

POLICY

Approved by: Rebecca R. Hunter, Commissioner	Policy Number: 12-060 (Rev. 02/18)
Signature: <i>Rebecca R. Hunter</i>	Supersedes: 12-060
Application: Executive Branch Agencies, All Executive Branch Employees	Effective Date: August 1, 2013
Authority: 29 U.S.C. § 651 et seq.; T.C.A. § 39-17-1350; T.C.A. § 50-3-101 et seq.; T.C.A. § 8-30-104	Rule: N/A

Subject:

Violence in the Workplace

The State of Tennessee is firmly committed to the safety and well-being of its employees and visitors. To this end, the State seeks to provide and maintain a safe, healthy and secure work environment that is free from workplace violence. In addition, employees are expected to maintain a high level of productivity and efficiency. The presence of weapons, unless lawfully carried by law enforcement or other commissioned officers pursuant to Tenn. Code Ann. § 39-17-1350, and violence in the workplace, whether threatened, actual, or perceived, is inconsistent with these objectives and is not permitted.

All employees not exempted above are expected to report to work without possessing weapons and to perform their duties in a safe and productive manner without violence or threats of violence toward any other individual. Violence, threats, or intimidation toward any other individual will not be tolerated.

Definitions

Workplace violence is any physical assault or threatening behavior in the workplace. This includes, but is not limited to, any act or threat of aggression, whether physical, verbal or written, which reasonably results in fear of bodily harm; causes or is capable of causing death or bodily injury; threatens the safety of a co-worker, visitor, client or member of the general public; or damages property.

Workplace violence can include but is not limited to physical actions (including but not limited to hitting, pushing, shoving, kicking, touching and assault); certain verbal actions (including but not limited to threats, harassment, abuse and intimidation); certain nonverbal actions (including but not limited to threatening gestures and intimidation); certain written communications (including but not limited to threatening notes, e-mail and social media postings); and other actions (including but not limited to arson, sabotage, vandalism and stalking).

DOHR Policy: Violence in the Workplace	Policy Number: 12-060
--	------------------------------

Weapon shall mean a device, instrument, material or substance used to, or capable of causing death, bodily injury, or damage to property. Weapons include but are not limited to an explosive, a device principally designed, made or adapted for delivering or shooting an explosive weapon, a machine gun, a rifle or shotgun, a handgun, a firearm silencer, brass knuckles, or any other device used for the infliction of bodily injury, damage to property, or death which has no common lawful purpose. Pocket knives or knives used solely for eating or food preparation, are not considered weapons for purposes of this policy unless used to inflict bodily injury or damage to property.

Workplace shall mean any location, either permanent or temporary, where an employee performs any work-related duty. This includes, but is not limited to, state-owned or leased buildings.

Possession or Possessing shall mean the presence of a weapon at any location in or on the workplace. This includes but is not limited to on the employee, in the employee's desk, lunch box or container, bag, purse, cabinet, office, etc.

Reasonable Suspicion shall mean a degree of knowledge sufficient to induce an ordinarily prudent and cautious person to believe that the circumstances being presented are more likely to be true than not. Reasonable suspicion must be based on an articulable, specific and objective basis and may include direct observation and/or information received from a source believed to be reliable.

Prohibited Conduct

The State of Tennessee strictly prohibits and will not tolerate the non-authorized use, possession, or sale of any weapon in the workplace; storage of any weapon in the workplace; refusing to submit to an inspection for the presence of a weapon based on reasonable suspicion; conviction under any criminal statute for the illegal use or possession of a weapon or for committing a violent act against the person or property of another; engaging in workplace violence, threats of workplace violence, or intimidation; refusing to cooperate in an investigation into allegations or suspicion that workplace violence or threats of workplace violence have or is likely to occur, or an investigation about the possession of a weapon by the employee or another employee.

Reporting

Any employee who witnesses or is subject to an incident of workplace violence, threats of workplace violence, or suspicious behavior must immediately report such conduct to the appropriate supervisor, human resources office, or general counsel and, if appropriate, to law enforcement.

If possible, and in the absence of emergency, a written report detailing the incident should be completed and forwarded to the human resources office as soon as practicable. Employees may use the attached Intake/Referral Form to report incidents. The affected department shall conduct an investigation into all allegations of workplace violence.

DOHR Policy: Violence in the Workplace	Policy Number: 12-060
--	------------------------------

If an investigation results in a finding under this policy, the investigative report will be forwarded to the appointing authority or designee for review and appropriate action. Parties to the incident will be informed of the findings, if appropriate.

Violations of this Policy

Any employee who engages in conduct that violates this policy or who encourages such conduct by others will be subject to appropriate corrective or disciplinary action, up to and including termination of employment.

Supervisory personnel who fail to take appropriate action upon learning of such conduct will be subject to corrective action or disciplinary action, up to and including termination of employment.

Retaliation

The State strictly prohibits and will not tolerate any form of retaliation directed against an employee who reports incidents of threats, workplace violence, intimidating conduct, or weapons possession. Any employee giving information about a violation or assisting in the investigation of such a complaint will not be adversely affected in terms and conditions of employment, discriminated against or discharged because of such complaint.

Miscellaneous

ParTNers Employee Assistance Program (EAP) provides confidential financial, legal and emotional counseling at no cost to members and their dependents. EAP should be considered a resource for employees dealing with potential workplace violence. EAP services are offered to all full-time state and higher education employees and their eligible family members. Optum is the vendor providing EAP, mental health and substance abuse services. All services are strictly confidential and can be accessed by calling 1.855.HERE.4.TN (1.855.437.3486), seven (7) days a week, twenty-four (24) hours a day. More information about your ParTNers EAP may be accessed at <https://www.tn.gov/finance/article/fa-benefits-eap>.

If an employee is injured while participating in a fight or after instigating a fight, then entitlement to workers' compensation benefits may be denied, consistent with state law. More information regarding workers' compensation may be accessed at <http://treasury.tn.gov/wc/>.

Questions regarding this policy should be directed to your agency's human resources office or the Office of the General Counsel.

Attachment - Intake/Referral Form

Statement Concerning Confidentiality

Pursuant to Tennessee Code Annotated § 10-7-503(a)(2)(A), "all state . . . records . . . shall at all times, during business hours, be open for personal inspection by any citizen of Tennessee, and those in charge of such records shall not refuse such right of inspection to any citizen, unless otherwise provided by state law." Accordingly, the State cannot and does not guarantee the confidentiality of this document or any notes, files, reports, or other documents, whether created by the State or received from the complainant, accused, or witnesses.

NAME OF COMPLAINANT OR PERSON REPORTING EVENT:

EMAIL/TELEPHONE NUMBERS OF COMPLAINANT OR PERSON REPORTING EVENT:

EMAIL: _____

WORK: _____

PREFERRED: _____

NAME OF AGENCY AND DIVISION INVOLVED:

NAME OF ACCUSED PERSON(S):

RELATIONSHIP OF ALLEGED ACCUSED TO YOU (I.E. DIRECT SUPERVISOR, CO-WORKER):

DOHR Policy:
Violence in the Workplace

Policy Number: 12-060

EXPLAIN WHY YOU BELIEVE THESE EVENTS OCCURRED:

WERE OTHER EMPLOYEES TREATED DIFFERENTLY THAN YOU? IF YES, DESCRIBE HOW:

IF YOU ANSWERED YES TO THE PREVIOUS QUESTION, PLEASE PROVIDE THE NAMES OF THE EMPLOYEES WHO WERE TREATED DIFFERENTLY:

PLEASE LIST BELOW ANY PERSONS (WITNESSES, FELLOW EMPLOYEES, SUPERVISORS, OTHERS) WHO MAY HAVE ADDITIONAL INFORMATION TO SUPPORT OR CLARIFY THIS COMPLAINT. EXPLAIN WHAT INFORMATION EACH CAN PROVIDE.

WHAT EXPLANATION DO YOU THINK THE AGENCY OR ACCUSED WILL GIVE AS TO WHY YOU WERE TREATED IN THIS MANNER?

DOHR Policy: Violence in the Workplace	Policy Number: 12-060
--	------------------------------

PLEASE IDENTIFY ANY OTHER INFORMATION (INCLUDING DOCUMENTARY EVIDENCE SUCH AS DIARIES, JOURNALS, RECORDINGS, EMAILS, VOICEMAILS, CORRESPONDENCE, ETC.) THAT YOU THINK IS RELEVANT TO THIS MATTER.

WHAT DO YOU WANT TO HAPPEN AS A RESULT OF THIS COMPLAINT?

SIGNATURE OF COMPLAINANT: _____

DATE: _____

DOHR Policy:
Violence in the Workplace

Policy Number: 12-060

IF COMPLETED BY SUPERVISOR OR AGENT OF STATE AS A RESULT OF INTERVIEWING A COMPLAINANT, PLEASE PROVIDE THE FOLLOWING INFORMATION:

PRINTED NAME: _____

SIGNATURE: _____

TITLE: _____

AGENCY AND/OR DIVISION: _____

WORK TELEPHONE NUMBER: _____

DATE COMPLAINT RECEIVED: _____

DATE FORM COMPLETED: _____

REASON FOR DELAY, IF ANY, BETWEEN THE DATE THE COMPLAINT WAS RECEIVED AND THE DATE THE FORM WAS COMPLETED:

NAME AND TITLE OF PERSON TO WHOM THE FORM WAS FORWARDED FOR ACTION:

DATE ON WHICH THE FORM WAS FORWARDED:
