

WORKPLACE VIOLENCE PREVENTION



Workplace Violence?

Any act or threat of physical violence, harassment, verbal abuse, intimidation, or other threatening disruptive behavior that occurs at the work site.

This can affect and involve employees, clients, customers, vendors, and visitors.

Why are you at risk?

- We work directly with a variety of people from the public.
- We typically handle cash payments.
- Time of day and location of work
- We work in an environment where alcohol is served.

Reducing Workplace Violence Hazards

- Keep cash register closed when not in use
- Do not count cash in front of customers
- During the night, all employees should leave the workplace at the same time. Use the "buddy system" when walking outside in the dark.
- Report and log incidents of any threats or violence
- Keep the back doors locked unless necessary
- When dealing with a unsatisfied customer, always try to deescalate the situation as quickly as possible
- Enter tips as often as possible

(Tip Jar) Theft

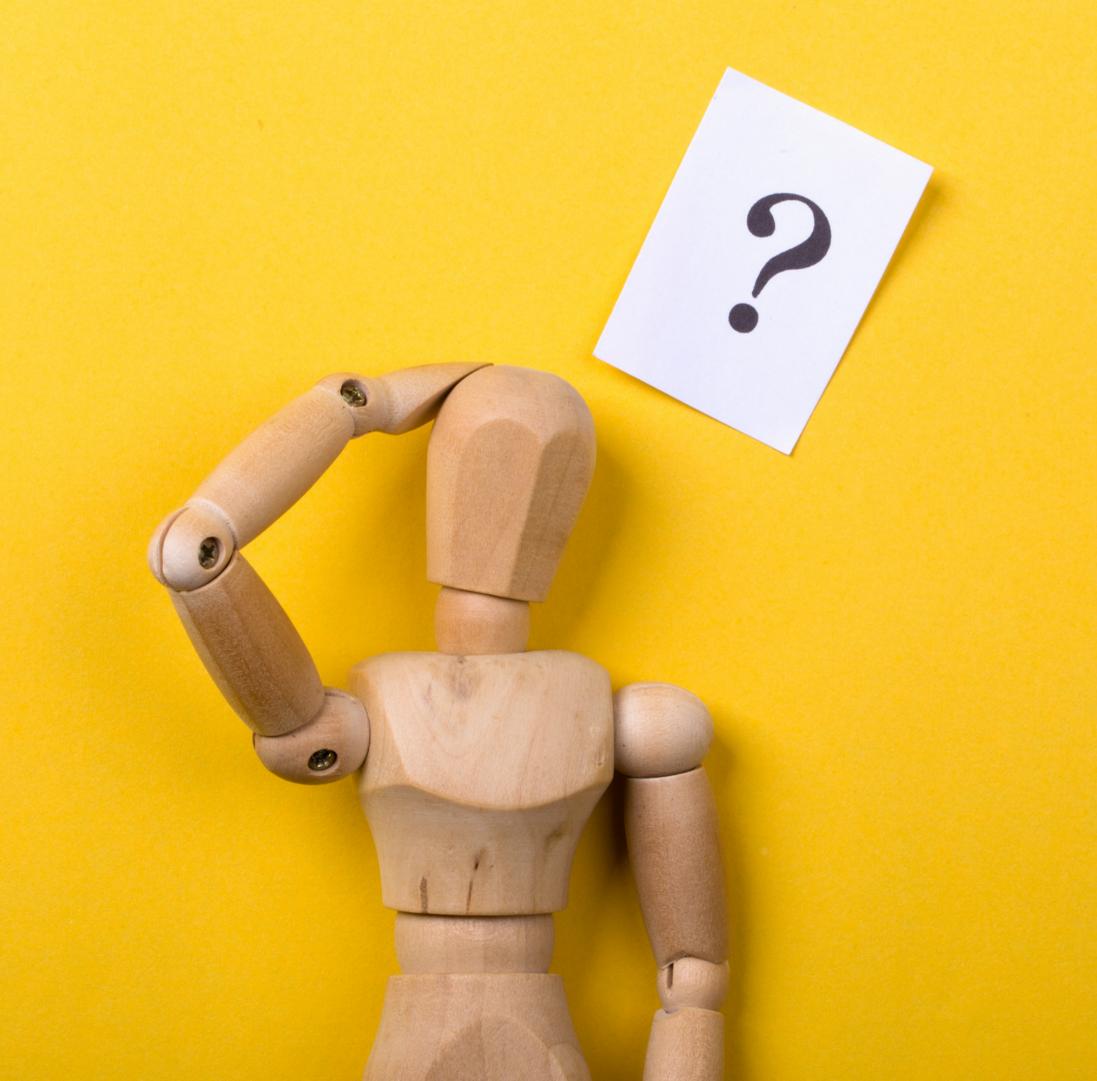
- Theft, specifically tip jar theft can happen
- Never chase after the thief if theft does occur
 - This could lead to significant injuries to yourself and other
 - YOUR safety should always come first
- How to AVOID: Have no more than \$10 in the tip jar
 - More than \$10 in the tip jar? --> enter cash tips into Toast and place them into the till
 - Try to enter cash tips into Toast as often as possible to reduce theft



Guest Confrontation/Conflict

- 911 is ALWAYS an option when things get out hand, especially when YOUR safety is in jeopardy
- How to DE-ESCALATE Conflict:
 - On't let your emotions get in the way & don't play the blame game
 - Let the customer vent while actively listening to their concerns
 - Apologize
 - Sympathize with positive language
 - Try and find a solution







Any safety, health or hazard issues at any of your locations?

Quarterly Walkthrough Checklist



WALK THROUGH CHECKLIST

COMPLETE QUARTERLY (MAR, JUNE, SEP, DEC)

At the end of the quarter (March, June,
September, December), a quarterly
walkthrough will be completed using this
checklist with a Support Team Member and a
safety committee representative at each
location.

Safety Committee Quarterly Walkthrough Checklist

This Safety Committee Quarterly Walkthrough Checklist is designed to help assist your organization identify and initiate corrective actions for physical hazards that could result in employee injury. For the best results, a formal walkthrough of your store, using this checklist form as a guide, should be conducted at once quarterly by a support member and an employee representative of the safety committee. This form is a guide and can be modified to fit your specific needs or hazards at your specific store.

Store Location:	Date:
Safety Committee Representative:	
Support Member:	

Directions: Please indicate with a $\sqrt{}$ under the "Y" or "N" column for each item inspected and "N/A" if the item is not applicable. Please place a $\sqrt{}$ under the "corrective actions" column if corrective actions are needed or if they have already been implemented immediately. Please complete the "Corrective Actions Follow-Up" section on the last page of this inspection report for all action items containing a $\sqrt{}$ under the "corrective actions" column. Once all corrective actions have been completed, this report should be maintained in a master file for future analysis.

FLOOR & WALKING SURFACES	Υ	N	N/A	CORRECTIVE ACTIONS
Are ALL employees wearing slip-resistant footwear?				
Are the floor surfaces at the stores entrances in good condition?				
Are the floor surfaces in the main dining areas in good condition?				
Are any floor mats in good condition? (edges not rolled up)				
Is lighting adequate in all areas of the store (inside and outside)?				
Are pathways to exits clear of obstructions, trash, etc.?				
Are cleaning agents used appropriate for the job task?				
Are primary walkways clear of obstructions such as boxes, bun racks, materials, or other tripping hazards?				
Are the floor surfaces in the kitchen areas in good condition?				

Have a Safety Concern?

LITTLE BIG BURGER

REPORT CONCENS

HOW CAN WE IMPROVE SAFETY?

See something. Say something. All LBB employees have a voice. Please click here to report any safety concerns or ways to improve safety in the workplace.

Incident Reporting:

- Form can be filled out online at WeAreLBB.com
- Who can submit a form \rightarrow ANYONE
- Possible examples of when it should be completed:
 - First Aid of any kind is administered (even the smallest injuries should be documented)
 - Injury of a guest or employee on the property
 - Someone being ejected from the property or if they make a threat
 - Possible crime has been committed (ex. theft or harassment)
 - Property damage (company-owned or property owned by guest, vendor, or employee)



Safety Committee Meeting Notes

SAFETY COMMITTEE

MEETING MINUTES

COMPLETE AFTER EVERY SAFETY COMMITTEE MEETING

After each monthly safety committee meeting, members should complete this brief form to record meeting notes and to report any safety concerns that require corrective action.

Date: today's meeting ____ / ___ / _____ Attending Absent

Minutes from my safety committee

Include any safety or health issues that you talk about. Include red involving tools, equipment, the work environment, and work practi	•
Recommendations for correcting hazards Include recommendations for correcting hazards and reasonable	deadlines for management to respond
Recommendations	Deadline for response