

Workplace Violence Prevention Program

Relevant Statutes, Standards, and Policies

- New York State Labor Law, Section 27-b
- NYCRR Part 800.6 and Part 801.39
- OPWDD Domestic Violence in the Workplace policy
- PROMOTE Training

This policy and program does not negate the requirement to follow all other existing laws, regulations, and policies that govern the New York State Office for People With Developmental Disabilities ("OPWDD").

Applicable Definitions:

Workplace Violence Prevention Program Coordinator: The Workplace Violence Prevention Program Coordinator is responsible for overall implementation of the workplace violence prevention program locally.

Workplace Violence Prevention Committee: Consists of Authorized Union Representatives and OPWDD management at each of our DDSOOs.

Risk Assessment Team: A subset of the WVP Committee that conducts the workplace Risk Assessments.

Workplace: Any location away from an employee's home, permanent or temporary, where an employee performs any work-related duty.

Imminent Danger: Any conditions or practices in any place of employment which are such that a danger exists which could reasonably be expected to cause death or serious physical harm immediately or before the risk of such danger can be eliminated through the enforcement procedures of the workplace violence prevention program.

Serious Physical Harm: Physical injury which creates a substantial risk of death, or which causes death or serious and long-term disfigurement, protracted impairment of health or long-term loss of the function of any bodily organ, or a sexual offense as defined in Article 130 of the Penal Law.

Risk: Any condition with potential of physical assault, threatening behavior, or verbal abuse in the workplace.

The Four Types of Workplace Violence:

- Type 1: Criminal Intent (stranger): The perpetrator has no legitimate business at the workplace. For example, he/she is there to commit robbery or assault.
- Type 2: Customer/Client/Patient: The perpetrator has a legitimate reason to be at the workplace, but perpetrates workplace violence, nonetheless.
- Type 3: Co-Worker: The violence is perpetrated by a fellow employee, be it a peer, supervisor, or subordinate.
- Type 4: Personal: The perpetrator is a partner, family member or friend. This includes domestic violence which occurs in the workplace.

Procedures:

OPWDD prohibits threats and acts of violence against all persons working at OPWDD. Violations of this policy by any person will be subject to legal action as appropriate. Violation of the Policy by OPWDD personnel may lead to disciplinary action up to and including termination, in accordance with applicable law, regulation, policy, and/or collective bargaining agreement. An employee's right to pursue a criminal complaint shall not be infringed upon.

OPWDD personnel are not expected to endure acts of violence. If a violent situation should arise that is out of your control and level of training:

- Remove yourself and others from immediate danger.
- Summon help by dialing 9-1-1 or through established internal means.
- Seek appropriate treatment for acute injuries.
- · Complete and submit an incident report form as soon as practical.

The OPWDD Workplace Violence Prevention Plan is designed to prevent, minimize, and respond to physical assault and threatening behavior where an employee performs work-related duty in the course of his or her employment. The Workplace Violence Prevention Plan includes the following components:

- Workplace Examination and Mitigation of Risks: On an annual basis, or more often as necessary
 when there are changes in risk factors, an assessment of risks of violence where an employee works
 should be made by the Risk Assessment Team. When a specific hazard is identified, the means and
 method of mitigating the risk will be addressed. These measures may include engineering controls,
 administrative controls, training, and/or clinical review/interventions.
- Risk Assessment Evaluation: Each workplace location will be reviewed by the Risk Assessment Team.
 The Team will make further recommendations to the committee, if indicated, for corrective actions and for opportunities for environmental safety improvements. In addition, the committee will review summary data on workplace violence incidents at least annually. The committee will assure that data regarding workplace violence incident injuries is kept separate from data regarding injuries due to other events. The committee will analyze trends, and offer systemic recommendations for the agency.
- Training: See "Employee Information and Training" section of this policy.

• Reporting and Investigation of Workplace Violence Incidents: Employees are required to immediately report incidents of threats or acts of violence in the workplace of which he or she is aware. In cases where the reporting individual is not a state employee, reports should be made to the appropriate area supervisor and/or to the OPWDD Safety and Security Office. In cases where the reporting individual is a state employee, the report shall be made to the individual's immediate supervisor or his or her designee. The supervisor will contact the Administrator on Duty (AOD), who will determine the need to contact the Regional Director or Administrator on Call for further action.

When there is a serious risk of violence to person(s) or property, call 9-1-1 immediately, or Safety and Security, if applicable.

A Workplace Violence Reporting Form is to be completed for each incidence of workplace violence by the supervisor if the employee is unable to complete the form. The form is to be submitted as soon as possible. In instances where an employee believes that a workplace violence episode is a result of the supervisor's actions, the reporting form may be submitted directly to the Workplace Violence Prevention Program Coordinator. The Workplace Violence Prevention Program Coordinator will investigate the circumstances of the episode, identify and record any actions which will be taken in response to the episode, and will ensure that any follow-up training/counseling is obtained and completed. The completed form will be sent to the WVP Coordinator for review and follow up. Within 30 days of the incident, the OPWDD Office of Safety and Security will review the episode and make recommendations for further corrective action when indicated and for opportunities for OPWDD systemic improvements. All incidents must be investigated regardless of the wishes of the employee. All incidents will be promptly, thoroughly and fairly investigated. The investigation may include, as necessary, document review, witness interviews, and the interrogation of the alleged violator(s).

The Workplace Violence Reporting Form is to be completed in addition to other required documentation and notification procedures (accident report located on OPWDD Intranet). Consistent with New York State and Federal regulations, reporting to local law enforcement authorities will be completed if it appears that a crime may have been committed.

- **Support to Affected Employees:** OPWDD supports employees who are impacted by a workplace violence incident through the availability of appropriate services:
 - Necessary first aid and medical care, to include community-based EMS response as appropriate.
 - Employee consultation with his/her own existing medical providers (medical, counseling services, etc.).
 - Voluntary referral to the OPWDD Employee Assistance Program (EAP) for support and appropriate referrals.
- Employee Complaint Procedure: An employee who believes that a violation of the Workplace Violence
 Prevention Program has occurred shall immediately notify his/her supervisor/Department Head and shall
 allow OPWDD a reasonable opportunity to address such activity, policy or practice. If an employee
 believes that the violation remains, he/she may contact, in writing, the New York State Commissioner of
 Labor.

Complaints

Any OPWDD employee or their representative who believes that a violation of OPWDD's workplace violence prevention program has occurred or that a workplace violence imminent danger exists, shall bring such matter to the attention of a supervisor/contact person in the form of a written notice and shall afford OPWDD a reasonable opportunity to correct such activity, policy, or practice. "Imminent danger" is defined as "any conditions or practices in any place of employment which are such that a danger exists which could reasonably be expected to cause death or serious physical harm immediately or before the imminence of such danger can be eliminated." "Serious Physical Harm" is defined as "impairment of the body so as to render the body part affected functionally useless or substantially reduced in efficiency."

If, following a referral of such matter to a supervisor/contact person, and after a reasonable opportunity to correct such activity, policy or practice, the matter has not been resolved, and the employee or the employee representative still believes that a violation of a workplace violence prevention program remains or that an imminent danger exists, such employee may request an inspection by giving notice of an alleged violation to the **Commissioner of Labor**. Such notice shall be in writing, and shall set forth with reasonable particularity the grounds for the notice.

Written notice to OPWDD shall not be required where imminent danger exists to the safety of a specific OPWDD employee or to the general health of a specific individual in care and the employee reasonably believes in good faith that reporting to a supervisor would not result in corrective action.

A representative of OPWDD and an authorized employee representative shall be given the opportunity to accompany the Department of Labor during an inspection for the purpose of aiding such inspection. Where there is no authorized employee representative, the Director of Labor shall consult with a reasonable number of employees concerning matters of safety in the workplace.

RESPONSIBILITIES AND PROCEDURES

Responsibility

- All Employees
 - To the extent possible, and within the level of training, ensure the safety of everyone in the area.
 - If the Workplace Violence involves an injury requiring immediate attention or if there is a serious risk of violence to person(s) or property; call 911 immediately, prior to other notifications.
 - Contact supervisory staff and OPWDD Safety and Security as soon as possible.
 - Complete OPWDD Workplace Violence Reporting Form.
- Workplace Violence Prevention Committee/ Risk Assessment Team
 - Assess relevant policies, work practices, and procedures that may impact the risk of workplace violence.
 - Review and facilitate the methods and means by which each specific hazard identified in the evaluation is being addressed and forwards his/her comments to the TTL, if/as necessary.

- Files workplace violence assessment/risk evaluation at work site and forwards a copy to the Workplace Violence Prevention Program Coordinator.
- Completes annual assessment with direct input from worksite staff and union representatives.
 Updates current assessment immediately in the event of a WV incident and/or if a new risk is identified. Addresses methods of reducing the risk, such as: engineering controls, training, and/or clinical reviews/intervention.

Department Head/AOD

- Reviews reported information in the WV incident form, and ensures the safety of individuals, staff and site.
- Determines need to contact the Regional Director/Administrator on Call ("AOC") for further action.
- If an employee dies at work, regardless of the cause, or two or more employees are hospitalized and admitted as a result of a work-related incident, the NYS Department of Labor ("DOL"), Division of Safety and Health (DOSH) will be notified within 8 hours of occurrence.

Regional Director/AOC

- If necessary, provides Commissioner with detailed summary of incident and response actions.
- Notifies nearest office of the NYS DOL, DOSH, within 8 hours of an employee death or the hospitalization of two or more employees as a result of a work-related incident. (12 NYCRR Part 801).
- If emergency personnel decide evacuation is needed, determine a safe evacuation site, and direct all staff to report to the evacuation site.
- Complies with the decision of emergency personnel on re-entry into the building.
- If person(s) causing the crisis situation is no longer in the building, relies on law enforcement to exercise the responsibility for preventing that person from re-entry.
- In the event of a dangerous situation, ensures that OPWDD personnel take direction and cooperate fully with trained emergency professionals required for the continued protection and safety of individuals and staff without placing anyone at risk.

DIHRM

Coordinates, when needed, all communication with immediate relatives of employees.

Workplace Violence Program Prevention Committee

- Reviews Workplace Violence Reporting Form to ensure that relevant information/details are complete and that preventive actions are appropriate and reasonable to mitigate the chance of recurrence of a similar episode.
- Ensures that any follow-up training/counseling identified on Reporting Form for staff/individuals is completed.

- Reviews information on Reporting Form. Requests any other data necessary for completion of their incident review.
- Reviews the Workplace Violence Reporting Form responses and outcomes and ensures the completion of the form within 30 days of the incident.
- Makes recommendations for further corrective actions and for opportunities for OPWDD systemic improvements and through an annual records review.
- Files all Workplace Violence Incident Forms for future analysis and trending, ensuring that data regarding such incidents is kept separate from data regarding injuries/other health and safety matters unrelated to workplace violence.

Employee Information and Training

Employee training is required upon initial hire, and annually thereafter. Retraining is required any time there is a significant change to the program, a risk factor or work control. Training topics include the following:

- Requirements of the workplace violence regulations.
- Details of the risk factors identified in the risk assessment and OPWDD's procedures for conducting the risk assessment.
- Description and details of OPWDD's written Workplace Violence Prevention Program (WVPP)
- How to obtain a copy of the WVPP and where it is kept.
- Measures implemented to protect employees, report threats and incidents, and suggest improvements to the program.
- How to obtain post-incident crisis counseling.
- How to deal with potentially violent individuals, patients, coworkers, and others.
- How to initiate an emergency alerting system for imminent danger situations or when staff needs
 emergency assistance. Examples of these systems include personal alarm devices, codes, and panic
 alarms. Assigning and training appropriate personnel to respond is a key component of these systems.
- Incident alert and notification procedures.
- Appropriate work practices.
- Emergency procedures.

Recordkeeping

The recordkeeping requirements outlined in 12 NYCRR Part 801, Recording and Reporting Public Employees' Occupational Injuries and Illnesses, must be used for workplace violence incidents.

These reports will provide written notification when a violent incident occurs so that management can develop an appropriate response. Also, the Incident Report will create a historical record that can be used in the key risk assessment and program evaluation.

The purpose of maintaining records is to enable the employer to monitor its ongoing efforts, to determine if the workplace violence prevention program is working, and to identify ways to improve it. Employers may find the following types of records useful for this purpose:

- Records of employee and other injuries and illnesses at the establishment.
- Records describing incidents involving violent acts or threats, even if the incident did not involve an injury
 or a criminal act. (Records of events involving abuse, verbal attacks, or aggressive behavior can help
 identify patterns and risks that are not evident from the smaller set of cases that actually result in injury or
 crime.)
- Written risk evaluation.
- Recommendations of police advisors, employees, or consultants.
- Up-to-date records of actions taken to deter violence, including work practice controls and other corrective steps.
- Notes of safety meetings and training records.

Program Effectiveness and Evaluation

The WVPP Committee will evaluate the effectiveness of the plan at least annually or after serious incidents. The review should focus on incident trends and the effectiveness of the control measures. The review should also assess whether the reporting and recordkeeping systems have been effective in collecting all relevant information.

Discrimination and Retaliation

Employees will not be discriminated against or face retaliation for bringing forth a safety and health concern, for filing a complaint, or for participating in or causing any proceeding or inspection related to this program.

OPWDD shall not take retaliatory action against any public employee because the public employee takes action pursuant to this procedure. "Retaliatory Action" is defined as "the discharge, suspension, demotion, penalization, or discrimination against any public employee, or other adverse employment action taken against a public employee in the terms and conditions of employment."

Post-Incident Response

Post-incident response and evaluation are important components of an effective WVPP. This involves standard operating procedures for management and employees to follow in the aftermath of a violent incident. Procedures include the following:

- Assuring that the injured employees receive prompt and appropriate medical care. (This includes, but is
 not limited to, providing transportation of the injured to medical care. Prompt first aid and emergency
 medical treatment can minimize the harmful consequences of a violent incident.)
- Reporting the incident to the appropriate authorities as required by applicable laws and regulations.

- Informing management about the incident in writing.
- Securing the premises to safeguard evidence and reduce distractions during post-incident response processes.
- Preparing an incident report immediately after the incident, noting details that might be forgotten over time
- Addressing the need for appropriate treatment for victimized employees. (In addition to physical injuries, victims and witnesses may suffer psychological trauma, fear of returning to work, feelings of incompetence, guilt, powerlessness, and fear of criticism by supervisors or managers.)

If employees need assistance after the incident, supervisors can assist them by setting up meetings with the Statewide EAP and/or outside clinical staff. After the occurrence of a workplace violence incident or annually, OPWDD, with the participation of the Authorized Employee Representative, will conduct a review of the workplace violence prevention plans.

Appendices:

- A. Workplace Violence Prevention Program Contact List (which includes the WPV Coordinators).
- B. Workplace Violence Prevention Risk Assessment Form
- C. Statewide Workplace Violence Incident Form
- **D.** Sample Summary of Workplace Violence Prevention Worksite Assessment (lists site specific risk factors Identified in the workplace).
- E. OPWDD Training Outline.

Appendix A:

Workplace Violence Prevention Program (WVPP) Contact List

Central Office

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Title		Name	Contact Info
OPWDD WVPP		Interim Contact:	Work: 518-473-4200
Coordinator/Administrator		Samantha Beck,	Email: samantha.beck@opwdd.ny.gov
		Employee	
00000		Relations	W 1 540 (50 0000
	ıman Resources	Christopher	Work: 518-473-9689
Managemei	nt	Siciliano	Email: Christopher.P.Siciliano@opwdd.ny.gov
		<u> </u>	W 1 540 400 7070
OPWDD Physical Plant and		Don Hughes,	Work: 518-486-7870
Safety Services/Designee		Director	Email: don.hughes@opwdd.ny.gov
Office	Location	Nome	acutast info
Office	Location	Name	contact info
Central	Central	Danielle Vezzi	work: 518-402-7401
Office	Office,		email: danielle.r.vezzi@opwdd.ny.gov
	Albany		
	1		
Region 1	Western NY	Donna Lepore	work: (716) 608-2652
			email: Donna.M.Lepore@opwdd.ny.gov
	Finger Lakes	Jim Hooper	work: 585-241-5718
		·	email: jim.hooper@opwdd.ny.gov
Region 2	Central NY	Rosemary	work: 315-336-2300 x578
		Joseph	email: Rosemary.T.Joseph@opwdd.ny.gov
Broome		Robin Webb	work: 607-770-4627
			email: robin.l.webb@opwdd.ny.gov
Region 3	Sunmount	Erin Sayles	work: 518-359-7768
			email: erin.e.sayles@opwdd.ny.gov
	Capital	Emilee Walker	work: 518-388-0348
	District		email: Emilee.A.Walker@opwdd.ny.gov
Region 4	Taconic	Tina Russell	work: 845-877-6821 x3077
g			email: tina.russell@opwdd.ny.gov
	Hudson	Georgina	work: 845-947-6242
	Valley	Atakora	email: Georgina.Atakora@opwdd.ny.gov
Region 5	Metro NY	Alicia Gonzalez	work: 718-430-0897/0710
		, moid Gorizaidz	email: Alicia.Gonzalez@opwdd.ny.gov
	Staten Island	Jennifer Taylor	work: 718-983-5434
	Claten Island	Johnmei Taylul	email: jennifer.x.taylor@opwdd.ny.gov
	Brooklyn	Arlana Daytar	work: 718-642-6117
	Brooklyn	Arlene Dexter	
			email: arlene.dexter@opwdd.ny.gov

Region 6	Bernard	Annazette	work: 718-722-4518
	Fineson	Norville	email: annazette.norville@opwdd.ny.gov
	Long Island	Vickie Cisek	work: 631-326-4482
	_		email: victoria.cisek@opwdd.ny.gov

Appendix B:

Workplace Violence Prevention Risk Assessment Form

This from requires the participation of the authorized instructions: All sections below refer to present condi				
applicable to the worksite/facility being evaluated.				, , , , , , , , , , , , , , , , , , , ,
Worksite Location:				
Person(s) conducting the evaluation:				
Date of assessment:				
Is the OPWDD Workplace Violence Prevention Policy State	ement p	osted a	t the wor	ksite?
Please circle) Yes No				
Is the OPWDD Workplace Violence Prevention Policy avai	lable to	staff at	this work	site?
(Please circle) Yes No				
Have you provided staff with adequate training on how to	resnon	d effecti	vely to vi	olent situations at your worksite?
(Please circle) Yes No	respon	a circoti	very to vi	olent situations at your worksite:
Items	Yes	No	N/A	Notes Comments
1. Security Features				
Is the evacuation and floor plan current and posted				
Are there internal procedures for conflict situations				
Reception area available				
Sign-in procedure for visitors				
Barriers to separate visitors from work area				
Emergency numbers posted by phones				
One entrance used for visitors				
Multiple exits				
Unobstructed office exits				
Key distribution controls				
ID badges				
Door control(s) i.e. locks, panic buttons/duress				
alarms				
Intrusion panel				

Close circuit camera/recorder/monitor system				
Adequate lighting in and around the workplace				
Well-lit parking area	Vac	NIa	NI/A	Notes Comments
Constant power supply for phone system	Yes	No	N/A	Notes Comments
Landscaping does not obstruct view of the				
workplace				
2. Factors That Might Place Employees at Risk				
Staff Work in public settings				
Staff Work evening shift				
Staff Work night shift				
Staff Work alone or in small numbers				
Work in a location with uncontrolled public access				
Areas identified as previous security issues				
Worksite located in a remote location				
Any other factors that might place employees at				
risk				
3. Security Guards				
Are security guard(s) present at the location				
If yes, are they posted at entrance(s)				
Do guards patrol the building and grounds at worksite				
If there are no guards at worksite, what security controls are in place at the worksite				
controls are in place at the worksite				

4. Description of the Building: Using the information
from sections 1-3 and your working knowledge of the
building describe the physical characters of the
building (number of entrances and exits, number of
employees, access to the building, security features,
areas of concern related to security).
5. Specific Hazards: Using the information from
Sections 1-4 list specific hazards related to this
evaluation.
Signature:
Title:
11001
Deter
Date:

Appendix C:

Incident Report Form

(Incidents involving employees and/or visitors)

E-mail Form

Print Form

NYS Office for People with Developmental Disabilities

INCIDENT REPORT FORM

This is an internal report only.

The information provided on this form will be used to track incidents that occur in and around OPWDD worksites. If further information or action is deemed necessary someone from Human Resources will be in contact.

Please provide as much information as possible

	Please provide as n	nuch information as possible
INFORMATION ABOUT THE F	ERSON INVOLVED IN THE	EINCIDENT:
Full Name:		If visitor, employee to contact:
Bureau/Unit:		Supervisor:
Title:		Phone Numbers:
Employee Work Address:		
INFORMATION ABOUT THE II	NCIDENT:	
Date of Incident:	Time:	Police notified: YES NO Case #:
Location of Incident:		
Describe what happened, how	t happened, factors leading t	to the event, substances or objects involved. Additional space on page 2.
WORKERS' COM Was there an injury? YES	G INFORMATION IS VOLUI IPENSATION LAWS OR TO NO Did you see	NO If yes, please provide names, and contact information on page 2. NTARY AND IS IN NO WAY MEANT TO VIOLATE ANY PRIVACY OR DACT AS A MEANS OF REPORTING SUCH INCIDENTS. ek treatment at time of incident? injured and any other information known about the mechanism of injury.:
injury/illness occurred. The Ac	related injury or illness, it sh cident Reporting System (1	efused nould be reported to Human Resources no later than ten business days afte -888-800-0029) should be notified and an Employee Accident Report Forn ort Form can be found on the <u>OPWDD Personnel Intranet page</u> .
FOLLOW UP INFORMATION		
Followed up by (whom):		
Title:		
Date report received:		

Witness Contact Information:	
Name	Name
Address	Address
City	City
State: Zip Code	State: Zip Code
Phone #'s:	Phone #'s:
	,
Additional Information:	

Appendix D:

Workplace Violence Prevention Worksite Assessment Summary

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Assessment completed on Date:	
OPWDD location occupies # of floors/rooms:	

General assessment information noted from the worksite evaluation:

- Evacuation plans are current and drills are conducted annually.
- Emergency evacuation signs posted.
- Security Control Plan in place at work location.
- Door(s) leading into the building/worksite are secured and locked.
- Where applicable, Swipe Card access installed on all doors.
- Where applicable, on-site security guards are present in the lobby and visitors must sign in and out at security desk.
- Proper lighting at the entrance of worksite/parking lot.

Identified risk factors:

- Leaving entrance to the worksite unlocked or propped open.
- Emergency contacts numbers not posted.

Determinations that the Workplace Violence Risk Assessment Team has made for possible mitigation of risk factors:

- Coach/train staff on general safety procedures.
- Coach/train staff on use of the "buddy system" when leaving work late at night.
- Post emergency contact numbers
- Do not allow anyone who is not an OPWDD employee into the workplace unless they have identified themselves and or have an appointment.

Appendix E:

OPWDD Workplace Violence Prevention Training Outline

- I. Review of Requirements of the Workplace Violence Regulations
 - A. Include a copy of the OPWDD Workplace Violence Policy Statement and information regarding where the Statement is posted at the worksite.
 - B. Provide detailed information of the risk factors that were identified at the worksite and where the risk assessment can be found.
 - C. Provide a detailed description of the OPWDD Workplace Violence Prevention Program and Procedures, including but not limited to how to report an incident, prevention measures and where the employee can obtain a copy of this document.
 - D. Provide GOER-mandated Workplace Violence training to all employees, including site specific information and training on the risks of workplace violence identified at the workplace. Provide training at least once a year and any time significant changes are made to the Workplace Violence Prevention Program.
- II. Other policies in place that may be relevant
 - Incorporate OPWDD Domestic Violence Policy and training information, including OPWDD practices that will promote safety in the workplace.
 - Include OPWDD reporting process and the roles and responsibilities of the OPWDD Domestic Violence Liaisons.