



Workplace Violence Prevention Program California Senate Bill 553

Fall 2024
WVPP v.1

Workplace Violence Prevention Plan (WVPP)

BACKGROUND – CALIFORNIA SENATE BILL 553

California Senate Bill 553 (SB553) requires California workplaces to have a policy to address the rising episodes of workplace violence. SB553 has multiple requirements for employers, which can be broadly grouped into two categories:

- Pre-violent incident activities include a Cal OSHA requirement that an employer engage with employees in developing and implementing a WVPP, providing education and training, awareness of how to recognize a violent incident, evaluating an incident or issue, and communicating issues to the employer.
- Post-violent incident activities include completing a violent incident report, an incident investigation, the violent incident log, and ongoing evaluation of incidents with issue identification and hazard correction.

This Workplace Violence Prevention Plan (WVPP) provides a framework to meet these requirements.

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Workplace Violence Prevention Plan (WVPP)

WORKPLACE VIOLENCE PREVENTION PLAN (WVPP)

The Workplace Violence Prevention Plan, hereafter known as WVPP, aims to ensure that Napa Valley College (NVC) provides employees with a place free of threats, intimidation, harassment, and acts of violence. The WVPP addresses the hazards associated with the four types of workplace violence, as defined by California Labor Code Section 6401.9 and Senate Bill 553.

The WVPP was implemented on: July 1, 2024

WVPP DEFINITIONS

Emergency: Unanticipated circumstances that can be life-threatening or pose a risk of significant injuries to employees or other persons.

Engineering Controls: A built space, a device, or an aspect that removes a hazard from the workplace or creates a barrier between the worker and the hazard.

Log: The violent incident log (see Addendum C) as required by California Labor Code Section 6401.9.

Plan: Workplace Violence Prevention Plan (WVPP) as required by SB 553.

Serious Injury or Illness: Any injury or illness occurring in a place of employment or in connection with any employment that requires inpatient hospitalization for other than medical observation or diagnostic testing or in which an employee suffers an amputation, the loss of an eye, or any serious degree of permanent disfigurement. This does not include any injury, illness, or death caused by an accident on a public street or highway unless the accident occurred in a construction zone.

Workplace: A workplace shall be an approved location in which an employee is conducting authorized business.

Workplace Violence: Means any act of violence or threat of violence that occurs in a place of employment and includes, but is not limited to, the following:

- The threat or use of physical force against an employee that results in, or has a high likelihood of resulting in, injury, psychological trauma, or stress, regardless of whether the employee sustains an injury.
- An incident involving a threat or use of a firearm or other dangerous weapon, including the use of common objects as weapons, regardless of whether the employee sustains an injury.
- Workplace violence **does not** include lawful acts of self-defense or defense of others.

Threat of Violence: Means any verbal or written statement including, but not limited to, texts, electronic messages, social media messages, or other online posts, or any behavioral or physical conduct that conveys an intent or that is reasonably perceived to convey an intent, to cause bodily harm or to place someone in fear of physical harm, and that serves no legitimate purpose.

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WORKPLACE VIOLENCE TYPES

Type 1: Violence by Strangers

The aggressor has no legitimate business relationship with the workplace and usually enters the affected workplace to commit a criminal act, such as a robbery.

Example: The employee is cleaning the outside of the workspace and is assaulted by a stranger.

Type 2: Violence by Customer/Clients/Patients/Students/Visitors

The aggressor is either the recipient or the object of a service provided by the affected workplace or the victim, such as a current or former client, patient, customer, passenger, criminal suspect, inmate, or prisoner.

Example: The employee is working as a cashier and is assaulted by a customer.

Type 3: Violence by Current or Past Coworkers

The aggressor has some employment-related involvement with the workplace, such as a current or former employee, supervisor, or manager.

Example: A former employee returns to the workplace to do harm.

Type 4: Violence by Someone with a Personal Relationship with an Employee

The aggressor doesn't work in the workplace but has a personal relationship with an employee.

Example: The partner of an employee assaults an employee in the workplace.

Violence may include not only physical acts of violence but also threats to commit violence or do harm. Workplace violence also means any verbal or written statement, including but not limited to text, electronic messages, social media messages, or other online posts or any behavioral or physical conduct, that conveys an intent or that is reasonably perceived to convey an intent, to cause bodily harm or to place someone in fear for their safety or for that of their immediate family.

RESPONSIBILITIES

The WVPP plan administrator, or designee is responsible for implementing the plan's provisions for Napa Valley College. The plan administrator, or designee is responsible for investigating each workplace violence incident, conducting post-incident analysis and corrective action determination, documenting the incident and findings in the respective logs, and disseminating corrective actions and updates to the WVPP.

Responsible Person: Charo Albarran

Phone: (707) 256-7100

Job Title: Assistant Superintendent/Vice
President Human Resources and
Training and Development and Title
IX Coordinator

Email: CAlbarran@napavalley.edu

Plan Responsibilities: Responsible for the plan, ensuring compliance, approving revisions, overseeing incident response and investigations, and training.

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Management

All managers and supervisors are responsible for implementing and maintaining the WVPP in their workplace and will work with and allow employees and authorized employee representatives by:

- Identify, evaluate, and determine corrective measures to prevent workplace violence.
- Design and implement training for their workplace.
- Report and investigate workplace violence incidents.

Management will ensure all employees understand WVPP's workplace violence policies and procedures.

Managers and supervisors will enforce the rules fairly and uniformly.

The plan shall be in effect at all times and be specific to the hazards of the workplace operations.

Managers who receive notification of a restraining order from an employee will meet with WVPP plan administrator to decide what actions, if any, need to be initiated.

After a violent incident, supervisors are responsible for completing the Violence Incident Report (see addendum A) with the affected employee.

The WVPP must be available for all employees to access and review. The completed WVPP is available online at the Human Resources webpage www.napavalley.edu/about/human-resources/index.html and the Risk Management webpage www.napavalley.edu/about/administrative-services/facilities-and-risk-management/risk-management/index.html. Physical copies are available and on display at the Human Resources office.

Employees

All employees will follow all WVPP directives, policies, and procedures to help maintain a safe work environment.

All employees are required to attend *mandatory annual* workplace violence training as outlined in the WVPP and acknowledge receipt of this policy.

All employees are responsible for reporting workplace hazards related to workplace violence.

In the event that an employee becomes aware of or experiences an incident of violence, the employee must immediately report the incident or situation to a supervisor and/or management. If you “*see something, say something*”.

Employees must be able to inform management about workplace hazards or threats of violence without fear of reprisal or adverse action (See Board Policy 7700 – Whistleblower Protection).

Employees will not be prevented from accessing their mobile or other communication devices to seek emergency assistance, assess the safety of a situation, or communicate with a person to verify their safety.

Employees who have an active restraining order issued against another person are encouraged to provide a copy of the restraining order to their supervisor, WVPP plan administrator, or both.

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Employees' concerns will be investigated promptly, and the investigation results will be provided, including any corrective actions to be taken.

Employees shall refer any questions regarding their rights and obligations under this policy to their immediate supervisor or next-level manager if the supervisor is unavailable.

COMMUNICATION WITH EMPLOYEES

Open communication between management and employees about issues related to workplace violence is essential in providing a safe and productive work environment. Management must facilitate a continuous flow of workplace violence prevention information that is readily available and understandable by all employees. This information shall consist of one or more of the following:

- New employee orientation includes workplace violence prevention policies and procedures.
- Workplace violence prevention *mandatory annual* training programs.
- Regularly scheduled meetings that address security issues and potential workplace violence hazards.
- Posted or distributed workplace violence prevention information.
- Procedures for employees to report a violent incident, threat, or other workplace violence concern without fear of reprisal or adverse action.
- Procedures for employees to anonymously report a violent incident, threat, or other violence concerns.
- Provide contact information for whom to call in an emergency.
- The WVPP is available for all employees to access and review online at the Human Resources webpage www.napavalley.edu/about/human-resources/index.html and the Risk Management webpage www.napavalley.edu/about/administrative-services/facilities-and-risk-management/risk-management/index.html. Physical copies are available and on display at the Human Resources office.

The WVPP requires that all employees receive clear, understandable, and effective workplace violence training and instruction at a level that is consistent with an employee's educational level, literacy, and language.

The WVPP will be reviewed with employees at least annually, which can be done via regularly scheduled meetings, newsletters, emails, or bulletins.

The developed *mandatory annual* training program for all employees includes understanding what a violent incident is and how to elevate an incident for management attention. This training will provide employees an opportunity to obtain help with site and/or role-specific training and education, as well as the supervisor's role in completing the violent incident report.

If changes are made in the WVPP after an incident analysis, those updates will be shared with employees in a timely manner.

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TRAINING AND INSTRUCTION

All employees, including managers and supervisors, will be trained in general and job-specific workplace violence practices. These sessions could involve presentations, discussions, and practical exercises. Training and instruction is *mandatory* and will be provided as follows:

- When the WVPP was first established.
- Annually to ensure all employees understand and comply with the plan.
- At the time of hire.
- Whenever a new or previously unrecognized workplace violence hazard has been identified and when changes are made to the plan. The additional training may be limited to addressing the new workplace violence hazard or changes to the plan.
- Additional annual training/review for managers and supervisors to ensure they understand their role and responsibilities with the plan.

Employees will be provided with training and instruction on the definitions found in this plan and the requirements listed below:

- The employer's WVPP, how to obtain a copy of the plan at no cost, and how to participate in the development and implementation of the plan.
- How to report workplace violence incidents or concerns to the employer or law enforcement without fear of reprisal.
- Workplace violence hazards specific to the employees' jobs, the corrective measures NVC has implemented, how to seek assistance to prevent or respond to violence, and strategies to avoid physical harm.
- The violent incident log and how to obtain copies of records about hazard identification, evaluation and correction, training records, and violent incident logs.
- Opportunities or where to locate someone knowledgeable about the plan for interactive questions and inquiries.
- Strategies to avoid/prevent workplace violence and physical harm.
- Resources on campus available to employees

All training material will be appropriate in content and vocabulary to the employees' educational level, literacy, and language.

EMPLOYEE ACCESS TO THE WRITTEN WVPP

Napa Valley College ensures that the WVPP shall be in writing and available and easily accessible to employees, authorized employee representatives, and representatives of Cal/OSHA at all times.

This will be accomplished by providing the employee or designated representative with a copy of the written WVPP. NVC will provide the requester with a printed copy unless the employee or designated

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representative agrees to receive an electronic copy. This will be done at the inception of the plan or at the time of employment with the district.

WORKPLACE VIOLENCE HAZARD IDENTIFICATION AND EVALUATION

The following policies and procedures are established and will be conducted by Napa Valley College to ensure that workplace violence hazards are identified and evaluated.

Inspections shall be conducted when the plan is established, after each workplace violence incident, and when the employer is made aware of a new or previously unrecognized hazard.

The evaluation will review all submitted/reported concerns of potential hazards:

- Daily or weekly review of all submitted and reported concerns.
- Workplace Violence Hazards suggestion box.
- Online form for reporting workplace violence hazards.
- Voicemail/email/text messages.
- Anonymously submitted information about workplace violence hazards or threats of violence submitted by employees or authorized employee representatives.

Periodic inspections of workplace violence hazards (see Addendum D) will identify unsafe conditions and work practices. Inspections for workplace violence hazards include assessing:

- The exterior and interior of the workplace for its attractiveness to criminals.
- The need for surveillance measures, such as mirrors and cameras?
- Procedures for employee response during a criminal act.
- Procedures for reporting suspicious persons or activities.
- Effective location and functioning of emergency buttons and alarms.
- Posting emergency telephone numbers for law enforcement, fire, and medical services.
- Whether employees have access to a telephone with an outside line.
- Whether employees have effective escape routes from the workplace.
- Whether employees have a designated safe area to go to in an emergency.
- Adequacy of workplace security systems, such as door locks, entry codes or badge readers, security windows, physical barriers, and restraint systems.
- Frequency and severity of threatening or hostile situations that may lead to violent acts by persons who are service recipients of our establishment.
- Employees' skill in safely handling threatening or hostile service recipients.
- The effectiveness of systems and procedures that warn others of actual or potential workplace violence danger or summon assistance, e.g., alarms or panic buttons.

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- The use of work practices for specified emergency events.
- Access to and freedom of movement within the workplace by non-employees, including recently discharged employees or persons with whom one of our employees is having a dispute.
- Frequency and severity of employees' reports of threats of physical or verbal abuse by managers, supervisors, or other employees.
- Any prior violent acts, threats of physical violence, verbal abuse, property damage, or other signs of strain or pressure in the workplace.

WORKPLACE VIOLENCE HAZARD CORRECTION

Identified workplace violence hazards will be evaluated and corrected in a timely manner.

- If an imminent workplace violence hazard cannot be immediately abated without endangering employee(s), all exposed employee(s) will be removed from the situation except those necessary to correct the existing condition.
 - Employees who are necessary to correct the hazardous condition will be provided with the required personal protection equipment (PPE).
- All corrective actions taken will be documented and dated on the appropriate forms.
- Corrective measures for workplace violence hazards will be specific to a given workplace.

ELEVATION OF AN INCIDENT

An employee shall immediately report any concerns or incidents related to workplace violence to their supervisor, human resources department, safety personnel, or the WVPP plan administrator. This report can be sent via email, text, phone, or in person.

Appropriate elevation and response need to be determined at the time of the incident, whether it is an in-person event or a threat of future harm. Employee safety is of the highest importance in any incident.

Elevation and response mechanisms can include the employee leaving the area, calling for help, or, with a more immediate threat, calling 911. The employee must share the specifics of the violent incident with a supervisor/manager or other NVC leaders.

The plan administrator, NVC leadership, and legal counsel (if appropriate) will determine the appropriate next steps on a case-by-case basis. This could include developing an individual safety plan, obtaining a restraining order on behalf of the employee, making changes to the workplace to improve safety, or implementing a plan for the current incident and mitigating a future violent incident.

Napa Valley College has a strict non-retaliation policy (See Board Policy 7700 – Whistleblower Protection). Any retaliation against an employee, coworker, or supervisor for making a report will be dealt with swiftly and could result in discipline up to termination.

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VIOLENT INCIDENT REPORT

The employee's immediate supervisor shall complete the Violent Incident Report (see addendum A). If the immediate supervisor is not available, the report shall be completed by the next level of management or the plan administrator.

Before proceeding with any formal investigation, the management-level supervisor shall report any threats or acts of physical violence to the plan administrator.

The violent incident report should be completed as quickly as possible while the event details are still current, ideally within 24 hours.

The report is mainly data collection, so it is crucial to create a culture and environment where employees feel comfortable coming forward to report a violent incident.

The program administrator must complete the report if the incident is between an employee and their supervisor.

VIOLENCE INCIDENT INVESTIGATION

The plan administrator or designee is required to complete the Violence Incident Investigation form (see Addendum B) within seven calendar days of receiving a Violence Incident Report. The investigation will generally include the following:

- Visit the scene of an incident as soon as safe and practicable.
- Interview of involved parties, such as employees, witnesses, law enforcement, and/or security personnel.
- Review security footage of existing security cameras, if applicable.
- Examine the workplace for security risk factors associated with the incident, including any previous reports of inappropriate behavior by the perpetrator.
- Determine the cause of the incident.
- Take corrective action to mitigate similar incidents from occurring.
- Record the findings and ensure corrective actions are taken.
- Obtain any reports completed by law enforcement.

VIOLENCE INCIDENT LOG

After completing the investigation, the plan administrator will complete the Violence Incident Log (see Addendum C); the log and supporting materials should be audit-ready.

The log intends to identify trends and opportunities for further hazard reduction. The program administrator should review the log at least annually or sooner if there are more frequent incidents of workplace violence.

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The ongoing report and tracking of violent incidents supports the identification of trends, and the potential of hazard reduction or mitigation hazards that are identified with potential solutions will be addressed and implemented in a timely manner.

If corrections are significant enough, they may require updating and modifying the current WVPP. Such updates must be brought to the attention of all employees in a timely manner.

RECORD KEEPING

Napa Valley College Human Resources will:

- Create and maintain records of workplace violence hazard identification, evaluation, and correction for a minimum of five (5) years.
- Create and maintain training records for a minimum of one (1) year and include the following:
 - *Annual* training dates.
 - Contents or a summary of the training sessions.
 - Names and expert qualifications of persons conducting the training.
 - Names and job titles of all persons attending the training sessions.
- Maintain violent incident logs for a minimum of five (5) years.
- Maintain records of workplace violence incident investigations for a minimum of five (5) years.
 - *The records shall not contain medical information per subdivision (j) of section 56.05 of the Civil Code.*
- All records of workplace violence hazard identification, evaluation, and correction; training, incident logs, and workplace violence incident investigations required by Labor Code section 6401.9(f) shall be made available to Cal/OSHA upon request for examination and copying.

EMPLOYEE ACCESS TO RECORDS

The following records shall be made available to employees and their representatives, upon request and without cost, for examination and copying within 15 calendar days of a request:

- Records of workplace violence hazard identification, evaluation, and correction.
- Training records.
- Violent incident logs.

REVIEW AND REVISION OF THE WVPP

The NVC WVPP will be reviewed for effectiveness:

- At least annually.
- When a deficiency is observed or becomes apparent.

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- After a workplace violence incident.
- As needed.

Review and revision of the WVPP will include the involvement of employees and authorized employee representatives in reviewing the plan's effectiveness, which should include, but is not limited to,:

- Review of incident investigations and the violent incident log.
- Assessment of the effectiveness of security systems, including alarms, emergency response, and security personnel availability (if applicable).
- Review that violence risks are appropriately identified, evaluated, and corrected.

Any necessary revisions must be made promptly and communicated to all employees. These revisions could involve procedure changes, contact information updates, and additions to training material.

ADDENDUMS

Title	Completed By
A Violence Incident Report	Immediate Supervisor and Affected Employee
B Violence Incident Investigation	Immediate Supervisor
C Violence Incident Log	WVPP Administrator
D Workplace Safety Review	Immediate Supervisor or Plan Administrator

EMPLOYER REPORTING RESPONSIBILITIES

As required by the California Code of Regulations (CCR), Title 8, Section 342(a), reporting Work-Connected Fatalities and Serious Injuries, Napa Valley College will immediately report to Cal/OSHA any serious injury or illness (as defined by CCR, Title 8, Section 330(h)) or death (including any due to workplace violence) of an employee occurring in a place of employment or connection with any employment.

I, Charo Albarran, Assistant Superintendent/Vice President Human Resources and Training and Development and Title IX Coordinator of Napa Valley College, hereby authorize and ensure the establishment, implementation, and maintenance of this written workplace violence prevention plan and the documents/forms within this written plan. I am committed to promoting a culture of safety and violence prevention in our workplace, and I believe these policies and procedures will help us achieve that goal.

HISTORY

Adopted: July 1, 2024

Reviewed:

Revised:

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ADDENDUM A: VIOLENCE INCIDENT REPORT

Report Instructions

The supervisor receiving a workplace violence report must complete this form with as much detail as possible to support an investigation. The original report must be forwarded to the plan administrator.

Employee Information

Reporting Employee: _____ ☐ Same as Affected Employee

Affected Employee(s): _____

Affected Employee(s) Job Title(s): _____

Was medical care provided? ☐ Yes ☐ No

Was law enforcement called? ☐ Yes ☐ No

Was fire/EMS called? ☐ Yes ☐ No

Were days lost from work? ☐ Yes ☐ No

Did anyone aid in concluding the event? ☐ Yes ☐ No

If yes, what action(s): _____

What is their name and contact information: _____

Were actions taken to protect employees from a continuing threat? ☐ Yes ☐ No

If yes, what action(s): _____

Is the employee willing to testify in court to obtain a restraining order? ☐ Yes ☐ No

Incident Information

Date Incident Occurred: _____ Time Occurred: _____

Type of incident:

- ☐ **Type 1:** Workplace violence committed by a person who has no legitimate business at the work site and includes violent acts by anyone who enters the workplace or approaches the workers with the intent to commit a crime.
- ☐ **Type 2:** Workplace violence directed at an employee by customers, clients, patients, students, inmates, or visitors.
- ☐ **Type 3:** Workplace violence against an employee by a present or former employee, supervisor, or manager.
- ☐ **Type 4:** Workplace violence committed in the workplace by a person who does not work there but has or is known to have a personal relationship with an employee.

Continued on the next page

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Provide as much detail about the incident (who, what, when, why):

Classification of violence (check as many as apply)

- | | | |
|---|------------------------------------|--|
| <input type="checkbox"/> Verbally Threatened | <input type="checkbox"/> Grabbed | <input type="checkbox"/> Choked |
| <input type="checkbox"/> Verbally Harassed | <input type="checkbox"/> Kicked | <input type="checkbox"/> Hit with Fist |
| <input type="checkbox"/> Physical Assault | <input type="checkbox"/> Pushed | <input type="checkbox"/> Hit with an Object |
| <input type="checkbox"/> Threaten Use of Physical Force | <input type="checkbox"/> Scratched | <input type="checkbox"/> Vandalism - Victim's Property |
| <input type="checkbox"/> Threaten Use of a Weapon | <input type="checkbox"/> Bitten | <input type="checkbox"/> Vandalism - Employer's Property |
| <input type="checkbox"/> Assaulted with a Weapon | <input type="checkbox"/> Slapped | <input type="checkbox"/> Animal Attack |
| <input type="checkbox"/> Other: _____ | | |

Where the incident occurred:

- | | | |
|---|---|--|
| <input type="checkbox"/> Inside an Office/Conference Room | <input type="checkbox"/> Emergency or Urgent Care | <input type="checkbox"/> Hallway |
| <input type="checkbox"/> Waiting Room | <input type="checkbox"/> Restroom or Bathroom | <input type="checkbox"/> Parking Lot or Outside Building |
| <input type="checkbox"/> Classroom | <input type="checkbox"/> Breakroom | <input type="checkbox"/> Cubicle |
| <input type="checkbox"/> Other: _____ | | |

Circumstances at the time of the incident (Check all that apply):

- | | | |
|--|---|---|
| <input type="checkbox"/> Employee Performing Normal Duties | <input type="checkbox"/> Poor Lighting | <input type="checkbox"/> Employee Rushed |
| <input type="checkbox"/> Employee Isolated or Alone | <input type="checkbox"/> High Crime Area | <input type="checkbox"/> Low Staffing Level |
| <input type="checkbox"/> Unable to Get Help or Assistance | <input type="checkbox"/> Working in a Community Setting | <input type="checkbox"/> Unfamiliar or New Location |
| <input type="checkbox"/> Other: _____ | | |

Assailant Information (Check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Stranger | <input type="checkbox"/> Customer | <input type="checkbox"/> Passenger |
| <input type="checkbox"/> Family or Friend of Employee | <input type="checkbox"/> Co-Worker | <input type="checkbox"/> Person In Custody |
| <input type="checkbox"/> Partner/Spouse of Employee | <input type="checkbox"/> Supervisor/Manager | <input type="checkbox"/> Family or Friend of Customer |
| <input type="checkbox"/> Former Partner/Spouse of Employee | <input type="checkbox"/> Family or Friend of Client | <input type="checkbox"/> |
| <input type="checkbox"/> Parent/Relative of Employee | <input type="checkbox"/> Other: _____ | |

Completed By

Name: _____ Title: _____

Contact: _____ Email: _____

Signature: _____ Date: _____

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ADDENDUM B: VIOLENCE INCIDENT INVESTIGATION

Report Instructions

The immediate supervisor or designee will complete the investigation into the violent incident. Further investigation and resolution of the incident are expected within seven days. In addition, a copy of the completed investigation will be submitted to the Plan Administrator.

Post Incident Response

Did the employee require medical attention as a result of the incident? ☐ Yes ☐ No ☐ N/A

If yes, what action(s): _____

Did the employee miss work as a result of the incident? ☐ Yes ☐ No

If yes, number of day(s): _____

Did the employee apply for workers' compensation? ☐ Yes ☐ No

Was law enforcement or security contacted? ☐ Yes ☐ No ☐ N/A

Were buildings/facilities contacted? ☐ Yes ☐ No ☐ N/A

Was immediate counseling provided to the affected workers and witnesses? ☐ Yes ☐ No ☐ Unk

Was critical incident debriefing provided to all affected staff who desired it? ☐ Yes ☐ No

Was post-trauma counseling provided to affected staff who desired it? ☐ Yes ☐ No

Did a professional counselor provide counseling? ☐ Yes ☐ No ☐ N/A

Has there been a follow-up with the employee(s)? ☐ Yes ☐ No

If yes, who: _____

Incident Analysis

What were the main factors that contributed to the incident?

What could have prevented or minimized the impacts caused by this incident?

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Has this type of incident occurred before in the workplace? ☐ Yes ☐ No

If yes, when: _____

Is this a recurring event? ☐ Yes ☐ No

Are there recommended modifications that need to be made to the workplace?

☐ Yes ☐ No

If yes, what: _____

Are there recommended modifications that need to be made to be made to policies or procedures?

☐ Yes ☐ No

If yes, what: _____

Are there recommended modifications that need to be made to WVPP?

☐ Yes ☐ No

If yes, what: _____

Completed By

Name: _____ Title: _____

Contact: _____ Email: _____

Signature: _____ Date: _____

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ADDENDUM C: VIOLENCE INCIDENT LOG

Log Instructions

Every workplace violent incident will be recorded in the violent incident log.

Any element of personal identifying information sufficient to allow identification of any person involved in a violent incident will not be recorded. Such personal identifying information includes the person's name, address, email, telephone number, social security number, or any other information that could reveal the person's identity, alone or in combination with other publicly available information.

The log shall be reviewed during the periodic reviews of the plan and every quarter.

How to complete the log:

Log Number: All entries will be assigned a number based on the year and sequence, YR-01.

Incident Date: Date that the incident occurred.

Incident Time: Using the 24-hour clock, enter the time that the incident occurs.

Entry Person: Name of person completing the log.

Physical Location: Address of the incident on the property.

Location at Workplace: Indicate the location in the workplace where the event occurred.

Type of Incident: Indicate the type of workplace violence incident, Type 1, 2, 3, 4

Incident Description: Summarize the incident and the type of violence used in the incident.

Responders: Indicate what first responders (law, security, fire/EMS) were called, if any.

Employer Actions: Summarize the actions taken by the employer.

Violent Incident Log

Log Year: _____

Log Number (Yr-00)	Incident Date	Incident Time (24 Hour Clock)	Entry Person
Physical Address		Location in Workplace (See "Where the incident occurred" on the Incident Report)	
Type of Incident <input type="checkbox"/> One <input type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> Four	Incident Description (See "Classification of violence" on Incident Report)		Responders
Employers Actions			

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Log Number (Yr-00)	Incident Date	Incident Time (24 Hour Clock)	Entry Person
Physical Address		Location in Workplace (See "Where the incident occurred" on the Incident Report)	
Type of Incident <input type="checkbox"/> One <input type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> Four	Responders		Incident Description (See "Classification of violence" on Incident Report)
Employers Actions			

Log Number (Yr-00)	Incident Date	Incident Time (24 Hour Clock)	Entry Person
Physical Address		Location in Workplace (See "Where the incident occurred" on the Incident Report)	
Type of Incident <input type="checkbox"/> One <input type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> Four	Responders		Incident Description (See "Classification of violence" on Incident Report)
Employers Actions			

Log Number (Yr-00)	Incident Date	Incident Time (24 Hour Clock)	Entry Person
Physical Address		Location in Workplace (See "Where the incident occurred" on the Incident Report)	
Type of Incident <input type="checkbox"/> One <input type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> Four	Responders		Incident Description (See "Classification of violence" on Incident Report)
Employers Actions			

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ADDENDUM D: WORKPLACE SAFETY REVIEW

Review Instructions

This checklist is designed to evaluate the workplace and job tasks to help identify situations that may place employees at risk of workplace violence.

1. Identify risk factors that may increase vulnerability to workplace violence.
2. Access the workplace to identify physical and process vulnerabilities.
3. Develop a corrective action plan with measurable goals and target dates.

Workplace

Assessed By: _____ Date: _____

Location(s) Assessed: _____

Identify Risk Factors

Risk Factor	Yes	No	Comments
Does the staff have contact with the public?	<input type="checkbox"/>	<input type="checkbox"/>	
Does staff exchange money with the public?	<input type="checkbox"/>	<input type="checkbox"/>	
Does the staff work alone?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the workplace located in an area with a high crime rate?	<input type="checkbox"/>	<input type="checkbox"/>	
Do the staff go to areas with high crime rates?	<input type="checkbox"/>	<input type="checkbox"/>	
Has there been prior workplace violence incidents?	<input type="checkbox"/>	<input type="checkbox"/>	
Does the staff perform public safety functions that might put them in conflict with others?	<input type="checkbox"/>	<input type="checkbox"/>	
Does the employee work with people who have a history of threats or violence?	<input type="checkbox"/>	<input type="checkbox"/>	
Does the staff work during the hours of darkness?	<input type="checkbox"/>	<input type="checkbox"/>	

Workplace Violence Prevention Plan (WVPP)

Interior of Workplace			
Risk Factor	Yes	No	Comments
Are employee ID badges required?	<input type="checkbox"/>	<input type="checkbox"/>	
Have employees been notified of past workplace violence incidents?	<input type="checkbox"/>	<input type="checkbox"/>	
Are trained security personnel or staff accessible to employees?	<input type="checkbox"/>	<input type="checkbox"/>	
Are bullet-resistant windows or similar barriers used when money is exchanged with the public?	<input type="checkbox"/>	<input type="checkbox"/>	
Are areas where money is exchanged visible to others?	<input type="checkbox"/>	<input type="checkbox"/>	
Is a limited amount of cash kept on hand with appropriate signage?	<input type="checkbox"/>	<input type="checkbox"/>	
Are there drop safes to limit available cash?	<input type="checkbox"/>	<input type="checkbox"/>	
Can someone hear an employee who calls for help?	<input type="checkbox"/>	<input type="checkbox"/>	
Do employees have a clear line of sight of visitors in the waiting areas?	<input type="checkbox"/>	<input type="checkbox"/>	
Do areas used for client or visitor interviews allow coworkers to observe problems?	<input type="checkbox"/>	<input type="checkbox"/>	
Are waiting areas and work areas free of objects that could be used as weapons?	<input type="checkbox"/>	<input type="checkbox"/>	
Is furniture in the waiting and work areas arranged to prevent employee entrapment?	<input type="checkbox"/>	<input type="checkbox"/>	
Are private, locked restrooms available for employees?	<input type="checkbox"/>	<input type="checkbox"/>	
Do employees have a secure place to store personal belongings?	<input type="checkbox"/>	<input type="checkbox"/>	

Workplace Violence Prevention Plan (WVPP)

Exterior of Workplace

Risk Factor	Yes	No	Comments
Do employees feel safe walking to and from the workplace?	<input type="checkbox"/>	<input type="checkbox"/>	
Are the entrances to the building clearly visible from the street?	<input type="checkbox"/>	<input type="checkbox"/>	
Is there a secure employee entry?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the area surrounding the building free of bushes or other hiding places?	<input type="checkbox"/>	<input type="checkbox"/>	
Are safety personnel provided outside the building?	<input type="checkbox"/>	<input type="checkbox"/>	
Is video surveillance provided outside the building?	<input type="checkbox"/>	<input type="checkbox"/>	
Is there enough lighting to see clearly? What is the lumen level?	<input type="checkbox"/>	<input type="checkbox"/>	
Are all exterior walkways visible to safety personnel?	<input type="checkbox"/>	<input type="checkbox"/>	

Parking Area(s) at Workplace

Risk Factor	Yes	No	Comments
Is there a nearby parking lot reserved for staff?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the parking lot attended and secured?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the parking lot free of blind spots, and is the landscape trimmed to prevent hiding places?	<input type="checkbox"/>	<input type="checkbox"/>	
Is there enough lighting to see clearly? What is the lumen level?	<input type="checkbox"/>	<input type="checkbox"/>	
Are safety escorts available?	<input type="checkbox"/>	<input type="checkbox"/>	

Workplace Violence Prevention Plan (WVPP)

Security Measures at the Workplace			
Risk Factor	Yes	No	Comments
Is there a response plan for workplace violence emergencies?	<input type="checkbox"/>	<input type="checkbox"/>	
Has staff received training in handling threatening or hostile situations?	<input type="checkbox"/>	<input type="checkbox"/>	
Are there physical barriers between staff and visitors?	<input type="checkbox"/>	<input type="checkbox"/>	
Are there security cameras? Can they be observed locally?	<input type="checkbox"/>	<input type="checkbox"/>	
Are there duress "panic" buttons?	<input type="checkbox"/>	<input type="checkbox"/>	
Is there a building alarm system(s)?	<input type="checkbox"/>	<input type="checkbox"/>	
Are there security detectors (metal, scanner, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	
Are there personal alarm devices?	<input type="checkbox"/>	<input type="checkbox"/>	
Are the telephones programmed for 911?	<input type="checkbox"/>	<input type="checkbox"/>	
Are there two-way radios, pagers, or cell phones?	<input type="checkbox"/>	<input type="checkbox"/>	
Are there security mirrors?	<input type="checkbox"/>	<input type="checkbox"/>	
Is there a procedure in place to report security concerns?	<input type="checkbox"/>	<input type="checkbox"/>	
Is there a system to alert staff of a security threat's presence, location, and nature?	<input type="checkbox"/>	<input type="checkbox"/>	
Are there systems in place to test security measures on a regular basis?	<input type="checkbox"/>	<input type="checkbox"/>	

Workplace Violence Prevention Plan (WVPP)

Corrective Action Plan

Type: RF – Risk Factor, IN – Interior, EX – Exterior, PA – Parking Area, SM – Security Measure

Type	Action Item	Person(s) Responsible	Target Date	Status

Comment

Completed By

Name: _____ Title: _____

Contact: _____ Email: _____

Signature: _____ Date: _____