

# **Guidelines for Implementing Preparedness and Incident Response Action Plan**

Please reference Minnesota Statute 144.566, Violence Against Health Care Workers (https://www.revisor.mn.gov/statutes/cite/144.566).

#### **Definitions:**

"Act of violence" means an act by a patient or visitor against a health care worker that includes kicking, scratching, urinating, sexually harassing, or any defined in sections 609.221 to 609.2241.

"Health care worker (HCW)" means any person, whether licensed or unlicensed, employed by, volunteering in, or under contract with a hospital, who has direct contact with a patient of the hospital for purposes of either medical care or emergency response situations potentially involving violence.

"Incident response" means the actions taken by hospital administration and health care workers during and following an act of violence.

"Workplace violence (WPV) hazards" means locations and situations where violent incidents are more likely to occur, including, as applicable, but not limited to locations isolated from other HCWs; HCWs working alone; HCWs working in remote locations; HCWs working late night or early morning hours; locations where an assailant could prevent entry of responders or other HCWs into a work area; locations with poor illumination; locations with poor visibility; lack of effective escape routes; obstacles and impediments to accessing alarm systems; locations within the facility where alarm systems are not operational; entryways where unauthorized entrance may occur, such as doors designated for staff entrance or emergency exits; presence, in the areas where patient contact activities are performed, of furnishings or objects that could be used as weapons; and locations where high-value items, currency, or pharmaceuticals are stored.

# **Facility Identification**

Hospital Name (doing business as):	
Address:	
City/State/Zip:	
Health Facility Identification (HFID) number:	

## **Required elements of Preparedness and Incident Response Action Plan**

## Action plan committee

Minnesota Statute 144.566, subd. 3 (https://www.revisor.mn.gov/statutes/cite/144.566#stat.144.566.3)

Use **Addendum A** to list all names and titles for nonmanagerial health care workers, nonclinical staff, administrators, patient safety experts, and other appropriate personnel to develop preparedness and incident response action plans to acts of violence.

#### General requirements of action plans

Minnesota Statute 144.566, subd. 4 (https://www.revisor.mn.gov/statutes/cite/144.566#stat.144.566.4)

Use **Addendum B** to list names or job titles for persons responsible for implementing plan and effective procedures. ☐ Effective procedures to obtain active involvement of HCWs and their representatives in the following: ☐ Developing the plan ☐ Implementing the plan ☐ Reviewing the plan ☐ Identifying WPV hazards ☐ Evaluating WPV hazards ☐ Correcting WPV hazards ☐ Designing trainings ☐ Implementing trainings ☐ Reporting incidents of WPV ☐ Investigating incidents of WPV ☐ Include names or job titles of the persons responsible for: ☐ Implementing the plan ☐ Effective procedures to ensure that supervisory and nonsupervisory HCWs comply with the plan Evaluation of risk factors Minnesota Statute 144.566, subd. 5 (https://www.revisor.mn.gov/statutes/cite/144.566#stat.144.566.5) ☐ Assessment procedures to identify and evaluate WPV hazards for each facility, unit, service, or operation, including community-based risk factors and areas surrounding the facility, such as employee parking areas and other outdoor areas. ☐ Specify the frequency that environment assessments take place. ☐ Assessment tools, environment checklists, or other effective means to identify WPV hazards. Review of workplace violence incidents Minnesota Statute 144.566, subd. 6 (https://www.revisor.mn.gov/statutes/cite/144.566#stat.144.566.6) ☐ Procedures for reviewing all WPV incidents that occurred in the facility, unit, service, or operation within the previous year, whether or not an injury occurred.

#### Reporting workplace violence

MN Statute 144.566, Subd. 7 (https://www.revisor.mn.gov/statutes/cite/144.566#stat.144.566.7)

Preparedness and Incident Response action plan must include: ☐ Procedures for HCWs to document information regarding conditions that may increase the potential for WPV incidents and communicate that information without fear of reprisal to other HCWs, shifts, or units. Name (of document): \_\_\_\_\_ Name (of document): ☐ Procedures for HCWs to report a violent incident, threat, or other WPV concern without fear of reprisal. Name (of document): \_\_\_\_\_\_ Name (of document): ☐ Procedures for the hospital to accept and respond to report of WPV and to prohibit retaliation against a health care worker who makes such a report. Name (of document): Name (of document): ☐ Policy statement stating the hospital will not prevent a HCW from reporting WPV or take punitive or retaliatory action against a HCW for doing so. Name (of document): \_\_\_\_\_ Name (of document): \_\_\_\_\_ ☐ Procedure for investigating HCW concerns regarding WPV or WPV hazards. Name (of document): \_\_\_\_\_ Name (of document): ☐ Procedure for informing HCW of results of the investigation arising from a report of WPV or from a concern about a WPV hazard and of any corrective actions taken. Name (of document): Name (of document): \_\_\_\_\_ ☐ Procedure for obtaining assistance from the appropriate law enforcement agency or social service agency during all work shifts. The procedure may establish a central coordination procedure. Name (of document): \_\_\_\_\_ Name (of document): ☐ Policy statement stating the hospital will not prevent a HCW from seeking assistance and intervention from local emergency services or law enforcement when a violent incident occurs or take punitive or retaliatory action against a HCW for doing so. Name (of document):

Name (of document):

#### Coordination of other employers

Minnesota Statute 144.566, subd. 8 (https://www.re	evisor.mn.gov/statutes/cite/144.566#stat.144.566.8)
----------------------------------------------------	-----------------------------------------------------

☐ Methods the hospital will use to coordinate implementation of the plan with other employers whose employees work in the same health care facility, unit, service, or operation and to ensure that those employers and their employees understand their respective roles as provided in the plan. These methods must ensure that all employees working in the facility (regardless of employer), unit, service or operation are provided the training required (noted below) and that WPV incidents involving any employee are reported, investigated, and recorded.

#### Training

#### Minnesota Statute 144.566, subd. 9 (https://www.revisor.mn.gov/statutes/cite/144.566#stat.144.566.9)

Preparedness and Incident Response action plan must include:

□ Procedures for developing and providing the training required in subdivision 10 that permits HCW and their representatives to participate in developing the training.

□ A requirement for cultural competency training and equity, diversity, and inclusions training.

□ The Preparedness and Incident Response action plans must include procedures to communicate with HCW regarding WPV matters, including:

□ How HCW will document and communicate to other HCWs and between shifts and units' information regarding conditions that may increase the potential for WPV incidents.

□ How HCW can report a violent incident, threat, or other WPV concern.

□ How HCW can communicate WPV concerns without fear of reprisal.

□ How HCW concerns will be investigated, and how HCWs will be informed or the results of the investigation and any corrective actions to be taken.

## Training required

the plan.

#### Minnestoa Statute 144.566, subd. 10 (https://www.revisor.mn.gov/statutes/cite/144.566#stat.144.566.10)

A hospital must provide training to all HCWs employed or contracted with the hospital on safety during acts of violence. Each HCW must receive safety training during the HCWs orientation and before the HCW completes a shift independently, and annually thereafter.	/
Training must include:	
$\ \square$ Safety guidelines for response to and de-escalation of an act of violence.	
<ul> <li>Ways to identify potentially violent or abusive situations, including aggression and violence predicting factors.</li> </ul>	
☐ The hospital's Preparedness and Incident Response action plans, including how the HCW may report concerns about WPV within each hospital's reporting structure without fear or reprisal, how the hospital will address WPV incidents, and how the HCW can participate in reviewing and revising	

☐ Sharing resources available to HCWs for coping with incidents of violence, including but not limited to critical incident stress debriefing or employee assistance programs.

#### Annual review and update of action plans

Minnesota Statute 144.566, subd. 11 (https://www.revisor.mn.gov/statutes/cite/144.566#stat.144.566.11) As part of its annual review of Preparedness and Incident Response action plans, the hospital must review with the designated committee: ☐ The effectiveness of its Preparedness and Incident Response action plans, including the sufficiency of security systems, alarms, emergency responses, and security personnel availability. Security risks associated with specific units, areas of the facility with uncontrolled access, late night shifts, early morning shifts, and areas surrounding the facility such as employee parking areas and other outdoor areas. ☐ The most recent gap analysis as provided by the commissioner. ☐ The number of acts of violence that occurred in the hospital during the previous year, including injuries sustained, if any, and the unit in which the incident occurred. Evaluations of staffing, including staffing patterns and patient classification systems that contribute to, or are insufficient to address the risk of violence. ☐ Any reports of discrimination or abuse that arise from security resources, including from the behavior or security personnel. As part of the annual update of Preparedness and Incident Response action plans, the hospital must incorporate corrective actions into the action plan to address: ☐ WPV hazards identified during the annual action plan review ☐ Reports of WPV ☐ Reports of WPV hazards ☐ Reports of discrimination or abuse that arise from the security resources Action plan updates Minnesota Statute 144.566, subd. 12 (https://www.revisor.mn.gov/statutes/cite/144.566#stat.144.566.12) ☐ Following the annual review of the action plan, a hospital must update the action plans to reflect the corrective actions the hospital will implementation to mitigate the hazards and vulnerabilities identified during the annual review. Requests for additional staffing Minnesota Statute 144.566, subd. 13 (https://www.revisor.mn.gov/statutes/cite/144.566#stat.144.566.13) ☐ A hospital shall create and implement a procedure for HCW's to officially request of hospital supervisors or administration that additional staffing be provided. ☐ The hospital must document all request for additional staffing made because of a HCW's concern over a risk off an act of violence. ☐ If the request for additional staffing to reduce the risk of violence is denied, the hospital must provide the

HCW who made the request a written reason for denial and must maintain documentation of that

communication with the documentation of requests for additional staffing.

#### GUIDELINES FOR IMPLEMENTING PREPAREDNESS AND INCIDENT RESPONSE ACTION PLAN

i r s	A hospital must make documentation regarding staffing requests available to the commissioner for inspection at the commissioner's request. The commissioner may use documentation regarding staffing requests to inform the commissioner's determination on whether the hospital is providing adequate staffing and security to address acts of violence and may use documentation regarding staffing requests if the commissioner imposes a penalty.
Dis	closure of action plans
Mini	nesota Statute 144.566, subd. 14 (https://www.revisor.mn.gov/statutes/cite/144.566#stat.144.566.14)
I	A hospital must make its most recent action plans and most recent action plan reviews available to local aw enforcement, all direct care staff and, if any of its workers are represented by a collective bargaining unit, to the exclusive bargaining representatives of those collective bargaining units.
Пг	Deadline of report submission to MDH: January 1, 2025

# Addendum A – Action plan committee

Additional sheets may be attached.

Full Name of Individual	Type of Representative
Example: Michael Johnson	□Nonmanagerial health care worker □Nonclinical staff ☑Administrator □Patient safety expert □Other:
	□Nonmanagerial health care worker □Nonclinical staff □Administrator □Patient safety expert □Other:
	□Nonmanagerial health care worker □Nonclinical staff □Administrator □Patient safety expert □Other:
	□Nonmanagerial health care worker □Nonclinical staff □Administrator □Patient safety expert □Other:
	□Nonmanagerial health care worker □Nonclinical staff □Administrator □Patient safety expert □Other:
	□Nonmanagerial health care worker □Nonclinical staff □Administrator □Patient safety expert □Other:
	□Nonmanagerial health care worker □Nonclinical staff □Administrator □Patient safety expert □Other:
	□Nonmanagerial health care worker □Nonclinical staff □Administrator □Patient safety expert □Other:
	□Nonmanagerial health care worker □Nonclinical staff □Administrator □Patient safety expert □Other:

# Addendum B: Individuals Responsible for Implementing Action Plan

Additional sheets may be attached.

Name or Job Title of persons responsible for implementing the plan		
Example: Name: Michael Johnson Job TItle: Registered Nurse		

Minnesota Department of Health
Health Regulation Division
Federal Licensing, Certification, and Registration section
P.O. Box 64900
St. Paul, MN 55164-0900
651-201-4200
Health.HRD-FedLCR@state.mn.us
health.state.mn.us

02/21/2024