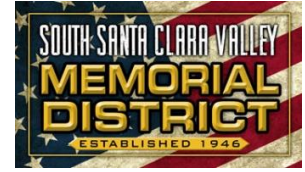




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Policy and Procedure Manual

Policy Title: Workplace Violence Prevention

Date Approved: Scheduled for April 15, 2024 Board Meeting

Date Revised: DRAFT 1

PURPOSE

The South Santa Clara Valley Memorial District maintains a zero-tolerance standard for violence in the workplace. The purpose of this policy is to provide employees guidance to maintain an environment at and within District property and events that are free of violence and the threat of violence.

POLICY

Violent behavior of any kind or threats of violence, either implied or direct, are prohibited at the Gilroy Veterans Memorial Building/Gilroy Veterans Hall and all District sponsored events. Such conduct by an employee will not be tolerated. An employee who exhibits violent behavior may be subject to criminal prosecution and shall be subject to disciplinary action up to and including dismissal. Violent threats or actions by a non-employee may result in criminal prosecution. The District will investigate complaints by employees and will also investigate known or suspected violations of this policy. Retaliation against a person who makes a complaint pursuant to this policy is also prohibited.

PROHIBITED BEHAVIOR

Violence in the workplace may include, but is not limited to the following list of prohibited behaviors directed at or by a co-worker, supervisor, or member of the public:

1. Direct threats or physical intimidation
2. Implications or suggestions of violence
3. Stalking
4. Possession of weapons of any kind on District property, including parking lots, other exterior premises or while engaged in activities for the District in other locations, or at District-sponsored events, unless such possession or use is a requirement of the job
5. Assault of any form
6. Physical restraint, confinement
7. Dangerous or threatening horseplay
8. Excessively loud, disruptive, or angry behavior or language that is clearly not part of the typical work environment which can be interpreted as threatening
9. Blatant or intentional disregard for the safety or well-being of others
10. Commission of a violent felony or misdemeanor on District property
11. Any other act that a reasonable person would perceive as constituting a threat of violence

Domestic Violence, while often originating in the home, can significantly impact workplace safety and the productivity of victims as well as co-workers. For the purposes of this document, “domestic violence” is defined as abuse committed against an adult or minor. Abuse is the intentional reckless attempt to cause bodily injury, sexual assault, threatening behavior, harassment, or stalking, or making annoying phone calls to a person who is in any of the following relationships:

- Spouse or former spouse
- Domestic partner or former domestic partner
- Cohabitant or former cohabitant and or other household members
- A person with whom the victim is having, or has had, a dating or engagement relationship
- A person with whom the victim has a child
- A sibling, child, or parent

The District recognizes that domestic violence may occur in relationships regardless of the marital status, age, race, or sexual orientation of the parties.

REPORTING ACTS OF VIOLENCE

An employee who:

1. Is the victim of violence, or
2. Believes they have been threatened with violence, or
3. Witnesses an act or threat of violence towards anyone else shall take the following steps:
 - If an emergency exists and the situation is one of immediate danger, the employee shall contact the local police officials by dialing 9-1-1, and may take whatever emergency steps are available and appropriate to protect himself/herself from immediate harm, such as leaving the area
 - If the situation is not one of immediate danger, the employee shall report the incident to the appropriate supervisor/manager or the HR Director or District Executive Director as soon as possible and complete the *South Santa Clara Valley Memorial District, Workplace Violence Incident Report Form* (Appendix A)

INCIDENT INVESTIGATION

Acts of violence or threats will be promptly investigated to protect employees from danger, to prevent unnecessary anxiety concerning employee welfare, and to prevent a loss of productivity. The District Manager will promptly initiate an investigation into suspected violations of this policy and may refer the matter to local police for their review of potential violation of civil and/or criminal law.

Procedures for investigating incidents of workplace violence include:

- Visiting the scene of an incident as soon as possible
- Interviewing injured and threatened employees and witnesses
- Examining the workplace for security risk factors associated with the incident, including any reports of inappropriate behavior by the perpetrator

- Determining the cause of the incident
- Taking mitigating action to prevent the incident from recurring. –
Recording the findings and mitigating actions taken

In appropriate circumstances, the District may inform the reporting individual of the results of the investigation. To the extent possible, the District will maintain the confidentiality of the reporting employee and the investigation but may need to disclose results in appropriate circumstances; for example, in order to protect individual safety. The District will not tolerate retaliation against any employee who reports workplace violence.

MITIGATION MEASURES

Incidents which threaten the security of employees shall be mitigated as soon as possible following their discovery. Mitigating actions may, but are not required to include:

- Notification of law enforcement authorities when a potential criminal act has occurred
- Provision of emergency medical care in the event of any violent act upon an employee
- Post-event trauma counseling for those employees desiring such assistance
- Assurance that incidents are handled in accordance with the Workplace Violence Prevention policy
- Retraining of employees on the requirements of this policy
- Requesting the District attorney pursue a restraining order as appropriate

TRAINING AND INSTRUCTION

The District shall be responsible for ensuring that all employees, including managers and supervisors, are provided with training and instruction on this policy and general workplace security practices. Training and instruction shall be provided as follows:

- To all current employees when the policy is first implemented
- To all newly hired employees, supervisors, and managers.
- To affected employees whenever management is made aware of a new or previously unrecognized hazard

Workplace violence prevention training includes, but is not limited to, the following:

- Preventive measures to reduce the threat of workplace violence, including procedures for reporting workplace security hazards
- Methods to diffuse hostile or threatening situations including de-escalation techniques
- Escape routes
- Explanation of this Workplace Violence Prevention Policy

In addition, specific instructions shall be provided to all employees regarding workplace security hazards unique to their job assignment.

Appendix A Workplace Violence Incident Report form

This form is to be completed after the incident when you are safe. If you need immediate assistance or you are in danger, call 911)

1. Status of Person Reporting: <input type="checkbox"/> Employee <input type="checkbox"/> Visitor <input type="checkbox"/> District Contractor <input type="checkbox"/> Other _____	2. Date of incident (mm/dd/yyyy):	3. Time of incident: <input type="checkbox"/> AM <input type="checkbox"/> PM
4. Name: (Last, First, MI)		5. Phone #:
6. Email		
7. Address or location of incident: (be specific about the building, inside or outside of building, etc.)		
8. Nature of the incident (note: check box and describe incident below) <input type="checkbox"/> Threat <input type="checkbox"/> Assault <input type="checkbox"/> Other (explain below)		
9. Were you injured: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Describe below the injury and any first aid or medical treatment you received. Note: if you feel this information is too personal, you may skip the description.		
10. Witnesses name, and contact information:		
Management Assessment (Items 13 and 14 below to be completed by Human Resources)		
11. Incident Assessment:		
12. Corrective Action		
13. Signature of Person Completing Report: <i>I the undersigned acknowledge reporting this incident as described above.</i>	14. Person Completing Report: (if different than named in Question 4.)	15. Date Submitted: