SUBJECT: VIOLENCE IN THE WORKPLACE

RATIONALE: To establish Craig Hospital’s policy against violence in the workplace and its dedication to maintaining a work environment free from intimidation, threats and violent acts.

SCOPE: All Departments, Medical Staff, Craig patients, family members and visitors

DEFINITIONS: Workplace Violence: Any threatening or aggressive behavior or verbal abuse that occurs in the work setting. This includes but is not limited to assault, battery, beatings, stabbing, suicide, shootings, rapes, near-suicides, psychological traumas, threats or obscene phone calls, being followed, sworn or shouted at; intimidation or harassment of any nature.

Zero Tolerance: Violence of any kind as defined above will not be tolerated in the workplace. Any incidents will be taken seriously and responded to according to the following procedures.

POLICY:

I. Craig Hospital is committed to the physical safety and emotional well being of its employees, patients, families, contractors, vendors, customers, visitors and others who interact with its employees. Craig takes a zero-tolerance position to violence in the workplace. Jokes or offensive comments regarding violent acts will be taken seriously and will not be tolerated.

II. No employee, patient, family, or other visitor is permitted to possess a weapon or weapons of any type on their person, in their locker or anywhere on or off Craig premises while working or representing Craig.
This ban extends to Craig owned vehicles and personal vehicles used for business or parked on Craig premises (Exception for Therapeutic Recreation sponsored and supervised sporting activities).

III. In an effort to promote a safe hospital environment, Craig reserves the right to conduct searches and inspections of all patient rooms, facilities, work sites, and Craig owned property without notice.

IV. The hospital Safety Officer is responsible and has authority for the comprehensive plan for prevention of workplace violence.

V. Hospital leadership supports zero tolerance of workplace violence through a system of accountability for involved managers and employees.

VI. Any employee found in violation of this policy may be subject to disciplinary action up to and including termination of employment. Violations will be addressed by human resources, management, administration and/or security.

VII. Any patient, family member or visitor found in violation of this policy may be subject to disciplinary action up to and including discharge from the hospital premises. Violations will be addressed by the physician, the treatment team, human resources, management, administration and/or security.

PROCEDURE:

I. Immediate response to a workplace violence incident:

A. Craig's Security Services should be notified (303-206-2115) of any potentially violent situations. Security personnel are authorized to respond and assist where necessary to de-escalate situations which are a threat to the safety of patients, staff, or visitors.

B. Depending on the severity of the situation, call 9-911.

C. If a weapon is involved, follow procedures for EMP 14 Response to Weapons, Code Silver

D. Specific procedures for a physically aggressive patient are followed per policy IP 34 Management of Agitated Behavior.

II. Hospital leadership helps prevent workplace violence by:
A. Developing the comprehensive plan for prevention of workplace violence, under the direction of the Safety Officer.

B. Disseminating a clear policy of zero tolerance for workplace violence in the orientation period and ongoing staff education.

C. Ensuring there are no reprisals against employees who report incidents, and keeping information confidential, as appropriate.

D. Educating employees to promptly report incidents and suggest ways to reduce or eliminate risks.

E. Implementing post violent incident procedures of employee support, debriefing, medical care for victims, referrals for care and reporting and filing claims, as appropriate.

III. Employee Responsibilities:

A. Immediately report to their supervisor, Administration or Human Resources any direct or indirect threats, or any behavior that is intimidating, violent or potentially violent, or otherwise in violation of this policy, and complete an incident report (RI 24 Incident Report) as soon as possible after the event.

   1. If the incident involves a patient’s behavior towards an employee, the attending physician will be notified.

   2. In cases of domestic violence involving the employee, the employee may report this to their supervisor and/or Human Resources so security options for the employee can be provided.

B. Understand and comply with the workplace violence prevention program and other safety and security measures.

IV. Environmental controls include the following:

A. Alarm systems and other security devices (switchboard duress button).

B. Closed circuit video recording for high risk areas.

D. Review of security logs in Safety Committee.

E. Door locking security plan.
F. Periodic physical walk-through to determine potential safety issues by the Safety Officer and Director of Engineering.

V. Administrative and Work Practice Controls:
   A. If possible, obtain information on patients including history of violence prior to admission. Security risk is then evaluated and safety measures are implemented by the treatment team as appropriate.
   B. State clearly to patients, families and employees that any threatening or aggressive behavior or violence will not be tolerated or permitted. Staff should review the zero tolerance policy with patients and or families as needed.
   C. The employee is responsible to report all threats or bodily harm.
   D. Conduct drills to test facility response to a violent event.
   E. Establish liaison with local police and state prosecutors.

VI. Training and education is provided to staff regarding workplace violence prevention:
   A. Response to alarms and pages.
   B. Causes and early recognition of escalating violent behavior.
   C. Diffusion of volatile situations.
   D. Multi-cultural sensitivity.
   E. Methods for dealing with distraught patients, family members or friends of patients.
   F. Location and operation of safety devices.
   G. How to call security and police department.
   H. Review of the Violence in the Workplace policy.

VII. Record Keeping and Evaluation:
   A. Monitoring of workplace violence will be done through the Safety Committee including monitoring of the OSHA log, security reports and
incident reports to determine overall effectiveness of workplace violence prevention and to identify deficiencies or changes that should be made.

B. A record of all training programs will be maintained.

C. Trends will be identified and responded to by the Safety Committee.

VIII. Policies Related to Workplace Violence:

A. **HR 45 Sexual Harassment** – states the hospital has no tolerance for sexual harassment.

B. **RI 35 Victims of Abuse and Neglect** – states that employees have the responsibility to report injuries or suspected abuse, exploitation or neglect to law enforcement or Social Services.

C. **RI 19 Patient Rights and Responsibilities** – states patients have the responsibility to show respect and consideration to hospital personnel and property.

D. **MS 12 Impaired Practitioner-Disruptive Behaviors**– prohibits and provides consequences for disruptive behavior by medical staff members (e.g., verbal or physical abuse of nurses by physicians).

E. **IP 34 Management of Agitated Behavior** – defines methods used to de-escalate agitated behavior, and to manage physically aggressive patients after verbal interventions have failed to produce a safe environment.

F. **EMP 14 Response to Weapons – Code Silver** - To minimize the risk to all patients, visitors and staff and to provide assistance when confronted by an individual brandishing a weapon, or one who has taken hostages within the healthcare facility or within its property by force.

References: OSHA Internet site [www.osha.gov](http://www.osha.gov)