

**KALEIDA HEALTH
1199/SEIU UNITED HEALTHCARE WORKERS EAST
COMMUNICATIONS WORKERS OF AMERICA**

2022 CONTRACT NEGOTIATIONS

**Union Proposal
Date Presented: May 3, 2022**

**Article 108
Workplace Violence**

Section 1. Health care workers are at a greater risk to experience threats, physical assaults or muggings than other workers. Violence is aggressive and abusive behavior from patients, visitors, physicians, other employees, supervisors, managers, or patient's family members. Violence is defined as, but not limited to, physical and verbal assaults, battering, sexual assaults, or verbal or non-verbal intimidation.

Section 2. In an effort to minimize that risk and increase the wellbeing of employees, the Employer and the Unions agree to maintain a multi-disciplinary Sub-Committee to address Workplace Violence. The Sub-Committee will be co-chaired by the Employer and the Unions with equal ability to add items to the agenda. In addition to, and to supplement the existing Employer policies which address: sexual harassment, harassment, workplace violence, physical violence, bullying and threats, the parties will maintain, develop and implement strong violence and abuse prevention programs including:

- a.) identification of employees who are most at risk of violence;
- b.) identification of where in the facilities violence is most likely to occur including all off site locations (ie: clinics, draw stations);
- c.) identification of the effects of violence on workers, the risk factors for violence, prevention strategies and the consequences of violence;
- d.) policies, **programs** and procedures for the prevention of violence or potential violence;
- e.) training programs on violence prevention and verbal de-escalation;
- f.) a trained Response Team, for each acute care and long term care facility, which will be available twenty-four (24) hours and seven (7) days a week, similar to a code team, that can be immediately called to assist an employee in any situation that involves violence;

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- g.) report the injury or illness to the appropriate bodies both internally and externally, ie: Department of Industrial Accidents, police, STARS, etc. **(the affected employee and the Union will receive notification of the illness or injury as well as a copy of the report);**
- h.) recommendations for appropriate services for employees who are affected by workplace violence, including provisions for psychological services;
- i.) procedures to permit interested employees to make a written request for a badge that does not contain their last name, at no cost to the employee;
- j.) policies and procedures relating to the removal, storage and disposition of any weapons found on patients, family members, visitors or others;
- k.) making recommendations for security as well as surveillance of hospital grounds and well lit parking areas, including escorts to cars and physical protection to worker if necessary;
- l.) a process to educate employees as to their right to security police protection (call 911) if an assault is being/has been committed **as well as the employee's right to press charges against the assailant;**
- m.) a process to insure that those involved in an incident of violence receive appropriate information and follow up to the event;
- n.) assure that all incidents of violence/harassment will be reported in accordance with the relevant policy. The safety/WPV Committee will review the status of claims of workplace violence in order to make appropriate recommendations. Patient and employee confidentiality will be respected.

The Employer and the Union will work collaboratively through the Workplace Violence committee to oversee compliance of the above listed items.

Section 3. In addition to the items listed in Section 2 above, the Employer and the Union will develop a program to help address worker on worker hostilities and violence in the workplace.

Section 4. The Employee Assistance Program (EAP) will be utilized to help employees work through instances of workplace violence, inclusive of on-site interventions and trainings.

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Section 5. The sub-committee will schedule a meeting within thirty (30) days of the ratification of this Agreement. The parties will utilize consultants and other experts in the field in the development of the policy.

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