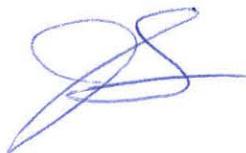


Memorandum

To: Marley Hart, Executive Officer
Occupational Safety and Health Standards Board
2520 Venture Oaks Way, Suite 350
Sacramento, CA 95833

Date: May 29, 2015

From: Juliann Sum, Chief
Cal/OSHA



Subject: Division Report in response to Board Decision on Petition 542 from Meleah Hall

This memorandum is written in response to the Standards Board's request that the Division report on the benefits of what we have learned from the healthcare advisory committee proceedings relative to potential regulatory language that might be generally applicable to workplace violence prevention in all workplaces. This request was made in the Board's Amended Proposed Petition Decision, Petition File No. 542.

From September 2014 through April 2015, the Division held five advisory committee meetings to determine what should be included in a workplace violence prevention standard for healthcare operations – how workplace violence is defined, what types of workplaces should be included, and how the issue of workplace violence can be addressed in the many healthcare environments. One of the advisory committee meetings was held in November 2014 to discuss, at the Board's request, the role of law enforcement in protecting healthcare workers. Later that month, a meeting was held to address workplace violence hazards and prevention in non-hospital health care facilities, services, and operations – including long-term care facilities, mental health clinics, home health and other health care field services, emergency medical services, and other health operations that are not in hospitals.

Out of these meetings, elements of a workplace violence prevention standard were identified. Although the focus was specific to healthcare settings, many of the principles could be applied broadly. Employers in other industries, for example, could be required to establish and implement the following:

- Assessment procedures for identifying and evaluating workplace violence risk factors. This should include risk factors at fixed work locations as well as risk factors at offsite or temporary work locations.
- Procedures for correcting hazards related to workplace violence in a timely manner, in accordance with Title 8, section 3203(a)(6), and use of engineering and work practice controls to eliminate or minimize employee exposure to the identified hazards to the extent feasible.

- An effective written workplace violence prevention plan (Plan) specific to the hazards and corrective measures for each facility, service, or operation. The Plan could be incorporated into the employer's injury and illness prevention program (IIPP) or kept as a separate document as appropriate for that employer.
- Effective procedures for the active involvement of employees and their representatives in the development, implementation, and review of the Plan, including participation in the identification, evaluation, and correction of workplace violence hazards, design and implementation of training, and the reporting and investigation of workplace violence incidents.
- Procedures for communicating workplace violence matters with employees and with law enforcement as appropriate.
- Procedures for developing and providing training, including ensuring that new employees, temporary employees, contract employees, and employees of visiting employers are informed of the Plan and the necessary elements of the Plan.
- Procedures for post-incident response and workplace violence injury investigation.
- Logs of violent incidents, to be used to evaluate and update the Plan.

Representatives from several high risk industries – including law enforcement, retail, and education – participated in the healthcare advisory committee meetings. Several of the ancillary operations of those industries will be covered in the proposed regulation for healthcare workplaces. During the advisory committee process, however, the Division did not receive input from any of the participants as to whether or how to develop a workplace violence prevention proposal for the other industries.

The discussion above regarding regulatory requirements potentially applicable to all workplaces is being provided in response to the Board's request in its Amended Proposed Petition Decision. Whether these additional requirements would actually be beneficial for certain categories of high-risk workplaces, such as those in educational settings (the focus of Petition # 542), requires further exploration.

cc: Christine Baker, Director
Eric Berg, Acting Deputy Chief
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