


**GUAM MEMORIAL HOSPITAL AUTHORITY
ADMINISTRATIVE MANUAL**

APPROVED BY:  Peter John D. Camacho, MPH Hospital Administrator/CEO	RESPONSIBILITY: Dept. Managers/Supv. Safety Security Human Resources Employee Health Services (EAP)	EFFECTIVE DATE: February 10, 2017	POLICY NO.: A-HR3000	PAGE 1 of 4
TITLE: WORKPLACE VIOLENCE PREVENTION PLAN				
LAST REVIEWED/REVISED: 02/2017				
ENDORSED: EOC 01/2017, EMC 02/2017				

PURPOSE:

The Guam Memorial Hospital Authority (GMHA) recognizes that violence in general and violence in the workplace as inappropriate methods for dealing with conflict and significant public health care issues. This policy outlines some of the behaviors that are inappropriate. It also provides a mechanism to identify acts or potential acts of violence and establishes a protocol to respond to either.

Healthcare workers have faced a significant risk of job-related violence and violence continues to increase. This hospital will provide a means of addressing workplace violence.

DEFINITION:

For the purposes of this policy, violence is broadly defined as, but not necessarily limited to, behavior involving employees, visitors, physicians, or patients, which cause or threatens to cause harm to anyone. Threats, verbal harassment or sexual harassment, in addition to actual physical harm, are considered acts of violence.

Persons engaging in violent behaviors as defined above are subject to disciplinary action as prescribed in the civil and criminal action as specified by local, state, or federal ordinances and statutes.

POLICY:

- The safety and security of hospital personnel, patients and visitors is of vital importance. Therefore, acts or threats of physical violence, including intimidation, harassment or coercion, which in your judgment affects the hospital or which occurs on hospital property will not be tolerated;
- This prohibition against threats and acts of violence applies to all persons involved, including but not limited to hospital personnel, licensed independent practitioners, contract and temporary personnel, employee family members, patients and visitors. Therefore, violation of this policy by any individual on hospital property is considered misconduct and will lead to disciplinary and/or legal action as appropriate;
- No reprisals will be taken against any employee who reports or experiences workplace violence;
- Responsibility for a Workplace Free from Acts and Threats of Violence;

- All hospital personnel must refrain from engaging in acts of violence and are responsible for maintaining a work environment free from acts or threats of violence;
- Prevention Program for Workplace Security;
 - 1. A prevention program for workplace security will include the following:
 - a. Complete a security and safety assessment of hospital
 - b. Sufficient trained personnel to provide security
 - c. Controlling access and freedom of movement
 - d. Ensuring adequate security systems including door locks, security windows, physical barriers and restraint systems
 - e. Employee training
 - f. Effective systems to warn others of a security danger or to summon assistance (i.e., panic buttons)
 - g. Adequate employee escape routes
 - h. Buddy system for specified emergency events
- Management Response Team;
 - 1. This hospital has established an incident response team which is responsible for the overall implementation and maintenance of the hospital's workplace violence prevention plan. Management response team members are management level representatives from the following departments:
 - Human Resources
 - Safety
 - Security Department
 - Risk Management
 - Governing Body
 - Administration
 - 2. The management response team is headed by Safety and Security Administrator or designee. He/she can be contacted by dialing "0" (hospital Operator).
 - 3. The management response team's duties include, but are not limited to, improving the hospital's readiness to address workplace violence by:
 - Reviewing past incidents of violence at the hospital.
 - Reviewing hospital's readiness to respond to issues of workplace violence.
 - Developing an expertise among management response team members and other appropriate members of management regarding issues of workplace violence.
 - Establishing liaison with local law enforcement and emergency services.
 - Training hospital personnel.
 - Initial appropriate pre-employment screening of potential hospital personnel in order to minimize the likelihood of hiring an individual with violent propensities.
 - Establishing and maintaining policies and procedures for dealing with issues of workplace violence among contract and temporary personnel.
 - The management response team may assign all or some of these tasks to other individuals within the hospital. Nevertheless, the management response team remains ultimately

responsible for implementing and maintenance of the hospital's Workplace Violence Prevention Plan.

- Managers and Supervisors and all employees shall be responsible for the following; and
 1. Workplace violence prevention training.
 2. Assisting management response team with implementing and maintaining the workplace violence program.
 3. Obey all approved workplace violence prevention policies.
 4. Be held accountable for reporting all incidents and following-up on violence related reports.
- Reporting Requirements:
 1. Hospital Personnel:
 - Shall report immediately any acts or threats of violence occurring on hospital premises to the Security Department, their respective supervisor/manager, a management response team member or to the Human Resources Department. No employee will be disciplined or discharged for reporting any threats or acts of violence.
 2. Supervisor:
 - Shall report immediately any acts or threats of violence to the Security Department, their immediate supervisor, management response team member or the Human Resources Department. Supervisors/Managers are additionally required to report the occurrences or each warning sign of violence that they observe (i.e., verbal abuse, aggressive behavior, loitering).
 3. Contract Services:
 - Third parties working on hospital premises shall be informed of Workplace Violence Prevention requirements by contracting department prior to doing any actual work on hospital premises.
 4. Medical Management:
 - Employees, who are victims of workplace violence, will be provided with appropriate medical and emotional treatment as determined by the Authority. Employees who are abused by patients, visitors, clients and so on may experience long and short-term psychological trauma, post-traumatic stress, anger, anxiety, irritability, depression, shock, disbelief, self-blame, fear of returning to work, disturbed sleep patterns, headaches and changes in relationships with family and coworkers.
 - Employees, who have been the victims of violence will receive immediate physical evaluations, be removed from the worksite and treated for acute injuries. Additionally, referrals shall be made for appropriate evaluation, treatment, counseling and assistance both at the time of the incident and for any follow-up treatment necessary.
 5. Record Keeping:
 - Should be used to provide information for analysis, evaluation of methods of control, severity determinations, identifying training needs and overall program evaluations.
 - Record keeping includes the following:
 1. Entry of injury on the OSHA Injury and Illness Log. Injuries that must be recorded include the following:

- a. Loss of consciousness
- b. Restriction of work or motions
- c. Transfer to another job or termination of employment
- d. Medical treatment beyond first aid
- e. All incidents of abuse, verbal attacks or aggressive behavior
- f. Recording and communicating mechanism so that all staff who may provide care for an escalating or potentially aggressive, abusive or violent patient will be aware of the patient's status and of any problems experienced in the past;
- g. Gathering of information to identify any past history of violent behavior, incarceration, probation reports or any other information that assists employees to assess violent status;
- h. Emergency Department personnel are encouraged to obtain and record information regarding drug abuse, criminal activity or other relevant information;
- i. Workers' Compensation and insurance records;
- j. Environment of Care Committee Minutes and inspections are kept in accordance with requirements; and
- k. Training program contents and sign-in sheets of all attendees are maintained.

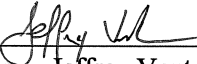
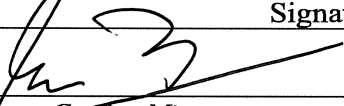
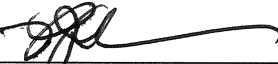
RESCISSION:

Policy No. 6100-33, Workplace Violence Prevention Plan of the Administrative Manual made effective September 2004.

GUAM MEMORIAL HOSPITAL
AUTHORITY
REVIEW AND ENDORSEMENT CERTIFICATION

The signatories on this document acknowledge that they have reviewed and approved the following:

- o Bylaws Submitted by Department/Committee: Safety and Security Dept. / EOC Committee
- o Rules & Regulations Policy No. 401 Safety and Security Manual and ~~A-HR3000~~ Administrative Manual
- o Policies & Procedures Title: 401-Code 60-Security Threat and ~~A-HR3000~~ Workplace Violence Prevention Plan

Reviewed/Endorsed	Date	Signature
	12/29/2016	
Title	Name Jeffrey Ventura Title Safety Administrator/Chief of Security, Acting	
Reviewed/Endorsed	Date	Signature
	1/03/2017	
Title	Name Gordon Mizusawa Title Environment of Care Chairman	
Reviewed/Endorsed	Date	Signature
	02/03/17	
Title	Name Peter John D. Camacho, MPH Title Hospital Administrator/CEO, Chairman, Executive Management Council	