



American College of
Emergency Physicians®

ADVANCING EMERGENCY CARE 

POLICY STATEMENT

Approved June 2022

Protection from Violence and the Threat of Violence in the Emergency Department

Revised June 2022 with current title, April 2016 titled “Protection from Violence in the Emergency Department,” June 2011, April 2008 titled “Protection from Physical Violence in the Emergency Department Environment.”

Reaffirmed October 2001, October 1997

Originally approved titled “Protection from Physical Violence in the Emergency Department” January 1993

The American College of Emergency Physicians (ACEP) believes that workplace violence is a preventable and significant public health problem, and that optimal patient care can be achieved only when patients, health care workers, and all other persons in the emergency department (ED) are protected against violent acts occurring within the department. Workplace violence is a preventable and significant public health problem and optimal patient care can be achieved only when patients, health care workers, and all other persons in the emergency department (ED) are protected against violent acts occurring within the department. There are concrete steps emergency physicians (EPs) can take to advocate for safer work conditions in the ED as hospitals are not considered a federal gun free zone and concealed weapon provisions vary among states. To ensure the safety and security of the ED environment, the hospital and its administrators have the following responsibilities:

- Provide an ED security system based upon ongoing institution-specific risk assessment that may include signage, adequate security personnel, timely personnel training, physical barriers, surveillance equipment, and other security components.
- Erect signage and provide for appropriate securing of firearms outside of the ED, designating the ED a ‘Firearm Free Zone.’
- Coordinate the healthcare institution’s security system with local law enforcement agencies when developing policies for safekeeping of firearms; trained and on-duty law enforcement officers, hospital security, military police and federal agents may be acceptable exceptions to the ‘Firearm-Free Zone.’
- Individual healthcare institutions must address workforce safety as a priority on their property while maintaining every patient’s healthcare rights.
- Develop written ED protocols with input from staff and the community which is served for violent situations occurring in the ED to ensure the safety of patients, visitors, and health care workers alike.
- Provide institutional and public-facing education and support academic research to decrease workplace violence, including firearm-related morbidity and mortality.

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- Promote a culture of safety by promoting continuous and open reporting of safety concerns by staff and visitors. The “see something, say something” approach works best with receptive leadership.
- Protect and support physicians who take personal safety precautions to prevent harm and who raise safety concerns
- Develop and enforce a mandatory reporting policy that requires employees to promptly report any verbal assault or physical battery. Such policies should clearly state that reporting will not result in any adverse action by the hospital such as termination, threatening to terminate, demoting, suspending, or in any manner discriminating against an employee who reports any assault or battery.
- Adopt a zero-tolerance policy for employees, patients, families, and visitors that states that any violence in the ED is not acceptable. This should include a process to safely treat, or, if indicated, discharge patients who threaten or commit acts of violence toward ED staff. Educate employees that assault and battery is not “part of the job.”
- Provide appropriate post-incident support for employees involved in violent events including prompt medical treatment, debriefing, counseling, and employee assistance.
- Educate staff through formal, regular training of early recognition of individuals with potential to become violent, techniques for de-escalation, non-violent crises intervention, and importance of seeking assistance.
- Pursue maximum criminal prosecution, when deemed appropriate, against those individuals who threaten and commit violent acts against health care workers. Additionally, ACEP recognizes that the EMS system is an integral component of emergency care and supports and encourages efforts to protect EMS personnel against physical violence in the prehospital environment.

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