



TITLE:
WORKPLACE VIOLENCE

PURPOSE

The purpose of this policy is to **outline expectations for reporting and reviewing workplace violence events occurring within the organization.** ~~procedures for addressing and reporting acts of workplace violence.~~

DEFINITIONS

~~Workplace violence is defined as an incident where people are verbally or physically abused, threatened, harassed or assaulted in circumstances relating to their work, involving an explicit or implicit challenge to their safety, well-being or health.~~

Workplace violence events include any act or threat of physical violence, harassment, intimidation, or other threatening, disruptive behaviors that occur at one's place of employment.

These behaviors may involve or affect employees, patients, customers, clients, and visitors. Examples of possible interactions include:

- Staff member to staff member**
- Patient to staff**
- Family to staff**
- Staff to patient**
- Staff to visitor**
- Staff to family**
- Visitors to staff**
- Visitors to patient**
- Domestic violence**

Workplace violence events include, but are not limited to:

- Aggressive physical contact that may or may not result in a physical injury**
- Hitting**
- Biting**
- Scratching**
- Pushing**
- Shoving**
- Sexual assault**

Physical Threat of aggressive behavior that makes you feel uncomfortable

Verbal abuse using aggressive or inappropriate language that makes one feel threatened, scared, or uncomfortable

PROCEDURE

- 1. Reporting**
 - a. All staff will report any act of violence or injury to their Manager/Supervisor and Security. Immediately to Security and their supervisor or Manager/Supervisor. In situations of immediate danger or weapons involvement, Law Enforcement is to be notified at the same time as Security.**
 - b. Any staff member who witnesses an act of workplace violence will promptly immediately report the incident to Security and his/her Manager/Supervisor.**
 - c. An RDE will be placed promptly either by the staff member reporting or their Manager/Supervisor.**

Reviewed:

Revised: 12/12/2014, 1/18/2016

Once printed this document is no longer controlled.

- d. ~~The Manager/Supervisor will ensure that a Remote Data Entry (RDE) is completed on all acts of workplace violence.~~
 - e. **There is to be no delay in reporting of events, however, if there is, the Manager/Supervisor or staff member will promptly report all acts of workplace violence to Security and Risk Management. Security will determine if immediate action is necessary (i.e. Notification of Human Resources or Law Enforcement).**
 - f. All acts of workplace violence initiated by a staff member will be reported to Security and Human Resources for follow up action.
 - g. Staff members are encouraged to alert Security to potential problems including personal issues that may involve worksite safety.
2. Verbal De-escalation
 - a. Verbal de-escalation is the primary response for all staff. Physical intervention should only be used as a last resort and if the individual presents a danger to themselves or others.
3. Code Gray
 - a. Staff will dial the Security dispatcher/PBX/switchboard and request Security assistance. Staff will provide the dispatcher/operator with their name, location and a description of the event.
 - ~~b. On off-site locations, staff will call 911 and notify local law enforcement of the need for assistance.~~
 - c. The dispatcher/PBX/switchboard will notify all Security personnel of the event and provide the location. Security will make every effort to control the situation without additional personnel.
 - d. In the event additional personnel are needed, the dispatcher/PBX/switchboard will make an overhead announcement notifying staff of a "Code Gray" providing the location.
 - e. Available staff will respond to the location and provide assistance as needed. Staff will take instruction from the Supervisor in charge of the area or Security.
 - f. The Supervisor will release additional personnel as soon as possible.
 - g. Once the situation is resolved, the Supervisor or Security will notify the dispatcher who will make an overhead announcement "all clear."
4. Personnel Response
 - a. If present, only Security, clinical staff and designated staff who have been trained in crisis intervention will interact directly with the patient, visitor or employee during an event. Other staff members will assist in keeping others from the area until the situation is resolved.
 - b. Non-trained staff members may intervene only if it is safe to do so and specifically requested and directed by a member of the clinical staff or Security.
 - c. Staff will follow all procedures related to restraint and seclusion when dealing with patients
 - d. Security personnel will follow Security Guidelines related to arrest by private citizens and use of force.
5. Court Issued Restraining Orders

If a court issued restraining order is warranted, contact the Administrator On Call who will contact the Northern Arizona Healthcare's (NAH) Legal Department for process support. Restraining orders will be monitored by the Security Department. As appropriate, Security will notify Patient Access Services who will add an alert to Cerner, NAH's patient documentation system.
6. Investigation
 - a. All acts of workplace violence will be investigated by Security.
 - b. Reports involving staff members will be forwarded to Human Resources for review.
 - c. Managers/Supervisors retain the ability to take immediate action if needed to de-escalate an incident (Administrative Suspension) when needed.
 - d. Human Resources, Security and departmental management will determine disciplinary actions as outlined in Human Resources policies.
7. Incident Review
 - a. Incidents of workplace violence will be reviewed by Security Management, Human Resources, **Risk Management, and Administration/Leadership as needed.**
 - b. Security will conduct a ~~Hazard~~ **Security** Vulnerability Assessment on all areas of the hospital, at least annually, or when trends suggest a need to implement additional measures.
 - e. All trends in workplace violence will be reported and discussed at the ~~monthly meeting of the~~ Environment of Care (EOC) Committee and Workplace Violence and Safety Committee meetings.

Reviewed:

Revised: 12/12/2014, 1/18/2016

Once printed this document is no longer controlled.

These trends will be reported to the ~~FMC's Quality Results Council (QRC) and VMC's Board Quality & Safety Committee as needed.~~ **NAH Quality Results Council (QRC) at least twice annually, or as requested.**

8. Employee Evaluation

- a. A post incident evaluation, including psychological, as well as medical treatment, will be provided to employees who have been subjected to abusive behavior. This will be provided by the Emergency Department, Employee Health or through the Employee Assistance Program.

RELATED DOCUMENTS N/A

REFERENCES

OSHA Guidelines related to Workplace Violence

NAH, ~~FMC~~ and ~~VMC~~ Guidelines related to Restraint and Seclusion (NHP 300-16 Restraint Use)

Arizona Revised Statutes, Title 13

Reviewed:

Revised: 12/12/2014, 1/18/2016

Once printed this document is no longer controlled.