violence prevention program, as is providing annual, customized safety training. This training should include a review of workplace violence prevention policies and procedures relevant to staff roles during a crisis, along with clear guidance on how to access and apply them effectively.

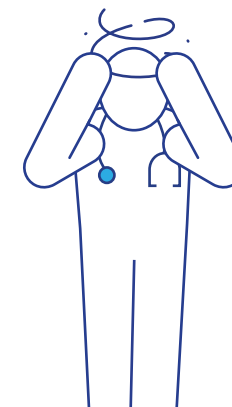
Key Research Findings

Without annual system-wide de-escalation training, staff remain uncomfortable handling crises.

Over two-thirds (40%) of organizations only provide training to security personnel and patient-facing staff working in high-risk areas.



69% of organizations do not provide frequent de-escalation training.



More than half (53%) still believe their staff feel just somewhat comfortable or very uncomfortable addressing a crisis.



Annual, system-wide de-escalation training equips professionals with proactive skills to respond confidently during crisis moments. **Because workplace violence is not a one-size-fits-all issue, it requires tailored solutions.** Customized training delivers tiered de-escalation strategies aligned with staff roles and varying risk levels. Regular refreshers help maintain training effectiveness and ensure staff are using the most current, evidence-based practices.

Conclusion

Health care organizations must implement system-wide violence prevention policies and annual training, because safety isn't just a protocol—it's the foundation for staff well-being, retention, and quality patient care.

Findings from the Workplace Violence Prevention Training Index survey highlight critical gaps in workplace safety and preparedness throughout the industry.

Workplace safety is directly shaped by proactive violence prevention measures. Organizations that lead in violence prevention preparedness are far more likely to report a safer work environment for their employees.

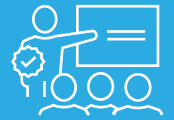
Given the ongoing and significant threat of workplace violence, it is crucial for health care organizations to prioritize the development and implementation of effective violence prevention programs. These programs must equip staff with the necessary skills, training, and resources to effectively prevent violent incidents.



Establishing a workplace violence prevention committee with clearly defined policies and governance is essential to ensuring staff feel secure at work.



System-wide, clearly defined roles are critical to the success of a workplace violence prevention program.



Annual, system-wide de-escalation training is vital in equipping staff with the proactive skills needed to confidently prevent and de-escalate crises.

The time to act is now—health care organizations must close the gaps in safety preparedness and empower their teams to prevent violence before it occurs.

About CPI

CPI is the industry-leading provider of de-escalation training for health care organizations. Since 1980, we have helped train more than 17 million people to create stronger cultures of safety in workplaces around the world. Our workplace violence experts partner with health systems to implement customized training solutions that create a safer environment, where all staff have the skills to confidently recognize and prevent incidents of violence.

We provide guidance to help our partners review, reassess, and reinvest in their workplace violence prevention programs. **Together, we can implement effective organizational changes to reduce the risk of traumatic situations and protect care teams, patients, and visitors.**

Using our 4D approach, we partner with health care leaders to discover, diagnose, design, and deliver proven de-escalation training in sustainable phases, customized to each organization's unique needs and risks.



1 / Discover

Understand the current state of workplace safety and the types of behavior encountered within an organization to determine risk levels across all staff.



2 / Diagnose

Build the organizational support structure required for ownership, accountability, and efficacy and adopt a common workplace violence prevention language.



3 / Design

Create a sustainable path to integrate and continuously improve de-escalation training throughout your entire organization.



4 / Deliver

Provide staff with the annual de-escalation training they require and apply additional training to upskill those in high-risk departments.



Connect with a CPI workplace violence expert today to learn how a customized de-escalation program and training plan will benefit your health system. CrisisPrevention.com/LetsConnect

Take the first step toward a safer health system by assessing your own workplace safety and preparedness.

Complete our 10-question Workplace Violence Prevention Training Index survey to see how your workplace compares and identify ways to enhance safety for your health care teams and their patients. CrisisPrevention.com/GetScore



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