SAMPLE – Workplace Violence Prevention Plan Policy

Subject: Workplace Violence Prevention Plan Policy
Number: 
Effective Date: 
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Approved by: (signature)
Distribution: 

I. STATEMENT OF PURPOSE

A. To outline the key components of a workplace violence prevention plan, including procedures to identify, prevent, and manage threats in the workplace

B. To create an awareness of actions that can reduce the likelihood of threats and violent behaviors

II. POLICY

It is the policy of [insert facility name] to promote a safe and non-violent environment for employees, patients, and visitors. The organization is committed to working with staff members to maintain a work environment free from acts or threats of violence, including harassment, intimidation, coercion, and other disruptive behavior. [insert facility name] has zero tolerance for all expressions of violence.

Violent behavior shall not be tolerated. Individuals who commit such acts may be removed from the premises and may be subject to criminal penalties. Staff members may also be subject to disciplinary action up to and including termination.

Each [insert facility name] staff member has the responsibility of maintaining a non-violent work environment by refraining from engaging in any violent behavior and reporting any occurrence that would be considered inappropriate under this policy.

III. DEFINITIONS

Workplace violence – violence which an individual inflicts, or threatens to inflict, on others at the place of work and may include:
- Damage to property
- Serious harm
- Injury
- Death
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Violence – includes physically harming another, shoving, pushing, harassing, intimidating, coercing, brandishing weapons, and/or threatening or talking of engaging in these activities - It is behavior used to frighten, intimidate, injure, damage, or destroy another person or property. This may include a direct or indirect threat of harm. It is usually an expression of anger and may take the following forms:
- Gestures/verbal abuse
- Innuendo
- Intimidation
- Physical force
- Retaliation
- Rough action
- Stalking
- Threats
- Coercion
- Harassment
- Theft
- Vandalism

Threat – a direct or implied expression of intent to inflict physical harm and/or actions that a reasonable person would perceive as a threat to physical safety or property - The following are some examples of behaviors that may be considered threats. (Additionally, because intent may not always be discerned by co-workers, jokes about physical acts of violence will not be tolerated.)
- Verbal threats which include descriptions of what the violent person plans to do
- Threatening conduct, such as intimidating others, showing off
- Brandishing a weapon
- Bizarre statements or actions threatening physical harm
- Obsessions, such as a grudge against a co-worker or supervisor
- Written threats

Zero-tolerance: The standard that states no behavior, implied or actual, that violates this policy will be tolerated.

IV. PROCEDURE

A. Annual Assessment

The workplace violence prevention plan is evaluated as part of the security management plan annual review, which is reported to the safety committee, the leadership team, and ultimately the governing body. Evaluation of the effectiveness includes data trends, summaries of reported incidents of assaults or other acts of violence, employee/visitor/patient reported complaints or concerns, results of case/event reviews and root cause analysis, and when applicable, results from high-risk area surveys. Ongoing additions or proactive changes to the security program may occur in response to past facility-based trends and events, as well as to changes in facility services and community needs.

B. Workplace Violence Prevention Through Education

At the time of hire, all new staff members will receive education on how to prevent and manage violence in the workplace. In addition, information regarding workplace violence is provided to all staff members with the annual mandatory safety education. Adding the following statement to each staff member’s annual review and having the individual sign off at each performance review is a convenient way to ensure that staff members have knowledge of the policies.

This document is a work product of Coverys’ Risk Management Department. This information is intended to provide general guidelines for risk management. It is not intended and should not be construed as legal or medical advice. Your organization should add to and modify this tool to address the compliance standards and regulations applicable in your state or organization.

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Employee Acknowledgement

I acknowledge that I have received a copy of [insert name of facility policies and procedures regarding sexual harassment, workplace violence, hostile work environment, substance abuse, etc.]. My signature means that I have reviewed these documents, understand them, and have discussed the contents with my manager.

C. Response Team

A response team has been established and is responsible for the overall implementation of the workplace violence prevention plan. Response team members include the following:
1. Risk management professional – (will act as team leader for patient/visitor threats and contact other members as the need arises or is applicable)
2. Director of human resources* – (will act as a team leader for employee threats)
3. Director of security*
4. Safety coordinator*

D. Handling of Threats/Assault – Communication

1. If a threat has been made or is imminent, it will be taken seriously and shall be immediately reported to security. The notified security officer shall alert his/her manager, who shall notify law enforcement, when applicable. If the security director is not immediately available, a security staff member will determine if law enforcement needs to be contacted. Security will also notify the administrative supervisor and director of risk management.
2. Personnel at physician offices and off-site facilities will contact the police at 911 for immediate threats; otherwise, the site manager will be called to request involvement of security and risk management. If the threat occurs after hours, the on-call administrator will be contacted.
3. Staff members who believe they are subject to or aware of threats (implied or direct), harassment, intimidation, physical/verbal abuse, or coercion from employees, patients, visitors, or others need to report these specific circumstances to their manager/supervisor, who will in turn contact security and risk management, as applicable.
4. Staff members who believe they may be at risk for violence at work as a result of a domestic dispute are encouraged to report the situation to their manager/supervisor, who will involve the members of the response team. Copies of any restraining/personal protection order shall be provided to security, along with a description or photograph of the individual, if available.
5. Workplace violence and/or threats will be submitted via a safety event report and directed to the staff member’s manager, who will then forward it to risk management.

E. Confidentiality

In the interest of safety, any person reporting a threat (or other behavior listed previously) may ask that their name be withheld. When an investigation follows, the person who filed a report will need to answer questions. The investigation will be completed in a confidential manner. In the event that an investigation or issue involves law enforcement, legal action, or a union grievance, the name of the individual reporting the event may need to be released.

F. Employee Conduct

All employees are expected to behave in accordance with all applicable policies. Any staff member engaging in violent behavior as defined in this policy and procedures may be subject to
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disciplinary action, up to and including termination. Healthcare provider code of conduct concerns will be addressed in accordance with the medical staff bylaws and other applicable provisions.

G. Patient Conduct

Physical/mental illnesses, mental/emotional illnesses, and situational stressors/crises may all be reasons for violent behavior. Direction for care or treatment of patients behaving in a threatening or violent manner will be decided upon by the healthcare provider or physician in charge. Exception: In the event that the patient’s behavior poses an imminent danger to the safety of staff members, other patients, or visitors, direction toward resolution of the incident will be handled by security or law enforcement personnel, if involved. Discharge from care or service for continuing violence will be determined by the director of risk management and/or administrative supervisor in conjunction with the healthcare provider. The appropriate senior administrator will be advised of the situation.

H. Visitor Conduct

Physical/mental/emotional illnesses and situational stressors/crises may all be reasons that precipitate violent behavior. However, if a visitor displays violent behavior, a staff member will explain to the visitor that any behavior which is threatening or violent in nature is not acceptable, and if the behavior continues, the involved person(s) will be asked to leave the premises. Security and/or police may need to be involved. In the event that the visitor’s behavior poses an imminent danger to the safety of employees, patients, or other visitors, direction toward resolution of the incident will be determined by security or law enforcement personnel, if involved.

I. Employee Post-Assault Management

1. Assist the staff member, if injured, to receive medical services.
2. Ensure that the staff member’s manager/supervisor and security have been notified.
3. Encourage the staff member, if able, to document the incident via the event reporting program. Documentation should describe the event and factors surrounding the event, including where it occurred, condition of patient or visitor, injuries sustained, and if medical treatment was obtained. Injuries should be recorded and submitted via a healthcare worker event report form. If the staff member is unable to provide this documentation, a colleague and/or manager should do so.
4. Security or site manager will notify police, as appropriate, with staff member’s consent.
5. The staff member’s manager should encourage involved staff members or witnesses to a violent act to use the Employee Assistance Program, as may be needed.

J. Guidelines for Responding to Telephone and Written Threats

1. Telephone Threats:
   a. Notify the appropriate manager/supervisor immediately. Note the time, date, and telephone number at which the threat was received.
   b. If the threat involves an imminent act of violence, such as a bomb threat, report it immediately to the operator/code line for overhead paging, in accordance with bomb threat procedures.
   c. If the threat is not imminent, report the threat to security. Security personnel will decide on whether to involve law enforcement.
   d. The staff member shall complete/submit a safety event report. The supervisor/director should then complete an investigation and forward the event report to risk management, as applicable.
2. Written Threats:
   a. Notify the appropriate manager/supervisor immediately. Handle the written material and any envelopes as little as possible, and then only by the corners.

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Place both the written material and any envelope in a large envelope. Note the names of anyone who handled the material after its arrival.

b. If the threat involves an imminent act of violence, such as a bomb threat, report it immediately to the operator/code line for overhead paging.

c. If the threat is not imminent, report the threat to security. Security personnel will decide on whether to involve law enforcement.

d. The staff member shall complete/submit a safety event report. The supervisor/manager should then complete an investigation and forward the event report to risk management, as appropriate.