



STATE OF WASHINGTON
DEPARTMENT OF CORRECTIONS

APPLICABILITY
DEPARTMENT WIDE

REVISION DATE
9/30/22

PAGE NUMBER
1 of 5

NUMBER
DOC 830.180

POLICY

TITLE
ASSAULT BENEFITS FOR EMPLOYEES

REVIEW/REVISION HISTORY:

Effective: 7/27/01
Revised: 5/11/07
Revised: 8/23/09
Revised: 1/24/11
Revised: 7/1/15
Revised: 5/7/18
Revised: 4/22/21
Revised: 9/30/22

SUMMARY OF REVISION/REVIEW:

II.D.1., II.D.1.a., and IV.A.1. - Adjusted duties from Secretary to Deputy Secretary


APPROVED:

Signature on file

CHERYL STRANGE, Secretary
Department of Corrections

9/29/22

Date Signed

 <p>STATE OF WASHINGTON DEPARTMENT OF CORRECTIONS</p> <p>POLICY</p>	APPLICABILITY DEPARTMENT WIDE		
	REVISION DATE 9/30/22	PAGE NUMBER 2 of 5	NUMBER DOC 830.180
	TITLE ASSAULT BENEFITS FOR EMPLOYEES		

REFERENCES:

DOC 100.100 is hereby incorporated in this policy; [RCW 34.05](#); [RCW 51](#); [RCW 72.09](#)

POLICY:

- I. The Department has a process to supplement current income and benefits, in coordination with an approved Department of Labor and Industries (L&I) workers' compensation claim, for employees recovering from an injury sustained in an assault by an individual(s) under the Department's jurisdiction while performing their official duties, including assaults during use of force.


DIRECTIVE:

I. General Requirements

- A. To be eligible for assault benefits, the following must have occurred per RCW 72.09.240:
 1. An individual(s) under the Department's jurisdiction assaulted the employee and, as a result, the employee sustained injuries that have required the employee to miss one or more days of work.
 2. The assault is not attributed, to any extent, to the employee's negligence, misconduct, or failure to comply with any rules or conditions of employment.
 3. The assault occurred while the employee was performing official duties.
 4. The employee has been approved for L&I workers' compensation benefits per RCW 51.32 for an injury related to the assault.
 5. A report has been submitted in the Incident Management Reporting System (IMRS).

II. Application Process

- A. Eligible employees may apply for assault benefits by submitting an application packet to their local/designated Human Resources office within 60 business days of the assault. An additional 60 business days may be allowed if the application cannot be reasonably submitted within that period.
 1. The packet will include:
 - a. DOC 03-133 Accident/Injury Report,

 <p>STATE OF WASHINGTON DEPARTMENT OF CORRECTIONS</p> <p>POLICY</p>	<p>APPLICABILITY DEPARTMENT WIDE</p>		
	<p>REVISION DATE 9/30/22</p>	<p>PAGE NUMBER 3 of 5</p>	<p>NUMBER DOC 830.180</p>
	<p>TITLE ASSAULT BENEFITS FOR EMPLOYEES</p>		

- b. DOC 03-188 Application for Assault Benefits,
- c. DOC 21-424 Use of Force Report or DOC 21-984 Community Corrections Use of Force Report, as appropriate,
- d. Copy of the IMRS report, and
- e. Other supportive information to be considered (e.g., videotapes).

2. If the employee is unable to complete the application, the employee's supervisor may initiate the process.

B. The local/designated Human Resources office will forward the application through the employee's chain of command.

C. The Appointing Authority and Assistant Secretary/designee will approve or deny the request within 30 business days after receipt of the completed application packet, unless additional information is needed.

D. The employee will be notified in writing of the decision and the right to appeal.

1. If the request is denied, the employee may file a written appeal with the Deputy Secretary. The appeal must be filed with the local/designated Human Resources office within 10 business days from the date of denial and specify why the application should be granted.

a. The Deputy Secretary will respond within 20 business days from the date the appeal was received unless additional information is needed.

III. Conditions of Reimbursement


A. Assault benefits authorized by the Department will not continue longer than the date of termination of time loss benefits by L&I or 365 consecutive days from the date of injury, whichever is later.

B. Reimbursement payments will be made by the Department per RCW 72.09.240 for each workday missed due to an assault as follows:

1. The employee will receive full pay for each workday the employee is not eligible to receive workers' compensation benefits.

2. If the employee receives workers' compensation benefits, the employee will:

a. Receive full pay, less any workers' compensation benefits, or

 <p>STATE OF WASHINGTON DEPARTMENT OF CORRECTIONS</p> <p>POLICY</p>	APPLICABILITY DEPARTMENT WIDE		
	REVISION DATE 9/30/22	PAGE NUMBER 4 of 5	NUMBER DOC 830.180
	TITLE ASSAULT BENEFITS FOR EMPLOYEES		

b. Receive full pay and remit the workers' compensation benefits to the Department's Business Office.

3. The employee will not receive greater than 100 percent of the employee's base salary, unless overpayment is the result of using accumulated annual leave, holiday leave, compensatory time, or exchange time.

C. While the employee is receiving assault benefits, the employee will:

1. Continue to be classified as a state employee and receive full service credit, and

2. Accrue full annual leave, full sick leave, and workers' compensation benefits.

D. The employee may elect to use accrued sick leave until a decision has been made on the application, provided the employee will return any overpayments to the Department.

1. When the employee's application for assault benefits has been approved, accumulated sick leave hours will not be reduced for any workdays missed due to the assault, provided the employee has returned any overpayments to the Department.

2. If the employee fails to return any overpayments to the Department, sick leave hours will be reduced proportionate to the overpayment.


E. The employee will be entitled to assault benefits only for absences that the Appointing Authority believes are justified.

F. The employee will not be entitled to assault benefits for any workday the Department finds the employee did not diligently pursue worker's compensation benefits.

G. If medical questions arise, at the request and expense of the Department, the employee will submit to an independent medical examination by a licensed physician or other licensed health care provider designated by the Department to determine whether the employee may continue to receive assault benefits.

IV. Appeals Regarding Collection of Overpayments

A. If a dispute arises concerning any amount of overpayment to be repaid to the Department, the employee may request a hearing per RCW 34.05.

 <p>STATE OF WASHINGTON DEPARTMENT OF CORRECTIONS</p> <p>POLICY</p>	APPLICABILITY DEPARTMENT WIDE		
	REVISION DATE 9/30/22	PAGE NUMBER 5 of 5	NUMBER DOC 830.180
	TITLE ASSAULT BENEFITS FOR EMPLOYEES		

1. The employee will submit a written appeal to the Deputy Secretary. The appeal must be filed with the local/designated Human Resources office within 30 business days after the dispute arises.

DEFINITIONS:

The following words/terms are important to this policy and are defined in the glossary section of the Policy Manual: Assault, Injury. Other words/terms appearing in this policy may also be defined in the glossary.

ATTACHMENTS:

None

DOC FORMS:

- DOC 03-133 Accident/Injury Report
- DOC 03-188 Application for Assault Benefits
- DOC 21-424 Use of Force Report
- DOC 21-984 Community Corrections Use of Force Report