

**POLICY NUMBER:**

APM- 1 - 99

DATE:

4/2/16

ISSUED BY:

*Daniel J. Alfonso*  
City Manager/Designee

*Daniel J. Alfonso*  
SIGNATURE

**CITY OF MIAMI**



**ADMINISTRATIVE POLICY**

REVISIONS

REVISED SECTION

DATE OF REVISION

Created	09/23/99
Revised	01/25/01
Revised	03/03/03
Revised	10/19/06
Revised	09/24/08
Revised	01/08/16

**SUBJECT:**

**WORKPLACE VIOLENCE**

**Purpose**

To define behaviors that lead to workplace violence, outline the reporting process to follow, and establish the employee's and management's role in the reporting process.

**Policy Statement**

It is the City of Miami's goal, with full support of management, to establish and maintain a safe workplace that requires a policy of *zero tolerance* toward violent behavior or the *threat* of such behavior by any employee. Violent behavior of any kind or threats of violence, either direct or implied, are prohibited in all City of Miami work locations as well as events sponsored by the City of Miami. An employee who intentionally antagonizes another employee or exhibits violent behavior may be subject to criminal prosecution and/or shall be subject to disciplinary action up to and including dismissal. Retaliation against a person who makes a complaint regarding violent behavior or threats of violence made to him/her is also prohibited.

**Definitions**

For the purpose of this policy, "violent behavior" is defined as:

- A. **Use of physical force** - the intentional use of physical force or power against a person that either results in or has a high likelihood of resulting in injury, death, or psychological harm.
- B. **Acts or threats** - the implication or expression or action, in any form or manner, which a reasonable person would perceive as intent to cause bodily harm or intent to cause the fear of bodily harm.



- C. **Sabotage** - The intentional damage of City-owned or personal property, or acts intended to cause such property to fail to operate, or to operate improperly; or the movement or concealment of such property with the intent of interfering with the ability of the owner or authorized user to locate it.
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**Prohibited Behaviors**

Violence in the workplace may include, but is not limited to, the following list of behaviors directed at or by a co-worker, supervisor or member of the public:

- A. Battery
  - B. Direct threats or physical intimidation
  - C. Implications or suggestions of violence
  - D. Stalking
  - E. Possession of firearms or personal weapons on City premises or in City vehicles, unless the possession of a firearm/weapon is an approved requirement of the job, or as otherwise specifically authorized by law
  - F. Assault of any form
  - G. Physical restraint, confinement
  - H. Dangerous or threatening horseplay
  - I. Loud, disruptive or angry behavior or language that is not part of the typical work environment
  - J. Blatant or intentional disregard for the safety or well-being of others
  - K. Commission of a violent felony or misdemeanor on City of Miami property
  - L. Use the City's resources to threaten, stalk or harass anyone at or outside the workplace
  - M. Any other act that a reasonable person would perceive as constituting a threat of violence
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**Employee's Responsibility**

- A. An employee who is the victim of violence, or believes they have been threatened with violence, or witnesses an act or threat of violence towards someone else shall report the incident(s) through the reporting procedures outlined in the Reporting Acts or Threats of Violence Section.
- B. Employees may submit complaints of workplace violence directly to Labor Relations. When reporting a threat or incident of violence, the employee should be as specific and detailed as possible.



- C. Retaliation against a victim or witness who reports an incident under this policy is absolutely prohibited.
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**Management's Role**

- A. Once the Supervisor is notified, it is his/her duty to notify the Department Director.
  - B. The supervisor will report the incident(s) through the reporting procedures outlined in the **Reporting Acts or Threats of Violence Section**.
  - C. Supervisors and Department Directors shall maintain discretion and shall support and guide their employees when going through the reporting process.
  - D. Supervisors may contact Labor Relations at 305-416-2060 should they have any additional questions.
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**Reporting Acts or Threats of Violence**

- A. If an emergency exists and the situation is one of immediate danger, the employee shall:
    - 1. Immediately dial 9-1-1 to request the assistance of law enforcement
    - 2. Not attempt to intercede during an incident
    - 3. Leave the immediate area of threat or harm
    - 4. Notify their direct supervisor
    - 5. Call the Department of Human Resources (DHR), Division of Labor Relations, at 305-416-2060
  - B. In non-emergency situations during business hours, the employee shall report the incident to their supervisor and Department Director as soon as possible and complete the City of Miami Workplace Violence Incident Report Form. However, if the supervisor/Department Director is not available or is named as the alleged aggressor in the report, the employee shall contact Labor Relations at 305-416-2060.
  - C. If the non-emergency incident occurred after business hours the employee shall call Labor Relations at 305-416-2060 to report the incident.
  - D. The completed Workplace Violence Incident Report Form, a written statement concerning the alleged incident, and a list of all potential witnesses shall be provided to Labor Relations as soon as possible. In addition, all supporting evidence such as video recordings, emails, etc. shall be supplied to Labor Relations.
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**The Investigation Process**

- A. Labor Relations will investigate the incident immediately in order to protect employees from danger, unnecessary anxiety concerning their welfare, and the loss of productivity.
- B. The victim, witnesses, and the alleged aggressor will be interviewed separately. All persons interviewed shall submit written statements with details of the incident. Notes may be taken during interviews but are intended for clarification purposes and are not a verbatim transcript of the interview.
- C. The alleged aggressor may request the presence of their union representative prior to or during an investigatory interview.
- D. Refusal to participate in the investigation process shall be documented and shall not necessarily cause the investigation to cease.
- E. In addition to this policy, the investigation will also encompass potential violations of City of Miami rules, regulations, policies, and/or applicable statutes. If violations are substantiated, discipline shall be issued by the respective department director or the City Manager within five working days in accordance with the Progressive Discipline APM 1-94.

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**Notice of Restraining Order**

Employees who have been granted a restraining order, temporary or permanent, shall immediately supply a copy of the signed order to the Department Director, the Director of DHR, and the Miami Police Department so that any action deemed necessary will be taken.

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**Additional Resources**

Employees who experience any of these situations may contact Cigna EAP at 1-800-554-6931 to inquire about support that may be provided by the Employee Assistance Program (EAP). EAP programs often assist employees, confidentially, in coping with emotions they may have suffered during threatening situations.

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# City of Miami - Workplace Violence Incident Report

## Part I

<b>Incident Type:</b>	Physical Force    Acts or Threats Sabotage    Harassment	<b>Incident Date:</b>	<b>Incident Time:</b>
Person Taking Report:		Reporting Date:	Reporting Time:
Incident Location:			
Person Reporting:	Reported By:    Telephone    Person    Writing		
<b>Complainant Name:</b>	City Employee:                      Yes                      No		
Department / Pos. Title:	Complainant DOB:	Gender:                      Male    Female	
Injuries:	Yes    No	FR#	Hospital:
Description of Injuries:			
Bus. Phone:	Res. / Cell Phone:		
Res. Address:	City:	State:	Zip:
Work Address:	City:	State:	Zip:
<b>Alleged Aggressor:</b>	City Employee:                      Yes                      No		
Department / Pos. Title:	DOB:	Gender:                      Male    Female	
Bus. Phone:	Res. / Cell Phone:		
Res. Address:	City:	State:	Zip:
Work Address:	City:	State:	Zip:
<b>Name of Witness:</b>	City Employee:                      Yes                      No		
Department / Pos. Title:	DOB:	Gender:                      Male    Female	
Bus. Phone:	Res. / Cell Phone:		
Res. Address:	City:	State:	Zip:
Work Address:	City:	State:	Zip:
<b>Name of Witness:</b>	City Employee:                      Yes                      No		
Department / Pos. Title:	DOB:	Gender:                      Male    Female	
Bus. Phone:	Res. / Cell Phone:		
Res. Address:	City:	State:	Zip:
Work Address:	City:	State:	Zip:

# City of Miami - Workplace Violence Incident Report

## Part II

<b>Complainant Name / Pos. Title:</b>						
<b>Description of Incident:</b> (add'l documentation may be provided if necessary) Describe what happened immediately prior to the incident that caused it to manifest into the violence. Describe any specific language of the threat. Was there physical contact? If so, describe the contact. How did the threat maker appear? Who else was involved and what actions did they take? How did the incident end? What event(s) triggered the incident? Any history leading up to the incident?						
<b>Weapon:</b> Yes No		<b>Description:</b>				
<b>Action Taken:</b>	Called Police	Called Security Management Notified	Separated	Transfer HR - Labor Relations Notified	Management Notified	Risk
<b>Was the alleged aggressor acting out of character:</b>			Yes No	<b>If so explain:</b>		
<b>Behavior &amp; Emotional State:</b>	Verbally Aggressive/Abusive Language Vandalism/Phys Acting Out	Hyper/Agitated	Threatening Violent/Phys Assault	Intense/Uncontrollable Anger Fearful	Erratic	
<b>Previous Behavioral History:</b>	Verbally Aggressive/Abusive Language Vandalism/Phys Acting Out	Hyper/Agitated	Threatening Violent/Phys Assault	Intense/Uncontrollable Anger Fearful	Erratic	
<b>Are fellow employees afraid of alleged aggressor?</b>			Yes No	<b>Explain:</b>		
<b>Previous history of related incidents or violence?</b>			Yes No	<b>Explain:</b>		
<b>Does alcohol or drug use appear to be a factor in this incident?</b>				Yes	No	
<b>Is there any evidence of work-related, health, or personal problems that may have contributed to this incident?</b>						
Yes No						
<b>If so, explain:</b>						

