

# OREGON STATE HOSPITAL

## POLICY

**SECTION 8:** Safety, Security, Emergency Management **POLICY: 8.033**

**SUBJECT:** Workplace Violence Prevention

**POINT PERSON:** Director of Occupational Health & Safety

**APPROVED:** Dolores Matteucci **DATE: NOVEMBER 17, 2023**  
*Dolores Matteucci*  
Superintendent

**SELECT ONE:** ☒ New policy ☐ Minor/technical revision of existing policy  
☐ Reaffirmation of existing policy ☒ Major revision of existing policy

### I. PURPOSE AND APPLICABILITY

- A. This policy establishes Oregon State Hospital's (OSH) Workplace Violence Prevention Program (WVPP) and outlines the role of OSH's Violence Prevention Sub-Committee in promoting a culture of safety.
- B. This policy applies to all OSH staff, patients, and visitors.

### II. POLICY

- A. OSH is committed to establishing an environment that promotes physical safety and emotional well-being for patients, staff, and visitors. In addition to the provisions of this policy, OSH follows the Department of Administrative Services (DAS) policy 50.010.02, "Violence-Free Workplace."
- B. OSH prohibits workplace violence. Such behavior may include, but is not limited to:
  - 1. Threats and threatening behavior such as physical, verbal, or written acts that express, or are reasonably perceived to imply intent to cause physical or psychological harm against a person or persons or cause damage to property;
  - 2. Statements, gestures, or expressions that communicate a direct or indirect threat of physical or psychological harm; or

3. Violent behavior such as carrying out threats or threatening behavior.
- C. The Workplace Violence Prevention Sub-Committee (WVPSC), as outlined in the Central Safety Charter and WVPP manual, focuses on prevention and reduction of workplace violence injuries while improving the culture of safety for patients and staff.
- D. OSH responds to workplace violence in a timely and appropriate manner as indicated in this policy and the WVPP manual.
  1. Reportable incidents must be reported per OSH policy 1.003, "Incident reporting." OSH conducts investigations of alleged workplace violence and initiates a timely and appropriate response to allegations.
  2. In the event of alleged or perceived workplace violence from public members or OSH visitors, Staff must follow Procedure A.
  3. In the event of alleged or perceived workplace violence from patients, staff must follow Procedure B.
  4. In the event of alleged or perceived workplace violence between staff, Staff must follow Procedure C.
  5. In the event of alleged or perceived workplace violence from personal relationships, staff must follow Procedure D.
- E. Depending on the severity of the workplace violence, OSH may take additional appropriate workplace violence response action, such as:
  - a. Notify law enforcement to assist with response or investigation; and/or
  - b. Restrict access to staff, visitors, or public (i.e., visitation restriction or restriction of hospital premises access) as outlined in Oregon Administrative Rule (OAR) 309-106-0010 to 309-106-0015 and OAR 943-012-0010.
- F. Staff responding to a law enforcement response and/or investigation must follow OSH policy 8.019, "Staff Response to Alleged Criminal Acts and Contraband."
- G. OSH provides staff with in-person and electronic training related to de-escalation, and emergency response as outlined per this policy and OSH Policy, 9.002, "Training for Staff."
- H. OSH responds to allegations of harassment per this policy and OSH policy 8.019, "Staff Response to Alleged Criminal Acts." OSH responds to allegations of workplace harassment, per DAS policy 50.010.01, "Discrimination and Harassment Free Workplace."

- I. OSH will provide resources and aid staff as outlined in DAS policy 50.010.04, ““Workplace Effects of Domestic Violence, Harassment, Sexual Assault and Stalking” and HR-related protocols. Information will be treated as private and confidential, only being shared with relevant parties as needed.
- J. OSH responds to allegations of patient verbal and physical abuse or mistreatment, including threats, per this policy and OSH policy 7.008, “Patient Abuse or Mistreatment Allegation Reporting.”
- K. A person may not retaliate against a patient, staff, or visitor who reports or experiences workplace violence.
- L. Oregon State Hospital (OSH) follows all applicable regulations, including federal and state statutes and rules; Oregon Department of Administrative Services (DAS), Shared Services, and Oregon Health Authority (OHA) policies; and relevant accreditation standards. Such regulations supersede the provisions of this policy unless this policy is more restrictive.
- M. Staff who fail to comply with this policy or related policy attachments or protocols may be subject to disciplinary action, up to and including dismissal.

### **III. DEFINITIONS**

- A. “Harassment” is as defined in Oregon Revised Statute (ORS) 166.065. A person commits the crime of harassment if the person intentionally:
  - 1. Harasses or annoys another person by:
    - a. Subjecting such other person to offensive physical contact; or
    - b. Publicly insulting such other person by abusive words or gestures in a manner intended and likely to provoke a violent response;
  - 2. Subjects another to alarm by conveying a false report, known by the conveyor to be false, concerning death or serious physical injury to a person, which report reasonably would be expected to cause alarm; or
  - 3. Subjects another to alarm by conveying a telephonic, electronic (electronic mail, internet, text message, etc.), or written threat to inflict serious physical injury on that person or to commit a felony involving the person or property of that person or any member of that person’s family, which threat reasonably would be expected to cause alarm.
- B. “Staff” includes employees, volunteers, trainees, interns, contractors, vendors, and other state employees assigned to work at Oregon State Hospital (OSH).

- C. "Threats" and "threatening behavior" as defined by DAS policy 50.010.02 means physical, verbal, or written acts that express, or are reasonably perceived to imply, intent to cause physical or psychological harm against a person or persons or cause damage to property.
- D. "Type I – Criminal Intent" means the perpetrator has no legitimate relationship to the OSH or its staff. Type I violence is usually incidental to another crime such as robbery, shoplifting, or trespassing. Acts of terrorism also fall into this category.
- E. "Type II – Patient/Resident/Customer/Client" means a violent person has a legitimate relationship with the business – for example, a patient, a customer, client, or adult in custody becomes violent while being served by OSH.
- F. "Type III – Staff on Staff" means the perpetrator of Type III violence is an employee or past employee of the business who attacks or threatens other employee(s) or past employee(s) in the workplace. This includes agency staff, contractors, students, volunteers, and interns.
- G. "Type IV – Personal Relationship" means the perpetrator in these cases usually does not have relationship with the business but has a relationship with the intended victim. This category includes victims of domestic violence who are assaulted or threatened while at work.
- H. "Weapon" has the same meaning as OSH policy 8.044, "Contraband and Prohibited Items."
- I. "Workplace" means any place where OSH conducts business including, but not limited to, OSH campus and buildings, state-owned vehicles, personal vehicles when used during OSH-related work or activities as defined in OSH policy 8.006, "Vehicle Usage," or other locations where OSH business is conducted.
- J. "Workplace harassment," is as defined in DAS policy 50.010.01. Conduct that constitutes discrimination prohibited by ORS 659A.030, including conduct that constitutes sexual assault or that is prohibited by ORS 659A.082 or 659A.112.
- K. "Workplace Violence" is defined in DAS policy 50.010.02.
- L. "Violence-Free Workplace." Workplace violence is behavior that to a reasonable person is intimidating, hostile, threatening, violent, or abusive.

#### **IV. PROCEDURES**

Procedures A Workplace Violence Type I Response

Procedures B Workplace Violence Type II Response

Procedures C Workplace Violence Type III Response

Procedures D Workplace Violence Type IV Response

**V. RELATED OSH POLICIES AND PROTOCOLS**

1.003 Incident Reporting

5.002 Family Medical Leave

5.011 Return to Work of Staff Injured on the Job

5.012 Injury or Illness Reporting

6.011 Treatment Care Planning

7.006 Patient Grievances

7.008 Patient Abuse or Mistreatment Allegation Reporting

8.002 Emergency Care Provided by OSH

8.006 Vehicle Usage

8.019 Staff Response to Alleged Criminal Acts and Contraband

8.026 Visitors to Patients

8.027 Weapons on Campus

8.044 Contraband and Prohibited Items

Safety Department – Central Safety Charter

Safety Department - Workplace Violence Prevention Program (WVPP) Manual

Legal Services – Release of Information FAQ

**VI. REFERENCES**

29 U.S. Code § 654. Department of Administrative Services. *Discrimination and harassment-free workplace*, 50.010.01. Author.

Department of Administrative Services. *Maintaining a Professional Workplace*, 50.010.03. Author.

Department of Administrative Services. *Violence-free workplace*, 50.010.02. Author.

Department of Administrative Services. *Workplace effects of domestic violence, harassment, sexual assault and stalking*, 50.010.04. Author.

Oregon Administrative Rule §§ 309-106-0010 - 309-106-0015.

Oregon Administrative Rules § 943-012-0005.

Oregon Revised Statute § 161.015.

Oregon Revised Statute § 163.211.

Oregon Revised Statute § 166.360.

Oregon Revised Statute § 179.505.

Oregon Revised Statute §§ 654.412-654.423.

Oregon Revised Statute §§ 659A.280 – 259A.290.

Joint Commission Resources, Inc. (2023). *The joint commission comprehensive accreditation manual for hospitals*. EC 02.01.01, EP 17. Oakbrook Terrace, IL: Author.

Joint Commission Resources, Inc. (2023). *The joint commission comprehensive accreditation manual for hospitals*. EC 04.01.01 ep1, EP 6. Oakbrook Terrace, IL: Author.

Joint Commission Resources, Inc. (2023). *The joint commission comprehensive accreditation manual for hospitals*. LD 03.01.01, EP 9. Oakbrook Terrace, IL: Author.

Joint Commission Resources, Inc. (2023). *The joint commission comprehensive accreditation manual for hospitals*. HR 01.05.03, EP 29. Oakbrook Terrace, IL: Author.