

Article 108
Workplace Violence

Section 1. The safety of staff, patients and visitors is a top priority for the Union and the Employer. To that end, the parties remain focused on continually assessing and improving safety at all sites. A security plan with input from the Union will be designed and implemented that will enhance the safety and security throughout the system.

Section 2. 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 3. 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, **workplace security**, physical violence, bullying and threats, the parties will maintain, develop and implement strong violence and abuse prevention programs **and strategies** including:

- a.) **maintenance of a dashboard for monitoring Kaleida Health system security;**
- b.) identification of employees who are most at risk of violence;
- c.) identification of where in the facilities violence is most likely to occur including all off site locations (i.e.: clinics, draw stations);
- d.) identification of the effects of violence on workers, the risk factors for violence, prevention strategies and the consequences of violence;
- e.) policies, programs, **strategies** and procedures for the prevention of violence or potential violence;
- f.) training **and education** programs on violence prevention, **and** verbal de-escalation, **and relevant security issues including didactic and "in-environment"** training of all employees;
- g.) **security overview and education in New Employee Orientation;**
- h.) 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

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code team, that can be immediately called to assist an employee in any situation that involves violence;

- i.) report the injury or illness to the appropriate bodies both internally and externally, i.e.: 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);
- j.) recommendations for appropriate services for employees who are affected by workplace violence, including provisions for psychological services;
- k.) 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;
- l.) policies and procedures relating to the removal, storage and disposition of any weapons found on patients, family members, visitors or others;
- m.) 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;
- n.) 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;
- o.) a process to insure that those involved in an incident of violence receive appropriate information and follow up to the event;
- p.) assure that all incidents of violence/harassment will be reported in accordance with the relevant policy. **Employees should utilize the Lighthouse (or equivalent) system to document incidents.** 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. **In addition, the Employer and the Union entered into Letter of Intent #10, Workplace Security, as part of the 2025 Master Agreement negotiations to identify certain short-and long-term initiatives and continuing strategies to further their mutual interest to enhance security throughout the Kaleida Health system. ~~Such compliance will include implementation of the following items within six (6) months of the ratification of this Agreement:~~**

- ~~a.) install weapon and acceptable behavior signage;~~
- ~~b.) implement a system of bag checks and wandling for all patients and visitors;~~

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- ~~e.) evaluate number and locations of cameras and add additional cameras as needed;~~
- ~~d.) evaluate number and locations of panic alarm system and add additional alarms as needed;~~
- ~~e.) implement additional door locking mechanism and card access restrictions;~~
- ~~f.) evaluate mass communications systems and implement Kaleida-wide;~~
- ~~g.) research employee "wearables" and implement system;~~
- ~~h.) security impact film and ballistic glass;~~
- ~~i.) substitute guest relation positions for security guards for patient check-in and increase the number of security guards and their areas of surveillance;~~
- ~~j.) assess weapons detection systems and implement a system prioritizing emergency departments.~~

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.

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.

~~Section 6. Following the nine (9) month period of implementation on security issues, the parties agree there are long term strategies that will continue to be worked on. Those strategies include but are not limited to:~~

- ~~a.) continued assessment of technology;~~
- ~~b.) continue the best practices related to a layered approach to technologies;~~
- ~~c.) continued security vulnerability assessments, both internally and externally and implement changes where identified;~~
- ~~d.) reduction of access points at all facilities;~~
- ~~e.) complete an assessment of parking areas both structural and open and enhance security;~~
- ~~f.) develop metrics for success, including response times, security breach occurrences and employee feedback scores.~~

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