



National Capital Region  
Medical Directorate  
**ADMINISTRATIVE INSTRUCTION**



NUMBER 1438.02  
MAY 2 2 2018

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PERS

SUBJECT: Workplace Violence Prevention Program

References: See Enclosure 1

1. PURPOSE. This Administrative Instruction (AI), in accordance with (IAW) the authority and in References (a) through (g):

a. Establishes policy, guidance, and procedures for preventing, evaluating, and responding to workplace violence for the National Capital Region Medical Directorate (NCR MD).

b. Cancels the NCR MD Administrative Instruction 1400.08 (Reference (o)) and reissues it to update policy, responsibilities, and procedures.

2. APPLICABILITY. This AI applies to the NCR MD, Walter Reed National Military Medical Center (WRNMMC), Fort Belvoir Community Hospital (FBCH) and Clinics, the Joint Pathology Center (JPC), and the Integrated Referral Management and Appointing Center (IRMAC). Hereafter, these facilities are collectively referred to as Joint Medical Treatment Facilities (MTFs) and Centers.

3. POLICY. It is NCR MD's policy that:

a. The NCR MD will not tolerate workplace violence at any level. The NCR MD places the highest priority on the health and safety of military personnel, civilian personnel, contract personnel, patients and visitors in an effort to deal with incidents of workplace violence. When warranted, appropriate disciplinary actions, to include termination of employment will be promptly initiated to avoid disruptive incidents.

b. Prohibited workplace behaviors include physical, verbal and non-verbal behaviors that may escalate and negatively impact the work environment, and violent behavior towards any military personnel, civilian personnel, contract personnel, patients or visitors. Prohibited workplace behavior includes, but is not limited to, 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 or emotional abuse via any means (i.e. face-to-face, cyber, telephone, social media, etc.). Furthermore, prohibited workplace behavior includes work-related incidents of domestic violence, sexual violence, stalking, attempted or threatened acts by or against employees, and/or employees' families or property.

c. In addition to physical acts against people or property, prohibited behaviors can also include oral or written statements, gestures, or expressions that communicate a direct, or indirect, threat of physical harm to self or others; and include any behavior or activity by an individual that would reasonably cause another individual to feel unsafe. Such behavior or activity will be immediately addressed and investigated when necessary. Those who commit such acts may be immediately removed from the premises, denied reentry pending completion of the appropriate investigation, and may be subject to administrative and disciplinary action, including termination, removal, or criminal prosecution. Removal from the premise action will be completed IAW the guidelines from the NCR MD Memorandum on Delegated Authority for Granting Administrative Leave (Reference s).

d. All employees who are subject to or become aware of any violent acts or threats of violence must immediately report the matter to their supervisor or a higher-level management official, and to the appropriate activity authority or civilian authorities (i.e., the police). Supervisory or management personnel who receive a report of violent activity, a violent episode or a threat of violence must take the report seriously and immediately assess the situation, determine the nature of the threat, and take appropriate action.

e. Effective prevention and intervention strategies require a multidisciplinary approach within the organization. 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.

f. During all workplace violence investigations, there will be no discrimination against an employee for political beliefs, physical disabilities, sex, sexual orientation, gender identity/expression, race, religion, color, national origin, or age.

g. During all workplace violence investigations, anonymity will be maintained to the maximum extent possible to protect the employee who feels threatened; however, the employee may willingly participate in legal proceedings.

4. AUTHORITY. The Presidential Memorandum, "Establishing Policies for Addressing Domestic Violence in the Federal Workplace," April 18, 2012 is institutionalized to cover domestic violence and Joint Commission standards.

5. DEFINITIONS. See Glossary.

6. RESPONSIBILITIES. See Enclosure 2.

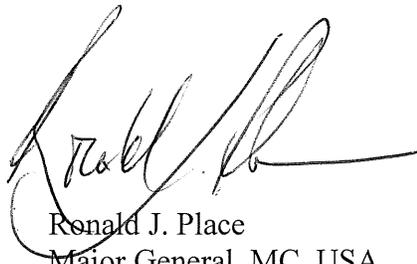
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7. PROCEDURES. See Enclosure 3.

8. EFFECTIVE DATE. This AI:

a. Is effective upon publishing to the NCR MD Website for non-bargaining unit employees. It will go into effect for bargaining unit employees upon the completion of statutory bargaining obligations; and

b. Expires 10 years from the publication date unless extended by future legislation IAW DoD Instruction 5025.01.



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Enclosures

1. References
2. Responsibilities
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5. Glossary

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ENCLOSURE 1REFERENCES

- a) Executive Order 12977, Interagency Security Committee. October 19, 1995.
- b) Presidential Memorandum, "Establishing Policies for Addressing Domestic Violence in the Federal Workplace," April 18, 2012
- c) Defense Civilian Personnel Advisory Service Guide: Workplace Violence Prevention and Response, May 2012
- d) DoD Instruction 1010.09, "DoD Civilian Employee Drug Free Workplace Program," June 22, 2012
- e) Interagency Security Committee, "Violence in the Federal Workplace: A Guide for Prevention and Response," April 2013
- f) Interagency Security Committee, "Appendix A: Threat Assessment, Counter Measures, Awareness, Resources, and Case Studies. Violence in the Federal Workplace: A Guide for Prevention and Response," April 2013
- g) Defense Health Agency (DHA) Memorandum, "Equal Employment Opportunity (EEO) Policy," December 11, 2013
- h) DoD Instruction 1438.06, "DoD Workplace Violence Prevention and Response Policy," January 16, 2014
- i) NCR MD Memorandum, "Workplace Violence," July 15, 2014
- j) DHA Memorandum, "Alternative Dispute Resolution (ADR) Policy," May 01, 2014
- k) DHA Memorandum for Director-WRNMMC, Director-FBCH, and Director-JPC "Mandatory Workplace Violence Training," September 01, 2015
- l) NCR MD AI 1400.06, "Civilian Disciplinary and Adverse Actions," April 17, 2015
- m) DHA Memorandum, "Violence Prevention Policy Statement," February 14, 2017
- n) U.S. Department of Labor, Occupational Safety and Health Administration, "Guidelines for Preventing Workplace Violence for Health Care and Social Service Workers," OSHA No. 3148-06R 2016
- o) NCR MD AI 1400.08, "Workplace Violence Prevention Program," July 29, 2016 (*hereby cancelled*)
- p) NCR MD AI 1426.01, "Employee Assistance Program (EAP)," August 24, 2015
- q) DHA Memorandum, "Notification and Federal Employee Antidiscrimination and Retaliation Act Policy," December 18, 2017
- r) DHA Memorandum, "Anti-Harassment Policy," December 18, 2017
- s) NCR MD memorandum, "Delegated Authority for Granting Administrative Leave," September 19, 2017

ENCLOSURE 2

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RESPONSIBILITIES

1. DIRECTOR, NCR MD. The NCR MD Director will:

- a. Oversee the development and implementation of a workplace violence prevention and response program that reflects NCR MD's strong commitment to the safety of its personnel, in accordance with Reference (a) through (n) of this AI.
- b. Appoint a Workplace Violence Prevention Program Manager.
- c. Establish a trained NCR MD violence Response Team that addresses region wide workplace violence concerns/events, as needed.
- d. Uphold annual compliance of uniform refresher training curricula for MTFs and Centers.
- e. Coordinate with the MTFs and Centers to ensure timely exchange of program updates.
- f. Monitor program efforts throughout NCR MD.
- g. Ensure a system of record keeping for the workplace violence incidents is centralized.

2. WORKPLACE VIOLENCE PREVENTION PROGRAM MANAGER. The Workplace Violence Prevention Program Manager (WVPPM) will:

- a. Support and coordinate efforts of all components of the Workplace Violence Prevention Program for NCR MD, including the MTFs and Centers.
- b. Support the coordination of resources that prevent and respond to workplace violence within the NCR MD by facilitating communication, establishing policy, guidance, procedures for preventing, evaluating, and taking appropriate courses of action regarding all forms of workplace violence.
- c. Ensure the incident report forms are handled with the highest possible degree of confidentiality using a secure, centralized system of record keeping for the workplace violence incidents.
- d. Apply strictest security measures to all incident report data.
- e. Provide quarterly and annual reports on workplace violence data for the Director of NCR MD and MTFs/Centers leadership.

- f. Annually notify the NCR MD workforce of the region policy regarding the prevention and response to workplace violence and of the identities of the members of the Workplace Violence Prevention Program.
- g. Establish annual workplace violence awareness month event.
- h. Uphold annual compliance of uniform refresher workplace violence prevention and response training curricula for MTFs and Centers.
- i. Coordinate with the MTFs and Centers to ensure timely exchange of program updates.
- j. Monitor program efforts throughout NCR MD.
- k. Respond to critical incidents and restore the workplace to a productive state after a potential aftermath.
- l. Determine the level of chain of command notification based on severity of workplace violence incidents.
- m. Facilitate and coordinate response actions to ensure that appropriate follow-up action is taken (e.g., investigations, union notification, victim assistance, preventive, and corrective actions) to address workplace violence incidents.

3. WORKPLACE VIOLENCE PREVENTION PROGRAM COORDINATOR, LIAISONS AND RESPONSE TEAM.

- a. Program Coordinator: Serves as an information resource for NCR MD about the WVPP. Assists the WVPPM with managing workplace violence incident report forms. Serves as a consultant to the WVPPM on expanding WVPP within NCR MD.
- b. Liaison: Each NCR MD MTF and Center will appoint a WVPP Liaison to assist in providing information regarding the WVPP. The WVPP Liaison will serve as the recipient for incident report forms which will be relayed to the WVPPM. WVPP Liaisons can be selected from the safety department by the MTF or Center leadership. WVPP Liaisons will receive training on their role and responsibilities in the WVPP by the WVPPM.
- c. Response Team: Evaluates the region's current ability to handle violent incidents and recommends ways to strengthen its response capability through the use of a threat assessment. Data obtained by the Response Team will be disseminated to the Director of NCR MD for organizational safety and effectiveness purposes. This team will be comprised of a group of experts, with varying perspectives, to identify recommendations to resolve critical incidents. Representatives from Labor Management Employee Relations (LMER), Police or Security, Legal/Executive/Management, Employee Assistance Program (EAP) and Equal Opportunity/Equal Employment Opportunity will act as consultants on the Response Team.

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(1) There will be 2 Response Teams for the NCR MD:

(a) Team A: This Team will respond to NCR MD HQ, WRNMMC, JPC, and IRMAC.

(b) Team B: This Team will respond to FBCH, DTHC, and Fairfax and Dumfries Health Centers.

(2) The Response Team will develop and implement standardized agency responses to behaviors of concern that may lead to acts of violence, such as bullying, intimidating behavior, threats, suicidal ideation, and domestic violence, among others, when needed. This team will receive training to their role and responsibilities within the WVPP by the WVPPM.

(3) The Response Teams will also assist MTF/Center leadership and management by:

(a) Respond to critical incidents and restore the workplace to a productive state after a potential aftermath.

(b) Determining the level of chain of command notification based on severity of workplace violence incidents.

(c) Facilitating and coordinating response actions to ensure that appropriate follow-up action is taken (e.g., investigations, union notification, victim assistance, preventive, and corrective actions).

4. SUPERVISORS AND MANAGERS. Supervisors and managers must:

a. Continuously monitor the climate of the workplace, paying special attention to signs of a hostile work environment.

b. Provide their employees with information concerning Federal, DoD, DHA and NCR MD policies and regulations concerning workplace violence.

c. Encourage employees to discuss concerns about working conditions that could possibly lead to an incident of workplace violence, such as a hostile work environment (e.g., during staff meetings, through an open door policy, etc.)

d. Inform employees of the counseling services (e.g. EAP), especially when they detect or others report, that an employee appears to be having difficulty dealing with anger frustration, hostility, or other signs of potential violence problems. Supervisors should recommend counseling services when there is a question concerning the employee's emotional/mental well-being.

e. Report all threats that are brought to their attention to their management or chain of command.

f. Promptly report a violent situation or a situation with the potential for violence:

(1) Contact the security office and 911 emergency phone number immediately on situations that pose an immediate threat to safety or well-being and requires medical resources or police support. Supervisors/managers should not attempt to physically stop violent acts except as a last resort.

(2) Contact higher-level management for further guidance after calling the 911 emergency phone number.

g. Promote workplace violence prevention programs within their offices through personal involvement and a commitment to training on workplace violence issues and policies.

h. Take appropriate action toward those who make threats, engage in any other forms of violence, or create a hostile work environment.

i. Ensure that employees know specific procedures for dealing with workplace threats and emergencies, including how to contact police, fire, and other safety and security officials, and how to evacuate the premises safely. Supervisors must also confirm that employees with special needs are aware of emergency evacuation procedures and have assistance as necessary regarding emergencies.

5. EMPLOYEES. Employees must:

a. Comply with the workplace violence prevention and response policies as set forth in this AI, applicable laws, and DoD regulations.

b. Refrain from making threats or engaging in workplace violence.

c. Refrain from making false allegations.

d. Report all acts or threats of violence (See Enclosure 3 – Types of Violence) to their immediate supervisor, the WVPP Liaison and the Security Office.

e. Do not attempt to intervene in violent acts except as a last resort and call the Security Office and 911 for assistance.

f. Familiarize themselves with their office environments, notice changes in behavior of co-workers (See Enclosure 3 - Warning Signs of Potential Violence), and report what they see and hear.

g. Complete workplace violence prevention and response training annually, and as directed.

**MAY 22 2018**ENCLOSURE 3PROCEDURES1. GENERAL.

a. The prevention and management of workplace violence is among the most important factors in providing a healthy, cooperative, and safe workplace where management can maintain a high level of productivity. Such incidences involving workplace violence, bodily injury, death, suicide, and physical or emotional threats are cause for concern and have a negative impact on the workplace environment. With proper training, supervisors can often recognize the signs that are characteristic of those who perpetrate violence and hostility in the workplace, and recognize indicators of other potentially harmful incidents. By recognizing signs, the management official can take action that will reduce the probability that a violent incident will occur.

b. Each incident of workplace violence has its own cause. Often it is because employees are frustrated, anxious, impatient, angry, or under the influence of alcohol or drugs, among many more possibilities. These people often lash out at the nearest target and often that means those in the workplace. Although reasons for workplace violence are numerous, some are noteworthy:

(1) Understaffing, this forces people to work beyond normal limits, thus precipitating stressful situations.

(2) Lack of training for supervisors and employees in recognizing and defusing potentially violent situations.

(3) Failure to design safe workplaces and emergency procedures.

(4) Failure to identify hazardous conditions and develop proper controls, policies, and education programs.

(5) Failure on the part of all personnel to report incidences or potential incidences of violence or threats.

c. Supervisory personnel have a significant responsibility for monitoring and controlling the behavior of employees at work and for ensuring that the workplace is free of safety risks and hazards.

d. It is important for supervisors and managers to be able to identify potentially problematic behavior and to respond promptly and accordingly to the behavior when exhibited.

e. It is essential that the supervisors and managers set the tone for the workplace and ensure all employees are treated with dignity and respect. The golden rule of treating others as one would wish to be treated is a powerful tool in preventing incidents of dissatisfaction, frustration, and stress from escalating to a potentially violent level.

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2. TYPES OF WORKPLACE VIOLENCE. There are different types of workplace violence, depending on the relationship between the employee and the person committing the violence:

a. Criminal Intent – The perpetrator has no legitimate relationship to the business or its employees, and is usually committing a crime in conjunction with the violence (robbery, shoplifting, trespassing). In health care settings this type of violence occurs less frequently compared to the other types. For example:

(1) A provider assaulted in the hospital parking garage.

(2) A home health care nurse is mugged while conducting a home visit.

b. Patient on Employee - This is the most common form of violence in health care settings. Violence is committed by someone who receives a service, such as a patient. The violence can be committed in the workplace or outside the workplace, but while the employee is performing a job related function. This type of violence occurs most frequently in emergency, psychiatric, waiting rooms, and geriatric settings.

c. Employee on Employee – Also known as lateral or horizontal violence. Violence is committed in or outside the workplace by a current or former employee, a prospective employee, or a current or former supervisor or manager. It includes bullying, and frequently manifests as verbal and emotional abuse that is unfair, offensive, vindictive, and/or humiliating though it can range all the way to homicide.

d. Personal Relationship - Violence is committed by someone who has a personal relationship with an employee, such as a current or former spouse or partner, a relative, or a friend. This would include the attacker who has a personal dispute with an employee and enters into or around the workplace to harass, threaten, injure, or kill.

3. WARNING SIGNS OF POTENTIAL VIOLENCE. While there is no specific identifying factor of a potentially dangerous person, the following behaviors should be viewed with concern:

a. Direct or veiled threats of harm.

b. Numerous conflicts with supervisors and employees; verbal comments indicating expression of hostility directed at co-workers, supervisors, or others.

c. Harboring grudges, an inability to handle criticism, habitually make excuses, and blaming others.

d. Fascination with weapons, a preoccupation with violent themes of revenge, and an unusual interest in recently-publicized violent events, if communicated in a manner that creates discomfort for co-workers.

e. Extreme or uncharacteristic changes in behavior or displays of emotional duress.

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- f. Obsessive intrusion upon others or persistent pursuit.
- g. Intimidation, bullying, or other threatening behavior, aggressive outbursts or comments, or excessive displays of anger.
- h. Signs of drug/alcohol abuse.

4. BEHAVIORS THAT MAY BE CONTRIBUTING FACTORS PRECEDING WORKPLACE VIOLENCE.

- a. Withdrawal from friends, co-workers, and or one's social circle.
- b. Reduced productivity.
- c. Unexplained absence from work area or marked increase in tardiness and or absenteeism.
- d. A major change in personal hygiene and appearance.
- e. Suffering a recent emotional or financial stressor such as financial hardship, divorce, death in the family or legal challenges.

f. While a person may exhibit one or more warnings and never resort to violence, it warrants the need for careful examination and, at times, formal intervention through Labor Management-Employee Relations (LMER) in the Civilian Human Resource Center (CHRC), Contracting Officer's Representative (COR) or chain of command protocols and filing a workplace violence incident report with the WVPP Liaison.

5. LEVELS OF VIOLENCE. The following levels of violence will assist supervisors, managers and WVPP in assessing the risk factors for violent behavior.

- a. Level I:
  - (1) Implied (veiled) threats
  - (2) Verbal or mental abuse
  - (3) Harassment or badgering
  - (4) Inappropriate tones (threatening) or gestures (menacing)
- b. Level II:
  - (1) Threatening gestures

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(3) Mishandling or abuse of property

(4) Stalking

c. Level III:

(1) "Scuffles" (physical contact)

(2) Assault – physical, sexual, armed

(3) Destruction

(4) A presently occurring loss of control event creating fear of imminent harm

(5) Unauthorized possession of firearms or other weapons on government premises

6. PREVENTION.

a. Open communication between supervisors and employees cannot be overemphasized. Through open communications, supervisors and managers can assist in reducing the risk of violence or unacceptable behavior.

b. Supervisors must create an environment in which employees feel comfortable conveying concerns, problems and grievances, as well as reporting threats, coercion, intimidation, or potential violent activity through the supervisory chain.

c. Early detection and intervention by first-level supervisor is crucial to preventing workplace violence. Recognizing the early warning signs and intervening quickly to assist the employee are two key elements for preventing potentially violent employees from escalating to the action level (See Enclosure 4).

d. The first-level supervisor plays a crucial role in understanding the early warning signs, recognizing them when they occur, and acting on that knowledge.

e. First-level supervisors must inform all new personnel of the workplace violence prevention program during their onboarding process.

7. WORKPLACE VIOLENCE PREVENTION PROGRAM TRAINING.

a. The intent of the Workplace Violence Prevention Training is to provide a baseline understanding of workplace violence to military, civilian and contract personnel in the NCR MD: the warning signs, prevention and intervention strategies, and identification of support resources. Training is provided by the WVPPM.

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b. All military, civilian and contract personnel must successfully complete workplace violence prevention training. Workplace violence prevention will be part of the annual training requirement.

#### 8. HANDLING A WORKPLACE VIOLENCE INCIDENT.

a. Report any workplace violence incident to the WVPP and your chain of command. WVPPM and the chain of command will complete separate investigations of the incident. Additionally, any resolved workplace violence incidents should be reported to the WVPP. Any resolved incidents will be recorded for tracking purposes and program alignment.

b. Contact the WVPP Liaison for your MTF/Center. The WVPP Liaison will complete the workplace violence incident report form and submit it to the WVPP Program Manager at [Dha.bethesda.wrnmhc.mbx.ncr-md-workplace-violence@mail.mil](mailto:Dha.bethesda.wrnmhc.mbx.ncr-md-workplace-violence@mail.mil). The WVPP Liaison will physically destroy the original hardcopy of the incident report form following submission to the WVPPM.

c. A thorough investigation of the incident will also be completed by the chain of command. It is recommended that the chain of command identify a qualified unit/point-of-contact to conduct the investigation. Depending on the severity level of the incident, this investigation may include cooperating with outside parties (i.e., police) while security/law enforcement and/or the WVPP conduct their own investigation.

(1) At the beginning of the investigation, the chain of command will notify the following individuals depending on the personnel involved in the incident:

(a) Contact LMER in the Civilian Human Resource Center (CHRC) for civilian personnel involved in a workplace violence incident. Notification of LMER of the incident may also prevent continued violent behavior during the investigation. In the case of severe infractions, LMER will advise on the appropriate administrative and/or disciplinary actions including immediate dismissal/removal from duty.

(b) Contact appropriate chain of command for military personnel involved in a workplace violence incident. Chain of command will follow up with the appropriate process for military disciplinary action.

(c) Contact the Contracting Officer's Representative (COR) for contract personnel involved in a workplace violence incident. The COR will follow up with the contract vendor on the contract personnel's behavior.

(2) During the investigation, both the reporting employee and perpetrator must be debriefed on the incident with an explanation of the investigative process by the chain of command. Debriefing should include a referral for EAP, counseling services and/or resources to promote wellness.

command. Debriefing should include a referral for EAP, counseling services and/or resources to promote wellness.

(3) At the conclusion of the investigation, the chain of command will debrief both the reporting employee and perpetrator with the outcome of the investigation after consultation with LMER/military chain of command/COR.

(a) If the workplace violent incident cannot be validated or proven to be deliberately false, chain of command will complete the following:

1. Inform the reporting employee that no further action will be taken at this time.

2. Counsel the reporting employee that purposeful, malicious false allegations will result in adverse administrative action.

d. The WVPPM will complete the following as part of their investigation:

(1) Submit a copy of the workplace violence incident report form to LMER for their awareness if employee(s) involved are civilian personnel.

(2) Conduct post assessment incident report form.

(3) Notify WVPP Response Team for immediate meeting based on severity/level of workplace violence behavior to provide additional recommendations to stabilize the workplace.

(4) Debrief reporting employee on outcome of WVPP investigation.

e. Once the incident is considered closed and data have been gathered from both forms, the original workplace violence incident report post assessment form will be destroyed by the WVPPM. An electronic copy of the completed workplace violence incident report will be stored on the H drive. Only the WVPPM, WVPP Coordinator and NCR MD Chief of Regional Personnel Branch will have access to this drive for data storage and situational awareness.

## 9. ACTIONS TO BE TAKEN AT OVERT ACTS OF VIOLENCE.

a. Without a weapon:

(1) Stay calm and listen attentively

(2) Maintain eye contact

(3) Be courteous and patient

(4) Make every effort to keep the situation under control

(5) Signal someone that you need help and have them call for help, the building security guards, or local law enforcement.

b. With a weapon:

- (1) Stay calm and quietly signal for help
- (2) Maintain eye contact
- (3) Stall for time
- (4) Keep talking and follow instruction from the person who has the weapon
- (5) Do not risk harm to yourself or others
- (6) Never try to grab the weapon
- (7) Watch for a safe chance to escape to a safe area

c. Active Shooter:

- (1) Evacuate
  - (a) Have an escape route
  - (b) Leave your belongings behind
  - (c) Keep your hands visible
- (2) Hide Out:
  - (a) Hide in an area out of the shooter's view
  - (b) Block entry to your hiding place and close the doors
  - (c) Silence your cell phone and/or pager
- (3) Take Action:
  - (a) As a last resort and only when your life is in imminent danger
  - (b) Attempt to incapacitate the shooter
  - (c) Act with physical aggression and throw items at the active shooter
- (4) When law enforcement arrives:

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- (a) Remain calm and follow instructions
  - (b) Put down any items in your hands (i.e., bag, Jackets)
  - (c) Raise hands and spread fingers
  - (d) Keep hands visible at all times
  - (e) Avoid quick movements towards officers such as holding on to them for safety
  - (f) Avoid pointing, screaming or yelling
  - (g) Do not stop to ask officers for help or direction when evacuating
- (5) Information that can help law enforcement:
- (a) Location of the active shooter
  - (b) Number of shooters
  - (c) Physical description of shooters
  - (d) Number and type of weapons held by shooters

10. AFTER THE WORKPLACE VIOLENCE INCIDENT. Recovery process:

- a. MTFs and Centers review the incident and examine the precipitating event(s) for effective resolution. Change in workplace conditions and/or procedures may curtail similar incidents in the future.
- b. Management will assist in employee's recovery by offering resources available at the MTFs and Centers (e.g., stress debriefing sessions, post-traumatic counseling recommendations), and/or offer continued alternative working conditions.
- c. Critical incident stress is a normal reaction to an abnormal situation. Employee may experience lingering effects after a traumatic event, which often includes:
  - (1) Feeling jumpy, anxious, and irritable
  - (2) Poor concentration, inability to make decisions and think clearly
  - (3) Having difficulty returning to the scene of the incident
  - (4) Intrusive vivid recollections of the event that cannot be "turned off."

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d. Supervisors should recommend support services to the affected employee(s) such as EAP for civilians and Pastoral Care for others. Contract personnel should be referred to the contract vendor for available support services.

e. When the person of concern is permitted to continue employment following an incident, management should instruct relevant supervisor(s) to:

- (1) Enforce standards of appropriate workplace behavior
- (2) Closely monitor the workplace conduct of the employee in question
- (3) Report immediately any future concerns to the MTF/Center chain of command

f. Retaliation or reprisals of any kind are strictly prohibited. Management should warn the perpetrator retaliation will not be tolerated and will result in adverse action.

#### 11. MANDATORY EMPLOYEE AND SUPERVISORY REFRESHER TRAINING.

a. This AI is the basis of annual refresher training for all military, civilian and contract personnel. The intent of the refresher training is providing knowledge of workplace violence: the warning signs, prevention and intervention strategies, and resolution.

b. Mandatory refresher training will occur annually for all employees conducted by the WVVPM.

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ENCLOSURE 4

ATTACHMENT 1 – WORKPLACE VIOLENCE INCIDENT REPORT FORM



**WORKPLACE VIOLENCE INCIDENT REPORT**

Form to be completed by WVPP Liaison or person subjected to/observer of the workplace violence incident. Please physically destroy the report after submission to the Workplace Violence Prevention Program Manager.

**Employee Information**

NAME		SUPERVISOR/CHAIN OF COMMAND	
EMAIL		PHONE	
RANK	<input type="checkbox"/> Military <input type="checkbox"/> Civilian <input type="checkbox"/> Contractor	COMMAND SITE	<input type="checkbox"/> NCR MD HQ <input type="checkbox"/> WRNMMC <input type="checkbox"/> JPC <input type="checkbox"/> IRMAC <input type="checkbox"/> FBCH <input type="checkbox"/> DTHC
DEPARTMENT		LOCATION OF INCIDENT	

**Perpetrator Relationship to Employee**

<input type="checkbox"/> Co-worker <input type="checkbox"/> Supervisor <input type="checkbox"/> Patient <input type="checkbox"/> Other (specify)			
RANK	<input type="checkbox"/> Military <input type="checkbox"/> Civilian <input type="checkbox"/> Contractor	SUPERVISOR/CHAIN OF COMMAND	

**Threat**

<input type="checkbox"/> Communicated directly to employee	<input type="checkbox"/> Verbal <input type="checkbox"/> Nonverbal <input type="checkbox"/> Phone <input type="checkbox"/> Email
<input type="checkbox"/> Mobile Phone <input type="checkbox"/> Social Media	<input type="checkbox"/> Other (specify)

**Harassment**

**Physical Attack**

<input type="checkbox"/> Verbal <input type="checkbox"/> Nonverbal <input type="checkbox"/> Sexual Harassment	<input type="checkbox"/> Hitting, fighting, pushing, or shoving <input type="checkbox"/> Sexual assault
<input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Mobile Phone <input type="checkbox"/> Social Media	<input type="checkbox"/> Use of object as weapon (specify)
<input type="checkbox"/> Other (specify)	<input type="checkbox"/> Use of weapon (gun, knife, etc.) (specify)
	<input type="checkbox"/> Other (specify)

**Intimidation / Bullying**

**Substance Use**

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

**Did the workplace violence incident result in any of the following?**

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

**Initial Response:**

<input type="checkbox"/> Situation Defused	<input type="checkbox"/> Medical Staff notified
<input type="checkbox"/> Police/ Security Notified	<input type="checkbox"/> Supervisor/Chain of Command Notified
<input type="checkbox"/> Employee & Perpetrator Employee Debriefing (Separately)	<input type="checkbox"/> Other (specify)

ATTACHMENT 2 – WORKPLACE VIOLENCE INCIDENT POST ASSESSMENT

REPORT FORM



**WORKPLACE VIOLENCE INCIDENT POST ASSESSMENT**

**Post Assessment Date**

Form to be completed by WVPP Program Manager or Program Coordinator. Please physically destroy document when electronic version is stored in shared drive.

**Describe workplace violence incident:**

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**What were the contributing factors of the incident?**

<input type="checkbox"/> Conflict with co-worker(s)/former co-worker	<input type="checkbox"/> Conflict with supervisor
<input type="checkbox"/> Conflict with patient	<input type="checkbox"/> Conflict with visitor
<input type="checkbox"/> Domestic violence	<input type="checkbox"/> Mental Health Issues
<input type="checkbox"/> Substance use in the workplace	<input type="checkbox"/> Physical Health Issues
<input type="checkbox"/> Receiving disciplinary action	<input type="checkbox"/> Receiving task related to position
<input type="checkbox"/> Other (specify)	<input type="checkbox"/> High performance work demands

**Follow-up response to incident: (Select all that apply)**

<input type="checkbox"/> Medical treatment provided to employee or perpetrator	<input type="checkbox"/> Employee & Perpetrator referred to EAP
<input type="checkbox"/> Provided Hotline Number	<input type="checkbox"/> Administrative action taken
<input type="checkbox"/> Workers' Compensation claim filed	<input type="checkbox"/> Employee & Perpetrator Debriefed (Separately)
<input type="checkbox"/> Notify Supervisor/Chain of Command	<input type="checkbox"/> LMER notified
<input type="checkbox"/> CORE notified	<input type="checkbox"/> EO/EEO notified
<input type="checkbox"/> Contracting Agency notified	<input type="checkbox"/> Other (specify)

**Recommendations given to Supervisor/Chain of Command:**

<input type="checkbox"/> Workplace violence prevention training	<input type="checkbox"/> Notify Supervisor/Chain of Command
<input type="checkbox"/> Resiliency and Psychological Health Services (WRNMMC ONLY)	<input type="checkbox"/> Employee & Perpetrator Employee Debriefing (Separately)
<input type="checkbox"/> Employee Assistance Program Referral	<input type="checkbox"/> Medical treatment provided to victim
<input type="checkbox"/> Notify Police/ Security	<input type="checkbox"/> Notify Appropriate Chain of Command for Military Personnel for Disciplinary/Administrative Action
<input type="checkbox"/> Provide Relevant Hotline Number	<input type="checkbox"/> Contracting Agency notified for Contracting Personnel
<input type="checkbox"/> Notify CORE for Contracting Personnel	<input type="checkbox"/> EO/EEO notified
<input type="checkbox"/> LMER notified	<input type="checkbox"/> Other (specify)

**Post Assessment Conclusion:**

Response Team Needed	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date Case Closed	
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GLOSSARYPART I. ABBREVIATIONS AND ACRONYMS

AI	Administrative Instruction
CHRC	Civilian Human Resources Center
COR	Contracting Officer's Representative
DHA	Defense Health Agency
FBCH	Fort Belvoir Community Hospital
IAW	In Accordance With
JPC	Joint Pathology Center
LMER	Labor Management and Employee Relations
MTFs	Medical Treatment Facilities
NCR MD	National Capital Region Medical Directorate
NCR MD HQ	National Capital Region Medical Directorate Headquarters
WRNMMC	Walter Reed National Military Medical Center
WVPP	Workplace Violence Prevention Program
WVPPM	Workplace Violence Prevention Program Manager

PART II. DEFINITIONS

The NCR MD is committed to providing a safe workplace that is free from violence, harassment, the lingering effects of domestic violence and any other action that disrupts our employees. Before the actions can be addressed, what constitutes these actions must be mutually understood.

Unless otherwise noted, the following definitions only apply to this Instruction.

Domestic Violence. Infliction of emotional, psychological, verbal, and/or physical abuse by one household member or significant other on another in the workplace.

Employee Assistance Program (EAP). Provides short-term counseling and referral services to

civilian employees who are encountering difficulties with stress, family, relationships, alcohol, work or other concerns which impact job performance and overall quality of life. For supervisors, coaching is available on how to deal with difficult employees, have difficult performance conversations, and be a better manager. EAP services are confidential at no cost.

Harassment. Creating an unpleasant or hostile situation through uninvited and unwelcome verbal or physical conduct.

Intimidation. Installation of fear or a sense of inferiority through verbal and/or physical urgings, demands, threats, insinuations, insults, etc.

Workplace Violence. Any violent act directed toward others at work through offensive or threatening language, physical violence, and inappropriate body language whether direct or indirectly, including, but not limited to vandalism, arson, and sabotage occurring in the workplace.