

Hospital Shootings Rare, but Rate of Other Assults High, Researchers Find

Shootings like the one in which a gunman shot a doctor and killed a patient at The Johns Hopkins Hospital in September are "exceedingly rare," but the rate of other assaults on workers in U.S. healthcare settings is four times higher than other workplaces, conclude two Johns Hopkins emergency physicians after reviewing workplace violence in health settings.

The rate of assault in all private-sector industries in the United States is two per 10,000, compared to eight per 10,000 at healthcare workplaces, note Gabor D. Kelen, M.D., and Christina L. Catlett, M.D., in a commentary to be published in the Dec. 8 issue of the Journal of the American Medical Association. As a result, while hospital shootings get widespread media and other attention, security experts instead should focus their efforts on preventing common everyday assaults in hospitals and other health care facilities, says Kelen, professor and chair of the Johns Hopkins Department of Emergency Medicine.

In the JAMA piece, Kelen and Catlett say that they determined from a review of violence in health care settings that investing heavily in magnetometers or other expensive high-tech security measures to prevent shootings, while a popular idea, isn't called for, considering how rare shootings are in health care."Magnetometers certainly project a protective aura; however they are not a security panacea in most healthcare settings," say Kelen and Catlett.

In fact, argue the authors, metal detectors may "emote a false sense of security" because they do not detect non-metallic weapons and have no effect on preventing assaults in which no weapon is used. As one reviewed report found, magnetometers installed in one hospital failed to decrease the number of weapons discovered in treatment areas because patients typically bypassed the detectors. "Importantly, there was no change in the rate of assaults," the authors write. To further underscore their point, Kelen and Catlett found in their review of available data that many shootings at health care facilities, occurred outside, not inside.

In addition to focusing on preventing more common everyday assaults against healthcare providers in the workplace instead of installing sophisticated screening equipment, the authors argue that the expectation of perfect safety and security in hospitals must align itself to the realities of contemporary American life, with its high rate of violence and incivility. In short, says Kelen, security perfection in hospitals is an unreasonable expectation that can't be met.

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