TO: ALL OFFICES

SUBJECT: MANUAL MATERIAL


EXPLANATION:

OKDHS:2-15-1 is revised to update regulations regarding Workers' Compensation.

OKDHS:2-15-1.1 is a new Section issued to update procedures regarding work-related illnesses and accidents. Language from OKDHS:2-15-4 through 2-15-6 is included in this Section.

OKDHS:2-15-1.2 is a new Section issued regarding Workers' Compensation benefits.

OKDHS:2-15-2 is revised to include local administrator or county director responsibilities regarding safety and work-related illnesses and accidents.


OKDHS:2-15-6.1 is a new Section issued to include Risk and Safety Management Unit responsibilities regarding Workers' Compensation claims.

OKDHS:2-15-7 is revised to update regulations regarding employee leave options due to Workers' Compensation.

OKDHS:2-15-7.1 through 2-15-7.3 are new Sections issued to update regulations regarding return to work options, failure to return to work, and recordkeeping.

OKDHS:2-15-30 and 2-15-32 are revised to update and reorganize language regarding: (1) bloodborne pathogens exposure control; and (2) the exposure control plan.
OKDHS:2-15-31 is revised to: (1) update existing definitions; and (2) add new definitions.


OKDHS:2-15-40, 2-15-42, and 2-15-43 are revised to update Risk and Safety Management Unit responsibilities regarding the OKDHS risk and safety management program.

OKDHS:2-15-41 is revised to: (1) update existing definitions; and (2) add new definitions.

OKDHS:2-15-44 is amended and renumbered to OKDHS:2-45-2 as the Information Services Divisions Information Security Office (ISO) is assigned responsibilities addressed in this Section.

OKDHS:2-15-45 through 2-15-49 are amended and renumbered to OKDHS:2-45-4 as ISO is assigned responsibilities addressed in these Sections.

OKDHS:2-15-50 is revoked.

OKDHS:2-15-51 is amended and renumbered to OKDHS:2-45-5 as ISO is assigned responsibilities addressed in this Section.

OKDHS:2-15-52 is revised to update regulations regarding workplace violence.
INSTRUCTIONS FOR FILING MANUAL MATERIAL

OAC is the acronym for Oklahoma Administrative Code. If OAC appears before a number on an Appendix or before a Section in text, it means the Appendix or text contains rules or administrative law. Lengthy internal policies and procedures have the same Chapter number as the OAC Chapter to which they pertain following an "OKDHS" number, such as personnel policy at OKDHS:2-1 and personnel rules at OAC 340:2-1. The "340" is the Title number that designates OKDHS as the rulemaking agency; the "2" specifies the Chapter number; and the "1" specifies the Subchapter number.

The chronological order for filing manual material is: (1) OAC 340 by designated Chapter and Subchapter number; (2) if applicable, OKDHS numbered text for the designated Chapter and Subchapter; and (3) all OAC Appendices with the designated Chapter number. For example, the order for filing personnel policy is OAC 340:2-1, OKDHS:2-1, and OAC 340:2 Appendices behind all Chapter 2 manual material. Any questions or assistance with filing manual material will be addressed by contacting Policy Management Unit staff at 405-521-4326.

REMOVE

OKDHS:2-15, Table of Contents
OKDHS:2-15-1
-----
-----
OKDHS:2-15-2
OKDHS:2-15-3
OKDHS:2-15-4
OKDHS:2-15-5
OKDHS:2-15-6
-----
OKDHS:2-15-7
-----
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INSERT

OKDHS:2-15, Table of Contents, pages 1-2, revised 9-15-07
OKDHS:2-15-1, 1 page only, revised 9-15-07
OKDHS:2-15-1.1, pages 1-2, issued 9-15-07
OKDHS:2-15-2, 1 page only, revised 9-15-07
OKDHS:2-15-4, AMENDED AND RENUMBERED TO OKDHS:2-15-1.1
OKDHS:2-15-5, AMENDED AND RENUMBERED TO OKDHS:2-15-1.1
OKDHS:2-15-6, AMENDED AND RENUMBERED TO OKDHS:2-15-1.1
OKDHS:2-15-6.1, 1 page only, issued 9-15-07
OKDHS:2-15-7, pages 1-2, revised 9-15-07
OKDHS:2-15-7.2, 1 page only, issued 9-15-07
<table>
<thead>
<tr>
<th>REMOVE</th>
<th>INSERT</th>
</tr>
</thead>
<tbody>
<tr>
<td>-----</td>
<td>OKDHS:2-15-7.3, 1 page only, issued 9-15-07</td>
</tr>
<tr>
<td>OKDHS:2-15-34</td>
<td>OKDHS:2-15-34, AMENDED AND RENUMBERED TO OKDHS:2-15-32</td>
</tr>
<tr>
<td>OKDHS:2-15-41</td>
<td>OKDHS:2-15-41, 1 page only, revised 9-15-07</td>
</tr>
<tr>
<td>OKDHS:2-15-45</td>
<td>OKDHS:2-15-45, AMENDED AND RENUMBERED TO OKDHS:2-45-4</td>
</tr>
<tr>
<td>OKDHS:2-15-46</td>
<td>OKDHS:2-15-46, AMENDED AND RENUMBERED TO OKDHS:2-45-4</td>
</tr>
<tr>
<td>OKDHS:2-15-47</td>
<td>OKDHS:2-15-47, AMENDED AND RENUMBERED TO OKDHS:2-45-4</td>
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<tr>
<td>OKDHS:2-15-48</td>
<td>OKDHS:2-15-48, AMENDED AND RENUMBERED TO OKDHS:2-45-4</td>
</tr>
<tr>
<td>OKDHS:2-15-49</td>
<td>OKDHS:2-15-49, AMENDED AND RENUMBERED TO OKDHS:2-45-4</td>
</tr>
<tr>
<td>OKDHS:2-15-50</td>
<td>-----</td>
</tr>
</tbody>
</table>
SUBCHAPTER 15. RISK AND SAFETY MANAGEMENT

PART 1. WORKERS' COMPENSATION

OKDHS:2-15-1. Workers' Compensation and accommodations for injured or disabled workers
OKDHS:2-15-1.1. Responding to work-related illnesses and accidents with injuries
OKDHS:2-15-1.2. Workers' Compensation benefits
OKDHS:2-15-2. Local administrator or county director responsibilities
OKDHS:2-15-4. Accident reporting - employee's responsibilities [AMENDED AND RENUMBERED TO OKDHS:2-15-1.1]
OKDHS:2-15-5. Accident reporting - supervisor's responsibilities [AMENDED AND RENUMBERED TO OKDHS:2-15-1.1]
OKDHS:2-15-6. Reporting requirements [AMENDED AND RENUMBERED TO OKDHS:2-15-1.1]
OKDHS:2-15-6.1. Risk and Safety Management Unit responsibilities
OKDHS:2-15-7. Employee leave options
OKDHS:2-15-7.1. Return to work options
OKDHS:2-15-7.2. Failure to return to work
OKDHS:2-15-7.3. Recordkeeping and posting safety notices

PART 3. WELLNESS PROGRAM [REVOKED]

OKDHS:2-15-20. Wellness program - general [REVOKED]
OKDHS:2-15-21. Administration of the Wellness program [REVOKED]
OKDHS:2-15-22. Employee participation [REVOKED]
OKDHS:2-15-23. Employee-instructors [REVOKED]
OKDHS:2-15-25. Use of facilities [REVOKED]

PART 5. BLOODBORNE PATHOGENS EXPOSURE CONTROL

OKDHS:2-15-30. Purpose
OKDHS:2-15-31. Definitions
OKDHS:2-15-32. Exposure Control Plan
OKDHS:2-15-33. Management of exposures to blood or other body fluids [AMENDED AND RENUMBERED TO OKDHS:2-15-32]

PART 7. SAFETY MANAGEMENT

OKDHS:2-15-40. Purpose
OKDHS:2-15-41. Definitions
OKDHS:2-15-42. Mitigation
OKDHS:2-15-43. Preparedness
OKDHS:2-15-44. Response [AMENDED AND RENUMBERED TO OKDHS:2-45-2]
OKDHS:2-15-45. Emergency operating plans [AMENDED AND RENUMBERED TO OKDHS:2-45-4]
OKDHS:2-15-46. Emergency operating plans general requirements [AMENDED AND RENUMBERED TO OKDHS:2-45-4]
OKDHS:2-15-47. Outside evacuation procedures [AMENDED AND RENUMBERED TO OKDHS:2-45-4]
OKDHS:2-15-49. Bomb threat - outside evacuation [AMENDED AND RENUMBERED TO OKDHS:2-45-4]
OKDHS:2-15-52. Workplace violence
PART 1. WORKERS' COMPENSATION

OKDHS:2-15-1. Workers' Compensation and accommodations for injured or disabled workers

Revised 9-15-07

(a) Workers' Compensation (WC) is the only remedy for work-related illness or injury suffered in the course of employment. [85 O.S. § 1 et seq.] WC is intended to provide an employee with income and medical care while off work due to a work-related illness or injury that arose out of and in the course and scope of employment.

(b) The Oklahoma Department of Human Services (OKDHS) ensures all employees with valid WC claims are provided all benefits to which they are entitled. OKDHS pursues available administrative and criminal sanctions in the event an employee files a claim for WC benefits to which he or she is not entitled.

(c) All rights and benefits associated with WC continue while the employee is on leave for a continuous period not to exceed 12 months. These rights and benefits end immediately when a claim for WC is denied or cancelled within the continuous 12 month period.
OKDHS:2-15-1.1. Responding to work-related illnesses and accidents with injuries

Issued 9-15-07

(a) Medical assistance.

(1) When an employee sustains a work-related illness or injury, the employee's supervisor ensures that prompt medical treatment is authorized for the employee who requires more than the first aid available at the workplace. The employee may see any medical professional of choice on the first visit for treatment. The employee is responsible to inform the medical professional that Workers' Compensation (WC) may cover the claim.

(2) The employee is authorized for subsequent medical treatment through the Certified Workplace Medical Plan (CWMP). The CWMP contracts with the Oklahoma Department of Human Services (OKDHS) to provide medical management to an employee who has filed a WC claim.

   (A) The employee's supervisor or designee notifies the OKDHS Support Services Division (SSD) Risk and Safety Management Unit risk manager of the need for additional treatment.

   (B) The employee is directed to the authorized treatment provider and given a medical authorization form provided to OKDHS by CWMP.

(b) Reporting requirements.

(1) An employee who sustains a work-related illness or injury while acting within the scope of employment is required to report the work-related illness or injury to his or her supervisor immediately after the accident occurs or the work-related illness is known, unless incapacitated.

   (A) The employee completes:

      (i) Form 23RS046E, Employee's Report of Job-Related Accidental Injury or Illness, in all instances of work-related illness or injury. The employee must sign Page three of this form or it will be returned for signature; and

      (ii) Form 23RS113E, Leave Option Election Work-related Accident/Illness.

   (B) If the employee does not seek medical treatment for the illness/injury it is
treated as an information only report and no WC claim is filed.

(2) In the event an employee fails to either complete Form 23RS046E or seek medical treatment within 30 days of the date of a work-related illness or injury, OKDHS presumes that the claim is not work-related.

(c) Investigating accidents. All accidents are investigated first by the employee's supervisor and then by the SSD Risk and Safety Management Unit. The employee's supervisor or designee:

(1) files the claim within 24 hours, or by the next business day, by telephone to the insurance carrier, CompSource Oklahoma at 1-800-872-7015;

(2) completes:

   (A) an immediate initial investigation of the claim by interviewing the injured worker and any witnesses; and

   (B) Form 23RS047E, Supervisory Report and Review of Job-Related Accidental Injury or Illness, obtaining written signed statements from witnesses; and

(3) faxes the completed Forms 23RS046E, 23RS047E, and 23RS113E, to SSD Risk and Safety Management Unit for further review and claim investigation. Original forms and documents are sent by mail to the SSD Risk and Safety Management Unit, and copies are maintained at the workplace in a location separate from the employee's personnel file.
OKDHS:2-15-1.2. Workers’ Compensation benefits

Issued 9-15-07

(a) Medical expenses.

(1) Workers’ Compensation (WC) benefits. WC benefits include all authorized and medically necessary:

(A) medical, surgical, nursing, and hospital services;

(B) medicines;

(C) crutches and prosthetic devices; and

(D) travel expenses outside the employee’s city of residence that are documented by the CompSource Oklahoma claims adjuster.

(2) Medical benefits. An injured employee is covered for only those medical expenses authorized by the Certified Workplace Medical Plan (CWMP) and provided by a member of the CWMP network. The CWMP authorizes necessary emergency treatment by medical providers who are not part of the plan.

(b) Compensation.

(1) Temporary total disability (TTD). TTD provides income to an employee who is temporarily unable to perform his or her duties because of a work-related illness or injury.

(A) The employee’s own accrued sick leave, annual leave, or any other accrued leave is used for the first three consecutive calendar days off work following a work-related illness or injury.

(B) After the first three consecutive calendar days off work, the employee is placed:

(i) on approved leave without pay (LWOP) per OKDHS:2-1-38(a)(4); and

(ii) the second payroll.

(C) Payments for TTD are equal to 70 percent of the average Oklahoman’s average weekly wage, not to exceed the amount set by the WC Act. [85 O.S. § 1
(D) An employee may elect to supplement TTD payments from his or her own accrued sick leave, annual leave, or any other accrued leave in order to maintain the same level of pay. The employee completes Form 23RS113E, Leave Option Election Work-related Accident/Illness. The combined compensation for paid leave usage and TTD must not exceed 100 percent of the employee’s regular wages.

(2) **Temporary partial disability (TPD).** TPD is available to an employee who returns to work at a wage less than the wage he or she earned prior to the injury. TPD payments equal 70 percent of the difference in the two wage rates, not to exceed the amount set by the WC Act. [85 O.S. § 1 et seq.]

(3) **Permanent disability.** Determining permanent disability is the responsibility of the WC Court.

   (A) Permanent total disability (PTD) is designed for an employee who is incapacitated because of accidental work-related illness or injury and unable to earn any wages in any employment.

   (B) Permanent partial disability (PPD) payments are designed to reimburse an employee for any disability which is permanent in nature but which is not totally disabling.

(4) **Death benefits.** Death benefits are available to dependents of an employee who dies as a result of a work-related illness or injury. Payments are made in a variety of ways, depending on marital status and number of dependents.

(5) **Rehabilitation.** Payment for physical or occupational rehabilitation services may be provided by WC to an employee who is unable to return to his or her original occupation.

(6) **Health insurance premiums.** The Oklahoma Department of Human Services pays employee health, dental, disability, and basic life insurance premiums for an employee on LWOP. Premium payments end after 12 months or at any time the WC claim is denied.

(7) **Retirement credit.** An employee receives participating service in Oklahoma Public Employees Retirement System (OPERS) for the time the employee receives TTD benefits provided the employee:
(A) notifies OPERS no later than four months after returning to work, terminating employment, or terminating TTD whichever is earlier; and

(B) pays his or her contribution to OPERS for the period of absence.
OKDHS:2-15-2. Local administrator or county director responsibilities

Revised 9-15-07

Oklahoma Department of Human Services (OKDHS) local administrators or county directors are responsible for:

1. maintaining a safe working environment;
2. detecting and promptly eliminating safety hazards to OKDHS employees, clients, and the general public;
3. conducting a continuing safety education and accident prevention program;
4. ensuring supervisors and employees fulfill their reporting responsibilities regarding work-related illnesses and accidents; and
5. signing, posting, and maintaining Workers’ Compensation Court Form No. 1-A, Oklahoma Workers’ Compensation Notice and Instruction to Employers and Employees, in conspicuous places such as work area bulletin boards, cafeteria bulletin boards, or other areas frequented by all employees.
OKDHS:2-15-4. Accident reporting - employee’s responsibilities [AMENDED AND RENUMBERED TO OKDHS:2-15-1.1]
OKDHS:2-15-5. Accident reporting - supervisor’s responsibilities [AMENDED AND RENUMBERED TO OKDHS:2-15-1.1]
OKDHS:2-15-6. Reporting requirements [AMENDED AND RENUMBERED TO OKDHS:2-15-1.1]
OKDHS:2-15-6.1. Risk and Safety Management Unit responsibilities

Issued 9-15-07

(a) **Compensability.**

(1) The determination of whether an employee's claim is compensable under the Workers' Compensation (WC) Act [85 O.S. § 1 et seq.] is the responsibility of the Support Services Division (SSD) Risk and Safety Management Unit. The Risk and Safety Management Unit thoroughly investigates all claims for validity and for purposes of mitigating potential risks for other employees. Written reports describing the conduct and findings of the investigation are maintained in the Risk and Safety Management Unit claim file.

(2) The Risk and Safety Management Unit serves as the point of contact between claims adjusters, medical claims managers, attorneys, and local administrator or county director. Any questions from the workplace regarding a claim are directed to the Risk and Safety Management Unit.

(b) **Notice to employee.** An employee on leave without pay (LWOP) due to a work-related illness or injury who is medically unable to perform the essential job functions of his or her original position with or without reasonable accommodations, is notified by letter of the Oklahoma Department of Human Services (OKDHS) procedure for returning to work in an alternate position.

(c) **Testimony.** An employee witness who is subpoenaed on behalf of OKDHS is subpoenaed at work and the county director or local administrator is responsible to make arrangements for the witness to appear. An employee testifying on behalf of OKDHS is considered on duty.
**OKDHS:2-15-7. Employee leave options**

Revised 9-15-07

(a) *Leave options within the first year with pay.* The procedures described in (1) through (5) of this subsection apply to an employee whose work-related illness or injury results in time off work.

(1) An employee who is off work less than four days may use:

   (A) sick leave per OKDHS:2-1-36;

   (B) annual leave per OKDHS:2-1-35;

   (C) compensatory time per OKDHS:2-1-30; or

   (D) compensatory holiday leave per OKDHS:2-11-96.

(2) An employee is placed on leave without pay (LWOP) on the fourth consecutive calendar day of inability to work due to a work-related illness or injury. The initial date of the work-related illness or injury is not counted as the first day off work.

(3) An employee may elect to use accrued sick leave, annual leave, compensatory time, or compensatory holiday leave to supplement the temporary total disability (TTD) payments received while on LWOP by completing Form 23RS113E, Leave Option Election Work-related Accident/Illness. Supplemental payments are not made unless the employee submits a completed Form 23RS113E to the local administrator or county director who sends:

   (A) the original to Support Services Division (SSD) Risk and Safety Management Unit; and

   (B) a copy to the Finance Division who issues a check.

(4) The first 12 weeks of leave taken in accordance with this Section are designated as family medical leave (FMLA leave), if the employee is eligible for FMLA leave and chooses not to supplement TTD payments with sick leave, annual leave, compensatory time, or compensatory holiday leave. The employee must file a completed Form 11AD002E, Certification of Health Care Provider, with the local administrator or county director who:

   (A) forwards the original to the SSD Risk and Safety Management Unit for
inclusion in the claimant's file; and

(B) retains a copy for the local records.

(5) An employee may elect to use accrued sick leave, annual leave, compensatory time, or compensatory holiday leave for any subsequent treatment or follow up visits once the employee returns to work.

(b) Exhaustion of LWOP after one year. Following exhaustion of the one year LWOP period, an employee:

(1) may be terminated pursuant to OKDHS:2-1-7;

(2) if no longer receiving TTD, may be granted a request to use accrued sick leave, annual leave, compensatory time, or holiday leave of up to one year additional LWOP; or

(3) receiving TTD, may request and be granted additional LWOP.
OKDHS:2-15-7.1. Return to work options

Issued 9-15-07

(a) Return to original job or alternate position. The employee's right to return to his or her original job or an alternate position expires one year from the date leave without pay (LWOP) starts.

(1) Release to return to work. The treating physician must release the employee before the employee returns to work. If the employee is released to work with restrictions, the employee and local administrator or county director, with the assistance of the Oklahoma Department of Human Services (OKDHS) Support Services Division (SSD) Risk and Safety Management Unit risk manager, develop an agreement that allows the employee to return to work in a manner that is consistent with the restrictions placed upon him or her by the treating physician. As the employee progresses through treatment, the agreement is reviewed. Changes to the agreement typically reflect the employee's current ability to perform the essential functions of his or her position.

(2) Medical restrictions. Any employee who returns to work and fails to follow the prescribed medical restrictions is subject to discipline, up to, and including, termination.

(b) Return to work options. The return to work options in this Section are listed in the order in which the options are given consideration.

(1) Return to original position.

(A) Without reasonable accommodation. An employee who is released by the treating physician to return to work with no restrictions or, with restrictions that do not limit the employee's ability to perform the essential job functions of his or her position, is immediately returned to his or her original position.

(B) With reasonable accommodation. In accordance with Sections 954 and 840-2.9 of Title 74 of the Oklahoma Statutes, OAC 530:10-3-2(a) of the Merit Rules, and the Americans with Disabilities Act (ADA) [42 U.S.C. § 12112], reasonable accommodation is required to permit an employee to perform essential job functions.

(C) With specific restrictions. When the medical report from the treating physician releases an employee to return to work and indicates specific restrictions that are permanent in nature, the local administrator or county
director:

(i) in consultation with the OKDHS risk manager, determines what reasonable accommodation(s) can be made to allow the employee to continue performing essential job functions; and

(ii) the OKDHS risk manager may consult with the treating physician, the employee, or others for suggestions regarding reasonable accommodation.

(2) **Light duty or detail to special duty.** Light duty assignment and detail to special duty are considered when an employee is released to return to work with restrictions that are temporary in nature.

(A) **Light duty or special duty assignment.** The goal of the light duty or special duty assignment is to permit the employee to return to work as soon as possible following a work-related illness or injury and resume the essential job functions of his or her original position when the medical restrictions expire.

(B) **Medical statement.** Prior to being assigned a temporary assignment for light duty or detail to special duty, the employee must provide a medical statement from the treating physician indicating that the employee is released to return to work subject to specific restrictions for a specified period of time.

(C) **Refusal of duty assignment.** If an employee refuses employment suitable to his or her capacity, OKDHS petitions the Workers' Compensation (WC) Court to terminate the employee's TTD benefits. The employee receives notice and hearing through the WC Court.

(3) **Temporary assignments.**

(A) **Light duty.**

(i) For any periods of temporary restrictions less than 60 days, an employee is provided light duty assignments. Such an assignment consists of any group of job duties that the employee is medically able to perform. The employee occupies and is paid in accordance with his or her original position.

(ii) At the end of the light duty assignment, the employee provides a full release from the treating physician to return to work and resumes all essential job functions of his or her original position.

(B) **Detail to special duty.**
(i) For any periods of temporary restrictions, an employee may be detailed to special duty for up to:

(I) six months in any vacant position whether or not the employee meets the minimum qualifications (MQs) for that position; or

(II) one year in any position which is temporarily vacant due to the absence of the incumbent and for which the employee meets the MQs for that position.

(ii) The employee must provide a medical report from the treating physician indicating a release to return to work with temporary restrictions. Salary upon detail is in accordance with Merit Rule OAC 530:10-7-17 and OKDHS:2-1-2. The employee must be returned to his or her original position prior to the expiration of the detail with a full medical release.

(iii) For details up to six months the workplace prepares Office of Personnel Management (OPM) Form OPM-14, Request for Personnel Action, indicating detail to special duty.

(iv) For details in excess of six months, the workplace must:

(I) ensure the employee's qualifications are certified by OPM; and

(II) prepare Form OPM-14 indicating detail to special duty and the position is temporarily vacant due to absence of the incumbent.

(c) First preference for return to an alternate position.

(1) First preference. An employee who is unable to return to work in his or her original position, or who has not been placed in temporary assignment pending return to his or her original position, is given first preference for any alternate positions provided the:

(A) employee is medically able to perform the essential job functions of the alternate position;

(B) employee meets the MQs for the alternate position;

(C) alternate position is vacant;

(D) alternate position does not constitute a promotion for the employee; and
(E) employee is within the one-year start of LWOP.

(2) First preference process. First preference rights are activated when the OKDHS risk manager receives a completed Form OPM 4-B, Personal Data Summary Sheet, and current medical statement from the treating physician. The OKDHS risk manager verifies that the employee is eligible for first preference and ensures that all eligible employees are provided notifications of job postings until:

(A) the employee's LWOP expires; or

(B) a placement is made.

(3) Medical statement. An employee who is placed in an alternate position through first preference must provide a medical statement from the treating physician every month until the employee is released to return to his or her original position or the right to return to the original position expires. The right to return to the original position expires one year from the start of LWOP.
OKDHS:2-15-7.2. Failure to return to work

Issued 9-15-07

(a) Failure to return following medical release.

(1) In the event the medical report from the treating physician indicates the employee is able to return to work and has not yet reported for duty, a letter notifying the employee to return to work is mailed or delivered to the employee by the workplace. The notice provides the employee seven days from the date of mailing or personal delivery to report to work.

(2) An employee who fails to return to work in compliance with the notice is subject to discipline up to, and including, termination.

(b) Failure to return within one year. If an employee does not return to work in either the original or an alternate position within one year after the start of leave without pay, the employee may be terminated in accordance with OKDHS:2-1-11.
OKDHS:2-15-7.3. Recordkeeping and posting safety notices

Issued 9-15-07

(a) Workers' Compensation (WC) files.

(1) Copies of all WC claims and related materials are kept in a location separate from the employee's personnel file at the employee's workplace.

(2) The Support Services Division (SSD) Risk and Safety Management Unit maintains the original copies of all WC claims and related materials in a central location.

(b) Oklahoma Department of Labor (ODOL) report. The local administrator or county director maintains a record of all occupational illnesses and injuries by calendar year using ODOL Form OK No. 300, Log and Summary of Occupational Injuries and Illnesses. The completed log is provided to the ODOL by the Oklahoma Department of Human Services (OKDHS) risk manager between January 1 and February 1 of each calendar year.

(c) Posting safety notices.

(1) Each OKDHS facility or county office posts, and keeps posted, safety notices informing employees of the protections and obligations provided for in the Oklahoma Occupational Health and Safety Act of 1970. [40 O.S. § 401 et seq.]

(2) Safety notices are furnished by the Risk and Safety Management Unit.
PART 5. BLOODBORNE PATHOGENS EXPOSURE CONTROL

OKDHS:2-15-30. Purpose

Revised 9-15-07

This Part outlines procedures designed to eliminate or minimize employee exposure to bloodborne pathogens (BBP), in compliance with Section 1910.3010 of Title 29 of the Code of Federal Regulations (CFR). The Oklahoma Department of Human Services (OKDHS) Support Services Division (SSD) Risk and Safety Management Unit risk manager formulates a written Exposure Control Plan.

(1) The OKDHS risk manager annually solicits input from non-managerial employees responsible for direct patient care who are potentially exposed to injuries from contaminated sharp devices or equipment in the identification, evaluation, and selection of effective engineering and work practice controls, and documents the solicitation in the Exposure Control Plan.

(2) The OKDHS risk manager reviews the Exposure Control Plan annually and as necessary to reflect new or modified tasks and procedures that affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

(3) The annual review reflects changes in technology that eliminate or reduce exposure to BBP.
OKDHS:2-15-31. Definitions

Revised 9-15-07

The following words and terms, when used in this Part, shall have the following meaning, unless the context clearly indicates otherwise.

"Assistant Secretary" means the Assistant Secretary of Labor for Occupational Safety and Health, or designated representative.

"Blood" means human blood, human blood components, and products made from human blood.

"Bloodborne pathogens (BBP)" means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

"Contaminated" means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

"Decontamination" means the use of physical or chemical means to remove, inactivate, or destroy BBP on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.

"Engineering controls" means controls, such as sharps disposal containers, self-sheathing needles, and safer medical devices, such as sharps with engineered sharps injury protections and needleless systems, that isolate or remove the BBP hazard from the workplace.

"Exposure incident" means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties.

"Handwashing facilities" means a facility providing an adequate supply of running potable water, soap, and single-use towels or hot air drying machines.

"HBV" means hepatitis B virus.

"HIV" means human immunodeficiency virus.

"Licensed healthcare professional" means a person whose legally permitted
"Occupational exposure" means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee’s duties.

"Other potentially infectious materials" means these human body fluids:

(A) semen;
(B) vaginal secretions;
(C) cerebrospinal fluid;
(D) synovial fluid;
(E) pleural fluid;
(F) pericardial fluid;
(G) peritoneal fluid;
(H) amniotic fluid;
(I) saliva in dental procedures;
(J) any body fluid that is visibly contaminated with blood; and
(K) all body fluids in situations where it is difficult or impossible to differentiate between body fluids.

"Parenteral" means piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, and abrasions.

"Personal protective equipment (PPE)" means specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes, for example, uniforms, pants, shirts, or blouses, not intended to function as protection against a hazard are not considered PPE.

"Source individual" means any individual, living or dead, whose blood or other
potentially infectious materials may be a source of occupational exposure to the employee.

"Sterilize" means the use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.

"Universal precautions" means an approach to infection control in which all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other BBP.

"Work practice controls" means controls that reduce the likelihood of exposure by altering the manner in which a task is performed, for example, prohibiting recapping of needles by a two-handed technique.
OKDHS:2-15-32. Exposure Control Plan

Revised 9-15-07

(a) Exposure determination.

(1) Preparation. The local administrator or county director of each workplace prepares an exposure determination that contains separate lists and is delineated by job classifications in which:

(A) all employees in those job classifications have occupational exposure; and

(B) some employees in those job classifications have occupational exposure.

(2) Tasks and procedures. The exposure determination:

(A) lists all tasks and procedures or groups of closely related tasks and procedures in which occupational exposure occurs and which are performed by an employee in a job classification listed in accordance with the provisions of this subsection; and

(B) is made without regard to the use of personal protective equipment (PPE).

(b) Methods of compliance.

(1) General. Universal precautions are observed to prevent contact with blood or other potentially infectious materials. When differentiation between body fluid types is difficult or impossible, all body fluids are considered potentially infectious materials.

(2) Engineering and work practice controls. Engineering and work practice controls are used to eliminate or minimize employee exposure. Where occupational exposure remains after institution of these controls, PPE is also used.

(A) Engineering controls are examined and maintained or replaced on a regular schedule to ensure their effectiveness.

(B) Handwashing facilities are readily accessible to employees. When provision of handwashing facilities is not feasible, an appropriate antiseptic hand cleanser is provided in conjunction with clean towels or antiseptic towelettes. Hands are washed with soap and running water as soon as practicable after cleaning with antiseptic hand cleanser.
(C) An employee washes his or her hands immediately or as soon as feasible after removal of gloves or other PPE, or as soon as feasible following contact with blood or other potentially infectious materials.

(D) Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure.

(E) Food and drink are not kept in refrigerators, freezers, shelves, and cabinets or on countertops or bench tops where blood or other potentially infectious materials are present.

(F) All procedures that involve blood or other potentially infectious materials are performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.

(c) **Personal protective equipment (PPE).**

1. **Provision.** When there is occupational exposure, the Oklahoma Department of Human Services (OKDHS) provides, at no cost to the employee, appropriate PPE, such as fluid impervious gloves, gowns, pocket masks, or other ventilation devices.

2. **Use.** OKDHS ensures that the employee uses appropriate PPE.

3. **Accessibility.** OKDHS ensures that appropriate PPE in the appropriate sizes is readily accessible at the workplace or is issued to the employee. Hypoallergenic fluid impervious gloves, glove liners, powderless gloves, or other similar alternatives are readily accessible to the employee who is allergic to the gloves normally provided.

4. **Cleaning, laundering, and disposal.** OKDHS cleans, launders, and disposes of PPE required in this Section at no cost to the employee.

5. **Repair and replacement.** OKDHS repairs or replaces PPE, at no cost to the employee, as needed to maintain its effectiveness.

6. **Gloves.** Gloves are worn when it can be reasonably anticipated that the employee may have hand contact with blood or other potentially infectious materials, and when handling contaminated surfaces.

   (A) Disposable, single-use gloves are not washed or decontaminated for re-use.
(B) Utility gloves may be decontaminated for re-use. Gloves are discarded if they have signs of deterioration or when their ability to function as a barrier is compromised.

(7) **Masks, eye protection, and face shields.** Masks in combination with eye protection devices are worn when eye, nose, or mouth contamination can be reasonably anticipated.

(8) **Gowns, aprons, and other protective body clothing.** Appropriate protective clothing, such as fluid impervious gowns, lab coats, clinic jackets, or similar outer garments, are worn in occupational exposure situations. The type and characteristics depend upon the task and degree of exposure anticipated.

(d) **Housekeeping.**

(1) **General.** OKDHS ensures the workplace is maintained in a clean and sanitary condition. The local administrator or county director determines and implements an appropriate written schedule for cleaning and methods of decontamination based upon the location within the workplace, type of surface to be cleaned, type of soil present, and tasks or procedures being performed in the area.

   (A) All equipment and environmental and working surfaces are cleaned and decontaminated after contact with blood or other potentially infectious materials.

   (B) Contaminated work surfaces are decontaminated with an appropriate disinfectant:

   (i) after completion of procedures;

   (ii) immediately or as soon as feasible when surfaces are overtly contaminated or after any spill of blood or other potentially infectious materials; and

   (iii) at the end of the work shift if the surface became contaminated since the last cleaning.

   (C) Broken glassware that may be contaminated is not picked up directly with the hands. It is cleaned up using mechanical means, such as a brush and dustpan, tongs, or forceps.

   (D) Reusable sharps that are contaminated with blood or other potentially infectious materials are not stored or processed in a manner that requires an
employee to reach by hand into the containers where these sharps have been placed.

(2) **Regulated waste.**

(A) **Contaminated sharps discarding and containment.**

(i) Contaminated sharps are discarded immediately or as soon as feasible in containers that are:

(I) closeable;

(II) puncture-resistant;

(III) leakproof on sides and bottom; and

(IV) labeled or color-coded as a biohazard.

(ii) During use, containers for contaminated sharps are:

(I) easily accessible to personnel and located as close as feasible to the immediate area where sharps are used or can reasonably be anticipated to be found;

(II) maintained upright throughout use; and

(III) replaced routinely and not allowed to overfill.

(iii) When moving containers of contaminated sharps from the area of use, the containers are:

(I) closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling; and

(II) placed in a secondary container if leakage is possible. The second container is closable; constructed to contain all contents and prevent leakage during handling; and labeled or color-coded as a biohazard.

(iv) Reusable containers are not opened, emptied, or cleaned manually or in any other manner that would expose an employee to the risk of percutaneous injury.
(B) **Other regulated waste containment.** Regulated waste is placed in containers that are:

(i) closable;

(ii) constructed to contain all contents and prevent leakage of fluids during handling;

(iii) labeled or color-coded as a biohazard; and

(iv) closed prior to removal to prevent spillage or protrusion of contents during handling.

(3) **Laundry.**

(A) OKDHS employees use universal precautions in the handling of all soiled laundry. Contaminated laundry is handled as little as possible with a minimum of agitation.

(B) Contaminated laundry is bagged or containerized at the location where it was used and is not sorted or rinsed in the location of use.

(C) Wet contaminated laundry is placed and transported in bags or containers that prevent soak-through and leakage of fluids to the exterior.

(D) OKDHS employees who have contact with contaminated laundry wear protective and other appropriate PPE.

(E) Contaminated laundry not cleaned on-site is shipped in containers that are labeled or color-coded as a biohazard.

(e) **HBV vaccination and post-exposure evaluation and follow-up.**

(1) **Availability.** OKDHS makes the hepatitis B virus (HBV) vaccine and vaccination series available to all employees who have occupational exposure, and provides post-exposure evaluation and follow-up to all employees who have had an exposure incident. All medical evaluations and procedures, including the HBV and vaccination series, and post-exposure evaluation and follow-up, including prophylaxis, are:

(A) made available at no cost to the employee at a reasonable time and place;
(B) performed by or under the supervision of a licensed physician or another licensed healthcare professional; and

(C) provided according to recommendations of the U.S. Public Health Service current at the time the evaluations and procedures take place.

(2) HBV vaccination.

(A) HBV vaccination is made available after the employee has received the training required in subsection (g) of this Section and within ten working days of initial assignment to all employees who have occupational exposure, unless the employee has previously received the complete HBV vaccination series, antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons.

(B) Participation in a prescreening program is not a prerequisite for receiving HBV vaccination.

(C) An employee who initially declines HBV vaccination may later decide to accept the vaccination as long as the employee still has occupational exposure. OKDHS makes the vaccination available at that time.

(D) An employee who declines an HBV vaccination signs the statement in Form 23RS002E, Hepatitis B Vaccination Declination. Signing Form 23RS002E:

(i) documents that the vaccination was declined; and

(ii) informs the employee that the vaccination is offered at no charge to the employee and will be offered at some future time if the employee initially declines, but continues to have occupational exposure and wants to be vaccinated.

(E) If the U.S. Public Health Service recommends HBV vaccination at a future date, OKDHS will offer a booster dose of HBV vaccine at no cost to the employee.

(3) Post-exposure evaluation and follow-up.

(A) The employee reports a possible bloodborne pathogen (BBP) exposure incident to his or her supervisor and completes Form 23RS046E, Employee's Report of Job-Related Accidental Injury or Illness. This type of exposure is handled as a Workers' Compensation claim. Refer to OKDHS:2-15-1.1 for
procedures regarding on-the-job accidents and reporting requirements.

(B) Following a report of an exposure incident, the local administrator or county director immediately makes available to the exposed employee a confidential medical evaluation and follow-up that includes using Oklahoma State Department of Health (OSDH) Form 207, Communicable Disease Risk Exposure Report, to document:

(i) the route(s) of exposure, and the circumstances under which the exposure incident occurred;

(ii) the identity of the source individual, unless identification is unfeasible or prohibited by state or local law;

(iii) the collection and testing of blood for HBV and human immunodeficiency virus (HIV) serological status;

(iv) post-exposure prophylaxis, when medically indicated, as recommended by the U.S. Public Health Service;

(v) counseling; and

(vi) evaluation of reported illness(es).

(C) The source individual's blood is tested as soon as feasible, and after consent is obtained, if possible.

(D) If consent is not obtained, OKDHS establishes that legally required consent cannot be obtained. When law does not require the source individual's consent, the source individual's blood, if available, is tested and the results are documented.

(E) When the source individual is already known to be infected with HBV or HIV, testing for the source individual's known HBV or HIV status is not required.

(F) Results of the source individual's testing are made available to the exposed employee, and the employee is informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.

(4) Collection and testing of blood for HBV and HIV serological status.
(A) The exposed employee's blood is collected as soon as feasible, and is tested after consent is obtained.

(B) If the employee consents to baseline blood collection, but does not give consent at that time for HIV serologic testing, the sample is preserved for at least 90 days. If, within 90 days of the exposure incident, the employee elects to have the baseline sample tested, such testing is done as soon as feasible.

(5) Information provided to the healthcare professional. The healthcare professional responsible for the employee's HBV vaccination is provided:

(A) a copy of this Section [OKDHS:2-15-32];

(B) a description of the exposed employee's duties as related to the exposure incident;

(C) documentation of the route of exposure and circumstances under which exposure occurred;

(D) results of the source individual's blood testing, if available; and

(E) all medical records, including vaccination status, relevant to the appropriate treatment of the employee.

(6) Healthcare professional's written opinion. The local administrator or county director obtains and provides the employee with a copy of the evaluating healthcare professional's written opinion within 15 calendar days of the completion of the evaluation. Except as described in (A) and (B) of this paragraph, all other findings or diagnoses are confidential and not included in the written report.

(A) The healthcare professional's written opinion for HBV vaccination is limited to whether:

(i) HBV vaccination is indicated for the employee; and

(ii) the employee received the vaccination.

(B) The healthcare professional's written opinion for post-exposure evaluation and follow-up is limited to a statement that the employee was:

(i) informed of the results of the evaluation; and
(ii) told about any medical conditions resulting from exposure to blood or other potentially infectious materials that require further evaluation or treatment.

(f) **Communication of hazards.** Warning labels on containers used for blood or other potentially infectious materials are marked BIOHAZARD. The labels are fluorescent orange or orange-red with lettering and symbols in contrasting color. Red bags or red containers may be substituted for labels.

(g) **Information and training.** All employees with occupational exposure participate in a training program that is provided at no cost during working hours. The person conducting the training is knowledgeable in the subject matter as it relates to the workplace. Training provided to employees at the time of initial assignment to tasks where occupational exposure may take place and at least annually thereafter includes:

1. A copy of the federal bloodborne pathogen standard per Section 1910.1030 of Title 29 of the Code of Federal Regulations (CFR) [29 CFR 1910.1030];
2. A general explanation of the epidemiology and symptoms of bloodborne diseases;
3. An explanation of the modes of transmission of BBP;
4. An explanation of the OKDHS BBP Exposure Control Plan and a means by which the employee can obtain a copy of the written plan;
5. An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials;
6. An explanation of the use and limitations of methods that will prevent or reduce exposure, including appropriate engineering controls, work practices, and PPE;
7. Information on the types, proper use, location, removal, handling, decontamination, and disposal of PPE;
8. An explanation of the basis for selection of PPE;
9. Information on HBV vaccine, including efficacy, safety, method of administration, benefits of being vaccinated, and that the vaccine and vaccination are offered free of charge;
(10) information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials;

(11) an explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that is available;

(12) information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident;

(13) an explanation of the required signs and color coding on labels; and

(14) an opportunity for interactive questions and answers with the person conducting the training session.

(h) Medical records.

(1) OKDHS establishes and maintains for each employee with occupational exposure an accurate medical record that includes:

(A) a completed OSDH Form 207;

(B) a copy of the employee's HBV vaccination status report from the facility providing the vaccination;

(C) a copy of the results of examinations, medical testing, and follow-up procedures;

(D) a copy of the healthcare professional's written opinion; and

(E) a copy of the information provided to the healthcare professional.

(2) Medical records are:

(A) confidential and are not disclosed or reported to any person without the employee's express written consent, except as required by this Section or by law; and

(B) maintained at least for the duration of employment plus 30 years in accordance with 29 CFR 1910.1020.

(i) Training records.
(1) Employee training records are maintained at the local workplace for three years from the date on which training occurred and include:

(A) date of the training session;

(B) contents or summary of the training session;

(C) names and qualifications of persons conducting the training; and

(D) names and job titles of all persons who attend the training session; and

(2) Employee training records required by this Section are provided upon request for examination and copying to:

(A) the subject employee;

(B) anyone having written consent of the subject employee; and

(C) the Director and Assistant Secretary of Health and Human Services in accordance with 29 CFR 1910.1020.

(i) Sharps injury log.

(1) OKDHS maintains a sharps injury log to record percutaneous injuries from contaminated sharps. The information on the sharps injury log is recorded and maintained in such manner as to protect the confidentiality of the injured employee, and contains:

(A) the type and brand of device involved in the incident;

(B) the department or work area where the exposure incident occurred; and

(C) an explanation of how the incident occurred.

(2) The sharps injury log is maintained for the period required by 29 CFR 1904.
OKDHS:2-15-33. Management of exposures to blood or other body fluids [AMENDED AND RENUMBERED TO OKDHS:2-15-32]
PART 7. SAFETY MANAGEMENT

OKDHS:2-15-40. Purpose

Revised 9-15-07

(a) The purpose of this Part is to:

(1) develop a comprehensive emergency management program that seeks to mitigate the effects of a hazard;

(2) establish a safety training program that preserves life and minimizes damage; and

(3) monitor the effectiveness of the program ensure persons provide and receive services safely.

(b) These regulations identify the roles, responsibilities, and actions required to mitigate, prepare for, respond to, and recover from the effects of hazards and emergencies. The Support Services Division Risk and Safety Management Unit is responsible for the consolidated and centrally administered system of risk management activities under the direction of the Oklahoma Department of Human Services (OKDHS) risk manager.
OKDHS:2-15-41. Definitions

Revised 9-15-07

The following words and terms, when used in this Part, shall have the following meanings, unless the context clearly indicates otherwise:

"Emergency operations plan" means the Oklahoma Department of Human Services (OKDHS) plan for continuing operations that each office or facility develops and maintains with information unique to that location. The OKDHS emergency operations plan is maintained by the Information Security Office on the InfoNet on the Information Security Web site.

"Hazard" means any existing or potential condition that can cause injury, illness, death of personnel, damage to or loss of equipment or property, or mission degradation.

"Mitigation" means activities that prevent the occurrence of an emergency or reduce the adverse impact of an emergency on a person, office, or facility.

"Preparedness" means activities and measures taken in advance to ensure effective response to the impact of hazards and includes:

(A) training;

(B) issuing timely and effective warnings; and

(C) temporarily evacuating people and property from threatened locations.

"Risk" means a measure of the probability that damage to life, health, or property will occur as a result of a given hazard.

"Safety coordinator" means the person designated to conduct safety and health activities in the workplace to ensure that preparedness and mitigation activities are ongoing in the office or facility.
**OKDHS:2-15-42. Mitigation**

Revised 9-15-07

Mitigation is the activities that prevent the occurrence or reduce the adverse impact of an emergency on a person, office, or facility and includes the long-term actions that lessen the undesirable effects of unavoidable hazards.

(1) **Inspections.** Safety and security inspections are conducted with assistance from the Support Services Division Risk and Safety Management Unit to identify potential hazards to comply with the Occupational Safety and Health Administration (OSHA) Department of Labor and Life Safety codes.

(2) **Drills.** Oklahoma Department of Human Services (OKDHS) offices and facilities conduct drills and simulations in conjunction with their OKDHS Emergency Operations Plan.

(3) **Monitoring.** The Risk and Safety Management Unit monitors OKDHS offices and facilities to ensure annual safety training is conducted, including at least one sheltering in-place drill and one outside evacuation drill.
**OKDHS:2-15-43. Preparedness**

Revised 9-15-07

Preparedness activities, including planning, training, and drills, are conducted per OKDHS:2-15-40 and OKDHS:2-15-42 to develop the response capabilities needed in an emergency.

(1) The local administrator or county director assigns an employee safety committee to assist in the development of emergency preparations.

(2) The Support Services Division Risk and Safety Management Unit consults with the local administrator or county director to ensure compliance with state and federal safety regulations.
OKDHS:2-15-44. Response [AMENDED AND RENUMBERED TO OKDHS:2-45-2]
OKDHS:2-15-45. Emergency operating plans [AMENDED AND RENUMBERED TO OKDHS:2-45-4]
OKDHS:2-15-46. Emergency operating plans general requirements [AMENDED AND RENUMBERED TO OKDHS:2-45-4]
OKDHS:2-15-47. Outside evacuation procedures [AMENDED AND RENUMBERED TO OKDHS:2-45-4]
OKDHS:2-15-49. Bomb threat - outside evacuation [AMENDED AND RENUMBERED TO OKDHS:2-45-4]
OKDHS:2-15-52. Workplace violence

Revised 9-15-07

(a) Policy. The Oklahoma Department of Human Services (OKDHS) promotes a safe workplace environment for employees. Violence, threats of violence, harassment, intimidation, and other disruptive behavior is prohibited.

(1) An employee who inflicts physical or emotional harm, threatens to harm, or intentionally damages the property of other employees, volunteers, clients, or vendors is disciplined per OKDHS regulations and may be referred for criminal prosecution.

(2) Discipline for violation of this Section may include discharge from employment and other penalties as provided by law.

(b) Definitions. The following words and terms, when used in this Section, shall have the following meanings, unless the context clearly indicates otherwise:

(1) "Covert violence" means menacing actions, such as:

   (A) stalking;

   (B) blocking passage;

   (C) making indirect or veiled threats; or

   (D) displaying a weapon or object that can be used as a weapon in an offensive or threatening manner.

(2) "Overt violence" means:

   (A) an illegal or criminal act whose purpose or effect is to inflict harm;

   (B) a deliberate act that results in physical harm to another;

   (C) deliberately touching another without consent;

   (D) deliberately damaging property of an OKDHS employee, volunteer, client, or vendor;

   (E) a physical or verbal act of aggression that causes another to experience
continuing emotional distress, could be reasonably expected to cause emotional distress in others, and does not have a legitimate purpose; or

(F) a verbal or nonverbal expression that communicates the intent to coerce or inflict harm.

(3) "Threat of violence" means the expression of intent to cause physical or emotional harm, regardless whether the party communicating the threat has the ability to carry it out. Threats of violence include written, verbal, or behavioral messages that explicitly or implicitly communicate or demonstrate intent to inflict harm or instill fear.

(4) "Universal precautions for violence" means preparations that avoid or mitigate violence and, at a minimum, include establishing "employee only" areas in each facility or office.

(A) Persons not assigned duties in those locations are denied entry unless given advance approval by the local administrator or county director. Designated employees for the facility or office issue passes in writing.

(B) Entrances and exits are clearly posted "Employees Only."

(5) "Violence" means an act or threat where there is potential for the infliction of physical or emotional harm to an actual or intended target that includes, but is not limited to OKDHS property or the person or property of an OKDHS employee, volunteer, client, or vendor.

(6) "Weapon" means a club, knife, gun, or other device or instrument that has potential or is intended to be used to commit violence.

(7) "Workplace" means a location, site, or locality where one or more OKDHS employees are present while on duty, and includes, but is not limited to, OKDHS offices, client residences, or areas where OKDHS employees perform assigned work duties.

(8) "Workplace violence" means an act or threat of violence by a person that occurs at, or directly affects, the workplace.

(c) **Weapon possession.** Weapons of any kind are prohibited in OKDHS offices and break areas under OKDHS partial or total control, management, supervision, or responsibility.
(1) **Posted notice.** Signs are posted at each entrance into all OKDHS offices and facilities stating, "No weapons are allowed."

(2) **Concealed weapons.**

   (A) Concealed weapons carried by any person having a valid concealed handgun license pursuant to Section 1277 of Title 21 of the Oklahoma Statutes are prohibited.

   (B) Properly authorized weapons carried by certified police, security officers, or OKDHS commissioned investigators are not prohibited.

(3) **Violation.** Unauthorized possession, display, or use of a weapon by an OKDHS employee inconsistent with OKDHS regulations is considered an act or threat of violence and responded to in accordance with OKDHS regulations.

(d) **Local response plans.** When there is an act or threat of violence, such as a report of a bomb or hostage, the OKDHS office or facility activates the Emergency Operations Plan. All acts or threats of violence are responded to in accordance with OKDHS regulations.

   (1) All employees have a duty and responsibility to immediately make a verbal report of any act or threat that constitutes or could result in workplace violence.

   (2) All employees who acquire knowledge of violence in the workplace are responsible for providing, by e-mail or memo, a narrative report to the local administrator or county director prior to the end of the shift or workday, outlining who, what, when, where, and how.

(f) **Investigation.** The local administrator or county director promptly investigates and reports all incidents using Form 23RS008E, Workplace Violence Incident Checklist, to the Support Services Division (SSD) Risk and Safety Management Unit risk manager and Human Resources Management Division (HRMD) director.

   (1) Appropriate responses are immediately initiated. Responses may include:

      (A) contacting local law enforcement;

      (B) providing the employee written notification to cease and desist;

      (C) applying corrective discipline;
(D) referring employee for fitness for duty medical examination;

(E) referring employee to Employee Assistance Program (EAP); or

(F) applying extraordinary security measures.

(2) The Risk and Safety Management Unit conducts a thorough investigation of all incidents.

(3) Duties of any employee under investigation for a workplace violence incident are suspended in accordance with Merit Rule:

(A) OAC 530:10-15-50 which provides up to 32 hours of administrative leave as a cooling off period; or

(B) OAC 530:10-11-120 which provides that permanent employees may be suspended with pay for up to 20 working days for internal investigation until the matter has been fully investigated.

(g) Duty to warn.

(1) A supervisor who has knowledge of an impending act or threat of violence must immediately notify the targeted employee and take all reasonable actions possible to prevent in accordance with OKDHS regulations.

(2) An employee who has knowledge of an impending act or threat of violence and fails to report it is subject to disciplinary action.

(3) An employee who has applied for or obtained a protective order must immediately notify the supervisor. The supervisor facilitates enforcement of the order within the employee's workplace for the protection of the affected employee and others in the workplace.

(h) Responding. The response to an act or threat of violence is described in this subsection.

(1) Informal. Invalid threats of violence may be responded to informally by the local administrator or county director. Consultation with the OKDHS Crisis Management Team (Team) is optional, as determined by the local administrator or county director.

(A) The response may include any level of progressive discipline deemed
(B) All involved parties are referred to EAP.

(2) **Formal.** Acts of workplace violence or valid threats of workplace violence, for which there is a reasonable expectation that the threat could result in harm to others, are responded to formally.

(A) The local administrator or county director:

(i) takes immediate steps to ensure the safety of the workplace and employees, volunteers, clients, or vendors; and

(ii) notifies the OKDHS risk manager and HRMD director.

(B) Local or state law enforcement is requested to respond to any act of violence or threat of violence, when deemed appropriate by the local manager.

(C) The employee who commits the act or threat of violence is removed from the workplace in accordance with Merit Rule OAC 530:10-15-50.

(i) Merit Rule OAC 530:10-15-50 provides an employee up to 32 hours of administrative leave as a cooling off period.

(ii) Merit Rule OAC 530:10-11-120 provides that a permanent employee may be suspended with pay for up to 20 working days for internal investigation.

(D) The local administrator or county director and HRMD director determine the personnel actions taken when an employee commits an act or threat of violence.

(E) An employee who commits an act or threat of violence is not permitted to return to work without the joint approval of the Team and the appropriate executive team member.

(i) **Notification.** The target of the threat of violence is immediately notified verbally and in writing on OKDHS letterhead of the nature and severity of the threat and the precautions implemented by OKDHS in response to the incident. An employee who remains at risk as a result of an act or threat of violence is advised of any continuing harm and the steps taken to mitigate risk. The local administrator or county director:
(1) notifies the target of the threat of violence of the actions taken to correct the behavior of the perpetrator. The written notification:

(A) is sent to the target within five working days after the incident is addressed; and

(B) does not include confidential information or information that is considered sensitive or protected under an employee's rights to privacy as provided for under federal, state, or OKDHS laws, rules or regulations; and

(2) sends a copy of the written notification to the OKDHS risk manager and the HRMD director within five working days after the incident occurred.

(j) Fitness for duty medical examination. An employee whose behavior constitutes a serious threat to others at work may be required to submit to a mental health examination to determine current fitness for duty. The affected local administrator or county director consults with the Team to make this determination. When the Team determines a fitness for duty medical examination is required, the risk manager completes Form 23RS009E, Request for Fitness for Duty Medical Examination.

(1) The employee referred for fitness for duty medical examination must sign Form 23RS010E, Order for Fitness for Duty Medical Examination.

(2) OKDHS pays the costs of the fitness for duty medical examination when OKDHS requires the employee to be evaluated by a psychologist or physician selected by OKDHS. With OKDHS approval, the employee may select the psychologist or physician and must pay all costs incurred.

(3) Failure of the affected employee to comply with the examination or cooperate with the evaluator will be deemed insubordination and is grounds for disciplinary action, up to and including discharge.

(k) Training.

(1) The Risk and Safety Management Unit assists divisions in training workshops on workplace violence that include, at minimum:

(A) universal precautions for violence;

(B) OKDHS workplace violence prevention policy;

(C) policies and procedures for field safety;
(D) recognizing and managing escalating hostile behavior;

(E) reporting and recordkeeping; and

(F) policies and procedures for obtaining medical care, Workers' Compensation, or legal assistance after a violent incident.

(2) Each division is responsible for providing all employees with workplace violence OKDHS policy upon entry on duty. Divisions present refresher workplace violence training to all staff annually.

(l) OKDHS Crisis Management Team (Team). The Team:

(1) provides overall guidance to OKDHS in responding to safety concerns and acts or threats of workplace violence;

(2) serves as a resource to OKDHS in the implementation of the workplace violence reduction program;

(3) may address specific issues or acts or threats of workplace violence to ensure employee, volunteer, client, and vendor safety and continued compliance with regulations in this Part;

(4) consists of:

   (A) the OKDHS risk manager, who is the Team chairperson and makes appointments to the Team;

   (B) the HRMD director;

   (C) the OKDHS Legal Division general counsel or designee;

   (D) a representative from the affected office or facility; and

   (E) other persons serving as a resource to the Team;

(5) membership list is posted on the Risk and Safety Management Unit Web site;

(6) meets:

   (A) quarterly;
(B) in response to an incident upon request of the local administrator or county director; and

(C) as requested by an Executive Team member or designee;

(7) makes recommendations regarding a workplace incident, including:

(A) fitness for duty;

(B) conditions and requirements for return to work;

(C) referral to EAP;

(D) referral for mediation;

(E) debriefing; and

(F) ongoing workplace safety;

(8) consults with and serves as a resource to OKDHS by:

(A) reviewing incidents;

(B) identifying trends;

(C) developing prevention plans;

(D) providing training; and

(E) making recommendations for program improvement to executive staff; and

(9) collects, compiles, and reports data annually to the OKDHS Director. The annual report includes a summary of the incidents that occurred, actions taken, and recommendations.