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# Town of North Hempstead

# WORKPLACE VIOLENCE PREVENTION PROGRAM





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**Human Resource Solutions Made Simple** 

# Town of North Hempstead

# WORKPLACE VIOLENCE PREVENTION PROGRAM

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## **SECTION 1 – INTRODUCTION**

#### **POLICY STATEMENT**

The Town of North Hempstead is committed to providing its employees with a work environment that is safe, secure, and free from violence. The Town also considers the safety of its residents, vendors, contractors, and the general public (collectively referred to as "visitors" throughout the remainder of this program manual) to be of paramount importance and strives to provide them the same type of protections while on Town property.

In accordance with the New York State Workplace Violence Prevention Act, the Town of North Hempstead has developed a Workplace Violence Prevention Program. As a part of this program, the Town conducted a comprehensive risk evaluation of the entire workplace. Authorized employee representatives were active participants in the development of this policy and program. The Town will conduct annual reviews, with the participation of the authorized employee representatives, to identify risk factors that may increase the likelihood of workplace violence and implement appropriate measures to minimize or eliminate these hazards. In order to achieve this goal, the Town encourages the participation and cooperation of employees and their authorized employee representative(s).

The Town will not tolerate any acts of violence in the workplace, including but not limited to, physical assault (e.g., hitting, pushing) or acts of aggression, whether verbal or physical, that would inflict physical injury upon an employee or elected official. In addition, employees are prohibited from possessing firearms or weapons (e.g., guns, non work related knives, explosives, and other items with the potential to inflict harm) in the workplace, even if the employee is licensed to carry the weapon. The only exceptions are law enforcement. An employee who has knowledge that a coworker or visitor possesses a weapon on Town property must report this to a Department Head or supervisor immediately.

For the purpose of this program, the workplace is defined as any location away from an employee's home, either permanent or temporary, where the employee performs any work-related duty in the course of employment. This includes, but is not limited to, Town-owned buildings and surrounding perimeters, parking lots, worksites, clients' homes, and traveling to and from work assignments.

Any incident of workplace violence or imminent danger must be promptly reported to the Department Head and/or any member of the Hazard Reduction Team as identified in Section 2 of this program or the Department of Finance/HR. In addition to being set forth in Section 2, the Hazard Reduction Team is identified on a list maintained in the Finance Department office (c/o the Commissioner of Finance).

Violations of this policy will result in appropriate remedial, disciplinary, and/or legal action, according to the circumstances, applicable New York State Law, and the Collective Bargaining Agreement as it may apply.

An employee will not be subject to criticism, reprisal, retaliation, demotion, discrimination, disciplinary action, or other adverse employment action for making a good faith report of acts pursuant to this program.

This Workplace Violence Prevention Program policy statement will be posted where notices to employees are normally displayed. In addition, a copy of the program manual will be made available to employees, the authorized employee representative(s), and the Commissioner of the New York State Department of Labor at each of the Town's worksites during normal working hours.

# OVERVIEW OF THE NEW YORK STATE WORKPLACE VIOLENCE PREVENTION ACT

Based on an increasing awareness of, and in response to, the violence that was occurring in public sector workplaces, the New York State Workplace Violence Prevention Act was passed in 2006. The Act amended NYS Labor Law by adding Section 27-b. Section 27-b requires all state and local government employers to take steps to ensure their employees are provided adequate protection from potential incidents of violence in the workplace.

Among other stipulations, Section 27-b requires the Town of North Hempstead to:

- 1. Conduct a risk assessment of its worksites to identify and address any existing risk factors that may increase the possibility of workplace violence:
- Provide training for all employees (upon initial assignment and annually thereafter) which informs them of the risk factors that may be present at their worksites, the measures they can take to protect themselves from such risks, and the steps the employer has implemented to protect employees, such as appropriate work practices, emergency procedures, and use of security alarms and other devices; and
- Develop and implement a written workplace violence prevention program that lists the risk factors and the methods the employer is using to prevent violence and minimize or eliminate identified hazards. (Required if an employer has 20 or more full-time employees).

#### WHAT IS WORKPLACE VIOLENCE?

For the purpose of this program, the term "violence" means any physical assault or acts of aggressive behavior occurring where a public employee performs any work-related duty in the course of his or her employment including but not limited to:

Workplace violence incidents are generally categorized into three levels:

Level I – Disruptive behavior such as verbal abuse Level II – Aggressive or threatening behavior Level III – Physical assault

A number of different actions in the work environment can trigger or cause workplace violence. It may even be the result of non-work-related situations, such as domestic violence or "road rage."

Workplace violence can be inflicted by an employee, a supervisor, department head, resident, member of the public, contractor, vendor, family member, or even a stranger.

#### WHAT IS A WORKPLACE VIOLENCE INCIDENT?

The New York State Department of Labor defines a workplace violence incident as one or more of the following:

- a. An attempt or threat, whether verbal or physical, to inflict injury upon another person;
- Any intentional display of force which would give a person reason to fear or expect bodily harm;
- c. Intentional and wrongful physical contact with a person without his or her consent that entails some injury or offensive touching; or
- d. Stalking a person with the intent of causing fear when such stalking has arisen through or in the course of employment.

A workplace violence incident may be committed without one person actually touching, striking, or doing bodily harm to another person.

While sexual harassment (as defined in Executive Order #19 and the New York State Human Rights Law) is prohibited by the Town of North Hempstead, it is specifically excluded from the definition of a workplace violence incident. An employee should refer to the Town of North Hempstead's Equal Employment Opportunity policy and Town code for more information about this topic. This policy shall not be construed to eliminate or affect any employee redress, concern or complaint of sexual harassment.

#### Workplace Violence Imminent Danger

The Department of Labor defines an imminent danger as any conditions or practices in any place of employment which are such that a danger exists that could reasonably be expected to cause death or serious physical harm immediately or before the imminence of such danger can be eliminated.

#### SAVINGS CLAUSE

The Town of North Hempstead has made every effort to ensure that this Workplace Violence Prevention Program complies with NYS Department of Labor regulations. In the event any of the provisions, portions or applications of this program are found to be invalid or inconsistent with any superseding legal requirements by any tribunal of competent jurisdiction, then the provisions, portions or applications specified in such decision shall be of no force and effect, but the remainder of this program shall continue to be in full force and effect.

# SECTION 2 – EMPLOYEE AND SUPERVISOR ROLES AND RESPONSIBILITIES

#### EMPLOYEE RESPONSIBILITIES

Employee and authorized employee representative involvement in the Town of North Hempstead's Workplace Violence Prevention Program is essential to the program's success. Employees are expected to read, understand, and comply with the Town's program and to attend ongoing education and training on workplace violence. Any questions should be directed to the employee's Department Head or supervisor.

Employees must promptly report any violations of the Town's Workplace Violence Prevention Program or any workplace violence imminent danger in accordance with the reporting procedures outlined in Section 5 (Incident Recordkeeping, Reporting, and Investigation) of this program manual.

#### Protective and Restraining Orders

An employee who applies for or obtains a protective or restraining order which lists specific workplace locations as being protected areas must provide the employee's Department Head, the Hazard Reduction Team, the Finance/HR Office, and the Town Attorneys Office with a copy of the petition and declaration used to seek the order. A copy of any temporary or permanent protective or restraining order that was granted must also be provided. The Town will follow confidentiality procedures that recognize and respect the privacy of the reporting employee.

#### DEPARTMENT HEADS/SUPERVISORS RESPONSIBILITIES

Department Heads and supervisors are responsible for communicating the Workplace Violence Prevention Program to employees and answering any of their questions. Department Heads and supervisors are expected to enforce the program in a fair and consistent manner and ensure all aspects of the program under their area of responsibility are properly met.

If an employee notifies his/her Department Head of an actual or potential workplace violence incident or submits a completed Workplace Violence Incident Report (Form-1), the Department Head is responsible for following the reporting procedures as outlined in Section 5 (Incident Recordkeeping, Reporting, and Investigation) of this program manual, a copy which can be obtained through your Department Head and/ or Supervisor, or on the intranet by printing pages 18-20 of the Workplace Violence Prevention Program Document.

#### HAZARD REDUCTION TEAM

The Town of North Hempstead will establish a Hazard Reduction Team to administer the Workplace Violence Prevention Program. The team, which will include an authorized employee representative mutually agreed upon by management and the union, will have the responsibilities of but not be limited to:

- Conducting a comprehensive risk evaluation of the entire workplace to identify any factors or situations that may place employees at risk of violence;
- Conducting employee surveys and interviews to obtain feedback on the risk factors employees believe are present in the workplace, to determine if there have been previous workplace violence incidents, etc.;
- Developing and implementing risk reduction strategies and plans for responding to acts of violence;
- Coordinating employee training and education programs relating to workplace violence;
- Investigating workplace violence incidents and implementing any necessary measures to reduce or eliminate the likelihood of similar incidents occurring;
- Reviewing the Workplace Violence Prevention Program quarterly, to include analyzing Workplace Violence Incident Reports to identify trends in the types of incidents that occurred during the year and to determine the effectiveness of the mitigating actions taken; and
- Updating the Workplace Violence Prevention Program as needed.

A list of the members of the Hazard Reduction Team is as follows:

John Darcy, Park & Rec, Dep. Comm (516) 708-7262

Gary Krasinski- EO Trainee, Highway, (516) 434-8045

Steven Somma- Bay Constable, Public Safety, (516) 351-4156

Donald Smallwood- Maint. Mech Trainee, Parks & Rec. (516) 708-7262

Matthew Temares- Deputy Commissioner of Public Safety, (516) 869-7730

### **SECTION 3 – RESPONSE PROCEDURES**

#### RESPONSE PROCEDURES DURING AN INCIDENT

If a threatening situation arises:

- Try to remain calm;
- Remove yourself from the threat as soon as possible;
- Immediately call, or alert others to call, for on-site assistance from the appropriate resource (e.g., supervisor, police, ambulance).
- Notify coworkers as soon as practical to enable them to also reach safety if danger is imminent and applicable to them.

#### POST INCIDENT RESPONSE PROCEDURES

If a workplace violence incident occurs or an employee submits a Workplace Violence Incident Report, the Hazard Reduction Team will conduct a thorough investigation of the situation. The Town of North Hempstead will respect the privacy and confidentiality rights of employees during investigations to the greatest extent possible, although the Town cannot guarantee complete confidentiality.

Based on the specific situation and the results of the team's investigation, appropriate measures will be taken, if needed, to eliminate or reduce the likelihood of similar workplace violence incidents occurring in the future. If the workplace violence incident was related to a threat, all employees who might be affected if the threat-maker were to carry out such threat will be given proper notification. Throughout the investigation, the Town will maintain open lines of communication with employees, visitors, and the public to answer questions and alleviate anxiety.

The Town of North Hempstead will provide information to potential or actual victims about the options available to them, such as obtaining a restraining order against the threat maker, obtaining follow-up medical care, if applicable, and/or the availability of any counseling services through an Employee Assistance Program (EAP).

#### **DEALING WITH CONFLICT**

There is no sure way to tell whether someone will become violent. However, there are often warning signs before violence occurs. These warning signs do not mean that the individual will actually become violent, but in combination, they should be a cause for concern. Warning signs of potentially violent individuals include:

- Written, oral, or implied threats or intimidation
- Fascination with weaponry or acts of violence
- Theft or sabotage of projects or equipment
- Alcohol or drug abuse in the workplace
- Expressions of hopelessness or heightened anxiety
- Intention to hurt self or others
- Lack of concern for the safety of others
- Externalization of blame
- Irrational beliefs and ideas
- Romantic obsession
- Displays of excessive or unwarranted anger
- Feelings of victimization
- Inability to take criticism
- New or increased sources of stress at home or work
- Productivity and/or attendance problems

#### DEALING WITH POTENTIALLY VIOLENT INDIVIDUALS

#### Do's

- Do project calmness. Move and speak slowly, quietly, and confidently.
- Do listen attentively and encourage the person to talk
- Do let the speaker know that you are interested in what he or she is saying
- Do maintain a relaxed yet attentive posture
- Do acknowledge the person's feelings and indicate that you can see he or she is upset
- Do ask for small, specific favors such as asking the person to move to a quieter area
- Do establish ground rules. State the consequences of violent or threatening behavior.
- Do employ delaying tactics that give the person time to calm down. For example, offer a glass of water.
- Do be reassuring and point out choices
- Do help the person break down big problems into smaller, more manageable problems
- Do accept criticism. When a complaint might be true, use statements such as, "You're probably right" or "It was my fault." If the criticism seems unwarranted, ask clarifying questions.
- Do arrange yourself so that your exit is not blocked
- Do make sure there are three to six feet between you and the other person

## Don'ts

- Don't make sudden movements that may seem threatening
- Don't speak rapidly, raise your volume, or use an accusatory tone
- Don't reject all demands
- Don't make physical contact, jab your finger at the other person, or use long periods of eye contact
- Don't pose in challenging stances, such as directly opposite someone, hands on hips, or with arms crossed
- Don't challenge, threaten, or dare the individual. Never belittle the other person.
- Don't criticize or act impatient
- Don't attempt to bargain with a threatening individual
- Don't try to make the situation seem less serious than it is
- Don't make false statements or promises you cannot keep
- Don't try to impart a lot of technical or complicated information when emotions are high
- Don't take sides or agree with distortions
- Don't invade the individual's personal space

## **SECTION 4 – TRAINING AND EDUCATION**

All employees will receive training and education on the risks of workplace violence. Training will be provided at the time of hire and at least annually thereafter. Additional training may be required prior to starting a new job assignment, if new laws relating to workplace violence are enacted or there are changes in any current laws, or if the Town makes significant changes in its Workplace Violence Prevention Program.

At a minimum, the Town's employee training and education will address the following:

- Overview of the New York State Workplace Violence Prevention Act and NYS Labor Law Section 27-b
- Overview of the Town's Workplace Violence Prevention Program
- Workplace location of the Town's Workplace Violence Prevention Program manual and procedures for obtaining a copy
- Definition of workplace violence and the three levels of workplace violence
- Methods of recognizing and responding to the three levels of violence
- Standard response action plan for violent situations
- Procedures for reporting a workplace violence incident or imminent danger
- How and when incidents will be investigated by the Town
- The risk factors identified in the Hazard Reduction Team's risk evaluation and determination
- Measures employees can take to protect themselves from identified risks
- Procedures, policies, safety devices, and/or work environment accommodations that have been implemented to protect employees based on the results of the risk evaluation
- Post-incident procedures, including medical follow-up and the availability of counseling for affected individuals

Specialized training and education is provided to Department Heads and supervisors as well as to those employees who are at higher risk of workplace violence based on their job duties and/or worksite location.

Upon completion of the training, employees will be asked to complete a training evaluation form to obtain their feedback on the quality and content of the training. Employees will receive a copy of the Town's Workplace Violence Prevention Program and will be required to sign a Policy Acknowledgement Form (Form-3) and a Training Acknowledgement Form (Form-4). These signed acknowledgement forms will be placed in the employee's personnel file.

# SECTION 5 – INCIDENT RECORDKEEPING, REPORTING, AND INVESTIGATION

#### INCIDENT RECORDKEEPING

The Town of North Hempstead, through the Hazard Reduction Team, will maintain accurate records regarding all workplace violence incidents. The Town will adhere to all of the requirements of 12 NYCRR Part 801, known as the Public Employer Recordkeeping Rule, which is implemented pursuant to Section 27-a of the Labor Law, for the recording of employee injuries or illnesses due to workplace violence incidents. All workplace violence incident forms will be kept according to the applicable retention and disposition schedules.

Any situation that meets the definition of a workplace violence incident as defined in Section 1 (Introduction) or any workplace violence injury that results in death, days away from work, restricted work or transfer to another job, medical treatment beyond first aid, or loss of consciousness will be documented on a Workplace Violence Incident Report. Any recordable workplace injury will also be documented on the SH 900 Log.

#### INCIDENT REPORTING

The Town will follow all federal, state and local laws and procedures in the reporting of workplace violence incidents.

### Internal Reporting Procedures

Any employee or authorized employee representative who believes that a workplace violence imminent danger exists or that there has otherwise been a violation of the Town's Workplace Violence Prevention Program should report such to the employee's Department Head. If the Department Head is unavailable or is a party to the violation, the report should be made to any member of the Hazard Reduction Team. See Section 2 for a list or contact the Finance Department.

An employee is responsible for reporting all incidents of Level I violence in writing within 48 hours of the occurrence using the Workplace Violence Incident Report. All Level II and Level III incidents must be reported as soon as possible using this form.

The Department Head in turn will forward a copy of the Workplace Violence Incident Report to the Hazard Reduction Team, and the Finance/HR office. All Level II and Level III incidents must be forwarded as soon as possible and all Level I incidents must be forwarded within 48 hours.

If, after providing the Town a reasonable opportunity to resolve the situation set forth in the Workplace Violence Incident Report, the employee believes that a violation of the Town's program still exists or that there continues to be a workplace violence imminent danger, the employee may contact the Commissioner of Labor at the NYS Department of Labor to request an inspection. Such request must be in writing, be signed by the employee or the employee's authorized representative, and include specific information as to the alleged violation or imminent danger. The Commissioner of Labor will provide a copy of the employee's notice to the Town of North Hempstead no later than the time of inspection. The employee may request that his or her name, the names of individual employees, and/or the authorized employee representative's name be withheld from the Town.

An employee is not required to provide written notice to the Department Head or the Hazard Reduction Team if a workplace violence imminent danger exists to the safety of a specific employee or to the general health of a specific person and the employee reasonably believes in good faith that reporting this information to the Department Head or the Hazard Reduction Team would not result in corrective action.

An employee will not be subject to criticism, reprisal, retaliation, demotion, discrimination, disciplinary action, or other adverse employment action for making a good faith report of acts pursuant to this program.

#### Law Enforcement Reporting Procedures

The Hazard Reduction Team is responsible for reporting any workplace violence incident that may be of a criminal or domestic violence nature to the appropriate law enforcement agency.

If a pattern of workplace violence incidents involving criminal conduct or serious injury develops, the Hazard Reduction Team will work with the District Attorney or local police department to develop a protocol to ensure that any future violent crimes occurring in the workplace are promptly investigated and appropriately prosecuted.

If an employee chooses to file a criminal complaint, the Town will provide the employee with the protocol and contact information for the District Attorney and/or police department. The Town will not infringe upon the right of an employee to pursue or file a criminal complaint.

#### **DOSH Reporting Requirements**

The Town is required to report any workplace violence related fatalities and multiple hospitalizations to the DOSH District Office within eight hours of the incident. (Refer to NYCRR Part 801 for complete information pertaining to employee recordkeeping and PESH reporting requirements).

DOSH will use the same criteria to review complaints as that utilized by the Public Employee Safety and Health (PESH) Program. Whenever there is a workplace violence incident resulting in an employee fatality or multiple employee hospitalizations, DOSH will conduct an on-site inspection. Other valid complaints that do not involve a fatality or multiple hospitalizations may result in an on-site inspection to determine if the Town is in compliance with the Workplace Violence Prevention Act.

#### INCIDENT INVESTIGATION

#### Risk Evaluation After an Incident

Following the filing of an incident report form, the Hazard Reduction Team shall undertake an investigation, complete a risk evaluation, and make a recommendation to the Commissioner of Finance/HR as to any measures that the Town should take to reduce or eliminate the likelihood of similar incidences occurring in the future. The Commissioner of the Department of Finance/HR shall evaluate the team's recommendation and make a final determination,in writing, notifying all affected parties of the outcome of the Town's investigation.

Upon completion of its review, the Hazard Reduction Team will address the cause(s) of the incident and take the necessary steps to eliminate or reduce the likelihood of such an incident occurring again. The team may also make recommendations for revising the Workplace Violence Prevention Program. Any revisions to the program will be put in writing and made available to employees. Employee training will be provided if significant changes to the program are made. The Town will also consider global prevention enhancements at all worksites which may be necessary to properly protect employees.

#### Annual Review of Incident Reports

The Hazard Reduction Team along with the Authorized Employee Representative(s) has the responsibility of reviewing and updating the Town's Workplace Violence Prevention Program quarterly. Part of this review will include summarizing the Workplace Violence Incident Reports and SH 900 Logs from the previous 12 months so they can be analyzed for any trends in the types of workplace violence incidents occurring and to review the effectiveness of the mitigating actions the Town has taken.

# **SECTION 6 - FORMS**

The following forms are to be used in administering the Town of North Hempstead's Workplace Violence Prevention Program:

- **FORM-1** Workplace Violence Incident Report Form
- **FORM-2** Employee Security Survey Form
- **FORM-3** Policy Acknowledgment Form
- **FORM-4** Training Acknowledgment Form

# **TOWN OF NORTH HEMPSTEAD**

# Workplace Violence Incident Report Form

This form must be used to document any reportable workplace violence incident. For any Level I incident, an employee must submit this completed form to the Department Head or supervisor within 48 hours of the occurrence. For all Level II and Level III incidents, this completed form must be submitted immediately. The Department Head or supervisor is responsible for forwarding this form to the Hazard Reduction Team and the Commissioner of Finance/HR within the same timeframes.

Victim's Name				
Job Title				
Department / Location				
Date and Time of Incident				
Location of Incident				
Name / Job Title of Individual Completing this Report				
Date Incident Report Completed				
Date Incident Report Rec	eived by	Finance/HR Comr	n.	
Finance/HR Commissioner Name / Signature				
List any individuals who n	nay have	witnessed this inc	ident:	
Witness Name Witnes			ess Job Title	Witness Work Phone Number
Check the type of violence the victim experienced (Check all that apply):				
Level I Violence				
☐ Intimidation	Bullying [		☐ Verbal abuse	☐ Minimal harassment
☐ Shouting	outing		☐ Obscene gestures	☐ False statements
Level II Violence				
Psychological Trauma	☐ Suicide threat		☐ Threats of assault	☐ Advanced harassment
Shouted at directly	Swore at directly		☐ Obscene calls	☐ Being followed or stalked
Level III Violence				
☐ Shooting	☐ Sta	bbing	Striking with an object	☐ Sexual assault
☐ Pushing ☐ Grabbing ☐		☐ Throwing objects	☐ Homicide	

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Accellant / Pornatrator	1.1	Name	Address		City	Stat
Assailant / Perpetrator  Member of the Public	√	Name	Address	5	City	Stat
Employee's Spouse	╁╫╴					
Employee's Significant Other	╅Ħ					
Employee's Supervisor	╁Ħ					
Coworker	╅					
Former employee	一					
Other (specify)						
Nas a police report filed?		1 I V 00	□ No Doli	ica Danart Ni	umbor	
Was the victim injured? ☐ Y			Treatment Obtained	I ☐ Yes ☐		] Yes [
Was the victim injured? Yes, please specify the injured?	ries and	No/Was Medical	Treatment Obtained	I ☐ Yes ☐	No/Refused ☐	] Yes 🗌
Was the victim injured? Yes, please specify the injured?	days?	No/Was Medical the name and lo	Treatment Obtained ocation of the facility	that provide	No/Refused ☐	] Yes [
Was the victim injured? ☐ Yes, please specify the injur	days?	No/Was Medical  If the name and lo	Treatment Obtained ocation of the facility  No Services available?	that provide	No/Refused  d medical care	] Yes [
Was the victim injured? Yes, please specify the injured?	days? of the o	Yes crisis counseling ince this incident	Treatment Obtained ocation of the facility  No Services available?	I  Yes   that provide  If yes, numb	No/Refused  d medical care  er of days  No	] Yes 🗌
Was the victim injured? Yes, please specify the injured.  Did the victim lose any work of the victim been informed. Has the victim received counse.	days?  of the one on to be	Yes crisis counseling ince this incident	Treatment Obtained ocation of the facility  No Services available? ?	I  Yes   that provide  If yes, numb Yes Yes Yes	er of days No	Yes  :
Vas the victim injured? Yes, please specify the injured?  Did the victim lose any work of the victim been informed has the victim received counse.  Did the victim have any reason	days?  of the of	Yes crisis counseling ince this incident lieve that this inc	Treatment Obtained ocation of the facility  No Services available? ?	I  Yes   that provide If yes, numb Yes Yes Yes Yes	No/Refused  d medical care  er of days  No  No  No  No ing in the future	] Yes  :

FORM-1 Page 2 of 3

EMPLOYEE SIGNATURE	DATE
DEPARTMENT HEAD SIGNATURE	DATE
HAZARD REDUCTION TEAM DESIGNEE	DATE
For Internal Town Use Only	
Indicate the steps that have been taken to mitiga	te future incidents of a similar nature:
Action Ta	ken Date Completed
Indicate any steps currently being taken by the T measures being taken:	own to mitigate future incidents and/or any interim protective
measures being taken:	rim Protective Measures Estimated Date
measures being taken:	rim Protective Measures Estimated Date
measures being taken:	rim Protective Measures Estimated Date
measures being taken:	rim Protective Measures Estimated Date
Action in Progress and/or Inte	rim Protective Measures Estimated Date
Action in Progress and/or Inte	rim Protective Measures  Estimated Date of Completion
Action in Progress and/or Inte	rim Protective Measures  Estimated Date of Completion
Action in Progress and/or Inte	rim Protective Measures  Estimated Date of Completion
Action in Progress and/or Interest and Indicate any other worksites, if applicable, that will 1.	rim Protective Measures  Estimated Date of Completion

FORM-1 Page 3 of 3

## **Employee Security Survey Form**

As part of the Town's effort to provide a safe workplace and minimize the potential for workplace violence, we are requesting your feedback by completing the following survey. Although providing your name is optional, if further clarification is needed, it allows us to contact you directly.

Name / Job Title: (opt	ional)	
Department:		
Work Location:		
Workplace violence member, or even a s	-	loyee, a supervisor, member of the public, family
		e violence. During the last twelve months of your ny incident(s) of the nature listed below (check all that
□ None	☐ Verbal threat	☐ Harassment of any kind
☐ Shouting	☐ Intimidation/bullying	☐ Obscene language/gestures
Please describe any i	ncident(s) in greater detail:	
		ce violence. During the last twelve months of your , any incident(s) of the nature listed below (check all
None	☐ Threats of assault ☐ Obs	cene calls
Please describe any i	ncident(s) in greater detail:	

FORM-2 Page 1 of 2

							last twelve months of your re (check all that apply):
	None	□ s	exual assault		Striking with hands or fo	eet	☐ Pushing or grabbing
	] Shooting	□ s	triking with an object		Assault with biological on chemical material	or	☐ Stabbing
Pleas	se describe any	incide	nt(s) in greater detail:_				
Hav	ve you experien	ced an	y of the following: (che	ck all t	hat apply)		
	Working alone during off hours where you felt unsafe	s	Working in isolated areas or where your whereabouts are unknown to coworkers		Poor security in and around building and parking lots		Poor lighting in or around building and parking lots
Wh	at training do yo	u feel	would help create a mo	ore pro	oductive and safe work	enviror	iment?
	Conflict resolution		What to do if subjected to workplace violence		How to prevent harassment in the workplace		How to implement effective counseling and corrective discipline
	Other (please s	specify	)				
Pleas	se indicate anv	other o	concerns with respect to	n work	place violence that you	would	like to address:
	so maioato arry	011101	oncome wan respect to	, work	place violence that year	Would	into to dadroso.
Than	ık you for compl	eting t	his survey.				

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# TOWN OF NORTH HEMPSTEAD

# Policy Acknowledgment Form

I hereby acknowledge that I have received or will receive a copy of the Town of North Hempstead's Workplace Violence Prevention Program manual outlining the Town's policy, objectives, procedures, and regulations regarding violence in the workplace. I further acknowledge that I have read or will read the contents of the program manual and will contact my department head or supervisor with any questions.

I understand that the objectives, procedures and regulations in this program manual will remain in effect unless I am notified of changes.

I understand that the Town of North Hempstead reserves the right to interpret, add to, or revise any part of this program manual, consistent with statutory requirements. Moreover, this program manual may be subject to alteration by changes in federal or state legislation, rules, and/or regulations.

I agree to abide by the Town of North Hempstead's Workplace Violence Prevention Program's policies and procedures.

EMPLOYEE NAME (PLEASE PRINT)
EMPLOYEE SIGNATURE
DATE OF SIGNATURE

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I hereby acknowledge that I have received training on the dangers of workplace violence, identified risk factors and available prevention methods, and my responsibilities and rights with respect to addressing the potential for workplace violence. I have been informed of the Town's policy regarding workplace violence and the program and procedures in place to minimize risks.

DATE OF TRAINING
EMPLOYEE NAME (PLEASE PRINT)
SIGNATURE OF EMPLOYEE
DATE OF SIGNATURE

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