

POLICY 53

TIOGA COUNTY

**WORK PLACE VIOLENCE PREVENTION POLICY AND DISCRIMINATORY
HARASSMENT POLICY**

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SECTION 1 – WORKPLACE VIOLENCE PREVENTION PROGRAM MANUAL

I. Policy Statement

Tioga County is committed to providing its employees with a work environment that is safe, secure, and free from harassment, threats, intimidation and violence. The County also considers the safety of its residents, vendors, contractors and the general public (collectively referred to as "visitors" throughout this policy) to be of paramount importance and strives to provide them the same type of protections while on County Property.

The County will not tolerate any acts of violence and will take all reasonable and practical measures to prevent violence and protect employees and visitors from acts of violence. This includes but is not limited to threatening or violent actions by:

1. Employees directed against other employees or County property.
2. Employees directed against visitors.
3. Visitors directed against County employees or County property or facilities.
4. Individuals who are conducting County business at an off-property location.

Any and all incidents of workplace violence should promptly be reported in accordance with the reporting procedures outlined in Section VII of this policy.

Enforcement of this policy will be accomplished through the implementation of a Workplace Violence Prevention Program, and by complying with the requirements of the NYS Workplace Violence Prevention Act, as set forth in NYS Labor Law Section 27-b. A copy of the County's policy is available by contacting the Legislative Office. A general review of this program will be conducted annually, at the time of a reported workplace violence incident, or if there is a change in operations or physical structure of any building.

Violations of this policy may result in appropriate remedial, disciplinary (in accordance with respective collective bargaining agreements), and/or legal action, according to the circumstances.

This Workplace Violence Prevention Program policy statement is to be posted where notices to employees are normally displayed. In addition, a copy of the policy will be made available to employees, the authorized employee representative(s), and the Commissioner of the New York State Department of Labor.

II. Overview of the New York State Workplace Violence Prevention Act

Based on an increasing awareness of, and in response to, workplace violence in public sector workplaces, the New York State Workplace Violence Prevention Act was passed in 2006. The Act amended NYS Labor Law by adding a new Section 27-b requiring that all state and local government employers take steps to ensure their employees are provided adequate protection from potential incidents of violence in the workplace.

Among other stipulations, Section 27-b requires every public sector employer to:

1. Conduct a risk assessment of their worksites to identify and address any existing risk factors that may increase the possibility of workplace violence;
2. Provide training for all employees (upon initial assignment and annually thereafter) which informs them of the risk factors that may be present in their workplace(s), the measures they can take to protect themselves from such risks, and the steps the employer has implemented to protect employees, such as appropriate work practices, emergency procedures, and use of security alarms and other devices; and
3. Develop and implement a written workplace violence prevention program that lists the risk factors and the methods the employer is using to prevent violence and minimize or eliminate identified hazards. (Required if the employer has 20 or more full-time employees).

III. Definitions

1. "Violence" means physically harming another, fighting, shoving, pushing, harassing, intimidating, coercing, brandishing weapons or threatening or talking of engaging in these activities.

2. "Workplace violence" can be any act of physical violence, threats of physical violence, harassment, intimidation, or other threatening, disruptive behavior that occurs in the workplace. Workplace violence can effect employees, visitors, contractors and others.

Workplace violence incidents are generally categorized as:

- Level I – Disruptive behavior such as verbal abuse
- Level II – Aggressive or threatening behavior
- Level III – Physical assault

3. For the purpose of this policy, "workplace" or "place of employment" is defined as any location, either permanent or temporary, where an employee performs any work-related duty. This includes, but is not limited to, County-owned buildings and facilities, parking lots and traveling to and from work assignments or work sites.

A number of different actions in the work environment can trigger or cause workplace violence. It may even be the result of non-work-related situations, such as domestic violence or "road rage". Workplace violence can be inflicted by an abusive employee, a supervisor, member of the public, family member, or even a stranger. Whatever the cause or whoever the perpetrator, workplace violence will not be accepted or tolerated.

Workplace violence presents serious occupational safety hazards for workers and unique challenges for employers who must attempt to prevent violence from occurring. The majority of violent incidents effecting workplaces are cases of assault, threats, domestic violence, forms of harassment and physical and/or emotional abuse.

4. A "workplace violence incident" is defined as one or more of the following according to the NYS Department of Labor:
 - An attempt or threat, whether verbal or physical, to inflict injury upon another person.
 - Any intentional display of force which would give a person reason to fear or expect bodily harm.
 - Intentional or wrongful physical contact with a person without his or her consent that entails some injury or offensive touching.

- Harassment of a nature that would give a person reason to fear escalation or make it difficult to pursue a normal work life or private life when the harassment arises out of or in the course of employment.
- Stalking a person with the intent of causing fear when such stalking has arisen through or in the course of employment.

An incident may be committed without one person actually touching or striking or doing bodily harm to another person.

While sexual harassment (as defined in herein and New York State Human Rights Law) is prohibited by Tioga County, it is specifically excluded from the definition of a workplace violence incident. An employee should refer to Section 2 of this policy for more information about this topic.

Possession of firearms, imitation firearms, knives, or other dangerous weapons, instruments or materials by County employees is covered in County Policy 49.

5. The Department of Labor defines an "imminent danger" as any conditions or practices in any place of employment which are such that a danger exists that could reasonably be expected to cause death or serious physical harm immediately or before the imminence of such danger can be eliminated.

IV. Savings Clause

Tioga County has made every effort to ensure that this Workplace Violence Prevention Program complies with NYS Department of Labor regulations. In the event any of the provisions, portions or applications of this program are found to be invalid or inconsistent with any superseding legal requirements by any tribunal of competent jurisdiction, then the provisions, portions or applications specified in such decision shall be of no force and effect, but the remainder of this program shall continue to be in full force and effect.

V. Responsibilities

1. Department Head/Supervisor Responsibility

Department Heads and supervisors are expected to enforce the program in a fair and consistent manner and ensure all aspects of the program under their area of responsibility are properly met.

If an employee notifies his/her Department Head of an actual or potential workplace violence incident or submits a completed Workplace Violence Incident Report, the Department Head is responsible for following the reporting procedures as outlined in Section VII of this policy.

2. Employee Responsibility

Employee and authorized employee representatives involvement in Tioga County's Workplace Violence Prevention Policy is essential to the program's success. Employees are expected to read, understand and comply with the County's program and to attend ongoing education and training on workplace violence. Any questions should be directed to the employee's Department Head or supervisor.

Employees must promptly report any violations of the County's Workplace Violence Prevention Policy or any workplace violence imminent danger in accordance with the reporting procedures outlined in Section VII of this policy.

Individuals who obtain a protective order or restraining order which lists specific workplace locations as being protected areas must provide their Department Head and the Safety Officer a copy of any temporary or permanent protective or restraining order that was granted. The County will maintain confidentiality that recognizes and respects the privacy of the reporting employee, unless in conflict with this policy.

3. Safety Officer

The Safety Officer, or his/her designee, will be responsible for annual training and disseminating any changes made to this policy to County personnel, as well as ensuring the policy is posted appropriately throughout county buildings and other work sites.

4. Workplace Violence Advisory Team

Tioga County will establish a Workplace Violence Advisory Team to administer the Workplace Violence Prevention Program. The team's responsibilities will include, but will not be limited to:

- Conducting an annual comprehensive risk evaluation of the entire workplace to identify any factors or situations that may place employees at risk of violence
- Periodically seek employee feedback on the risk factors employees believe are present in the workplace, previous workplace violence incidents, etc.
- Developing and implementing risk reduction strategies and plans for responding to acts of violence
- Coordinating employee training and education programs relating to workplace violence
- Semi-annual review of workplace violence incidents and forwarding to the Loss Control Committee any recommendations to reduce or eliminate the likelihood of similar incidents occurring in the future
- Reviewing the Workplace Violence Prevention Program at least annually, to include analyzing Workplace Violence Incident Reports to identify trends in the effectiveness of the mitigating actions taken
- Recommend any updates to the Workplace Violence Prevention Policy as needed

The Workplace Violence Advisory Team shall consist of representatives from the following: Safety, Law, Public Works, Sheriff's Office, Health & Human Services building, and labor groups.

5. Personnel Officer

The Personnel Officer is responsible for ensuring that new employees or transferred employees have a copy of the Workplace Violence Policy and Procedures made available to them and also ensuring that County employees receive the required initial training.

VI. Response Procedures

1. During an Incident

If a threatening situation arises:

- Try to remain calm.

- Remove yourself from the threat as soon as possible.
- Immediately call or alert others call appropriate help (e.g., police, supervisor, ambulance) to obtain immediate on-site assistance.
- If appropriate, evacuate in accordance with County Policy 31.
- Notify co-workers as soon as practical to enable them to also reach safety if danger is imminent and applicable to them.

2. Post Incident

If a workplace violence incident occurs or an employee submits a Workplace Violence Incident Report, the Safety Officer, or his/her designee, in conjunction with the County Attorney and Personnel Officer will conduct an investigation. Tioga County will respect the privacy and confidentiality rights of employees during investigations to the greatest extent possible, although the County cannot guarantee complete confidentiality.

Based on the specific situation and the results of the investigation, appropriate measures may be taken, if needed, to eliminate or reduce the likelihood of similar workplace violence incidents occurring in the future. Throughout the investigation, the County will attempt to maintain open lines of communication with employees, visitors, and the public to answer any questions and alleviate anxiety.

VII. Reporting Procedures

1. Recordkeeping

Tioga County will strive to maintain accurate records regarding all workplace violence incidents. The County will adhere to all the requirements of 12 NYCRR Part 801, known as the Public Employer Recordkeeping Rule, which is implemented pursuant to Section 27-a of the Labor Law, for the recording of employee injuries or illnesses due to workplace violence incidents. All workplace violence incident forms will be kept according to the applicable retention and disposition schedules.

Any situation that meets the definition of workplace violence incident as defined in Section III or any workplace violence injury that results in death, days away from work, restricted work or transfer to another job, medical treatment beyond first aid, or loss of

consciousness will be documented on a Workplace Violence Incident Report (Form 1). Any recordable injury will also be documented on the SH 900 Log.

2. Incident Reporting

The County will follow all federal, state and local laws and procedures in the reporting of workplace violence incidents. Any workplace violence incident that has been reported may be of a criminal or domestic violence nature will, to the extent practical, be immediately reported to the appropriate police authorities or be handled in accordance with this Policy.

Internal Workplace Violence Incident Reporting Procedures

Any employee or authorized employee representative who believes that a workplace violence imminent danger exists or that there has otherwise been a violation of the County's Workplace Violence Prevention Policy shall report such to the employee's Department Head. If the Department Head is unavailable or is a party to the violation, the report shall be made to the County Attorney or Personnel Officer.

An employee is responsible for reporting all incidents of Level I violence in writing within 48 hours of the occurrence using the Workplace Violence Incident Report Form (Form 1). All Level II and Level III incidents must be reported immediately using Form 1.

The Department Head is responsible for forwarding copies of the Workplace Violence Incident Report to the County Safety Officer. If the Safety Officer is unavailable or a party to the violation, the Report shall be forwarded to the County Attorney or Personnel Officer. All Level II and Level III incidents must be forwarded immediately and all Level I incidents must be forwarded within 48 hours.

An employee is not required to provide written notice to the Department Head or the County Attorney if a workplace violence imminent danger exists to the safety of a specific employee or to the general health of a specific person and the employee reasonably believes in good faith that reporting this information to the Department Head or the County Attorney would not result in corrective action.

An employee will not be subject to criticism, reprisal, retaliation, demotion, discrimination, disciplinary action, or other adverse employment action for making a good faith report of acts pursuant to this program.

Law Enforcement Reporting Procedures

The County Attorney is responsible, to the extent practical, for reporting any workplace violence incident that may be of a criminal or domestic violence nature to the appropriate law enforcement agency.

If a pattern of workplace violence incidents involving criminal conduct or serious injury develops, the County will work with the District Attorney or local police department to develop a protocol to ensure that any future violent crimes occurring in the workplace are promptly investigated and appropriately prosecuted.

If an employee chooses to file a criminal complaint, the County will provide the employee with the protocol and contact information for the District Attorney and/or Police Department.

VIII. Incident Investigation

1. Risk Evaluation After a Workplace Violence Incident

The Safety Officer, or his/her designee, will perform a risk evaluation and determination immediately after the occurrence of a workplace violence incident. The investigation may take various forms, depending upon the type of incident.

Upon completion of the review, the Safety Officer, or his/her designee, will address the cause(s) of the incident and take the necessary steps to eliminate or reduce the likelihood of such an incident occurring again. The Safety Officer may also make recommendations for revising the Workplace Violence Prevention Policy. Any revisions to the policy will be put in writing and made available to employees. Employee training will be provided if significant changes to the policy are made. The County will also consider global prevention enhancements at all work sites which may be necessary to properly protect employees.

2. Annual Review of Workplace Violence Incident Reports

The Workplace Violence Advisory Team, or its designee, is responsible for reviewing and updating the County's Workplace Violence Prevention Policy at least annually. Part of this review will include summarizing the Workplace Violence Incident Reports and SH 900 Logs from the previous 12 months so they can be analyzed for any trends in the types of workplace violence incidents occurring and to review the effectiveness of the mitigating actions the County has taken.

IX. Training and Education

All employees will receive training and education on the risk of workplace violence. Training will be provided at the time of hire and at least annually thereafter. Additional training may be required prior to starting a new job assignment, if new laws relating to workplace violence are enacted or there are changes in any current laws, or if the County makes significant changes in this policy. At a minimum training shall address the following:

- The requirements and risk factors in their workplace that were identified in the risk evaluation and determination, except there will be no disclosure of the information otherwise kept confidential for security reasons;
- The measures that employees can take to protect themselves from the identified risks, including specific procedures that the county has implemented to protect employees such as incident alert and notification procedures, appropriate work practices, emergency procedures, and use of security alarms and/or other devices;
- The location of the written workplace violence program and how to obtain a copy, and shall make it available for reference to employees, authorized employee representatives and the supervisor in the work area during the regular work hours.

Upon hire, employees will receive a copy of the County's Policy and will be required to sign a Policy Acknowledgement Form (Form 2) and a Training Acknowledgement Form (Form 3). The signed Form 2 will be placed in the employee's personnel file, and signed Form 3 will be filed with the Safety Officer.

X. Workplace Risk Evaluation

As required by Section 27-b of the NYS Labor Law, the County conducted an evaluation of the workplace in general, and each worksite specifically, to identify existing or potential hazards that might place employees at risk of workplace violence.

The following risk factors, locations and applicability in Tioga County are listed below:

1. Working in public settings: applies to all County locations and personnel.
2. Working late night or early morning hours: applies to personnel at the County Office building, Court Annex/County Clerk's building, Health and Human Services building, Public Safety Building, Highway Department, Buildings & Grounds, and Mental Hygiene in Waverly.
3. Exchanging money with the public: applies to personnel at the County Office building, Public Safety building, Court Annex/County Clerk's building, Health and Human Services building, and Mental Health in Waverly.
4. Working alone or in small numbers: applies to personnel at all County Office buildings. It also applies to personnel who do County work off County premises.
5. Uncontrolled access to the workplace: applies to personnel at the County Office buildings or sites with unrestricted access.
6. Areas of previous security problems include the County Office building and Health and Human Services building.

XI. Methods for Hazard Prevention and Control

1. It is the policy of the County to make high risk areas more visible, install additional lighting where needed, post signs where necessary, train employees on conflict resolution and maintain a response system through the Sheriff's Department.
2. The hierarchy of controls to be used is:
 - Engineering Controls.
 - Administrative Controls.
 - Personal Protective Equipment.
3. It is also the County's policy to use input from a variety of sources including, but not limited to: employee security surveys, self-assessments, Sheriff's Department recommendations and lessons learned from other entities to effect changes that make the County's work areas and personnel as safe as possible.

SECTION 2 – DISCRIMINATORY HARASSMENT POLICY

I. Policy Statement

It is the policy of the County of Tioga to provide and maintain a work environment which is free from unlawful discrimination based on sex (with or without sexual conduct), race, color, religion, national origin, age, disability, sexual orientation and any other class protected by law (collectively referred to as "discriminatory harassment" or "harassment"). Harassment based on these characteristics is a form of unlawful discrimination and is prohibited in each and every work environment and each and every situation which directly impacts the work environment.

The County of Tioga will take appropriate steps to prevent and correct unlawful harassment and discrimination as defined by both federal and state law. The federal laws include Title VII of the Civil Rights Act, the Age Discrimination in Employment Act, and the Americans with Disabilities Act. The state law is the New York State Human Rights Law.

The County of Tioga considers discriminatory harassment to be a form of employee misconduct and considers this type of misconduct to be a serious offense which will not be tolerated. Allegations of harassment will be investigated thoroughly and if substantiated, will be met with appropriate corrective and/or disciplinary action commensurate with the seriousness of the offense(s), and in accordance with the parameters of applicable collective bargaining agreements and/or state law.

This policy applies to all applicants and employees of the County of Tioga and prohibits harassment, discrimination and retaliation whether engaged in by fellow employees, by a supervisor or manager or by someone not directly connected to the County (e.g., an outside vendor, consultant or citizen).

Conduct prohibited by this Policy is unacceptable in the workplace and in any work-related setting outside the workplace, such as during business trips, business meetings, and business-related social events.

All information gathered during an investigation of a harassment complaint will be handled in a confidential manner, to the extent possible.

Retaliation against any individual making a harassment complaint or assisting in the investigation of such a complaint is forbidden. Retaliation is a serious violation of this policy which may result in disciplinary action.

This Policy does not preclude the filing of discriminatory harassment complaints with either the New York State Division of Human Rights or the Federal Equal Employment Opportunity Commission, or the pursuing of any other remedies as permitted by law.

II. Definitions

1. "Sexual Harassment" is defined as:

Unwelcome sexual advances, request for sexual favors, and other verbal or physical conduct of a sexual nature when:

- A. Submission to such conduct is made explicitly or implicitly a term or condition of an individual's employment (e.g., promotion, training, assignments, etc. . .);
- B. Submission to or rejection of such conduct by an individual is used as a basis for employment decisions (e.g., hiring, evaluation, promotion) affecting such individual; or
- C. Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment.

Examples of specific behaviors that may be considered sexual harassment include, but are not limited to:

- Spoken or written words related to an employee's sex
- Any sexual advance that is unwelcome
- Sexually oriented comments
- Showing or displaying pornographic or sexually explicit objects or pictures in the workplace
- Offensive touching, patting or pinching

- Requests for sexual acts or favors
- Abusing the dignity of an employee through insulting or degrading sexual remarks or conduct
- Threats, demands or suggestions that an employee's work status is contingent upon her/his toleration of or acquiescence to sexual advances
- Subtle pressure for sexual activities
- Leering at a person

Sexual harassment is gender neutral and may involve members of the same or different gender.

2. Other unlawful harassment:

Harassment on the basis of any other protected characteristic is also prohibited. Under this policy, prohibited harassment is verbal or physical conduct that is offensive to or shows hostility or aversion toward an individual because of his/her race, color, religion, national origin, age, disability, sexual orientation or marital status (and any other class protected by law) , and that: (i) has the purpose or effect of creating an intimidating, hostile or offensive work environment; (ii) has the purpose or effect of unreasonably interfering with an individual's work performance; or (iii) otherwise adversely affects an individual's employment opportunities.

Harassing conduct includes, but is not limited to: epithets, slurs or negative stereotyping; threatening, intimidating or hostile acts; denigrating jokes and display or circulation in the workplace (including through e-mail) of written or graphic material that denigrates or shows hostility or aversion toward an individual or group, based on an individual's protected class.

3. Other Unacceptable Conduct:

This policy also prohibits conduct of one employee toward another that may not rise to the level of discrimination or harassment in violation of the law, but nonetheless creates a degree of hostility or intimidation that adversely affects the work environment. Teasing, ridicule, and other conduct intended to annoy, personally attack, belittle or embarrass another individual is inappropriate and also unacceptable in the workplace. Therefore, the County encourages the use of its complaint procedure by employees who believe they have been subject to inappropriate conduct by another employee, even if such conduct may not be harassment or discrimination per

se. The County endeavors to create an environment in which employees may feel free to raise concerns and are confident that those concerns will be addressed.

III. Responsibilities

1. Managerial and Supervisory Personnel

All managerial and supervisory personnel of the County of Tioga shall be responsible for enforcing this Policy and shall have particular responsibility for ensuring that the work environment under their supervision is free from discriminatory harassment and its effects. Failure of a manager or supervisor to comply with this responsibility may result in disciplinary action.

All managerial and supervisory personnel who receive discriminatory harassment complaints will be responsible for reporting such in accordance with Section IV.2 below.

2. The County

The County of Tioga will conduct periodic training for managerial and supervisory personnel in each Department of the County on the issues surrounding discriminatory harassment, its effects and its appearances, and the role and responsibility of managerial/supervisory personnel in preventing incidents of harassment complaints.

The County of Tioga shall distribute this Policy to all County employees and all others covered by its parameters. Copies of this Policy will be distributed to new employees as they are hired.

Copies of this Policy will be conspicuously posted.

IV. Reporting and Resolution Procedures

1. If an individual is subjected to a situation which he/she believes constitutes discriminatory harassment in violation of this Policy, the County recommends that the employee confront the harasser directly and advise the harasser that his/her behavior is not welcomed and will not be tolerated. Note that neither this policy nor state/federal law requires that an individual tell an alleged harasser to stop his/her actions. Employees should feel free to keep written records of any alleged sexual harassment incidents,

including the date, time, location, names of people involved, witnesses (if any), and who said or did what to whom.

2. A written or verbal complaint should be filed by the affected employee with the employee's immediate supervisor. The supervisor will immediately forward the complaint to the Department Head. In the event the employee does not believe it would be appropriate to file the complaint with the immediate supervisor, it may be filed directly to the appropriate Department Head or to the County's Personnel Officer. If the Department Head is unavailable or a party to the violation, the supervisor shall forward the complaint to the Personnel Officer or County Attorney.

V. Complaint Investigation

1. Harassment complaints should be investigated as promptly as possible and resolved within a reasonable time after the receipt of the complaint. **The Office of the County Attorney** and with the oversight of the Personnel Officer and/or their designee(s) will coordinate an investigation of the complaint. Following the investigation, **the County Attorney and/or his/her designee(s)** may issue a written report of findings and conclusions.
2. Thereafter, any conclusions may be issued from the the County Attorney and/or his/her designee(s), in writing, back to the complainant.
3. Retaliation against any individual making a harassment complaint or assisting in the investigation of such a complaint is strictly forbidden. Retaliation, like discrimination and harassment, is against the law and is a serious violation of this Policy. Employees who retaliate against other employees who complain about harassment and/or participate in investigation of harassment may be subject to disciplinary action.

VI. Response Procedures

1. In the event a complaint of discriminatory harassment is determined to be founded, the County may take disciplinary action in accordance with the provisions of applicable collective bargaining agreements and/or state law, if applicable.
2. If disciplinary charges are filed against an employee on the grounds that the County has determined the employee is guilty of unlawful

harassment, the accused employee may exercise his/her rights through the disciplinary procedure provided for in his/her labor contract and/or state law, if applicable.

3. Reporting of a false complaint is a serious act. In the event it is found that the individual bringing the complaint has knowingly made false accusations, the County will take action in accordance with the provisions of the applicable collective bargaining agreement and/or state law, if applicable.

SECTION 3 - FORMS

The following forms are to be used in administering Tioga County's Workplace Violence Prevention Program and Discriminatory Harassment Policy:

- **Form 1:** Workplace Violence Incident Report Form
- **Form 2:** Workplace Violence Prevention Program Policy Acknowledgement Form
- **Form 3:** Workplace Violence Prevention Program Training Acknowledgement Form
- **Form 4:** Discriminatory Harassment Complaint Form
- **Form 5:** Notice of Withdrawal of Complaint of Discriminatory Harassment

**TIOGA COUNTY
WORKPLACE VIOLENCE INCIDENT REPORT (FORM 1)**

This form is to be used to document any reportable workplace violence incident. This form is to be completed and forwarded to the Safety Officer within the timeframe outlined in Section VII of the Workplace Violence Prevention Policy.

Today's Date _____
Date of Incident _____
Time of Incident _____
Case Number _____

Employee Name _____
Title _____
Workplace Location _____

Name/Title of Individual Completing this Report _____
Date Report Received by County Attorney _____
County Attorney Name/Signature _____

(DSS ONLY: Attach a WMS or CSMS inquiry screen, if available)

Check the Type of Violence the victim experienced (Levels I, II or III):

Level I Violence:

<input type="checkbox"/> Intimidation	<input type="checkbox"/> Bullying	<input type="checkbox"/> Verbal abuse
<input type="checkbox"/> Minimal Harassment	<input type="checkbox"/> Shouting	<input type="checkbox"/> Swearing
<input type="checkbox"/> Obscene gestures	<input type="checkbox"/> False statements	<input type="checkbox"/> Other

Level II Violence:

<input type="checkbox"/> Psychological trauma	<input type="checkbox"/> Swore at directly	<input type="checkbox"/> Obscene calls
<input type="checkbox"/> Threats of assault	<input type="checkbox"/> Shouted at directly	<input type="checkbox"/> Suicide threat
<input type="checkbox"/> Advanced harassment	<input type="checkbox"/> Being followed/stalked	<input type="checkbox"/> Other

Level III Violence:

<input type="checkbox"/> Shooting	<input type="checkbox"/> Stabbing	<input type="checkbox"/> Grabbing
<input type="checkbox"/> Striking with an object	<input type="checkbox"/> Throwing objects	<input type="checkbox"/> Pushing
<input type="checkbox"/> Sexual assault	<input type="checkbox"/> Homicide	<input type="checkbox"/> Other

Detailed Incident Description (Including what happened immediately prior to the incident and how the incident ended):

Names and job titles of involved employees:

Names or identifiers of individuals involved (non-employee):

Extent of injuries, if any:

Name(s)/Title(s)/Phone Numbers of Any Potential Witness(es):

What was the immediate action taken?

Police Notified?: _____ YES _____ NO

Police Department _____

Name of Officer _____

Date _____ Time _____

Police Report Number (If applicable) _____

Did you lose any work days? ☐ YES ☐ NO If so, how many? _____

Have you received counseling since this incident? ☐ YES ☐ NO

Did you have any reason to believe that this incident might occur?

☐ YES ☐ NO

Has Tioga County taken measures to avert this incident from occurring in the future, that you are aware of? If so, describe the actions Tioga County has or is in the process of taking to mitigate future incidents (list time table for correction, interim protective measures and any global prevention enhancements for similar worksites which are apparent:

Signature

Date

**TIOGA COUNTY
WORKPLACE VIOLENCE PREVENTION PROGRAM POLICY
ACKNOWLEDGEMENT FORM (FORM 2)**

I hereby acknowledge that I have received a copy of Tioga County's Workplace Violence Prevention Policy outlining the County's policy, objectives, procedures, and regulations regarding violence in the workplace. I further acknowledge that I have read or will read the content of the Policy and will contact my Department Head or supervisor with any questions.

I understand the objectives, procedures and regulations in this Policy will remain in effect unless changes become necessary.

I understand that Tioga County reserves the right to interpret, add to, or revise any part of this Policy, consistent with statutory requirements. Moreover, this Policy may be subject to alteration by changes in federal or state legislation, rules, and/or regulations.

I agree to abide by Tioga County's Workplace Violence policies and procedural requirements.

EMPLOYEE NAME (PLEASE PRINT)

EMPLOYEE SIGNATURE

DATE OF SIGNATURE

A copy of this form is to be placed in the employee's personnel file.

**TIOGA COUNTY
WORKPLACE VIOLENCE PREVENTION PROGRAM TRAINING
ACKNOWLEDGEMENT
(FORM 3)**

I hereby acknowledge that I have received training on the dangers of workplace violence, identified risk factors and available prevention methods, and my responsibilities and rights with respect to addressing the potential for workplace violence. I have been informed of the County's policy regarding workplace violence and the program and procedures in place to minimize risks.

DATE OF TRAINING

EMPLOYEE NAME (PLEASE PRINT)

SIGNATURE OF EMPLOYEE

DATE OF SIGNATURE

A copy of this form is to be filed with the Safety Officer

**TIOGA COUNTY
DISCRIMINATORY HARASSMENT COMPLAINT FORM (FORM 4)**

(Submit to Department Head and/or Personnel Officer)

This form may be used to file a charge of harassment which is a form of discrimination prohibited by federal law, the New York State Human Rights Law, and County Policy.

It in no way deprives you of the right to file a complaint with the US Equal Employment Opportunity Commission, New York State Division of Human Rights, and/or the Federal/State courts.

(PLEASE PRINT OR TYPE)

1. Name _____
Phone Number _____
Residence _____
Mailing Address (if different from residence) _____
City _____ State _____ Zip Code _____

2. Department _____

3. Have you filed this charge with a Federal, State or local government agency?

YES/NO: _____ When _____ Where _____
(Month/Day/Year)

Have you instituted a suit or court action on this charge?

YES/NO: _____ When _____ Where _____
(Month/Day/Year)

(AN AFFIRMATIVE REPLY TO THIS QUESTION WILL IN NO WAY STOP A
COUNTY REVIEW OF YOUR COMPLAINT)

4. Alleged Discrimination Occurred on or about:

Month: _____ Day: _____ Year: _____ Time: _____

Is this alleged discrimination continuing: YES _____ NO _____

Describe the alleged act of harassment. **Use additional sheets if necessary.**

5. Indicate the name(s) of the alleged harasser(s):

6. State the name(s) of any potential witness(es):

7. I swear or affirm that I have read the above related facts and that the statements are true and correct to the best of my knowledge, information and belief.

Date: _____ (Signature) _____

-INFORMATION PROVIDED HEREIN WILL BE CONFIDENTIALLY MAINTAINED-

**TIOGA COUNTY
NOTICE OF WITHDRAWAL OF COMPLAINT OF DISCRIMINATORY
HARASSMENT (FORM 5)**

COMPLAINANT'S NAME: _____

TITLE AND DEPARTMENT: _____

DATE COMPLAINT FILED: _____

DEPARTMENT HEAD NOTIFIED: _____

I hereby withdraw this complaint and agree that no further internal action is required.

Complainant's Signature

Date

cc: Personnel Officer