

Children’s Hospital and Health System Safety Policy and Procedure

This policy applies to the following entity(s):

Children’s Hospital and Health System

SUBJECT: Workplace Violence Prevention

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Definitions

Children’s has adopted The Joint Commission’s definition of Workplace Violence: An act or threat occurring at the workplace that can include any of the following: verbal, nonverbal, written, or physical aggression; threatening, intimidating, harassing, or humiliating words or actions; bullying; sabotage; sexual harassment; physical assaults; or other behaviors of concern involving staff, licensed practitioners, patients, clients, families, or visitors.

Staff includes all Children’s Wisconsin paid and unpaid employee and non-employee personnel, Medical College of Wisconsin providers and staff, volunteers, residents, fellows, trainees, clinical and non-clinical contracted staff, students, researchers and temporary workers (i.e. contractors and vendors) at any work site or remote location, regardless of clinical responsibility or patient contact.

POLICY

Children’s Hospital and Health System (“Children’s”) is committed to providing a safe environment for all staff, patients, clients, families, and visitors. This policy supports a commitment to providing a cooperative environment consistent with dedication to the health and well-being of children and staff. Workplace Violence will not be tolerated.

Children’s conducts an annual worksite analysis related to its Workplace Violence Prevention program and takes steps to prevent, mitigate, and respond to Workplace Violence safety and security risks based upon findings from the analysis.

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Children's takes steps to identify and address Workplace Violence, investigate reports of such behaviors, and take actions established by this policy. Children's expects everyone; staff, patients, clients, families, and visitors to treat each other with respect and dignity at all times.

All Children's locations are Weapon Free Facilities. Any person bringing a weapon on site will be asked to remove it from the facility. Law enforcement will be contacted if staff feel threatened or the person refuses to remove the weapon(s) from the facility. **NOTE:** Refer to the *Active Shooter, Outside Threat And Restricted Movement Policy and Procedure* for additional steps related to an active shooter threat.

Staff engaging in behavior prohibited by this policy may also be in violation of other Children's Wisconsin policies. Refer to the 'Harassment/Bullying/Disruptive Behavior' and 'Code of Employment Conduct' policies.

PROCEDURE

1) Recognizing Workplace Violence

Behaviors that could escalate to Workplace Violence if not addressed may include but are not limited to; STAMP (Staring and eye contact, Tone and volume of voice, Anxiety, Mumbling, Pacing), consciously ignoring, physical posturing, etc.

Examples of behaviors constituting Workplace Violence may include but are not limited to; verbal assault, cursing, obscene or derogatory comments, raised voice or yelling, offensive or intimidating gestures or actions, threats (direct or implied), harassment (in-person, by telephone, letter or electronic), destruction of property, physical assault or battery including striking, hitting, pushing (with the hands or body), grabbing, spitting, kicking, choking, unwanted touching, throwing objects, brandishing a weapon or any object with the intent to be used as a weapon or to intimidate.

2) Preventing Workplace Violence

- A. The goal should be to prevent Workplace Violence whenever possible, and to intervene as early as possible to help prevent unwelcome behaviors from escalating to Workplace Violence.
- B. Staff can use the following tools to help prevent or reduce the potential for Workplace Violence:
 - 1. Being aware of your mood and using breathing or other techniques to be at your best before interacting with others.
 - 2. Using the AIDET model when introducing yourself.
 - 3. Communicating with empathy and using the Heart-Head-Heart method.
 - 4. Avoiding using anti-peace phrases.
 - 5. Assessing from a safe distance before moving closer and watching for warning signs like STAMP or whether the person has anything in their hands.

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6. More information on these tools can be found by searching for “SAFER” on Children’s Connect.
7. For Milwaukee campus Hospitalized patients, consult and collaborate with the Behavioral Assessment Team for patients with known aggressive behaviors
8. For patients, review the chart in Epic for any prior Security Risk Assessments and corresponding safety plans

3) Responding to Patients or Clients demonstrating Workplace Violence

- A. Staff witnessing or threatened by a patient’s or client’s behavior, if safe to do so, should attempt to de-escalate the patient or client consistent with their level of training and scope of practice. In the event de-escalation is not safe to do, not possible, or is not effective, staff should take steps to protect themselves, other staff, the patient or client, other patients or clients, and other families or visitors. These steps may include but are not limited to;
 1. Keeping a safe distance and/or creating barriers between them and the patient or client.
 2. Calling for help or bystander support.
 3. Evaluating the safety of remaining in the room with the patient or client.
 4. Closing the door to the patient or client’s room.
 5. Closing doors to rooms in the area where the incident is occurring.
 6. Calling for Public Safety or law enforcement:
 - **Milwaukee Hospital:** notify Public Safety by dialing extension 88.
 - **Fox Valley Hospital:** notify ThedaCare Security Services by dialing extension 444. ThedaCare Communications will overhead page “Security Assist” announcement.
 - **Off-site locations:** If Public Safety is on-site, notify Public Safety to respond. If Public Safety is not on-site or if the situation requires an immediate response from police, fire or EMS dial 911.
 7. If a patient cannot be calmed or controlled and must be restrained to prevent an immediate risk of physical harm to the patient or others, staff should follow the Patient Care Policy and Procedure: *Restraints – Use Of*. If applicable, Public Safety must be contacted for the application or removal of violent restraints and staff may be called upon to assist Public Safety.
 8. Staff should report the incident to their leader as soon as safely possible.
 9. Staff should submit a safety event using the Behavior Form in Origami
 10. Children’s staff should submit all work-related injuries through ReadySet (physical or psychological)
 11. Injuries to non-Children’s employees (MCW, volunteers, family, visitors should have a safety event report completed using Origami.
- B. Public Safety responsibilities:
 1. Public Safety may also, with the possible assistance of staff members, attempt to de-escalate the situation or gain control in the event of an immediate risk of physical harm. This may involve any actions deemed appropriate to ensure the safety of staff, patients, clients, family members, visitors, or the patient or client themselves. Refer to *Behavior*

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Outbursts – Care of the Patient Policy and Procedure.

2. If a patient cannot be calmed or controlled and must be restrained to prevent an immediate risk of physical harm to the patient or others, staff should follow the Patient Care Policy and Procedure: *Restraints –Use Of*. If applicable, Public Safety must be contacted for the application or removal of violent restraints and staff may be called upon to assist Public Safety.
 3. If a client cannot be calmed or controlled and must be physically stabilized to prevent an immediate risk of physical harm to the client or others, Public Safety should follow appropriate control alternatives depending on the totality of the circumstances.
 4. Public Safety may also request assistance from law enforcement if their assistance is needed or if a weapon is observed.
 5. Public Safety will generally complete a Security Risk Assessment describing the safety plan to minimize the potential for escalating behaviors in the future. Refer to *Security Risk Policy and Procedure*.
 6. Fox Valley Hospital: Theda Security Services will generally perform an initial assessment of the incident, complete a security report and Safety Plan describing the actions to be taken to minimize the potential for escalating behaviors in the future, as appropriate. Theda Security may involve Theda’s Workplace Violence Prevention Coordinator for additional guidance, and works in tandem with Children’s Public Safety team. Staff should contact Theda Security to begin this process.
- C. Depending on the nature and severity of the incident Public Safety may also notify Children’s Administrator On Call, Risk Management On Call, and/or MarCom On Call.
- D. Leadership responsibilities:
1. Provide support to staff and offer resources which may include but are not limited to: Critical Incident Stress Management (“CISM”), Employee Assistance Program (“EAP”), etc.
 2. Ensure that event reporting is completed and responded to within the established timeframes.
- As appropriate, request review by a multidisciplinary care conference or huddle to help determine the best and safest way to continue delivering care.

4) Responding to Families or Visitors Demonstrating Workplace Violence

- A. Staff witnessing or threatened such family or visitor behavior, if safe to do so, should attempt to de-escalate the behavior consistent with their level of training. In the event de-escalation is not safe to do, not possible, or is not effective, staff should take steps to protect themselves, other staff, the patient or client, other patients or clients, and other families or visitors. These steps may include but are not limited to;
1. Keeping a safe distance from the family member or visitor.
 2. Calling for help or bystander support.
 3. Evaluating the safety of remaining in the room.
 4. Closing the door to the room.
 5. Closing doors to rooms in the area where the incident is occurring.
 6. Calling for Public Safety or law enforcement:
 - **Milwaukee Hospital:** notify Public Safety by dialing extension 88.

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- **Fox Valley Hospital:** notify ThedaCare Security Services by dialing extension 444. ThedaCare Communications will overhead page “Security Assist” announcement.
 - **Off-site locations:** If Public Safety is on-site, notify Public Safety to respond. If Public Safety is not on-site or if the situation requires an immediate response from police, fire or EMS dial 911.
7. Staff should report the incident to their leader as soon as safely possible.
 8. Staff should submit a safety event using the Behavior Form in Origami
 9. Children’s staff should submit all work-related injuries through ReadySet (physical or psychological)
 10. Injuries to non-Children’s employees (MCW, volunteers, family, visitors should have a safety event report completed using Origami.
- B. Public Safety Responsibilities:
1. Public Safety may, with the possible assistance of staff members (and the Security Assist Team in FV), attempt to de-escalate the situation or gain control in the event of an immediate risk of physical harm. This may involve any actions deemed appropriate to isolate and/or remove the visitor from the property in such a way as to ensure the safety of staff, patients, clients, family members, visitors, or the family member or visitor themselves.
 2. Public Safety may also request assistance from law enforcement if their assistance is needed or if a weapon is observed.
 3. A visitor that demonstrates Workplace Violence and was removed from the property may be denied access in the future. This is usually decided on a case-by-case basis after Public Safety consultation with Risk Management and/or others.
 4. Public Safety will generally complete a Security Risk Assessment describing the safety plan to minimize the potential for escalating behaviors in the future. Refer to *Security Risk Policy and Procedure*.
 5. Fox Valley Hospital: Theda Security Services will generally complete a Safety Plan describing the actions to be taken to minimize the potential for escalating behaviors in the future. Staff should contact Theda Security to begin this process.
 6. Depending on the nature and severity of the incident, Public Safety may also notify Children’s Administrator On Call, Risk Management On Call, and/or MarCom On Call.
- C. Leadership responsibilities:
1. Provide support to staff and offer resources which may include but are not limited to: Critical Incident Stress Management (“CISM”), Employee Assistance Program (“EAP”), etc.
 2. Ensure that event reporting is completed and responded to within the established timeframes.
 3. As appropriate, request review by a multidisciplinary care conference or huddle to help determine the best and safest way to continue delivering care.

5) Responding to Staff Demonstrating Workplace Violence

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- A. Staff witnessing or threatened by such staff behavior, if safe to do so, should attempt to de-escalate the behavior consistent with their level of training. In the event de-escalation is not safe to do, not possible, or is not effective, staff should take steps to protect themselves, other staff, the patient or client, other patients or clients, and family members or visitors. These steps may include but are not limited to;
1. Keeping a safe distance from the staff member.
 2. Calling for help or bystander support.
 3. Evaluating the safety of remaining in the room with the staff member.
 4. Closing the door to the room.
 5. Closing doors to rooms in the area where the incident is occurring.
 6. Calling for Public Safety or law enforcement:
 - **Milwaukee Hospital:** notify Public Safety by dialing extension 88.
 - **Fox Valley Hospital:** notify ThedaCare Security Services by dialing extension 444. ThedaCare Communications will overhead page "Security Assist" announcement.
 - **Off-site locations:** If Public Safety is on-site, notify Public Safety to respond. If Public Safety is not on-site or if the situation requires an immediate response from police, fire or EMS dial 911.
 7. Staff should report the incident to their leader as soon as safely possible. If their leader is not available or is part of the problem, the person should promptly report the situation to one of the following individuals:
 - a) Another leader within the department or division
 - b) Human Resources (Business Partner or Director)
 - c) A Vice President
 - d) Administrator On-Call
 - e) The CHW Legal Department
 - f) Corporate Compliance
 - g) Anonymous Corporate Compliance Help line by dialing (414) 266-1773 or (877) 659-5200 or emailing via Children's Connect by searching "Corporate Compliance Help Line"
 8. Staff should submit a safety event using the Behavior Form in Origami
 9. Children's staff should submit all work-related injuries through ReadySet (physical or psychological)
 10. Injuries to non-Children's employees (MCW, volunteers, family, visitors should have a safety event report completed using Origami.
 11. Staff who believe that they are being subjected to or have experienced violent behavior by another staff member while off duty should notify their immediate supervisor and Public Safety.
- B. Public Safety Responsibilities:
1. Public Safety may, with the possible assistance of departmental supervisor or staff, attempt to de-escalate the situation or gain control in the event of an immediate risk of physical harm. This may involve any actions deemed appropriate to ensure the safety of staff, patients, clients, family members, visitors, or the staff member themselves.
 2. Public Safety may also request assistance from law enforcement if their assistance is

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needed or if a weapon is observed.

Public Safety will generally complete a Security Incident Report.

- C. Depending on the nature and severity of the incident Public Safety may also notify Children's Administrator On Call, Risk Management On Call, and/or MarCom On Call.
- D. Leadership responsibilities:
 - 1. Provide support to staff and offer resources which may include but are not limited to: Critical Incident Stress Management ("CISM"), Employee Assistance Program ("EAP"), etc.
 - 2. Ensure that event reporting is completed and responded to within the established timeframes.
 - 3. Notify and seek guidance from Human Resources.

6) Guidance for Staff experiencing or concerned about the potential for domestic violence

- A. Because of the potential for domestic violence to spill over into the workplace, Staff that are experiencing or concerned about the potential for domestic violence are strongly encouraged to report their concerns to Public Safety.
- B. Public Safety staff will generally consult with Staff in these situations and help assess the risk to the Staff member and the organization, and can work with the Staff member, their leader(s) and/or Human Resources to offer resources and develop a safety plan aimed at preventing and mitigating the risk of harm to the Staff member and the workplace.

7) Workplace Violence Prevention Training and Education

- A. Upon hire
 - 1. Review of this policy is included in the new hire orientation checklist
 - 2. New hires are assigned 'Creating a Safe Workplace: New Employees' in Workday
 - 3. New hires are assigned 'Reporting a Patient, Visitor, or Medical Staff Safety Event' in Workday
- B. Staff at higher risk
 - 1. In addition to completing the required education above, front line clinical staff who may be at elevated risk of experiencing Workplace Violence complete online courses: 'Creating a Safe Workplace – Behavioral Challenges & Restraints', plus instructor-led courses on Behavioral Challenges, Intimate Partner Violence, and Security – Professional Communication Skills.
- C. Recurring training
 - 1. Workplace Violence Prevention refresher education is included in Annual Safety Education
 - 2. When changes occur to this policy or other policies that are referenced in this policy those changes will be communicated to affected staff.

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