Mary Lanning
HEALTHCARE

SAFETY AND SECURITY IN THE WORKPLACE

Policy: SEC 218.00, **v.4** **Effective: 05/15/2026**
Category: Security **Origination Date:** 09/01/1997

I. PURPOSE:

To improve the safety and security of our patients, visitors, and staff by evaluating and mitigating risks in the physical environment, and by protecting individuals and property against harm or loss through theft, or actions of workplace violence. .

II. POLICY:

Mary Lanning Healthcare appoints a Safety Officer who chairs both the Environment of Care Safety Committee and the Workplace Violence Prevention Program. The multidisciplinary groups assist the Safety Officer to identify and mitigate risks and set parameters and guidelines to address threats and acts of physical violence as detailed in each charter. Mary Lanning Healthcare has a zero tolerance for workplace violence situations.

Employees receive education on organizational risk, safety concerns, and maintaining security of their department(s) by identifying and reporting potential or actual incidents to ensure a timely response and resolution.

III. DEFINITIONS:

A. Workplace Violence

1. Workplace violence is any act or threat of physical violence, or other disruptive behavior that occurs at the work site - regardless of intent - that may alter employment conditions. Incidents can include any of the following:
    - Verbal or written abuse
    - Physical aggression or assaults
    - Words or actions of threat, intimidation, humiliation, or harassment
    - Bullying or actions of sabotage
    - Sexual harassment
2. These acts of violence can affect and involve employees, patients, clients, customers, and visitors. They may include conduct against persons or property that is severe, offensive, or intimidating that it alters the employment conditions at Mary Lanning Healthcare.

B. Employees

1. For purposes of this policy, the term Employees includes all employed staff, leadership, licensed practitioners, students, and volunteers.

IV. RESPONSIBILITIES:

A. The Environment of Care Safety Committee (EOC) is a multidisciplinary team responsible for the environmental and fire and life safety activities by assessing, managing, and reducing identified risks and mitigating future risks. This group meets quarterly on an approved agenda. Reporting topics include those in:
   1. Safety Management
   2. Security
   3. Hazardous Materials and Waste
   4. Life Safety
   5. Utilities
   6. Equipment Management

B. The Workplace Violence Prevention Team is a multidisciplinary subgroup of the EOC. Their guiding principles are to maintain a culture of safety, establish and maintain a healthy and secure work environment, and report and analyze incidents and trends. Specific activities and responsibilities of this group are outlined in the Charter. Information from this committee reports up to the EOC.
   1. Mary Lanning Healthcare's prohibition against threats and acts of violence applies to all persons involved in the hospital's operation, including but not limited to hospital personnel, contract and temporary workers, and anyone else on Mary Lanning Healthcare's property.
      a) Violations of this policy by any individual on hospital property, by any individual acting as a representative of the hospital while not on hospital property, or by any individual acting off of hospital property when his/her actions affect the hospital's business interest will be followed by legal action, as appropriate.
      b) Violation by an employee of any provision of this policy may lead to disciplinary action, up to and including termination, as provided by the Mary Lanning Healthcare Policy and Procedure Manual.

V. PROCEDURE:

A. Conduct Risk Assessments
   1. Assessments are completed annually to evaluate the risks of the potential for environmental hazards and workplace violence.
      a) Environmental rounds are conducted regularly to evaluate the condition of the physical environment and identify risks.

b) Findings of security and workplace violence risk assessments are used to help minimize or eliminate safety and security risks identified.

c) The Safety Officer and security staff work with Leadership to identify security sensitive areas in the hospital and clinics. Identification badges are used to restrict access.

2. EOC activities and goals are summarized and reported to the Board of Trustees through the annual Environment of Care Effectiveness Report by the Safety Officer.

B. Examples of Workplace Violence

1. General examples of prohibited workplace violence include, but are not limited to, the following:

a) All threats or acts of violence occurring on hospital property, regardless of the relationship between the hospital and the parties involved in the incident.

b) All threats or acts of violence not occurring on hospital property but involving someone who is acting in the capacity of a representative of Mary Lanning Healthcare while on-duty or on-shift.

c) All threats or acts of violence not occurring on hospital property involving an employee of Mary Lanning Healthcare if the threats or acts of violence affect the legitimate interests of the hospital.

d) Any threats or acts resulting in the conviction of an employee of the hospital, or of an individual performing services on the hospital's behalf on a contract or temporary basis, under any criminal code provision relating to threats or acts of violence that adversely affect the legitimate interests and goals of Mary Lanning Healthcare.

2. Specific examples of conduct that may be considered "threats or acts of violence" prohibited under this policy include, but are not limited to, the following:

a) Hitting or shoving an individual.

b) Threatening to harm an individual or his/her family, friends, associates, or their property.

c) The intentional destruction or threat of destruction of property owned, operated, or controlled by Mary Lanning Healthcare.

d) Making harassing or threatening telephone calls, letters, or other forms of written or electronic communications.

e) Intimidating or attempting to coerce an employee to do wrongful acts that would affect the business interests of the hospital.

f) Harassing surveillance, also known as "stalking", the willful, malicious and repeated following of another person and making a credible threat with the intent to place the person in reasonable fear of his or her safety.

g) Making a suggestion or otherwise intimating that an act to injure persons or property is "appropriate", without regard to the location where such suggestion or intimidation occurs.

h) Unauthorized possession or inappropriate use of firearms, weapons, or any other dangerous devices on hospital property.

C. Reporting Obligations

1. Any security or physical safety concern should be reported to Security immediately.
2. Any unsafe working condition or identified environmental hazard should be promptly reported to Engineering for immediate intervention.
3. Each employee of the hospital and every person on hospital property are required to report incidents of safety concerns, threats, or acts of physical violence of which he/she is aware.
    a) In cases where the reporting individual is a hospital employee, an occurrence report should be made through the online electronic occurrence reporting system. Alternatively, reports may be made to the reporting individual's immediate supervisor, a management level supervisory employee if the immediate supervisor is not available, or to the hospital's Human Resources Department.
        - Each employee who receives such report shall promptly refer the incident to the appropriate management level supervisor, who shall enter the occurrence and take corrective action in accordance with the hospital's policy and procedure manual.
4. Any actual incident or occurrence classified as workplace violence will precipitate a hotwash debriefing and development of an after-action report. Feedback will be requested from those with lingering fear or anxiety. Any staff member may request support services regardless of whether or not they were involved or witness to the event. Trauma and mental health counseling will be available through EAP.

D. Training

1. The hospital will provide training upon hire and on an annual basis on:
    a) Risk factors associated with workplace violence and proper handling of emergency situations to minimize the risks of violent incidents occurring in the workplace.
    b) Emergency codes and required response
    c) Maintaining safety and security during emergency or disaster events

VI. REFERENCES

A. https://www.jointcommission.org/resources/patient-safety topics/workplace-violence-prevention/compendium-of-resources/

B. SMS, Inc SS-EC.02.01.01EP017-b-Policy-Workplace-Violence-Risk-Assessment 2025

VII. COLLABORATED WITH:

N/A

VIII. DISTRIBUTION:

All MLH employees

IX. RESCISSIONS

A. Origination Date: 09/1997
B. Reviews/Revisions: 10/2012, 08/2014, 06/2019, 04/2022, 05/2023, 06/2026

X. REVIEW AND REISSUE DATE:

A. Three (3) years from last review date

XI. FOLLOW-UP RESPONSIBILITY:

Safety Officer

XII. ATTACHMENTS:

None