

#### Safety and Health: Prevention of Workplace Violence and Violence Against Health Care Workers

##### Policy:

No Department of Human Services (DHS) facility will tolerate workplace threats or violent acts.

DHS facilities must promote, establish and maintain a work environment that is free from intimidation, threats or violent acts, and must implement local policies or procedures for responding to all threats or violent acts.

##### Authority:

Minnesota Statutes, section 15.86, "Zero Tolerance of Violence"

Minnesota Statutes, section 182.653 subdivision 2, "Rights and Duties of Employers"

Minnesota Statutes, section 182.653 subdivision 8, "Workplace Accident and Incident Reduction Act"

Minnesota Statutes, section 626.557, "Vulnerable Adult Act"

Minnesota Statutes, section 144.556, "Violence Against Health Care Workers"

##### Purpose:

To inform employees of the DHS commitment to a zero tolerance of threats or violent acts in the workplace, to define manager and employee responsibilities, and to encourage the development of local procedures to prevent, investigate, and respond to threats or violent acts at facilities.

##### Definitions:

**Workplace violence:** A threat or action, which occurs at the workplace, in which someone (employee, client, contractor, volunteer or visitor) seeks to intimidate, threatens to harm or harms another person.

**Critical incident coordinator:** A designated employee who will coordinate the response to a workplace threat or violent act against an employee.

##### Responsibilities:

Commissioner or designee, site administrators, managers and supervisors are responsible for implementing and enforcing this policy. All employees are responsible for conducting themselves within the spirit and intent of this policy.

Site administrators, or designees will:

1. Develop and effectively implement, facility policies or procedures to ensure that threats or violent incidents are reviewed to determine if additional or alternative violence prevention techniques are required.
2. Design and implement preparedness and incident response plans in collaboration with Safety Administrators.
3. Make action plans available to local law enforcement and collective bargaining units.
4. Designate a committee of representative of hospital employees to develop the plans. The committee is to include non-managerial health care workers, nonclinical staff, administrators, patient safety experts, and other personnel.
5. Review the plans with the designated committee at least annually. The annual review will include:
  - a. review of the plan's effectiveness;
  - b. the most recent gap analysis and;
  - c. the number of acts of violence and injuries by unit that occurred at the hospital during the previous year.

6. Provide training to all healthcare workers, in collaboration with Learning and Development. This training will occur annually and upon hire. Training will include:
  - a. Violence prevention practices for the general population
  - b. Violence prevention practices for specific populations served (e.g. mental health).
  - c. Safety guidelines for response to and de-escalation of an act of violence;
  - d. Ways to identify potentially violent or abusive situations; and
  - e. The hospital's incident response reaction plan and violence prevention plan
7. Provide ongoing communication to patients, visitors and staff that violence will not be accepted.

**Procedures:**

Commissioner, site administrators or designees must develop and effectively carry out facility policies and procedures to ensure that:

1. A violence prevention policy or procedure is developed and implemented. The local policy may include the appointment of a critical incident coordinator to organize the response to a violent threat or incident.
2. A facility climate is maintained in which threats or acts of violence are less likely to occur.
3. Employees are aware of this policy, the local violence prevention policy or procedure, and the various violence reduction resources available to employees.
4. All threats or violent acts are documented and reported according to local procedure.
5. All threats or violent acts are promptly, completely and accurately investigated or if an imminent danger exists, reported to the local law enforcement agency.
6. If the result of an investigation concludes that the employee threat or violent act did occur, appropriate disciplinary steps are taken and the local law enforcement agency is notified, when appropriate.

**References:**

[DHS Policy - Critical Incident Stress Management](#)

[DHS Policy - Prohibition of Weapons](#)

[DHS Policy - General Harassment](#)

State Operated Services Policy Manual Number 3020 Contraband

State Operated Services Policy Manual Number 6260 Therapeutic Intervention

Guidelines for Preventing Workplace Violence for Health Care and Social Service Workers OSHA 3148-01R 2004

[DHS Personal Safety Guidelines](#)

**CANCELLATIONS:**

This policy supersedes DHS Policy, dated 1/09.

**Policy Contact:**

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