WPVP Regulations

Estimated Timeline

- September 20, 2016: Cal/OSHA Standards Board adopted the proposed regulation
- December 7, 2016: OAL deadline to accept or reject the regulatory package
- January 1, 2017: Effective Date (assuming accepted by OAL before November 30); April 1, 2017: Effective Date (assuming accepted by OAL after November 30)
  - NOTE: Violent Incident Log, Recordkeeping and Hospital Reporting would be required to be in place as of January 1, 2017; remainder in place as of January 1, 2018

WPVP Regulations

Elements

- Creating and maintaining a Workplace Violence Prevention Plan
- Identifying management with responsibility for administering
- Coordinating with other employers of employees working at your site
- Identifying and evaluating safety and security risks
- Investigating violent incidents
- Correcting hazards
- Communicating with employees and others
- Training
- Hospital reporting to Cal/OSHA
- Recordkeeping
- Program Review
Scope

- Health facilities including hospitals, long-term care, intermediate care, congregate care, correctional treatment center, psychiatric hospital
  - Including any service that falls under the hospital’s license
- Home health care and home-based hospice
- Emergency medical services and medical transport, including those services when provided by firefighters and other emergency responders
- Drug treatment programs
- Outpatient medical services to the incarcerated in correctional and detention settings
- NOTE: DDS facilities must comply so long as they are not designated to close by 2021. CDCR facilities are exempt

Key Provisions

Healthcare Workplace Violence Definition

- “Workplace violence” means any act of violence or threat of violence that occurs at the work site. The term workplace violence shall not include lawful acts of self-defense or defense of others. Workplace violence includes 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 the 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;
Key Provisions

Four workplace violence types:

- **“Type 1 violence”** means workplace violence committed by a person who has no legitimate business in the work site, and includes violent acts by anyone who enters the workplace with the intent to commit a crime.

- **“Type 2 violence”** means workplace violence directed at employees by customers, clients, patients, students, inmates, or visitors or other individuals accompanying a patient.

- **“Type 3 violence”** means workplace violence against an employee by a present or former employee, supervisor, or manager.

- **“Type 4 violence”** means workplace violence committed in the workplace by someone who does not work there, but has or is known to have had a personal relationship with an employee.

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Workplace Violence Prevention — Looking at the Continuum of Behavior

- Intimidating Behavior
- Harassment
- Workplace Violence
  - Bullying
  - Threat of Violence
Training

- Training to be tailored to the risks employees are reasonably anticipated to encounter in their jobs
  - Scope of who must be trained is still unclear
- Awareness training for all employees when the plan is adopted and, for new employees, at the start of employment
  - Overview of the Plan
  - Recognizing potential for violence
  - Strategies for avoiding harm
  - Hospital alarm systems and how to use escape routes
  - Role of private security personnel, if any
  - Reporting incidents
  - Resources

Training

- Opportunity to ask questions
  - Computer-based learning is permitted so long as employees can have their questions answered within one business day
- Annual refresher training for employees whose job involves patient contact and their supervisors
  - At least annually to review topics included in the initial training and results of the annual review
  - Focused on topics/information applicable to those employees
- Opportunity to ask questions
  - Computer-based learning is permitted so long as employees can have their questions answered within one business day
Training

- Specified training for employees whose job responsibilities include violent incident response
  - General and personal safety measures
  - Aggression and violence predicting factors
  - The assault cycle
  - Characteristics of aggressive and violent patients and victims
  - Verbal intervention and de-escalation techniques and physical maneuvers to defuse and prevent violent behavior
  - Strategies to prevent physical harm
  - Appropriate use of restraining techniques
  - Appropriate use of medications as safety restraints
- The opportunity to practice maneuvers and techniques with other team members and a debrief after the training to identify and correct issues

Other Key Provisions

- Procedures to obtain the active involvement of employees or their representatives in all aspects of plan development, implementation and evaluation/assessment
- Developing effective procedures for obtaining assistance from appropriate law enforcement agency, including a policy statement that prohibits the employer from adopting a policy that prevents employees from calling local law enforcement
- Procedures to assess the work environment, including parking lots, etc., for safety/security risks
Other Key Provisions

- Procedures to identify and evaluate patient-specific risk factors
  - Factors specific to a patient that may increase the likelihood or severity of a workplace violence incident such as use of drugs or alcohol, psychiatric condition or diagnosis associated with increased risk of violence, any condition or disease process that would cause confusion and/or disorientation, or history of violence
  - How “patient-specific” is still a question

- Procedures to assess visitors or other individuals who display disruptive behavior or otherwise demonstrate a risk of committing workplace violence

Other Key Provisions

- Procedures to implement corrective action, as applicable, including but not limited to:
  - Sufficient staffing
  - Eliminating line of sight obstacles
  - Removing, fastening or controlling items that could be used as a weapon
  - Preventing transport of unauthorized firearms or other weapons

- Annual review or review when changed circumstances
Other Key Provisions

- Post-Incident Response
  - Provide appropriate medical/psychological care
  - Investigate
  - Debrief
  - Document
  - Correct identified hazards

Violent Incident Log

- To be reviewed during the annual plan review and available to employees
- For each incident, employer completes based on information solicited from the employee(s):
  - Date, time, location and department
  - Detailed description of the incident
  - Classification of perpetrator
  - Circumstances
  - Type of incident
  - Consequences of incident
Acute Care, Acute Psych and Specialty Hospital Reporting

- Required by SB 1299
- Must report any violent incident that involves
  - The use of physical force against an employee by a patient or a person accompanying a patient that results in, or has a high likelihood of resulting in, injury, psychological trauma, or stress, regardless of whether the employee sustains an injury; or
  - An incident involving the use of a firearm or other dangerous weapon, regardless of whether the employee sustains and injury

24-Hour Reporting for

- A fatality or an injury that requires inpatient hospitalization for a period in excess of 24 hours for other than medical observation or in which an employee suffers a loss of any member of the body or suffers any serious degree of permanent disfigurement
- An incident involving the use of a firearm or other dangerous weapon
- Urgent or emergent threat to the welfare, health or safety of hospital personnel such that they are exposed to a realistic possibility of death or serious physical harm
Acute Care, Acute Psych and Specialty Hospital Reporting

- 72-Hour Reporting for
  - Other reportable incidents within the following parameters
    - The use of physical force against an employee by a patient or a person accompanying a patient that results in, or has a high likelihood of resulting in, injury, psychological trauma, or stress, regardless of whether the employee sustains an injury
    - For this purpose, injury is defined as an incident requiring medical treatment more than first aid

Acute Care, Acute Psych and Specialty Hospital Reporting

- Cal/OSHA is developing on-line reporting tool
- Reporting data points are still under discussion
- Cal/OSHA has stated it will not display information by hospital, but rather aggregate it in some fashion
Resources

- CHA – Members Only
- NIOSH
  - www.cdc.gov/niosh/topics/violence/pubs.html
- Minnesota Hospital Association
- Fed/OSHA
- Emergency Nurses Association
  - www.ena.org/practice-research/Practice/ViolenceToolKit/Documents/toolkitpg4.htm

Questions

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