

**ADOPTED REGULATION OF THE
DIVISION OF INDUSTRIAL RELATIONS OF THE
DEPARTMENT OF BUSINESS AND INDUSTRY**

LCB File No. R044-20

EXPLANATION – Matter in *italics* is new; matter in brackets [~~omitted material~~] is material to be omitted.

AUTHORITY: § 1, NRS 618.295; §§ 2-5, NRS 618.295 and 618.7317; § 6, NRS 618.295, 618.7316 and 618.7317.

A REGULATION relating to occupational safety; establishing time periods within which a medical facility is required to report certain incidents of workplace violence to the Division of Industrial Relations of the Department of Business and Industry; establishing certain requirements for procedures in a medical facility’s plan for the prevention of and response to workplace violence; establishing certain requirements for certain measures to prevent or mitigate risks of workplace violence; requiring a medical facility to maintain, record and review a log of certain information relating to incidents of workplace violence; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:

Existing law requires certain medical facilities to develop and carry out a plan for the prevention of and response to workplace violence and to report incidents of workplace violence to the Division of Industrial Relations of the Department of Business and Industry. (NRS 618.7312-618.7318)

Existing law requires each medical facility’s plan for the prevention of and response to workplace violence to be specific for each unit, area and location maintained by the medical facility. (NRS 618.7312) Under existing law, the Division is required to define by regulation the term “unit” for the purposes of the plan. (NRS 618.7317) **Section 2** of this regulation defines the term “unit” for the purposes of the requirement that the plan be specific to each unit, area and location maintained by the medical facility.

Section 3 of this regulation establishes time periods within which a medical facility must report to the Division certain incidents relating to workplace violence.

Section 4 of this regulation sets forth certain requirements for procedures which a medical facility must include in its plan for the prevention of and response to workplace violence.

Section 5 of this regulation requires certain controls and measures implemented by a medical facility to prevent or mitigate the risk of workplace violence identified in the facility’s assessment of its workplace to effectively address the hazardous conditions which constitute the risk.

Section 6 of this regulation requires a medical facility to: (1) maintain and record in a log certain information relating to incidents of workplace violence; and (2) review that log annually.

Section 1. Chapter 618 of NAC is hereby amended by adding thereto the provisions set forth as sections 2 to 6, inclusive, of this regulation.

Sec. 2. *For the purposes of NRS 618.7301 to 618.7318, inclusive, the Division interprets the term “unit” to mean a component of a medical facility, including, without limitation, a group, department, section or wing, that is used for providing patient care or support services.*

Sec. 3. *A medical facility shall report to the nearest office of the Division:*

1. Any fatality, inpatient hospitalization, amputation or loss of an eye of an employee resulting from workplace violence in which physical force or a firearm or other dangerous weapon is used, not later than 8 hours after the time that the fatality, hospitalization, amputation or loss is reported to any agent or employee of the facility.

2. Any incident of workplace violence in which physical force or a firearm or other dangerous weapon is used but no fatality or injury results, not later than 24 hours after the incident occurs.

3. Any realistic possibility of workplace violence, not later than 30 days after the medical facility learns of the possibility. The information reported pursuant to this subsection must include, without limitation:

(a) Any and all measures taken or to be taken to address the threat;

(b) The names of the persons who took measures or are responsible for initiating the measures; and

(c) The date by which the facility completed or anticipates completing the measures.

Sec. 4. 1. *Every plan for the prevention of and response to workplace violence which is developed pursuant to NRS 618.7312 must include:*

(a) Procedures for the assessment of potential workplace hazards which are designed to identify and evaluate patient-specific risk factors and assess visitors and other persons who are not employees. Patient-specific risk factors include, without limitation:

(1) A patient's mental status and conditions which may cause the patient to be nonresponsive to instruction or behave unpredictably, disruptively, uncooperatively or aggressively;

(2) A patient's treatment and medication status, including type and dosage, if known;

*(3) A patient's history of violence, as it is known to the medical facility and employees;
and*

(4) Any disruptive or threatening behavior displayed by a patient.

(b) Assessment tools, decision trees, algorithms or other effective means to:

*(1) Identify situations in which workplace violence involving a patient is likely to occur;
and*

(2) Assess visitors and other persons who display disruptive behavior or otherwise demonstrate a risk of committing workplace violence.

(c) Procedures for communication among law enforcement, paramedic and other emergency medical transportation services and facilities receiving patients to identify risk factors associated with patients who are being transported to the receiving facility.

2. A medical facility must develop procedures to respond to a hazard relating to workplace violence not later than 30 days after the medical facility recognizes the specific hazard. The procedures must take into account, without limitation:

(a) Engineering controls and work practice controls to eliminate or minimize, to the extent possible, the exposure of employees to the hazard.

(b) Measures to immediately protect employees from imminent danger.

(c) Measures to protect employees from a serious hazard not later than 7 days after the serious hazard is identified, except as otherwise provided in paragraph (d). A serious hazard is a hazard from which there is a realistic possibility that death or serious physical harm could result.

(d) Interim measures to abate an identified serious hazard until permanent control measures can be implemented if the permanent control measures cannot be implemented within 7 days.

Sec. 5. *Any engineering control, work practice control or other appropriate measure which a medical facility implements to prevent or mitigate the risk of workplace violence as identified in an assessment of the workplace pursuant to section 4 of this regulation must, at a minimum, effectively address the hazardous conditions which constitute the risk.*

Sec. 6. 1. *A medical facility shall maintain a log of workplace violence incidents and record in the log information about every incident, post-incident response and investigation regarding an injury resulting from workplace violence.*

2. *Information which is recorded in the log about each incident must be based on information solicited from the employees who witnessed or experienced the workplace violence. Except as otherwise provided in subsection 3, the information recorded in the log must include:*

(a) The date, time and specific location of the incident, including the unit of the medical facility in which the incident took place.

(b) A detailed description of the incident.

(c) A classification of the person who committed the violent act, including whether the perpetrator was:

(1) A patient, employee or provider of health care of the medical facility;

(2) A vendor or supplier of or to the medical facility;

(3) A family member or friend of a patient, employee, provider of health care, vendor or supplier;

(4) A coworker, supervisor or manager employed by the medical facility;

(5) A partner, spouse, parent or other relative of an employee of the medical facility;

(6) A stranger with criminal intent; or

(7) Any other person.

(d) A classification of surrounding circumstances at the time of the incident, including, without limitation, whether the employee was:

(1) Performing his or her usual job duties;

(2) Working in a poorly lit area;

(3) Required to work in an abnormally hurried manner;

(4) Working during a period of low staffing levels;

(5) In an area where crime rates are higher than in surrounding areas;

(6) Isolated or alone;

(7) Unable to get help or assistance;

(8) Working in a community setting; or

(9) Working in an unfamiliar or new location.

(e) A classification of the location where the incident occurred, including, without limitation, whether it occurred in:

- (1) The room of a patient;*
 - (2) An emergency room or urgent care center;*
 - (3) A hallway;*
 - (4) A waiting room;*
 - (5) A restroom or bathroom;*
 - (6) A break room;*
 - (7) A cafeteria of the medical facility;*
 - (8) A parking lot or other area which is controlled by the medical facility and used by employees, staff, visitors of patients, vendors or suppliers;*
 - (9) A personal residence; or*
 - (10) Any other location.*
- (f) The type of incident, including whether it involved:*
- (1) A physical attack, including, without limitation, biting, choking, grabbing, hair-pulling, kicking, punching, slapping, pushing, pulling, scratching or spitting;*
 - (2) An attack with a weapon or object, including, without limitation, a firearm, knife or other object;*
 - (3) The threat of physical force or use of a weapon or other object; or*
 - (4) A sexual assault or threat of sexual assault, including, without limitation, rape or attempted rape, physical display or unwanted verbal or physical sexual conduct.*
- (g) The consequences of the incident, including:*
- (1) Whether medical treatment was provided to the employee;*
 - (2) Who, if anyone, provided assistance necessary to conclude the incident;*
 - (3) Whether security staff for the medical facility was contacted;*

(4) Whether law enforcement was contacted;

(5) The amount of time, in hours, lost from work, if any; and

(6) Actions taken to protect employees from a continuing threat, if any.

(h) Information about the person recording the information in the log, including the name, job title, telephone number and electronic mail address of the person, and the date each entry to the log was made.

3. The employer shall omit from the log any element of personally identifiable information which is sufficient to allow identification of any person involved in a workplace violence incident, including, without limitation, any:

(a) Person's name;

(b) Person's address;

(c) Person's electronic mail address;

(d) Person's telephone number;

(e) Person's social security number; or

(f) Other information that, alone or in combination with other publicly available information, reveals the identity of any person.

4. Each medical facility shall review the log which that facility maintains pursuant to this section at the time the facility conducts its annual assessment of the effectiveness of its plan for the prevention of and response to workplace violence pursuant to the procedures included in the plan as required by paragraph (g) of subsection 2 of NRS 618.7312.