

Thermalito Union Elementary School District

WORKPLACE VIOLENCE PREVENTION PLAN

TABLE OF CONTENTS

PURPOSE AND AUTHORITY	3
PERSON(S) RESPONSIBLE	4
PROCEDURES AND IMPLEMENTATION	4
COORDINATION	4
RESPONDING TO REPORTS OF WORKPLACE VIOLENCE	5
EMPLOYEE COMPLIANCE	5
EMPLOYEE COMMUNICATION	6
EMPLOYER EVALUATION AND RESPONSE	7
WORKPLACE VIOLENCE REPORT FORM	8
EMPLOYEE TRAINING	11
RECORDKEEPING	11
HAZARD ASSESSMENTS	12
EMPLOYER REPORTING RESPONSIBILITIES	12
SAFETY TRAINING RECORD LOG	13

PURPOSE AND AUTHORITY

California SB 553 requires California employers to establish, implement, and maintain an effective workplace violence protection plan (WVPP) in all work areas at all times. The WVPP, a component of the Injury and Illness Prevention Program, is intended to establish a framework for protecting employees from workplace violence. This plan includes the following components:

1. Names or job titles of the persons responsible for implementing the plan. If there are multiple persons responsible for the plan, their roles shall be clearly described.
2. Effective procedures to obtain the active involvement of employees and authorized employee representatives in developing and implementing the plan.
3. Methods that will be used to coordinate the implementation of the plan with other employers, when applicable, to ensure that those employers and employees understand their respective roles, as provided in the plan.
4. Effective procedures for the employer to accept and respond to reports of workplace violence, and to prohibit retaliation against an employee who makes such a report.
5. Effective procedures to ensure that supervisory and nonsupervisory employees comply with the plan
6. Effective procedures to communicate with employees regarding workplace violence matters, including, but not limited to, both of the following:
 - a. How an employee can report a violent incident, threat, or other workplace violence concern to the employer or law enforcement without fear of reprisal.
 - b. How employee concerns will be investigated.
7. Effective procedures to respond to actual or potential workplace violence emergencies, including, but not limited to, all of the following:
 - a. Effective means to alert employees of workplace violence emergencies' presence, location, and nature.
 - b. Evacuation or sheltering plans that are appropriate and feasible for the worksite.
 - c. How to obtain help from staff assigned to respond to workplace violence emergencies, if any, security personnel, if any, and law enforcement.
8. Procedures to develop and provide employee training
9. Procedures to identify and evaluate workplace violence hazards, including, but not limited to, scheduled periodic inspections to identify unsafe conditions and work practices and employee reports and concerns. Inspections shall be conducted:
 - a. When the plan is first established
 - b. After each workplace violence incident
 - c. Whenever the employer is made aware of a new or previously unrecognized hazard.
10. Procedures to correct workplace violence hazards identified above in a timely manner consistent with the IIPP, including:
 - a. Procedures for post-incident response and investigation.
 - b. Procedures to review the effectiveness of the plan and revise the plan, including:
 - i. Procedures to obtain the active involvement of employees and authorized employee representatives in reviewing the plan.
11. Maintain a written log recording incidents of workplace violence

PERSON(S) RESPONSIBLE

Administrators

The ultimate responsibility for overseeing the development, implementation, and maintenance of the WVPP rests with the superintendent's office and the district Safety Coordinator.

Managers and Supervisors

Any manager or supervisor the Thermalito Union Elementary School District (TUESD) employs will ensure employees follow reporting procedures and this plan's provisions.

Employees

Employees should immediately report all workplace violence and hazards to their immediate supervisor. If there is an immediate life threat to any employee, employees should activate the 911 system before submitting any reports. Employees should submit reports without fear of reprisal. Employees who are teleworking from a location of the employee's choice and not under the control of TUESD are not subject to this plan.

PROCEDURES AND IMPLEMENTATION

Involving employees in developing and implementing our WVPP is critical to the program's overall effectiveness. We welcome and encourage employees to participate in this plan's initial development and implementation and the ongoing/annual refresher. We will utilize the following procedures to involve employees in the development and implementation of this plan:

- Establish a WVPP committee and make it open to all employees, including sharing meeting dates, locations, agendas and minutes.
- Implementing an employee survey soliciting feedback and input on specific aspects of both the development and implementation of this plan.
- Request employees to submit their ideas directly to the person responsible for this WVPP (as identified above) via email or telephone.
- Make use of an anonymous suggestion box (physical or electronic) for employees to share ideas. In using this option, include where these suggestion boxes or email addresses can be found.
- Have site/department managers solicit feedback and/or indicate their interest in participating during a staff meeting.

COORDINATION

In an effort to ensure that all employees understand their respective roles in this plan, that they understand all aspects of this plan, and they understand how to report incidents of workplace violence, we will take the following steps:

1. Provide an annual interactive training session for all employees.

2. Provide a timely reporting process so all employees can report workplace violence incidents and hazards.
3. Every reporting employee will receive direct contact after every report is submitted..
4. Employees will receive updates on newly identified workplace hazards and steps taken to mitigate the hazard.

RESPONDING TO REPORTS OF WORKPLACE VIOLENCE

Employees should call 9-1-1 if the threat or act of violence is imminent.

If the employee is not in imminent danger, the employee will complete the workplace violence reporting form and email it directly to the superintendent's office. A copy of the workplace violence reporting form is located in this packet. If the employee's supervisor is not the perpetrator, the employee should make a verbal report to their direct supervisor or site administrator and submit the workplace violence reporting form.

The Superintendent or designee will adhere to the following process for accepting and responding to reports of workplace violence:

1. Determine any steps that need to be taken to protect the reporting employee, or any other employee, against an immediate threat of violence.
2. Investigate the report to gather all relevant information (interview employees, visit the location, document evidence, ask follow-up questions).
3. Evaluate the findings to identify the root cause.
4. Define corrective actions/steps to be taken to address each cause.
5. Coordinate with the necessary departments/staff to implement the corrective actions.
6. Communicate the findings and corrective actions back to the reporting employee.
7. Monitor the effectiveness of the corrective actions.
8. Document the incident and all correlating information in the "Violent Incident Log" for recordkeeping and reporting purposes.

All employees are encouraged to report any concerns or incidents related to workplace violence, and that they can do so without fear of reprisal.

EMPLOYEE COMPLIANCE

While the Superintendent or designee and Safety Coordinator are responsible for overseeing the development, implementation, and maintenance of the WVPP, all employees are responsible for adhering to their roles, responsibilities, and training provided under this plan. Supervisors and managers will use the following procedures to ensure employees comply with the WVPP:

- Ensuring employees take/attend the training(s) and refresher training(s) assigned to them.
- Monitor employee adherence to topics and concepts covered in the training they received.
- Follow our established disciplinary action process if an employee or supervisor does not follow elements of this plan.

Disciplinary Action

We will actively enforce all aspects of the WVPP. An employee who fails to adhere to the procedures and practices of this plan shall be disciplined. Insert your disciplinary action process here:

1. Retraining
2. Warning
3. Warning with reprimand placed in personnel file
4. Suspension from work and record added to personnel file
5. Discontinue employment with record added to personnel file

Whenever an employee is disciplined, the Superintendent or designee shall document the action taken.

EMPLOYEE COMMUNICATION

If the employee is not in imminent danger, the employee will complete the workplace violence reporting form and email it directly to the superintendent's office at gblake@thermalito.org. If there is an immediate life threat to any employee, employees should activate the 911 system before submitting any reports.

When making a report of workplace violence, please include the following information (please note that workplace violence does not include lawful acts of self-defense or defense of others):

1. Date
2. Time
3. Location
4. Type of workplace violence:
 - a. Type 1 = Committed by a person who has no legitimate purpose at the worksite
 - b. Type 2 = Committed by a person who does have a legitimate purpose at the worksite (customer, client, patient, student, inmate, or visitor).
 - c. Type 3 = Committed by a present or former employee, supervisor, or manager.
 - d. Type 4 = Committed by a person who does not work at the workplace but has or is known to have had a relationship with an employee
5. Circumstances at the time of the incident, including but not limited to the following:
 - a. Was the employee completing usual job duties?
 - b. Was the area poorly lit?
 - c. Was the work being "rushed"?
 - d. Was the employee working during a low staffing level?
 - e. Was the employee isolated/alone?
 - f. Was the employee able to get help/assistance?
 - g. Was the employee working in a community setting?
 - h. Was the employee working in an unfamiliar/new location?
 - i. Other: please explain
6. Classification of where the incident occurred:
 - a. At the workplace, indoors (please include building name and/or room number)
 - b. At the workplace, outdoors (please specify)

- c. Other area (please explain)
- 7. Type of incident (including but not limited to):
 - a. Physical attack – no weapon/object
 - b. Physical attack – with a weapon/object
 - c. Threat of physical force or threat of use of a weapon/object
 - d. Sexual assault/threat (including rape, attempted rape, physical display, or unwanted verbal/physical sexual contact)
 - e. Other (please specify):

EMPLOYER EVALUATION AND RESPONSE

When responding to a report of workplace violence, Superintendent or designee, as outlined above, will adhere to the following process:

1. Determine any steps that need to be taken to protect the reporting employee, or any other employee, against an immediate threat of violence.
2. Investigate the report to gather all relevant information (interview employees, visit the location, document evidence, ask follow-up questions), including capturing the following information:
 - a. Consequences of the incident (including but not limited to):
 - i. Was security or law enforcement contacted?
 1. If so, what was their response (please explain):
 - ii. Actions taken to protect employees from a continuing threat or any other hazards resulting from the incident (please explain)
 - b. Information about the person completing the employer's response/log:
 - i. Name
 - ii. Title
 - iii. Date
3. Evaluate the findings to identify the root cause.
4. Define corrective actions/steps to be taken to address each cause.
5. Coordinate with the necessary departments/staff to implement the corrective actions.
6. Communicate your findings and corrective actions back to the reporting employee.
7. Monitor the effectiveness of the corrective actions.
8. Document the incident and all correlating information in the "Violent Incident Log" for recordkeeping and reporting purposes.

WORKPLACE VIOLENCE REPORTING FORM

THIS FORM IS TO BE USED BY EMPLOYEES THAT HAVE IDENTIFIED AN INCIDENT, THREAT OR CONCERN RELATED TO WORKPLACE VIOLENCE. THIS FORM BRINGS THE ISSUE TO THE ATTENTION OF THE MANAGEMENT.

IT IS ILLEGAL FOR THE EMPLOYER TO TAKE ACTION AGAINST AN EMPLOYEE FOR MAKING SUCH A REPORT. THE EMPLOYER MUST INVESTIGATE THE REPORT AND EXPLAIN TO EMPLOYEES THE ACTION TAKEN AND ANY SUBSEQUENT ACTIONS, AS NECESSARY.

To be printed and completed by the individual investigating the incident. Return completed form within 2 days following incident to the site supervisor and the superintendent's office, **Attach witness statements to this form.**

Report submitted by:	Date:
General Description:	Phone:

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

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

Name:	Name:
<input type="checkbox"/> Victim or <input type="checkbox"/> Assailant	<input type="checkbox"/> Victim or <input type="checkbox"/> Assailant
Job Title:	Job Title:
Department:	Department:
Phone:	Phone:
Immediate Supervisor:	Immediate Supervisor:

Classification of Incident (Select One)

<ul style="list-style-type: none"> Type 1 <p>Committed by a person who has no legitimate purpose at the worksite.</p>	<ul style="list-style-type: none"> Type 2 <p>Committed by a person who does have a legitimate purpose at the worksite</p>	<ul style="list-style-type: none"> Type 3 <p>Committed by a present or former employee, supervisor, or manager.</p>	<ul style="list-style-type: none"> Type 4 <p>Committed by a person who does not work at the workplace, but has or is known to have had a relationship with an employee.</p>
--	--	--	--

Classification of Incident Location (Select One)

<ul style="list-style-type: none"> At Workplace, Indoors (Please Include Bldg. Name/Room No.) 	<ul style="list-style-type: none"> At Workplace, Outdoors (Please Specify) 	<ul style="list-style-type: none"> Other Area (Please Explain)
--	---	---

Type of Incident

<input type="checkbox"/> Physical Attack – no weapon/object
<input type="checkbox"/> Physical Attack – with weapon/object
<input type="checkbox"/> Threat of physical force and/or threat of use of a weapon/object
<input type="checkbox"/> Physical Assault - Hitting, fighting, pushing, or shoving
<input type="checkbox"/> Sexual assault/threat (incl. rape, attempted rape, physical display, or unwanted verbal/physical sexual contact)
<input type="checkbox"/> Other (specify)

How was the incident communicated? (Check one or more)

<input type="checkbox"/> Communicated directly to victim	<input type="checkbox"/> Verbal	<input type="checkbox"/> Mail	<input type="checkbox"/> Note	<input type="checkbox"/> Email
<input type="checkbox"/> Communicated to another person	<input type="checkbox"/> Verbal	<input type="checkbox"/> Mail	<input type="checkbox"/> Note	<input type="checkbox"/> Email
<input type="checkbox"/> Other (specify)				

Initial Response or Follow up Activity: (Check all that apply)

<input type="checkbox"/> Situation defused	<input type="checkbox"/> Occupational Medicine notified
<input type="checkbox"/> Security called	<input type="checkbox"/> Law Enforcement notified If Yes, Name of Agency and Report Number:
<input type="checkbox"/> First Aid Received?	<input type="checkbox"/> Employee Assistance Program Resources Provided?
<input type="checkbox"/> Other (specify)	

Describe Incident in Detail

Include what happened, where, who was involved, what you heard, saw, etc. Also include the circumstances at time of incident (i.e.: was the employee completing usual job duties, was the area poorly lit, was the work being rushed, was the employee working during a low staffing level, was the employee isolated/alone, was the employee able to get help/assistance, was the employee working in a community setting, was the employee working in an unfamiliar/new location, other – please explain).

List Names of Other Witnesses

Signature

Date

Person Receiving Witness Statement

Date

Routing

<i>Yes</i>	<i>No</i>	<i>Name</i>	<i>Signature</i>	<i>Date</i>
<input type="checkbox"/>	<input type="checkbox"/>	[APPLICABLE CONTACT/DEPT]		
<input type="checkbox"/>	<input type="checkbox"/>	[APPLICABLE CONTACT/DEPT]		

Upon completion of investigation, attach a findings/follow-up document to this form

EMPLOYEE TRAINING

We will provide employees with initial training when the plan is first established and annually thereafter on all of the following:

1. Our WVPP plan, how to obtain a copy of the plan at no cost, and how to participate in the development and implementation of the plan.
2. The definitions and requirements of SB 553.
3. How to report workplace violence incidents or concerns to us and/or law enforcement, without fear of reprisal.
4. Workplace violence hazards specific to employees' jobs, the corrective measures we have implemented, how to seek assistance to prevent or respond to violence, and strategies to avoid physical harm.
5. The required violent incident log and how to obtain copies of records.
6. An opportunity for interactive questions and answers with a person knowledgeable about the employer's plan.

Additional training shall be provided when a new or previously unrecognized workplace violence hazard has been identified and when changes are made to the plan. The additional training may be limited to addressing the new workplace violence hazard or changes to the plan.

RECORDKEEPING

Records of workplace violence hazard identification, evaluation, and correction will be created and maintained for a minimum of five years.

Training records will be created and maintained for a minimum of one year and include training dates, contents or a summary of the training sessions, names and qualifications of persons conducting the training, and names and job titles of all persons attending the training sessions.

Violent incident logs will be maintained for a minimum of five years.

Records of workplace violence incident investigations will be maintained for a minimum of five years. These records shall not contain "medical information," as defined in subdivision (j) of Section 56.05 of the Civil Code.

All records required above will be made available to employees and their representatives, upon request and without cost, for examination and copying within 15 calendar days of a request.

The Superintendent or designee will be responsible for ensuring that all relevant records are completed, maintained, and made available upon request as required by this program and/or Cal/OSHA. A safe and healthy workplace is the goal of everyone at Thermalito Union Elementary School District, with responsibility shared by management and staff alike.

HAZARD ASSESSMENTS

Any employee who locates a workplace violence hazard is encouraged to report it via email to their site administrator and/or secretary. The site administrator and/or secretary will then input it into “Facilitron Works Home Splashpage”. Hazards located during a workplace violence inspection will be documented and corrected promptly.

TUESD will conduct periodic inspections for workplace violence hazards. Hazard assessments will be performed:

- Annually
- When the WVPP is implemented
- When a new or previously unidentified violence hazard is recognized
- Post-workplace violence incident
- New TUESD facilities or significant changes to existing TUESD facilities

Inspection will be conducted through the lens of the four types of violence outlined in SB-553

EMPLOYER REPORTING RESPONSIBILITIES

As required by California Code of Regulations (CCR), Title 8, Section 342(a). Reporting Work-Connected Fatalities and Serious Injuries, the Thermalito Unified School District will immediately report to Cal/OSHA any serious injury or illness (as defined by CCR, Title 8, Section 330(h)), or death (including any due to Workplace Violence) of an employee occurring in a place of employment or connection with any employment.

