

Workplace Violence: Faculty and Staff Incivility Policy

	Type:	Tier 2
	Effective Date:	March 2014
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	Contact:	Human Resources
	Date Approved:	June 2017

Approval Signature:

Typed Name and Title: Lilicia Bailey, Senior Vice President and Chief People Officer

1) General Policy Statement

It is the policy of Wake Forest Baptist Medical Center to create and maintain a safe and positive work environment. The Medical Center does not tolerate violence or incivility committed by a staff or faculty member in the workplace. Any staff or faculty member determined to be involved in workplace violence or intimidation will be subject to corrective action up to and including discharge. Situations involving a violent patient or visitor are addressed in the Violent and Abusive Patient/Visitor Policy.

a) Scope: All WFBMC Staff and Faculty

b) Responsible Department/Party/Parties:

i. Policy Owner: Human Resources

ii. Procedure: Human Resources, Security Services

iii. Supervision: Human Resourcesiv. Implementation: Human Resources

2) Definitions

For purposes of this policy, the following terms and definitions apply:

- a) WFBMC: Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Davie Medical Center (DMC), Lexington Medical Center (LMC) and all on-site subsidiaries as well as those off-site governed by WFBMC policies and procedures.
- b) **Workplace Violence:** Any threat or act of violence or intimidation against a staff/faculty member, patient, student, visitor, vendor or volunteer with the intent of causing physical or emotional harm.
- c) Incivility: Rude, discourteous or disrespectful behavior that shows disregard for others' feelings
- d) **Weapon**: Any object used to intimidate, inflict bodily harm, or kill such as firearms, knives or blades, brass knuckles, mace, pepper spray, etc.

3) Policy

- a) Workplace Violence
 - i. Examples of workplace violence include, but are not limited to:
 - a. Written, verbal or physical threat to harm
 - b. Offensive or threatening language
 - c. Coercive or harassing behavior that causes physical or emotional harm
 - d. Physical contact that is unwelcome and/or has the intent to cause distress or injury

- e. Approaching or threatening another person with a weapon
- f. Causing or attempting to cause injury or intimidation to another person
- b) All members of the Medical Center community are responsible for maintaining a safe work environment. Incidents of workplace violence or intimidation should be reported to a leader, an Employee Relations consultant, Medical Center Security Services or the Compliance Hotline. All reports under this policy will be investigated promptly and will be handled confidentially.
- c) Any staff/faculty member determined to be involved in workplace violence or intimidation will be subject to corrective action up to and including discharge. Where appropriate, the Medical Center will report acts of violence to proper authorities.

4) Procedures

- a) Emergency Situations
 - i. Example of an emergency situations are:
 - a. A weapon has been displayed, or a threat involving a weapon has occurred.
 - b. There is a hostage situation.
 - ii. In an emergency situation, the steps below should be followed:
 - a. Call 911 immediately.
 - b. Locations with on-site Security should also contact Security Services.
 - c. Security personnel are expected to report to the area immediately for employee safety and to facilitate law enforcement involvement.
 - d. In instances where making a direct call to Security is impractical, individuals may utilize available panic alarms or SPOT badge activation to summon assistance.
 - e. Personnel at off-site locations should maintain familiarity with site-specific emergency notification procedures.
 - f. When contacting Security or City/County 911 centers, provide all information possible.
 - g. If providing detailed information is deemed dangerous, provide the dispatcher with a request for help and allow the line to remain open.

b) Non-Emergency Situations

- i. A situation is considered a "non-emergency" if there is no immediate danger of physical harm, but the words or actions of an individual have caused concern for the safety of another individual.
- ii. Non-emergency concerns may be reported to a leader, Employee Relations, Security Services or the Compliance Hotline.

5) Incivility

- a) Examples of incivility include, but are not limited to:
 - i. Persistent singling out of one person
 - ii. Shouting/raising voice at an individual
 - iii. Obscene remarks or gestures
 - iv. Personal insults or offensive nicknames
 - v. Public humiliation in any form
 - vi. Continual criticism on matters unrelated or minimally related to the individual's job performance
 - vii. Public reprimands
 - viii. Deliberately interfering with mail or other communication
 - ix. Gossiping or spreading rumors about an individual
 - x. Manipulating an individual's ability to do his/her work
 - xi. Assigning menial tasks not in keeping with an individual's normal job responsibilities
 - xii. Ignoring or deliberately excluding an individual from work-related activities (e.g., meetings)
 - xiii. Physical abuse or threats of abuse to an individual or an individual's property (e.g., throwing objects, pounding on a desk or door, or defacing/destroying property)
- b) Incidents of incivility should be reported to a leader, Employee Relations, Security Services or the Compliance Hotline.
- c) All reports under this policy will be investigated and will be handled confidentially and appropriate actions will be taken.
- d) Any staff/faculty member demonstrating incivility in the workplace will be subject to performance improvement action up to and including discharge.

6) Questions

Questions regarding how the policy applies to a specific situation should be directed to Employee Relations at emprelations@wakehealth.edu.

7) Related Policies

Violent and Abusive Patient and Visitor Policy

8) Review/Revision/Implementation

- a) Review Cycle: This policy shall be reviewed by Human Resources at least every three years from the effective date.
- b) Office of Record: After authorization, the Legal Department shall house this policy in a policy database and shall be the office of record for this policy.