



General and High-Risk Department-level Prevention of Workplace Violence Environmental Risk Assessment
 (Title 8, CCR, Ch. 4, Section 3342 – Cal/OSHA Workplace Violence Prevention in Health Care) - Due March 4, 2022

Department / Service Laboratory & Pathology	Date(s) of Assessment 3/2/22	Name of Person(s) Conducting Assessment Janice Wolf
<p>This assessment tool is designed to assist Department or Service-level Plan Owner(s) with identifying and evaluating general and unique workplace violence risks confronting their staff while on the campus, within the facility and within their department(s). This tool is to recognize and consider historical hazards and risks (minimally – past 12 months), as well as current hazards and risks that are confronting staff. It is to be used to engage and solicit participation from department/service-line staff and representatives in order to develop, implement and review the Workplace Violence Plan, as well as gain greater insight and obtain solutions and/or alternatives for making the workplace a safer environment.</p> <p>Results of the assessment are to be used to coordinate, develop, implement and review on-going Plans of Protection with department staff, representatives and other employers whose staff work in the identified locations.</p> <p>The Department Plan owner will provide results of the assessment to all relevant stakeholders in order to integrate recommendations to the Campus/Facility Master Plan of Protection.</p>		

Community, Campus and Building Risk & Hazard Recognition				
Risk Factor or Task	Observation(s) /Actions	Supplemental information	Yes/No (When)	Observation(s) or Corrective Action(s)
Plan Owner Identification	Does your Staff and Representatives know who is responsible for implementing your Department and Campus Workplace Violence Plan?	<p>-MCAT is the Plan Business Owner(s).</p> <p>-The Custodian of the PWPV Plan is the Assistant Medical Center Administrator of Support Services</p> <p>-The committee members are made up of Management / Labor partners that collectively work together to reduce violence in the workplace.</p>	<p>No</p> <p>3/25/22</p>	<p>Campus: MCAT/ Assistant Medical Center Administrator of Support Services</p> <p>Department: Janice Wolf</p> <p><i>This information will be shared at huddles, posted on the huddle board, and emailed to staff for review prior to 3/25/22.</i></p>
Community-based, Environmental Risk Factors 	Have you discussed with your staff and representatives the criminal activity and crimes of violence activity that may have effect on your campus, facility or department / service (minimally, past 12 months and current)?	<p>-Kaiser Permanente uses the CAP Index® CRIMECAST Model to forecast crime and risk in the neighborhoods surrounding the medical centers.</p> <p>- The CAP Index® CRIMECAST Model is based upon the strong relationship that exists between a neighborhood’s “social demographics” and the amount of crime that is perpetuated there.</p> <p>- CAP scores range from 0 (lowest risk) to 2000 (highest risk) and indicate the risk of crime at a site compared to an average of 100.</p> <p>-South Bay Medical Center is projected to have a score of 143 out of 2,000 in 2022. A score of</p>	<p>No</p> <p>3/25/22</p>	<p><i>This information will be shared at huddles, posted on the huddle board, and emailed to staff for review prior to 3/25/22.</i></p>

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		<p>143 indicates that there is low risk of staff being involved in any of the crimes listed below.</p> <table border="1"> <thead> <tr> <th colspan="2">National</th> <th colspan="3">This Site's Scores</th> </tr> <tr> <th>CRIMECAST CATEGORY</th> <th>PAST 2019</th> <th>CURRENT 2021</th> <th>PROJECTED 2022</th> <th></th> </tr> </thead> <tbody> <tr> <td>CAP Index</td> <td>151</td> <td>145</td> <td>143</td> <td></td> </tr> <tr> <td>Homicide</td> <td>109</td> <td>173</td> <td>174</td> <td></td> </tr> <tr> <td>Rape</td> <td>104</td> <td>185</td> <td>174</td> <td></td> </tr> <tr> <td>Robbery</td> <td>164</td> <td>161</td> <td>158</td> <td></td> </tr> <tr> <td>Aggravated Assault</td> <td>106</td> <td>140</td> <td>121</td> <td></td> </tr> <tr> <td>Crimes Against Persons</td> <td>119</td> <td>138</td> <td>119</td> <td></td> </tr> <tr> <td>Burglary</td> <td>53</td> <td>57</td> <td>56</td> <td></td> </tr> <tr> <td>Larceny</td> <td>51</td> <td>43</td> <td>41</td> <td></td> </tr> <tr> <td>Motor Vehicle Theft</td> <td>271</td> <td>305</td> <td>293</td> <td></td> </tr> <tr> <td>Crimes Against Property</td> <td>60</td> <td>61</td> <td>59</td> <td></td> </tr> </tbody> </table>	National		This Site's Scores			CRIMECAST CATEGORY	PAST 2019	CURRENT 2021	PROJECTED 2022		CAP Index	151	145	143		Homicide	109	173	174		Rape	104	185	174		Robbery	164	161	158		Aggravated Assault	106	140	121		Crimes Against Persons	119	138	119		Burglary	53	57	56		Larceny	51	43	41		Motor Vehicle Theft	271	305	293		Crimes Against Property	60	61	59			
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<p>Exterior Campus, Environmental Risk Factors</p> 	<p>Have you discussed with your Staff and Representatives the criminal and crimes of violence activity that has occurred on your exterior campus (minimally, past 12 months and current)?</p>	<p>In 2021, the following violent or criminal activity have been reported to Security:</p> <table border="1"> <thead> <tr> <th colspan="2">South Bay Medical Center</th> </tr> </thead> <tbody> <tr> <td>Assault</td> <td>9</td> </tr> <tr> <td>Battery</td> <td>5</td> </tr> <tr> <td>Burglary</td> <td>10</td> </tr> <tr> <td>Damage Property</td> <td>0</td> </tr> <tr> <td>Disturbing the Peace</td> <td>409</td> </tr> <tr> <td>Sexual Assault/Rape</td> <td>0</td> </tr> <tr> <td>Theft/Personal</td> <td>21</td> </tr> <tr> <td>Theft Property</td> <td>9</td> </tr> <tr> <td>Threat</td> <td>153</td> </tr> <tr> <td>Vehicle Theft</td> <td>9</td> </tr> <tr> <td>Total</td> <td>623</td> </tr> </tbody> </table>	South Bay Medical Center		Assault	9	Battery	5	Burglary	10	Damage Property	0	Disturbing the Peace	409	Sexual Assault/Rape	0	Theft/Personal	21	Theft Property	9	Threat	153	Vehicle Theft	9	Total	623	<p>No 3/25/22</p>	<p>This information will be shared at huddles, posted on the huddle board, and emailed to staff for review prior to 3/5/22.</p>																																				
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<p>Building, Environmental Risk Factors</p>	<p>Have you discussed with your staff and representatives the criminal activity and crimes of violence that have occurred within your building (minimally, past 12 months and current)?</p>	<p>(Please see attached on page 8.)</p>	<p>No 3/25/22</p>	<p>I am aware of the incidents occurring in the various buildings in the past 12 months. I have staff in most buildings.</p> <p>This information will be shared at huddles, posted on the huddle board, and emailed to staff for review prior to 3/25/22.</p>																																																												

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Department or Service Risk and Hazard Recognition				
Risk Factor or Task	Observation(s) /Actions	Supplemental information	Yes/No (When)	Observation(s) or Corrective Action(s)
Department or Service, Environmental Risk Factors – Other Incidents	Have you identified and discussed with your staff and representatives, “other” workplace violence incidents of concern; including threatening behavior that adversely affects a violence free work environment within your department or service delivery? These incidents may or may not have been reported to security (minimally, past 12 months and current).past 12 months and current)?	<p>The following chart illustrates threatening behaviors that affects the workplace:</p> <p>Level 1: Service Recovery - verbal or dissatisfaction without a specific or implied threat of violence.</p> <p>Level 2: Intimidation/Foul Language/Vague Threat - No specific threat has been made but behavior causes staff to feel intimidated.</p> <p>Level 3: Indirect Threat, Inappropriate Sexual conduct - Verbal threat to commit an act of violence; perceived as “general” in nature. Inappropriate sexual comment or conduct.</p> <p>Level 4: Identifiable target - A threat of violence, usually to an identified target, but lacking immediacy with or without a specific plan.</p> <p>Level 5: Act of Violence - An act of violence has been committed against an individual staff member or the members of a specific department. Weapon sighted.</p> <p>-Escalation and notification to Security and your Manager helps contribute to staff & physician awareness, increased communication and training to make the workplace safer.</p>	YES	We have not had any threat management cases. These items are covered in our routine rounding activities, huddles, and drills.
Department or Service, Environmental Risk Factors – General Engineering Controls	Have you discussed with your Staff and Representatives department space configuration and furnishing placement opportunities to minimize opportunities for staff evacuation, lighting, patient lines of sight improvement or other engineering controls (e.g. card readers, barrier enhancements or alarms) that would reasonably assist with reducing workplace violence risks?	<p>- To reduce workplace violence risks, ensure all doors are secured, locked, operating properly & not propped open.</p> <p>- Ensure that department is properly lit and furniture in exam room & offices are set up so that staff and providers can easily evacuate (ex. Avoid having your back to the doorway, reposition desk to</p>	YES	These items are covered in our routine rounding activities, huddles, and drills.

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		<p>face door, consider adding a mirror to decrease blind spots in office)</p> <p>-Staff should be educated on how to use the KP Secure App on their computers and iphone.</p>		
<p>Department or Service, Environmental Risk Factors – Work Practice Controls</p>	<p>Have you discussed with your Staff and Representatives Work Practice Controls that would reasonably assist with reducing workplace violence risks (minimizing or removing furnishings or objects that can be used as improvised weapons, means of improving alerting security, establishing effective response plans, special procedures for isolated work locations?</p>	<p>-Assess workspace to ensure that it is clear and free of objects that can be used as weapons</p> <p>- For all emergency situations contact Security directly (on-campus 6500) or 911 (off-campus)</p> <p>- Ensure staff are aware of lockdown and evacuation procedures (ex. Code silver or active shooter). Staff should know where all stairwell and emergency exits are located.</p>	YES	<p>These items are covered in our routine rounding activities, huddles, and drills.</p>
<p>Department or Service, Environmental Risk Factors – Workplace Violence Hazard Correction</p>	<p>Have you discussed with your Staff and Representatives, procedures to correct workplace violence hazards in a timely manner? (Imminent Hazards – protected immediately; Serious Hazard within 7 Days)?</p>	<p>-Imminent hazard (ex. Assault, bodily injury or hospitalizations) require a 24-hour remediation.</p> <ul style="list-style-type: none"> • Violent incidents as a result of an assault requires notifying law enforcement, Security, and Environmental Health & Safety. • Violent incidents that result in bodily injury or hospitalization are reported to CAL OSHA and law enforcement. <p>-Serious hazard (ex. Verbal threat, property damage/vandalism) require a 7-day correction deadline examples include reporting to threat management team or Security.</p>	YES	<p>These items are covered in our routine rounding activities, huddles, and drills.</p>

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Department or Service Administrative Requirements				
Risk Factor or Task	Observation(s) /Actions	Supplemental information	Yes/No (When)	Observation(s) or Corrective Action(s)
Active involvement of Staff and representatives	Have you discussed with your staff and representatives the procedures to review & implement changes to the Workplace Violence Plan?	The Prevention of Workplace Violence Plan is reviewed and updated annually. Suggested revisions can be sent to the PWPV committee.	YES	This was communicated in 2021 and will be shared again at huddles, posted on the huddle board, and emailed to all staff before 3/25/22.
Supplemental Workers	Have you coordinated the Workplace Violence Plan with “other” employers whose staff work on the campus, within the facility, or within your department? Do you ensure those employers and their staff have a role in implementing the Workplace Violence Plan? Do you ensure those employers and their staff are properly training? Does the procedure ensure those employers and their staff reports are investigated and feedback provided?	-Supplemental workers include contracted nurses or staff, volunteers, per diems, etc. -Contracted staff and vendors working in your departments should also be familiar with the PWPV Plan and receive the same training as KP staff. -All contracted workers must complete KP Learn course (ID: SAF:NEHS 22 11270_ANNUAL Safety Training)	YES	This was communicated in 2021 and will be shared again at huddles, posted on the huddle board, and emailed to all staff before 3/25/22.
Non-retaliation (Reporting)	Do you have a procedure for informing staff and representatives of KP’s Non-Retaliation Policy which prohibits and disallows taking punitive or retaliatory action against individuals who report acts or threats of violence; or who seek assistance and intervention from, internal KP resources, local emergency services or law enforcement?	-Kaiser Permanente has a Nat’l policy prohibiting retaliatory actions.	YES	This information is included in department orientation and annual compliance training.
Workplace Violence Communications	Do you have a procedure to communicate with staff regarding Workplace Violence matters? How to document/communicate conditions that increase potential incidents with other staff members? How to report violent incidents, threats or concerns? How concerns are investigated, how staff is informed of the results of an investigation.	-Dept huddles, meetings, and Medical Center Huddle Headlines. Violent incidents are reported through VIR and TMT SharePoint site. -Threat Management action items and conclusions to investigations are shared with Department Administrators. -Department Administrators are responsible for circling back with the staff on the conclusion of the investigation.	YES	This was communicated in 2021 and will be shared again at huddles, posted on the huddle board, and emailed to all staff before 3/25/22.
Post Incident Response	Do you have, and have you discussed with your staff and representatives, procedures to: (1) Provide immediate medical care or 1 st aid to all affected by incident, (2) identify all Staff involved in the incident, (3) provide	-It is important to debrief any incidents that has impacted staff. -Provide EAP and emotional support for staff & physicians	YES	This was communicated in 2021 and will be shared again at huddles, posted on the huddle

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	post trauma counseling (EAP), (4) conducting post incident debriefing for all involved, (5) review of all patient –specific risk factors & risk reduction measures, (6) review if correct action measures where effectively implemented, and (7) solicit from injured & affected staff opinion regarding cause and if other measure would have prevented the injury.	post event. -If necessary, develop a cause map or root cause analysis that involves staff, management and Risk Management and/or Threat Management.		board, and emailed to all staff before 3/25/22.
Workplace Violence Reporting	Do you have a procedure for discussing with staff and representatives the expectation of immediately reporting to Security and Manager/Supervisor (1) Threatening behavior (2) The use of force against a hospital employee (3) An incident involving the use of a weapon, regardless to whether the staff member sustains an injury? Is there a procedure in place that complies with the state regulatory reporting requirements (content and timelines) (if applicable)?	-Escalate to your Manager or House Supervisor in real time. -Call Security (if needed) -All workplace violence incidents should be reported to your Manager. The Manager is responsible for submitting violent incidents/via the SFR/VIR system. -All threatening behavior should be reported by submitting a threat report. -The Environmental Health and Safety Manager will notify Cal/OSHA of all incidents resulting in serious bodily injury or death.	YES	This is covered in “See Something/Say Something” discussions and huddles.
Training	Do you have an effective procedure for obtaining the active involvement of staff and their representatives in developing training curriculum, training materials, conducting training sessions, and reviewing and revising the training program? Are timelines and content consistent with the state regulatory guidelines (if applicable)?	-Online KP Learning module training. -Situational & de-escalation training, ie Neurology, Urgent Care, Service Representatives and Screeners training. (Course ID: CPL:SCAL FRNT SSRE 2021, Class ID: 0000889019) -Vistelar training that replaces MOAB, CPI & EVADE.	YES	KP Learn Courses completed by staff and on-going department safety meetings.
Recordkeeping	Do you keep: 1. Records of workplace hazard identification (assessments), evaluations and corrective actions 2. Training records Violent Incident Logs Violent Incident Reports – injury or non-injury Violent incident injury investigations	All records and violent incidents are tracked by the Environmental Health & Safety Manager.	YES	Hazards etc. are tracked on the Workplace Safety Action Log. Training are tracked via KP Learn transcripts.

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Annual Review	<p>Is the Plan reviewed annually (department-level) with staff and representatives on the department-level assessments/ plans, respective work areas, community/common areas, services, operations, as they relate to the Prevention of Workplace Violence Plan?</p> <p>Does the review include an assessment of the prior year incidents, and include considerations for:</p> <ol style="list-style-type: none"> 1. Staffing and patient classifications systems 2. Appropriate security systems 3. Equipment and facilities 4. Security risks associated with specific areas (day/time/locations, etc.). <p>Are the results of the annual reviews used to revise the Prevention of Workplace Violence Plan as needed?</p>	<p>The PWPV Plan should be reviewed annually and discussed with staff.</p>	YES	<p>This was communicated in 2021 and will be shared again at huddles, posted on the huddle board, and emailed to all staff before 3/25/22.</p>

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Criminal Activity and Crimes of Violence By Building	
CNM - Carson North Medical Offices	12
Disruptive Behavior	2
Harassment	2
Theft - Facility	2
Theft - Personal	4
Threat	1
Vandalism	1
CRS - Carson Chemical Dependency Recovery	8
Disruptive Behavior	1
Sexual Misconduct	1
Theft - Facility	1
Trespass - Loitering	3
Vandalism	2
GAR - Gardena Medical Offices	5
Disruptive Behavior	2
Theft - Personal	3
HRB - South Bay Medical Center	162
Assault	15
Battery - Aggravated Assault	4
Burglary	11
Counterfeit Currency or Forgery	1
Death	1
Disruptive Behavior	55
Harassment	6
Robbery	1
Sexual Misconduct	2
Theft - Facility	13
Theft - Personal	26
Threat	9
Trespass - Loitering	10
Vandalism	7
Weapon	1
LBP - Long Beach Plaza Medical Offices	3
Disruptive Behavior	1
Harassment	1
Threat	1
MHB - Manhattan Beach Medical Offices	1
Disruptive Behavior	1
PKV - Parkview Medical Offices	1
Theft - Personal	1
SHM - Signal Hill Medical Offices	2
Disruptive Behavior	1
Theft - Facility	1
TOR - Torrance Medical Offices	1

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Off Property	1
Grand Total	195

Notes/Corrective Action: