

NATIONAL CAPITAL
REGION MEDICAL



Workplace Violence Program

Employee Toolkit

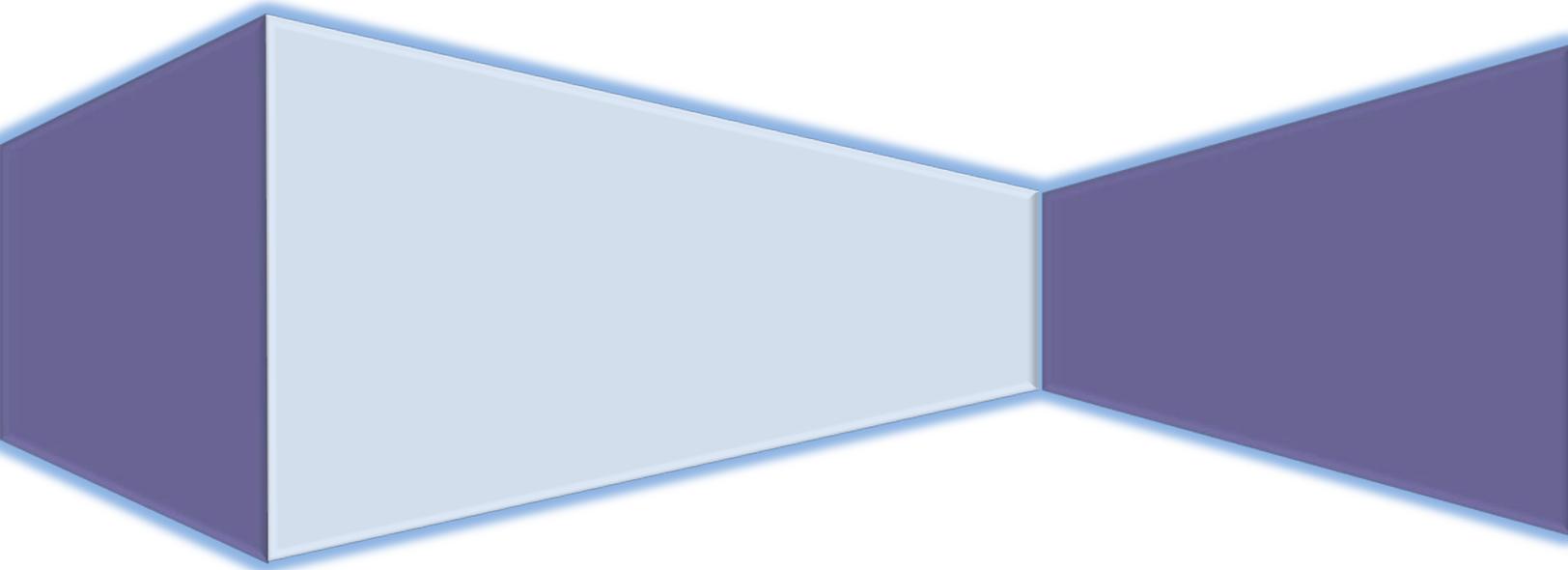


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NCR MD Workplace Violence Program

A safe workplace environment is paramount in protecting our most valuable resource: our employees. Violent behavior toward any civilian, military or contracting personnel shall not be tolerated. When warranted, disciplinary actions, up to and including termination of employment shall be initiated promptly to avoid perpetuation of disruptive incidents.

Prohibited workplace behavior includes any acts of violence, threats, harassment, intimidation, bullying, possession or use of a weapon unless required as a condition of employment or dangerous instrument, and other disruptive behavior reasonably perceived to be a threat of physical harm via any means such as face-to-face, cyber, telephonic, etc.

Work-related incidents of domestic violence, sexual violence, and stalking, attempted or threatened acts by or against employees, and/or employees' families or property are under the domain of workplace violence.

Responding to workplace violence is not exclusively a security, human resources, management and higher level supervisory, or behavioral health problem, but draws on multiple stakeholders, as effective prevention and intervention strategies require a multidisciplinary approach within the organization.

Violence and threats of violence are taken seriously. Your supervisor/chain of command should respond accordingly, to include contacting onsite security or police.

During all workplace violence investigations, there shall be no discrimination against an employee for political beliefs, physical disabilities, sex, race, religion, color, national origin, or age.

Anonymity shall be maintained to the maximum extent possible to protect the employee who feels threatened; however, respondents may willingly participate in legal proceedings. Privacy and trust will be respected at all times.

Note: The above was taken from the National Capital Region Medical Directorate (NCR MD) Administrative Instruction (AI) 1400.08, "Workplace Violence Program," July 29, 2016.

Workplace Violence Continuum

Recognizing all forms of workplace violence is the first step in preventing language and behaviors that can frighten and intimidate staff. Although violence of any kind is not tolerated, violent offenses differ in severity and so should their repercussions. Presented are violence levels from yellow to red depending on the assailant actions.

Violence Level	Assailant Actions
Yellow	<ul style="list-style-type: none"> • Intimidation/bullying • Disrespectful (overt and passive-aggressive) • Verbally abusive (curse words, demeaning, etc.) • Refuses to cooperate with supervisors • Constantly argues with co-workers • Makes unwanted sexual comments
Orange	<ul style="list-style-type: none"> • 3+ yellow infractions of similar actions • Verbal and/or written threats of violence to victim and victim's personal effects (such as car) • Stalking (co-worker or outside party perpetrating domestic violence) • Expressing empathy or align with those who resort to violence • Suicide threat with no recent attempt, preparatory behavior, or rehearsal of act
Red	<ul style="list-style-type: none"> • 3+ orange infractions of similar actions • Physical altercation of any severity • Aggressive posturing/demonstration of rage during verbal altercation • Purposeful sabotage/vandalism/stealing of agency and employee property • Persistent suicidal ideation or thought • Bringing weapon on site • Utilization of an object as a weapon to harm others (not limited to guns)

Behavior Signs to Watch

Verbal Cues

- Speaking loudly or yelling
- Swearing
- Threatening tone of voice



Non-Verbal or Behavioral Cues

- Physical appearance (clothing and hygiene neglected)
- Arms held tight across chest
- Clenched fists
- Heavy breathing
- Pacing or agitation
- A terrified look signifying fear and high anxiety
- A fixed stare
- Aggressive or threatening posture
- Thrown objects
- Sudden changes in behavior
- Indications of drunkenness or substance abuse

Indicators of Potential Violence

- Increased use of alcohol and/or illegal drugs
- Unexplained increase in absenteeism; vague physical complaints
- Noticeable decrease in attention to appearance and hygiene
- Depression / withdrawal
- Resistance and overreaction to changes in policy and procedures
- Repeated violations of company policies
- Increased severe mood swings
- Noticeably unstable, emotional responses
- Explosive outburst or anger or rage without provocation
- Suicidal: Comments about “putting things in order”
- Behavior which is suspect of paranoia (“Everybody is against me.”)
- Increasingly talks of problems at home
- Escalation of domestic problems into the workplace; talk of severe financial problems
- Talk of previous incidents of violence
- Empathy with individuals committing violence
- Increase in unsolicited comments about firearms, other dangerous weapons and violent crimes.

Taken from US Homeland Security Active Shooter How to Respond. October 2008

Suggested Actions During Violent Acts

While workplace violence prevention is critical, some violent incidents are inevitable. Utilize the information below to successfully diffuse a violent situation.



Stay Calm & Listen Attentively



Maintain Eye Contact



Be Courteous & Patient



Control the Situation



Signal Someone for Help



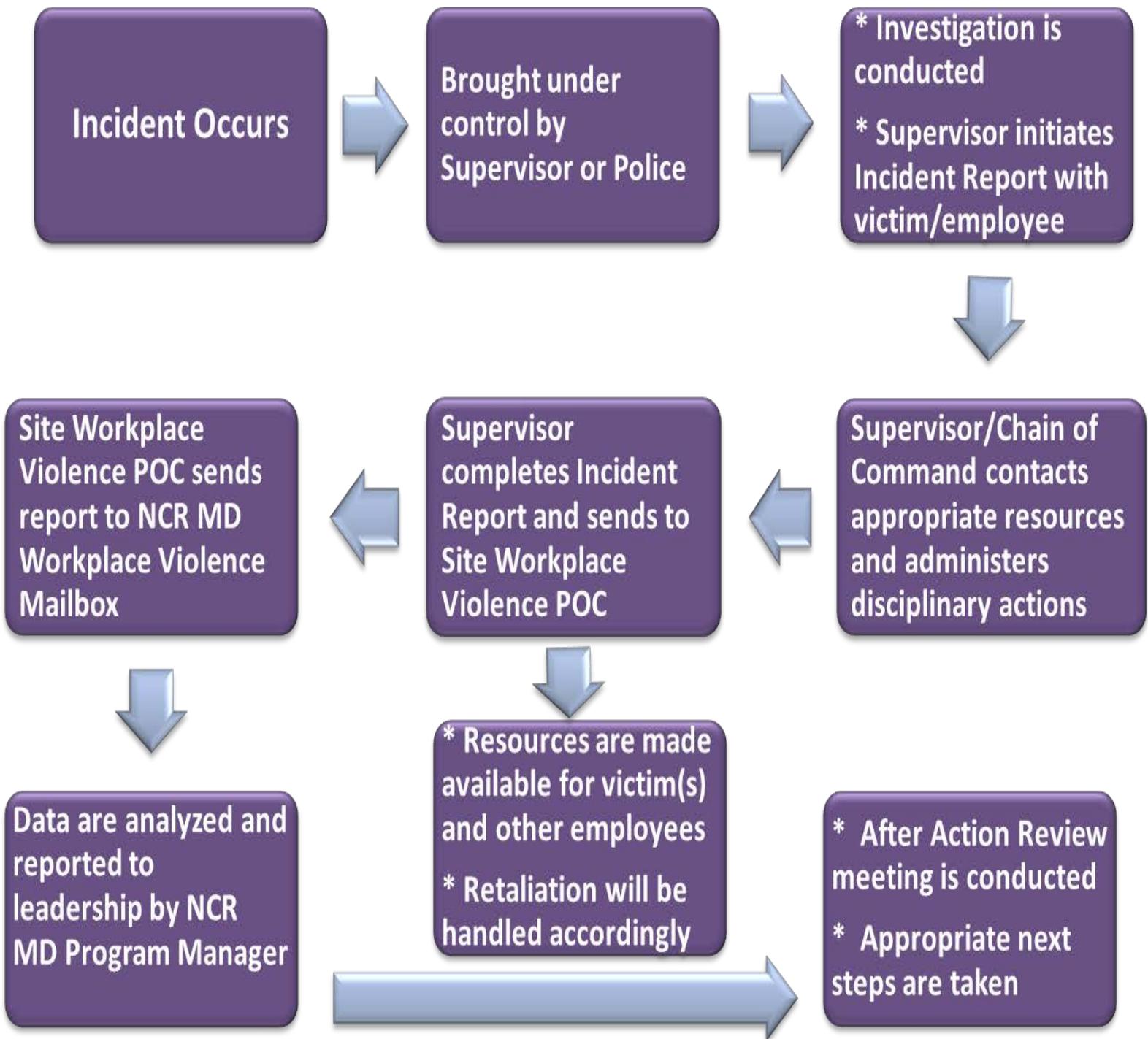
Have Someone Contact the Police

When the Assailant Has a Weapon



- Stall for time
- Keep talking and following instruction from the person who has the weapon
- Do not risk harm to yourself and others
- Never try to grab the weapon
- Watch for safe chance to escape to a safe area

Workplace Violence Incident Report Process



Workplace Violence Program Site Point of Contacts

	Site & Contact Name	Phone	E-mail
1	Walter Reed National Military Medical Center Mr. Nathan Williams (Security and Anti-Terrorism Officer)	(301) 295-9061	Nathan.w.williams.civ@mail.mil
2	Fort Belvoir Community Hospital Mr. Andrew Holtz (Chief of Police)	(571) 231-3814	Andrew.c.holtz.civ@mail.mil
3	DiLorenzo TRICARE Health Clinic 1. SGT Jarrad C. Stewart (Medical Records NCO) 2. SGT Geronimo Dudley II (Medical Technician NCO)	(703) 692-8784 (703) 692-1304	Jarrad.c.stewart.mil@mail.mil Geronimo.dudley2.mil@mail.mil
4	Joint Pathology Center Mr. Roberto Espinoza (HR Administration Officer)	(301) 295-4625	Roberto.a.espinoza.civ@mail.mil
5	Integrated Referral Management and Appointment Call Center Ms. Leslie Cohen (Supervisor)	(301) 319-5301	Leslie.r.cohen.civ@mail.mil

Workplace Violence Program Point of Contacts

	Name	Phone	E-mail
1	Ms. Avril Barker, Program Coordinator	(301) 400-1768	Avril.Barker.civ@mail.mil
2	Dr. Joan Gordon, Program Manager	(301) 319-3817	Joan.Y.Gordon.ctr@mail.mil



WORKPLACE VIOLENCE INCIDENT REPORT

Each section of the form should be completed by the specified person.

SECTION 1: TO BE COMPLETED BY THE PERSON SUBJECT TO OR OBSERVED THE INCIDENT.

Date of Incident:	Time:
Address/Location of Incident:	

Report submitted by <u>(May Remain Anonymous)</u> :	Date:
Title:	Telephone:
Chain of command notified of the incident? Yes No	

SECTION 2: TO BE COMPLETED BY: WRNMMC FORT BELVIOR JPC HQ

Individuals involved in the incident (use additional sheet(s) if necessary):

Name: (Violence directed towards) <input type="checkbox"/> Civilian <input type="checkbox"/> Military <input type="checkbox"/> Contractor <input type="checkbox"/> Other	Assailant's Name: <input type="checkbox"/> Civilian <input type="checkbox"/> Military <input type="checkbox"/> Contractor <input type="checkbox"/> Other
Title:	Title:
Division:	Division:
Phone:	Phone:
Immediate or Higher Level Supervisor:	Immediate or Higher Level Supervisor:
Has victim been notified of your intent to complete this form? Yes <input type="checkbox"/> No <input type="checkbox"/>	Has the assailant's supervisor been notified of the incident? Yes <input type="checkbox"/> No <input type="checkbox"/>

Assailant Relationship to Employee

<input type="checkbox"/> Co-worker	<input type="checkbox"/> Supervisor
<input type="checkbox"/> Other (specify)	

Category of (Check one or more)**Threat**

<input type="checkbox"/> Communicated directly to victim	<input type="checkbox"/> Verbal	<input type="checkbox"/> Nonverbal	<input type="checkbox"/> Phone	<input type="checkbox"/> Electronic
<input type="checkbox"/> Communicated to another person	<input type="checkbox"/> Verbal	<input type="checkbox"/> Nonverbal	<input type="checkbox"/> Phone	<input type="checkbox"/> Electronic
<input type="checkbox"/> Other (specify)				

Harassment and/or Sexual

Being Harassed: <input type="checkbox"/> Verbally	<input type="checkbox"/> Nonverbally	<input type="checkbox"/> Via Phone	<input type="checkbox"/> Via Electronic (Email/Social Media)
<input type="checkbox"/> Other (specify)			

Intimidation / Bullying

<input type="checkbox"/> Stalking
<input type="checkbox"/> Engaging in actions intended to frighten, coerce, or induce duress
<input type="checkbox"/> Other (specify)

Physical Attack

<input type="checkbox"/> Hitting, fighting, pushing, shoving, or sexual assault
<input type="checkbox"/> Use of object as weapon (specify)
<input type="checkbox"/> Use of weapon such as gun, knife, etc. (specify)
<input type="checkbox"/> Other (specify)

Substance Abuse

<input type="checkbox"/> Drugs
<input type="checkbox"/> Alcohol
<input type="checkbox"/> Other (specify)

Did the incident result in any of the following categories?

<input type="checkbox"/> Physical injury	<input type="checkbox"/> Trauma/Emotional injury
<input type="checkbox"/> Medical care required	<input type="checkbox"/> Death

Initial Response: (Check all that apply)

<input type="checkbox"/> Situation defused – no further action needed	<input type="checkbox"/> Medical Staff notified
<input type="checkbox"/> Security notified	<input type="checkbox"/> Supplementary Program referral (e.g., EAP, Pastoral Care, FB's_____, JPC's_____)
<input type="checkbox"/> Installation Police notified	<input type="checkbox"/> Other (specify)

POST ASSESSMENT

SECTION 3: TO BE COMPLETED BY: WRNMMC FORT BELVIOR JPC HQ

What were the contributing factors of the incident: (Check all that apply):

<input type="checkbox"/> Conflict with co-worker(s)/former co-worker	<input type="checkbox"/> Alcohol/drugs in the workplace
<input type="checkbox"/> Conflict with supervisor	<input type="checkbox"/> Receiving disciplinary action
<input type="checkbox"/> Other (specify)	

Follow-up Response: (Check all that apply)

<input type="checkbox"/> Medical treatment provided to victim	<input type="checkbox"/> Victim referred to counseling
<input type="checkbox"/> Medical treatment provided to assailant	<input type="checkbox"/> Assailant referred to counseling
<input type="checkbox"/> Workers' Compensation claim filed	<input type="checkbox"/> Administrative action taken

What other support services were provided to the victim?

<input type="checkbox"/> EAP	<input type="checkbox"/> Support Group
<input type="checkbox"/> Stress Debriefing	<input type="checkbox"/> Other (specify _____)
<input type="checkbox"/> Hotline Number	

What can be done to prevent a future incident?

Overall, does the victim feel the situation was resolved adequately?

What can be done to improve the follow-up process?

During the Investigation

Investigations into any workplace violence incident are methodical, deliberate, and careful. You should respond quickly to any and every assailant action to mitigate residual effects on the victim and the overall environment, restore a safe environment, and aid in the prevention of future incidents. The investigation will focus on fact-finding to prevent recurrence and not fault-finding.

If the police were contacted, work with your supervisor/chain of command to ensure a police report was created to avoid issues with the investigation. These investigations can be lengthy at times so make reasonable working accommodations (e.g., move the alleged victim to another department or switch schedules) to avoid further altercations with the accused party.

Once an initial, internal investigation into allegations has been validated, the Civilian Human Resource Center (CHRC)/Labor Management and Employee Relations (LMER) and/or the legal department may be contacted for category orange or red offenses. Depending on the violence level/offense, the duty of conducting the investigation may be shared with outside parties (e.g., CHRC, LMER, police, etc.) to quickly and accurately validate the allegations.

If the allegation cannot be validated, your supervisor/chain of command should inform you that no further action by management will be taken at this time. You may choose to file directly with CHRC or LMER at that time. Purposefully/malicious false allegations are a serious offense and will result in administrative and/or disciplinary action of the accuser.

Employee Resources

Feelings of safety and happiness are not solely relegated to actions within the workplace. Unfortunately, the lingering effects of domestic violence, depression, substance abuse, and many other issues may come with employees into their workplace. These issues not only impact them, but possibly others and can quickly escalate from a small conflict to excessive workplace violence.

While the issues presented do not constitute “workplace violence,” failure to take corrective action on an employee issue of any level typically results not only in continued problems, but an escalation of actions as well. For example, an employee’s refusal to take responsibility for his/her actions, or caused problems while finding fault in others can progress into taking action against their perceived slights. The possible indicators listed may be typical symptoms of larger issues and should be noted. True issues may be associated with multiple indicators. Employees should be counseled by their supervisors and provided the appropriate resources to foster a safe and productive workplace while mitigating a crisis and/or violence.

Presented is the key for each workforce population:

- **Military**
- **Civilian**
- **Contractor**

Domestic Violence

Possible Indicators	For	Resource	Contact Information
<ul style="list-style-type: none"> • Significant Other (SO) always present/loitering • Frequently needs to “check in” with SO • Frequently misses work • Appears hyper-reactive to normal situations • Wearing excessively covering clothing for the environment 	<ul style="list-style-type: none"> ● ● ● 	<p>National Domestic Violence Hotline Anonymous national hotline that is available 24 hours a day, 365 days a year that provides local advocates, education, resources and support outside of the workplace.</p>	<p>(800) 799-7233 (800) 787-3224 (TTY)</p>
	<ul style="list-style-type: none"> ● ● ● 	<p>National Center on Domestic and Sexual Violence Collaborates with law enforcement, legal system agencies, advocacy organizations, social service agencies, military, etc., in support against domestic and sexual violence.</p>	<p>(512) 407-9020 http://www.ncdsv.org</p>
	<ul style="list-style-type: none"> ● ● ● 	<p>Safehaven Confidential national hotline that is available 24 hours a day, 365 days a year that provides education, resources and support for all forms of sexually related violence.</p>	<p>(800) 621-4673 http://www.safehorizon.org help@safehorizon.org</p>

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Depression and/or Psychological Symptoms

Possible Indicators	For	Resource	Contact Information
<ul style="list-style-type: none"> • Withdrawn from social interactions • Overreaction or complete non-reaction to stressful situations • Appears disinterested in work • Tired/ expresses desire to sleep more and/or change in sleep patterns/ insomnia • Weight gain or loss • Feeling helpless, hopeless, and worthless • Irritable • Self-destructive behavior • Increase in alcohol and/or drug consumption • Difficulty concentrating/making decisions • Loss of interest in once desirable activities • Increased feelings of anxiety 	<ul style="list-style-type: none"> ● ● ● 	<p>Mental Health America Provides education to alter the stigma associated with mental health issues to ensure prompt and high quality psychological care.</p>	(800) 969-6542
	<ul style="list-style-type: none"> ● ● ● 	<p>Help Guide Non-profit guide to mental health and well-being that provides depression self-assessment, articles, and self-help tips/tricks to recognize depression and how to overcome it lifestyle changes, counseling, and medication.</p>	http://www.helpguide.org/home-pages/depression.htm
	<ul style="list-style-type: none"> ● ● ● 	<p>Resiliency and Psychological Health Services Interdisciplinary primary prevention program that strengthens individual coping skills and reduces psychological symptoms via confidential intervention, education, training, and consultation.</p>	(301) 400-1974 Building 7, 5 th Floor, Room 5307, Bethesda <i>*WRNMC personnel only</i>
	<ul style="list-style-type: none"> ● 	<p>Military and Family Life Counseling Prevents military family distress via education and confidential short-term counseling for stress and contributing factors of stress</p>	(301) 233-6341 (301) 310-4666
	<ul style="list-style-type: none"> ● 	<p>Military OneSource Confidential DoD-funded program providing comprehensive info on every aspect of military life at no cost to active duty, National Guard, and reserve members, and their families for deployment, reunion, relationships, grief, psychological health, etc.</p>	(800) 342-9647 http://www.militaryonesource.com
	<ul style="list-style-type: none"> ● 	<p>Employee Assistance Program Problems in your personal life can impact not just your peace of mind but your ability to do your job effectively. Call the EAP's toll-free number to schedule an appointment with a licensed counselor. You may have up to six (6) free sessions per issue.</p>	(800) 222-0364 (888) 262-7848 (TTY) www.FOH4You.com

Anger and/or Stress Issues

Possible Indicators	For	Resource	Contact Information
<ul style="list-style-type: none"> • Passive anger: self-destructive behavior, sarcasm, and/or apathy • Substance abuse • Frequent headaches • Depression (See possible depression symptoms) • Nervous habits (e.g., nail biting, pacing, leg twitches, etc.) • Frequently missing work for colds, lack of sleep, etc. • Social withdrawal/avoidance 	<ul style="list-style-type: none"> ● ● ● 	<p>Help Guide Non-profit guide to mental health and well-being that provides stress level self-assessment, articles, and self-help tips/tricks to recognize stress/anger and how to overcome it.</p>	<p>http://www.helpguide.org/home-pages/stress.htm</p>
	<ul style="list-style-type: none"> ● ● ● 	<p>Integrated Health Services Internal Medicine/ Medical Home Clinic offers classes and programs including Anger Management and Stress Reduction. Classes are available for all employees.</p>	<p>(301) 295-0105</p>
	<ul style="list-style-type: none"> ● 	<p>Employee Assistance Program Problems in your personal life can impact not just your peace of mind but your ability to do your job effectively. Call the EAP's toll-free number to schedule an appointment with a licensed counselor. You may have up to six (6) free sessions per issue.</p>	<p>(800) 222-0364 (888) 262-7848 (TTY) www.FOH4You.com</p>

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Physical and/or Health Issues

Possible Indicators	For	Resource	Contact Information
	<ul style="list-style-type: none"> ● ● ● 	<p>Help Guide – Overcoming Drug Addiction</p> <p>Comprehensive assistance for those suffering from substance abuse via practical tips and helpful articles for those wanting full control of their own recovery to treatment locators for those who need a deeper intervention.</p>	<p>http://www.helpguide.org/articles/addiction/overcoming-drug-addiction.htm</p>
	<ul style="list-style-type: none"> ● ● ● 	<p>Integrated Health Services</p> <p>Internal Medicine/ Medical Home Clinic that offers classes and programs including Tobacco Cessation, Pain Management, Yoga, Diabetes, Weight Management, Pain Management, and Cholesterol Control. Classes are available for all employees.</p>	<p>(301) 295-0105</p>

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Family Issues

Possible Indicators	For	Resource	Contact Information
<ul style="list-style-type: none"> • Complains about family issues. • May be frustrated with alternative or long work hours, level of information provide and/or physical security • Expresses confusion/frustration regarding the similarities and differences among military, civilian, and contractor duties and expectations 	<ul style="list-style-type: none"> ● ● 	<p>Fleet and Family Support (FFSC) Offers helpful programs and professional services to assist with meeting challenges unique to military life.</p>	<p>(301) 319-4087</p> <p>After Hours/Family Advocacy: (301) 312-5531</p>
	<ul style="list-style-type: none"> ● ● 	<p>Military and Family Life Counseling Part of MilitaryOne Source, helps prevent/mitigate family distress through education and confidential short-term counseling support for family, couple relationships, parenting, and youth about coping skills, stress management, financial topics, etc.</p>	<p>(800) 342-9647</p> <p>http://www.militaryonesource.com</p>
	<ul style="list-style-type: none"> ● 	<p>Operation BRAVE Families Assistance with family dialogue and normal child resilience of families that focuses on prevention, outreach, and preclinical services for children and families whose Service Member parent is injured.</p>	<p>(301) 295-8031</p>
	<ul style="list-style-type: none"> ● 	<p>Military OneSource Confidential DoD-funded program providing free info on every aspect of military life for active duty, National Guard, and reserve members, and their families for spouse employment & education, parenting, tax filing, childhood services, etc.</p>	<p>(800) 342-9647</p> <p>http://www.militaryonesource.com</p>
	<ul style="list-style-type: none"> ● 	<p>Employee Assistance Program Problems in your personal life can impact not just your peace of mind but your ability to do your job effectively. Call the EAP's toll-free number to schedule an appointment with a licensed counselor. You may have up to six (6) free sessions per issue.</p>	<p>(800) 222-0364 (888) 262-7848 (TTY) www.FOH4You.com</p>

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