

Division of Public Health

Field and Office Worker Safety Guidelines

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I. OVERVIEW OF GUIDELINES

This document has been developed to help assure the safety of Division of Public Health employees in the workplace. It contains information which will help our employees understand and recognize threatening situations in addition to precautionary actions.

General Information

The Division of Public Health's workers who are engaged in professional intervention with clients may be exposed to health risks, threats and volatile situations. These situations can develop in the field or in an office environment. For this reason, protective measures have been developed in the form of a set of DPH Field Worker Guidelines. With the approval and implementation of this document, it will be the responsibility of all managers to insure that these guidelines are reviewed and enforced with all new and current employees.

Purpose

The purpose of this document is to provide guidelines to encourage all Division of Public Health (DPH) field and office workers to understand and recognize potentially threatening situations in a field or office environment and, if confronted, take appropriate actions to ensure workers safety.

Provided in this document are basic safety principles and precautions offered to educate DPH field and office workers. They include:

- Employee assessment.
- Basic home visit and office safety precautions,
- client interaction techniques
- communicable disease and nuisance pest guidance

II. BASIC SAFETY PRINCIPLES AND PRECAUTIONS

Employee Assessment:

The first step is to ensure all DPH field and office workers assess the risk of a meeting with a client whether it's in the field or in an office environment. Before DPH workers initiate a meeting, they should assess the risk to themselves with the assistance of their immediate supervisor. Consideration and questions include the following:

It's important that all DPH field and office workers understand all aspects of their job descriptions through new hire orientation and subsequent safety training.

Know your limitations in terms of professional knowledge and skills. Avoid helping in situations that are not within your area of competence.

Recognize the need to consult your supervisor/management about the handling of a particular case and determine if a given intervention is appropriate.

Ask your supervisor if there are DPH documented occurrences of violence, vicious pets on or near the premises, weapons, drugs or other violent behavior toward other workers.

Determine what the geographic locations are for your client in terms of minimal to extremely isolated areas and/or minimal to high crime areas.

Determine if your initial contact should be scheduled during normal or after normal working hours.

Positive Client Interaction:

A worker's appearance, verbal statements and demeanor can impact the client or patient response.

Introduce yourself by name and explain your job task. Use language the client or patient will understand.

During the client or patient interview, listen with empathy and respect. Maintain positive eye contact and adopt a relaxed posture rather than a closed arms posture.

Listen and show you are listening by nodding and using words such as "*I see*". Avoid any irritating motions, such as tapping pens, fiddling or doodling.

Maintain a pleasant demeanor when you are with your client by encouraging client participation.

Use appropriate appearance and grooming in order to project an image of professionalism. Avoid provocative clothes and keep jewelry to a minimum.

If required, ask for permission to write/take notes. Listen to clients and allow them to express their opinions, complaints or issues.

Remain alert. Watch for changes in mood, movements or expressions.

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If you feel comfortable with the situation in terms of applicable experience and skills, try to solve some problems immediately to demonstrate that you are trying to find solutions. If you are governed by rules or program policies explain them to the client or patient.

Avoid emotion provoking expressions such as “*calm down*” if the client or patient becomes agitated. It’s extremely important that you never get drawn into an aggressive situation.

Approaching an Agitated Client:

In confrontational situations, if the Field/Office worker appears calm, has control of the situation without being intimidating and uses anger reduction techniques, he/she will probably be able to defuse the situation. The following information should provide some direction in these situations. When a client or patient is agitated, hostile or verbally abusive you need to do the following:

Maintain a calm disposition so that feelings of anxiety, fear, anger, etc. do not interfere with the ability to communicate effectively. All statements should be made in a very clear, simple, and direct manner.

You should be assertive so that your involvement in the situation is viewed as clearly professional and not personal. Avoid taking responses personally and responding defensively.

Show respect for clients by speaking to them and not at them. Be directive, not authoritative. Present alternatives in a positive manner.

Request help if needed. If a client becomes aggressive, make attempts to calm him/her. Otherwise, seek assistance from the nearest support person.

Avoid touching, whether it is in a calming or protective manner without explaining your actions.

Remove yourself from the immediacy of the hostile situation.

Personal Safety:

Due to increased incidents of violence directed at field and office workers, an awareness of safety guidelines is required to better prepare DPH staff members. Personal safety guidelines are important and should include awareness, prevention and management of dangerous situations in your work environment.

The best protection in a potentially threatening situation is to follow your intuition and by observing your surroundings.

Review agency safety policy and procedures within thirty days (30 days) of your hire date.

Walk with a sense of purpose. Do not walk on the side of the street where people are loitering. Walk on the outside of the sidewalk, away from possible hiding places.

Be aware of body language.

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Be alert to people around you. Beware of strangers who approach and speak to you. Keep at a safe distance and keep moving.

Do not give money to people who ask for it.

Be aware of safe places such as stores, library, school and community centers to use for refuge.

Do not carry a purse or bag. If you must carry one, conceal it or use a shoulder bag or backpack with a firm grip on the shoulder strap.

Wear sensible/appropriate clothing, low-heeled shoes, and no jewelry which could be snatched off or wrapped around your neck.

Assess multi-story buildings for safety. If you take the elevator, observe elevator *“interior”* before entering. If the elevator appears unsafe, wait for the next elevator or consider taking the stairs. The best course of action is to call your office and ask for 2 or 3 colleagues to come down to escort you upstairs.

If a suspicious person enters the elevator after you have entered it, exit before the door closes. If unable to exit the elevator, stand next to the control panel and note if the elevator has an emergency alarm button or phone. If accosted, press all buttons and be prepared to use the elevator phone for contact.

Before entering an elevator or a stairwell, be aware of any suspicious individuals that are loitering in the lobby area. If your intuition indicates an unsafe situation, leave the area, call your office and ask for 2 or 3 colleagues to come down to escort you upstairs.

If you suspect a person to be in a stairwell, back away and leave the area. Call your office and ask for 2 or 3 colleagues to come down to escort you upstairs.

If you receive an unexpected package at your agency office, and you do not know who it is from, do not open the package. Immediately notify your supervisor about the package.

After having direct or indirect contact with a client, wash your hands. If on a home visit, it's advisable to use pre-packaged towelettes or anti-bacterial hand cleanser once you are away from the clients' house. Avoid using the clients' restroom or entering other parts of the clients' house unescorted.

If you are in a situation where the potential for exposure to client bodily fluids, ensure that you have personal protection gloves available to you – preferably nitrile vs. latex gloves. **Reference:** Blood-borne Pathogens Safety Training Guidelines.

Do not attempt to pick up any adult client who has fallen -- call for emergency personnel. In the case of a child or infant, apply proper agency protocol.

Do not give clients medication, even if it is their own, and at their request.

If for any reason you have to transport a client, first check on state policy to determine if allowed. Prior to any visit where personal transportation is used, check your car insurance policy to determine if the client would be covered in the event of an accident.

Do not stay in a situation where you feel threatened. Trust your intuition and take the appropriate actions to ensure your personal safety.

III. DPH OFFICE VISIT SAFETY

Prior to client office visits all DPH staff members should conduct a briefing with their immediate supervisors/management. The intent is to discuss such matters as past client or patient history, past interviews or agency policy when working with a potentially agitated or hostile client. The following are office visit safety guidelines of which all DPH office staff should be aware.

General Office Safety:

Front desk receptionists are required to check all credentials of non-DPH personnel prior to allowing them into the office environment. If there is any question of validity, call your supervisor or facilities management staff to verify entry.

Assess your client or patient waiting rooms to ensure that environment provides maximum comfort and minimal stress to the client or patient. Keep waiting time to a minimum. If the interview is delayed, ensure client is informed.

Do not schedule a meeting when you know you will be alone in the building.

Don't set client or patient deadlines if you can not keep them, or set time limits with an irritated or aggressive client or patient. If the situation is escalating, take a break to defuse the situation and the aggression.

If escorting a client or patient to a room walk beside them on the same level, in front going upstairs, and behind them going downstairs.

Dress appropriately including low-heeled shoes with a good grip in the event you need to exit the room quickly. It's suggested that you do not wear any jewelry, necklaces, scarves or neckties.

In rooms where interviews are conducted, limit the number of pictures, vases, or other items that can be used as weapons by an agitated or hostile client or patient. It's strongly recommended that an assessment of your office area is conducted to eliminate any potential weapons, such as a letter opener, break room utensils, bottles, etc.

If your agency has an interview or crisis room furniture should be minimal, lightweight, without sharp corners or edges and/or affixed to the floor.

If applicable, be sure client or patient interview or treatment is not conducted in isolation. Ensure office staff knows where you are and who you are interviewing. Always be sure that the client or patient knows that other office staff members are present.

It's recommended that all waiting/observation room children's toys are cleaned regularly after use.

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Be sure that all office security and fire doors are properly closed. Never wedge any of these doors for convenience purposes.

If leaving your workstation, keep purses and personal items of value locked in your desk drawer.

Where applicable, always use a room in which you are visible to others. For example, using an office with glass (security) windows but where confidential discussions cannot be overheard. If a room does not offer visibility to others, ensure an office staff member drops in to check on you - keeping disruptions to a minimum. Example – offer water or cup of coffee.

As part of your pre-meeting briefing at the first sign you are in distress office staff should know who will respond and what immediate action to take.

Be aware of the location of the nearest exits from your work area, in the event an “immediate” egress is required.

After Hours Field/Office Meetings:

If a DPH field or office staff member is required to work after hours the following safety guidelines are recommended:

Always notify your supervisor when you need to extend your work day.

If you are working at the home of a client, be aware of the location or neighborhood where the visit takes place. Note street lighting, open spaces, shrubs and other growth that may hinder your site of the surrounding area.

It is appropriate to ask someone to accompany you when going to your car after dark. Do not take unnecessary risks.

IV. FIELD WORK GUIDELINES:

Visits to clients at home fall into two main categories; (a) regular visits to the same client, or (b) occasional or single visits to meet with or interview a client. Prior to engaging in a home visit each DPH field worker should follow these basic guidelines.

DPH Field Trip Registration:

Each DPH field agency should have a daily register or log-in/log-out process which meets the needs of the agency’s daily operational routine. This process should be designed to record movement of staff members who engage in client home visits or field activities. It’s recommended that a daily register or log-in/log-out process include:

- Name
- Appointment time and expected return time.
- Name of client, address and phone number if known.
- Employee contact number

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Before Leaving the Office:

Know the purpose of your visit and determine if it is safe to engage in a client visit alone. Discuss concerns with your supervisor before the visit. Familiarize yourself with the client by reading his/her file or any other available records before you go. Check with fellow staff members who previously visited the client's home for potential safety issues.

Ensure that all home visits are made with the full knowledge of your supervisor and colleagues. It is recommended that DPH staff receive permission from their immediate supervisor when scheduling an initial home visit *after* normal business hours.

Make every effort to schedule initial client visits during normal working hours. It is also recommended that home visits are conducted in daylight if possible.

When making visits after normal business hours (5:00 PM) it is recommended that DPH field workers inform their immediate supervisor or an office associate of the scheduled meeting followed by contacting the same person upon completion of visit.

Limit valuables or money on your person when visiting client's homes. Secure credit cards and keep your wallet out of sight. Secure personal belongings in the trunk of your vehicle before leaving your office or leave them in your office.

Take only what is essential to visit a client. Do not carry information that clients should not read such as client information from a previous visit.

It is recommended that you inform your supervisor if you change your schedule or route by providing a new time of departure, destination, time of return and any other activity you may participate in.

For your safety it is recommended that DPH field workers carry a cell phone on all home visits. If possible, it's also recommended that phone number of local law enforcement is programmed into the cell phone. Before departure, check the cell charge and batteries.

Inquire about the location of your visit such as – rural vs. urban, type of home - such as apartment vs. single unit dwelling, etc.

At the time of your client home visit be aware of your physical mobility. Closely observe your environment for potential danger. Always have a back-up escape route.

Ensure your vehicle is in proper running order, has sufficient fuel and a spare tire is available.

Establish a routine for securing your car, car keys, alarms and any other safety equipment.

Always lock your vehicle when traveling, when you arrive at your destination and on your return to the main office or home.

Know who to call or what steps to take if you should experience a vehicle breakdown.

If applicable, before any off-site visit it is good practice to establish a standard code word, phrase or sentence that can be incorporated in a telephone conversation to indicate danger.

DPH staff is neither permitted to carry concealed weapons in state vehicles nor are they permitted to carry concealed weapons in state offices or client homes/premises.

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Before leaving for a home visit be sure you have agency identification on your person at all times.

Wear shoes and clothing that would allow a quick exit if necessary. High heels are not recommended.

When You Arrive at a Home Visit Site:

If you believe your safety is threatened, remove yourself immediately from the situation. If applicable, document incident and file in the record folder. Discuss with your supervisor for alternatives to serve the client. **Important Note:** Do not remain at any location where illegal activity is occurring.

Use your intuition when approaching a client's neighborhood, leaving your car and when entering and departing home visit premises. If environment or situation merits it, anticipate an escape route.

If environment or situation merits it and communication capability is available, check in with your office receptionist, your supervisor or a colleague while on route and upon arrival to the home visit site.

When arriving at your destination, conduct an assessment of the location, streets, nearest exit route, safe locations, etc. in the event of an immediate departure from the area.

Park your vehicle in such a way that you can make a safe and quick departure in an emergency. If it's overcast or nearing dusk, park in well-lighted area.

When you knock on the door, stand to one side and not in a position where the opening of the door could trap you.

Upon arrival ensure your potential client knows who you are and why you are there. Be sure to present your agency ID card/badge. Do not present your credentials to a third party unless asked to do so.

Confirm the name of your client, appointment date and time. Do not enter the house if your client is not available to greet you.

Wait to be asked inside and let your client lead the way.

Do not attempt to initiate a home visit if the client or others in the home are inappropriately dressed or if the client appears to be under the influence of alcohol or drugs.

When You Enter the Property:

If you believe your safety is threatened, remove yourself immediately from the situation. Document incident and file in the record folder. Discuss with your supervisor for alternatives to serve the family.

Do not remain at any location where illegal activity is occurring.

When conducting a home visit, if the front door is ajar, knock and call out the client's name. If you get no response from any one at the home, immediately leave and notify your supervisor about that

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incident. If you suspect that the occupant is home but s/he doesn't answer the door, do not walk around the house peering in windows or knocking on other doors or windows. Immediately leave area and try to call the client by phone.

Enter a home only after an adult gives you permission to do so. If you receive an aggressive reception, immediately leave the premises.

When entering or departing a client's home, always be aware of where the client is in terms of entering or leaving the premises.

Keep car keys handy and accessible while in the client's home.

After entering a client's home be aware of where all exits are located and position yourself accordingly. Be aware as you enter the premises, how the front door opens. Be aware of your surroundings in terms of exit routes, other people in the room and/or adjacent rooms and any obstacles that may hinder a quick exit.

Take only what you need into the house. Do not spread your belongings around - you may need to leave in a hurry.

In the client's home be respectful to your client as you may be perceived to be invading the client's personal space. Try to avoid reacting to the house in terms of smells, surroundings and untidiness.

Keep your car doors locked at all times, whether you are in or out of the car. Keep your car windows rolled up high enough at all times such that a person cannot get his/her hand/arm inside of the car. If stopped while in your car by a person, no matter who confronts you, stay in your car with the engine running.

When on a home visit, look before you sit in order to avoid sitting on sharp objects or other items or material. Try to sit on hard chairs rather than cushioned chairs.

When in a client's home, do not partake of food or drink (given the availability of drugs and other substances). Be respectful and inform the client you have just eaten and appreciate their offering.

Ask for dogs or other animals to be put in another room. Do not enter premises alone if a threatening animal is present.

If threatened by a dog, (a) do not run, make any sudden movements, or produce any loud noises, (b) stand still and do not stare at the dog, but keep the dog in you sight, (c) slowly begin to back away from the dog. Do not turn your back to the dog -- or reach your hand out to it, (d) if bitten by a dog do not attempt to restrain the dog that just bit you, immediately call emergency personnel and let them handle the dog and care for your wounds.

It's important to know and locate safe places in your area and use them when needed. Example: a school, church, gas station, convenience store, fire department, police station, hospital or any area that is public and has people around.

After Completing the Home Visit:

Upon leaving the client's home, observe your surroundings for potential danger situations. Approach your car with keys in hand.

If your car is equipped with an alarm and you become threatened, activate the car alarm to draw attention to your situation.

If the environment or situation merits it and communication capability is available, immediately notify your supervisor or another agency staff member before going home or returning to the office. If you return to the office, immediately sign-in on the field trip register.

If people are hanging around your car as you approach it and you do not feel comfortable with the situation, cross over to the side of the street, walk away and call the police. **Important Note:** Do not ask them what they are doing as this will identify you as the driver/owner.

Upon approaching your car, conduct a quick check inside and under your vehicle before entering the vehicle. Immediately enter your car and lock the door.

Do not sit in your vehicle at the visit site to make notes or plan additional visits. If applicable, move to another location away from the visit site to perform these tasks.

Complete your report of the visit. If there has been any problem or even a feeling of unease, details should be included in the visit report. **Important Note:** Even though you may have handled an incident very well, the concerning incidents should not go unreported. If not reported, this can leave the next person in a situation to be at greater risk.

IV. PREVENTION OF COMMUNICABLE DISEASES AND NUISANCE INFESTATIONS

Employees need to be aware of the most contagious communicable diseases and nuisance infestations that can occur when working in client homes and out in the community. Precautions should be taken to avoid spreading or contracting these problems. In this section, you will find a brief description of common risks, and links to additional resources.

Parasites and Bed Bugs

Bed bugs (*Cimex lectularius*) are small, flat, parasitic insects that feed solely on the blood of people and animals while they sleep. Bed bugs are reddish-brown in color, wingless, range from 1mm to 7mm (roughly the size of Lincoln's head on a penny), and can live several months without a blood meal.

Scabies

Human scabies is caused by an infestation of the skin by the human itch mite (*Sarcoptes scabiei* var. *hominis*). The microscopic scabies mite burrows into the upper layer of the skin where it lives and lays its eggs. The most common symptoms of scabies are intense itching and a pimple-like skin rash. The scabies mite usually is spread by direct, prolonged, skin-to-skin contact with a person who has scabies.

For additional information, see <http://www.cdc.gov/parasites/>

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Tuberculosis (TB)

TB is spread through the air from one person to another. TB germs are passed through the air when someone who is sick with **TB disease** of the lungs or throat coughs, speaks, laughs, sings, or sneezes. For additional information, see <http://www.cdc.gov/tb/>

Seasonal Influenza

Flu is a serious contagious disease. The CDC recommends the following precautions:

- Get the annual flu vaccine as soon as it is available. It takes about two weeks after vaccination for your body to develop the immune response.
- Cover your nose and mouth with a tissue or your sleeve when you cough or sneeze. Discard the tissue.
- Wash your hands frequently with soap and water.

If you are sick, limit contact with others to prevent infecting them. The CDC recommends when you are experiencing flu-like illness, stay home for at least 24 hours after the fever is gone, except to seek medical care.

For a additional information visit <http://www.cdc.gov/flu/protect/preventing.htm>

V. INCIDENT REPORTING

Employees must report activities that may pose a threat to their safety or to the safety of the person receiving services.

If at any point during an interaction the employee feels that he/she is in serious danger or that the client is in danger, contact 911.

The following situations require the completion of the DPH Threat and Violence Report:

- Illegal activity – the use, sale, or manufacture of drugs
- Verbal – screaming, threats, intimidating behavior
- Physical – hitting, pushing, pulling hair, property damage.
- Refusal to secure weapons, weapons being drawn or fired
- Interactions with law enforcement (except normal traffic incidents).

Each incident must be investigated by the supervisor to determine appropriate safety precautions and boundaries.

Employees who are injured or who contract a communicable disease from the workplace must complete the Employee Injury Report form and Supervisors must investigate.