Workplace Violence, After Care Checklist

Employee:

Name______________________________

1. Notify Charge Nurse
2. Call Nurse Care Line:
3. Fill out Employee Injury Report Form

Charge Nurse:

☐ Employee Called Care Line
☐ Employee completed Injury Report Form
☐ Supervisor & Manager Notified (email if no injury, phone call if injury)
☐ Security Notified
☐ Debriefing Held (victim, witnesses, other involved staff)
☐ Follow up Packet Given
☐ Peer Advocate Called

Once the above steps have been completed please put form in mailbox of (ED Supervisor)

Supervisor/Manager:

☐ Employee Health Notified
☐ Employee Contacted within 48 hours
☐ Employee Contacted at 2 weeks
☐ Employee Contacted at 60 days