HARASSMENT PREVENTION PROGRAM (HPP) PROCEDURES

1. REASON FOR ISSUE: To establish policy for consistent processing of allegations of harassment and Sexual Harassment within the Department of Veterans Affairs (VA). This handbook provides guidance, instructions and mandatory procedures for VA organizations and key stakeholders at every level of the organization.

2. SUMMARY OF CONTENTS/MAJOR CHANGES: This handbook introduces Agency-wide procedures for the Harassment Prevention Program at VA in accordance with the “Enforcement Guidance: Vicarious Employer Liability for Unlawful Harassment by Supervisors” from the Equal Employment Opportunity Commission (EEOC). This guidance requires Federal agencies to establish a harassment prevention policy and procedures that cover all protected bases of discrimination. It sets forth procedures for addressing allegations of harassing behavior in accordance with EEOC guidance.

This handbook also introduces Agency-wide procedures for responding to harassment and sexual assault allegations by and against non-department individuals in accordance with the Johnny Isakson and David P. Roe, M.D., Veterans Health Care and Benefits Improvement Act of 2020, Title V, Deborah Sampson, Subtitle III, Eliminating Harassment and Assault, Section 5303 (Pub. L. 116-315). This handbook will be maintained on the VA Publications website.

3. RESPONSIBLE OFFICE: Office of Resolution Management, Diversity & Inclusion (ORMDI) (08).


5. RESCISSIONS: None.

CERTIFIED BY: 

/s/ Guy T. Kiyokawa
Assistant Secretary for Enterprise Integration

/s/ Gina M. Grosso
Assistant Secretary for Human Resources and Administration/Operations, Security and Preparedness

BY DIRECTION OF THE SECRETARY OF VETERANS AFFAIRS:
HARASSMENT PREVENTION PROGRAM (HPP) PROCEDURES

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HARASSMENT PREVENTION PROGRAM (HPP) PROCESSING PROCEDURES

1. PURPOSE. This handbook establishes the roles, responsibilities and procedures for reporting harassment allegations within VA, in accordance with VA Directive 5979, HPP. It ensures the consistent processing of allegations of harassment for all VA facilities.

2. SCOPE. This handbook provides mandatory procedures and processes necessary to address, prevent and report all allegations of harassment in VA. The procedures and processes established herein are mandatory and apply to all harassment allegations.

3. BACKGROUND. In 2016, EEOC mandated that all Federal agencies establish a stand-alone Harassment Prevention office. The Office of Resolution Management, Diversity & Inclusion (ORMDI) established the Anti-Harassment Prevention office, later changed to the Harassment Prevention Program (HPP) office.

4. RESPONSIBILITIES.
   a. Assistant Secretary for Human Resources and Administration/Operations, Security and Preparedness (AS HRA/OSP), along with the responsibilities in Para c, shall:
      (1) Designate the Deputy Assistant Secretary (DAS) of the Office of Resolution Management, Diversity & Inclusion (ORMDI) as the Responsible Agency Official for the Harassment Prevention Program.
      (2) Support the effective implementation of the VA Equal Employment Opportunity, Diversity and Inclusion, NO FEAR, Whistle-blower Rights and Protection Policy Statement.
   b. Under Secretaries, Assistant Secretaries and Other Key officials shall:
      (1) Ensure all employees are aware of the HPP Policy, VA Directive 5979 and that this handbook is available to employees who do not have access to a computer.
      (2) Appoint a National Harassment Prevention Lead (NHPL) for the Administrations (Veterans Health Administration (VHA), Veterans Benefits Administration (VBA) and National Cemetery Administration (NCA). This position can be a collateral duty position; however, it is recommended that the NHPL be a full-time dedicated position. This position will serve as the National Point of Contact (POC) for harassment and sexual harassment reporting for their respective Administration.
      (3) Ensure all Staff Offices designate a Harassment Prevention Coordinator (HPC) to receive all reports of harassment. This can be a collateral duty position.
Require each facility to designate a point of contact (these positions may be collateral duty positions) to receive reports of harassment, sexual harassment and sexual assault from Veterans and visitors in compliance with the Deborah Sampson Act (P.L. 116-315, Section 5303). The Administrations and Staff Offices are required to have:

(a) At least one individual, in addition to law enforcement, at each facility including Veteran Centers.

(b) At least one individual at each Veterans Integrated Service Network (VISN).

(c) At least one individual at each Regional Benefits Office.

(d) At least one individual at each NCA district office.

(e) At least one individual at each headquarters Staff Office.

Ensure harassment prevention programs within their respective areas are compliant to this policy.

Review and sign a supplemental harassment prevention policy for Administrations or Staff Offices. A supplemental policy is not required, however if created, the policy must comply with this handbook and VA Directive 5979 and include the following:

(a) A process for employees and contractors of the Department to respond to reported incidents of harassment and sexual assault committed by any non-Department individual within a facility of the Department, including accountability actions such as no contact/stay away orders.

(b) A process for any non-Department individual (any visitor to a VA facility or Staff Office who is not an employee, contractor or Veteran who receives care or services from the VA) to report harassment and sexual assault.

(c) Clear mechanisms for non-Department individuals to readily identify to whom and how to report incidents of harassment and sexual assault committed by another non-Department individual.

(d) Clear mechanisms for employees and contractors of the Department to readily identify to whom and how to report incidents of harassment and sexual assault and how to refer non-Department individuals with respect to reporting an incident of harassment or sexual assault.
(e) Establish a reporting process for any employee or contractor of the Department who witnesses harassment or sexual assault within a facility committed by or against a non-Department individual.

(f) Consider corrective actions for employees or contractors of the Department who witness and fail to report incidents of harassment and sexual assault committed by or against a non-Department individual.

(7) Ensure each facility that experiences five or more incidents of substantiated sexual harassment, sexual assault, or a combination thereof, during any single fiscal year develop a remediation plan to remedy or prevent these findings in the future or improve environmental conditions.

(a) Remediation plans require two levels of approval, the Facility or Staff Office Director and Network/Regional/Executive Director or other applicable key officials.

(b) Approved remediation plans must be submitted to the ORMDI HPP office within five business days after second level approval.

(c) Updates and status of the facility’s plans must be provided to the Agency HPP office and applicable Under Secretaries, Assistant Secretaries and Other Key officials office quarterly. To view a remediation plan template, visit www.va.gov/ORMDI/HPP.asp.

c. Deputy Assistant Secretary of the Office of Resolution Management, Diversity & Inclusion shall:

(1) Provide executive leadership, general oversight and support to the HPP and ensure that its functions remain separate and distinct from Equal Employment Opportunity (EEO) complaint processing functions.

(2) Designate an ORMDI Program Manager to oversee the Harassment Prevention Program.

(3) Develop and oversee VA-wide policy for processing harassment allegations.

(4) Provide an electronic case management system and a call center to receive harassment allegations from VA employees and managers.

(5) Ensure that an Agency-wide training program is established and maintained to address and prevent harassment within the VA.

(6) Verify that VA Directive 5979 and this Handbook are posted on VA Publications Website and ORMDI HPP Website and distributed via email through mass distribution to all employees annually.
d. The VA Sexual Harassment and Assault Prevention/Survivor Care and Support Sub-Council Governance shall:

(1) Compile and share agency harassment and sexual assault prevention best practices across all Administrations and Staff Offices.

(2) Coordinate the Agency’s world-class harassment initiatives across the enterprise to ensure a unified approach in addressing sexual harassment, sexual assault, survivor care, and interpersonal violence.

e. The ORMDI Program Manager (Chief, Harassment Prevention Program) shall:

(1) Develop and oversee the harassment prevention policy.

(2) Provide training and policy guidance to managers, supervisors and employees regarding the implementation and interpretation of this policy.

(3) Communicate the Harassment Prevention Policy and reporting procedures to all employees and contractors.

(4) Establish a collateral-duty Fact Finder Program and provide initial and refresher training for a Fact Finder Cadre. This group of volunteer factfinders will be responsible for conducting HPP investigations only.

(5) Collaborate with each Administration and Staff Office to ensure supplemental harassment prevention policies are consistent with this Handbook and VA Directive 5979. Supplemental policies must be reviewed and approved by the Harassment Prevention Program office. All supplemental policies must include harassment prevention and reporting procedures for non-Department individuals including Veterans.

(6) Ensure the Harassment Prevention Policy and reporting procedures are posted on policy and guidance websites throughout the Agency.

(7) Maintain and post a list of the Agency’s Harassment Prevention Coordinators (HPC) on the ORMDI website. Information shall include HPC email address, telephone number and local website (if applicable).

(8) Establish a centralized HPP complaint tracking system that will be the official system of record for tracking all harassment allegations. The tracking system will store reported harassment allegations, inquiries, reports, findings, actions taken and other pertinent documents in accordance with this policy.

(9) Provide non-compliance notifications and compliance reports to Under Secretaries and other key officials on the status of the harassment prevention programs within their respective program areas. Programs not
in compliance with this policy will be reported to the Secretary of VA quarterly.

(10) Conduct Harassment Prevention Program (HPP) Compliance Reviews for each facility that experiences five or more incidents of substantiated harassment, sexual harassment and sexual assault, or a combination thereof, during any single fiscal year. The compliance reviews will focus on each Administration and Staff Office within VA to ensure the Agency is meeting the VA's goal of a harassment-free work environment. The compliance review focus areas are:

(a) Leadership and accountability
(b) Program compliance
(c) Harassment prevention efforts
(d) Training and communication

(11) Establish and distribute harassment prevention program guidelines and conduct periodic program assessments for Administrations and Staff Offices.

f. VA Administration and Staff Office Managers/Supervisors shall:

(1) Take measures to prevent and address all forms of harassment in the workplace

(2) Ensure that harassment and sexual assault prevention signage include reporting procedures and points of contact and are prominently displayed.

(3) Ensure harassment allegations are acknowledged to the individual reporting the allegation within two business days from receipt of complaint.

(4) Appoint Harassment Prevention Coordinator(s) (HPC). The HPC will serve as the primary point of contact for receiving harassment allegations in their respective administration or staff office. The HPC can be a collateral duty position.

(5) Ensure that the facility HPC receives ORMDI HPP Coordinator training within 45 business days of their appointment to the position by contacting the ORMDI HPP office. Ensure employees receive a copy of this handbook and the associated VA Directive 5979 by email. These documents are available at: VA Publications Website and ORMDI HPP Website.

(6) Post HPP policy, directive, handbook and associated updates on the local facility website within 30 business days of distribution.
(7) Ensure that HPP training conducted at the facility or staff office level is reviewed and certified by ORMDI HPP office.

(8) Ensure all employees and contractors complete the annual mandatory Harassment Prevention and Accountability training course (VA 45224) in Talent Management System (TMS).

(9) Report sexual harassment allegations received by management that were not reported to ORMDI HPP office using VA Form 10221a. The completed form shall be submitted through the Sexual Harassment Intake Portal within two business days of receipt of the allegation.

(10) Immediately, but no later than five business days from the receipt of the complaint, address any allegations of harassment. Addressing allegations can include separating the parties, conducting factfinding, inquiry, Administrative Investigative Board (AIB), or issuing stay away/no contact order, etc. For additional guidance concerning inquiries, factfinding and administrative investigations refer to VA Handbook 0700.

(11) In the case of sexual harassment, separate the parties within one business day of the receipt of the allegation.

(12) Upon notification that a HPP case has been filed involving senior leaders, as defined in VA Directive 0500, management must also notify the Office of Accountability and Whistleblower Protection (OAWP).

(13) Ensure all managers and supervisors receive a minimum of an hour of factfinding training in a program approved by the Office of the General Counsel (OGC), which includes the one-hour video hosted on TMS, course number 4557027. Self-initiated factfinding are most common type of factfinding. In this process, the Factfinder and the Initiating Authority are the same individual. This type of factfinding is typically done by a first-line supervisor within their own business unit or office when they are not directly involved in the allegation.

(14) Designate 2-3 collateral duty factfinders to serve a voluntary 2-year appointment to conduct third-party initiated factfinding for the HPP; appointments may be renewed for a 2-year extension. All factfinders are required to complete a mandatory factfinding training within 45 days of appointment. See VA Handbook 0700 for specific guidance.

(15) Ensure allegations of inappropriate and harassing behavior are kept confidential. All information pertaining to a harassment claim must be maintained on a confidential basis. The maintenance of records and any disclosure of information from these records must be in complete compliance with the Privacy Act, Title 5 U.S.C. 552a. Such information can be disclosed on a need-to-know basis.
(16) Ensure all required documents (factfinding report and outcome memorandum/email) are provided to the ORMDI HPP office no later than 30 business days from the date of receipt of the complaint. For an example of a factfinding template go to ORMDI HPP Website.

(17) Follow-up with the individual who reported the allegation within three business days of the completion of the investigation. The individual who reported the allegation should not receive a copy of the factfinding report. Please direct the individual to the local Privacy Office for any Freedom of Information Act disclosure requests.

(18) Based on the outcome of the investigation, take prompt and appropriate personnel or other actions as identified by the investigation.

g. **Administration and Staff Office Human Resource Offices (HR)** shall:

   (1) Provide guidance and advice to employees and management to address harassment allegations.

   (2) Complete biannual HPP training provided by ORMDI HPP office specific to their roles in accordance with this policy.

h. **Administration/Staff Office National Harassment Prevention Lead (NHPL)** shall:

   (1) Upon receiving notification of harassment/sexual harassment allegations from the ORMDI HPP office, the NHPL will determine the appropriate HPC and assign the HPP case to the appropriate facility or staff office HPC.

   (2) Work with the HPC to ensure a prompt inquiry regarding reports of harassment.

   (3) Input, update and review information and records in HPP Complaint Tracking System.

   (4) Provide the ORMDI HPP office quarterly reports on harassment prevention program events, updates on open cases, remediation plans, training and other Administration/Staff Office activities and/or initiatives.

i. **Harassment Prevention Coordinator (HPC)** shall:

   (1) Serve as the primary point of contact to receive harassment allegations from their respective facility or staff office. This position may be a collateral duty position.

   (2) Coordinate with the ORMDI HPP office to ensure management is aware of allegations and ensure management timely addresses all allegations based on the timelines established by this handbook.
(3) Review, update and input all required information and records in the ORMDI HPP Complaint Tracking System related to reports of harassment.

(4) Notify management of all received harassment allegations from ORMDI HPP office or directly received by the HPC. Educate the individual reporting harassment on the next steps in the HPP process.

(5) Provide assigned fact finder the allegation details received from the ORMDI HPP Complaint Tracking System.

(6) Coordinate with the ORMDI HPP office on providing HPP awareness training to the workforce.

5. HARASSMENT REPORTING PROCEDURES.

a. All Department of Veterans Affairs employees and contractors are required to report unlawful harassment and public safety incidents to supervisory personnel and to facility law enforcement personnel when necessary as outlined below.

b. Managers and supervisors will be held accountable for failure to respond to harassment incidents once they are made aware of such an incident or witness such conduct regardless of whether the alleged harasser or the target of the harassment is an employee, contractor, a visitor to a VA facility or a Veteran. Disciplinary action is an accountability measure that can be used against those who failed to report harassment.

c. Employees and contractors who have been subjected to unwelcome conduct are encouraged to inform the person(s) responsible for the conduct that it is unwelcome and offensive. If the conduct continues or the individual is uncomfortable confronting the responsible person(s) regarding the conduct, the individual should report the matter to a VA official (VA Management official, HPC, ORMDI HPP office) immediately.

d. Employees and contractors are reminded that contacting the ORMDI HPP office does not prevent the individual from filing an EEO complaint nor does it mean the individual has filed an EEO complaint.

(1) If an individual elects to file an EEO complaint, they must contact an ORMDI EEO Counselor within 45 calendar days from the date of most recent incident of alleged harassment to initiate an EEO complaint.

(2) To contact an ORMDI EEO Counselor the individual should call 1-888-566-3982 and press Option # 2.

e. All employees and contractors should familiarize themselves with the tables on the following pages that outline the appropriate harassment reporting process:
# TABLE 5.1 VHA REPORTING PROCEDURES FOR INDIVIDUALS EXPERIENCING HARASSMENT

Note: Harassment can be reported to any of the points of contact in any order.

<table>
<thead>
<tr>
<th>If you are VA employee and the harasser is a VA employee or contractor contact:</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Agency Harassment Complaint (POC)</th>
<th>Agency Discrimination Complaint (POC)</th>
<th>Additional Reporting Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>Facility HPC</td>
<td>ORMDI HPP Office – Call 1-888-566-3982 select option 3</td>
<td>ORMDI EEO Counselor – Call 1-888-566-3982 select option 2</td>
<td>OAWP (visit <a href="https://oawp.va.gov/intake/">https://oawp.va.gov/intake/</a> for further guidance)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If you are VA employee and the harasser is a Veteran or Non-Department Individual contact:</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Agency Harassment Complaint (POC)</th>
<th>Agency Discrimination Complaint (POC)</th>
<th>Additional Reporting Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>Facility HPC</td>
<td>ORMDI HPP Office</td>
<td>ORMDI EEO Counselor</td>
<td>Submit Disruptive Behavior Reporting System (DBRS) entry</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If you are a Veteran Patient and the harasser is a VA employee or contractor contact:</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Agency Harassment Complaint (POC)</th>
<th>Agency Discrimination Complaint (POC)</th>
<th>Additional Reporting Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Advocate</td>
<td>VA Management Official</td>
<td>VA Police</td>
<td>ORMDI HPP Office</td>
<td>N/A</td>
<td>N/A</td>
<td>Submit DBRS entry</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If you are a Veteran Patient and the harasser is a Veteran Patient or Non-Department Individual contact:</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Agency Harassment Complaint (POC)</th>
<th>Agency Discrimination Complaint (POC)</th>
<th>Additional Reporting Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Advocate</td>
<td>VA Management Official</td>
<td>VA Police</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>Submit DBRS entry</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If you are a Student/Intern/Trainee and the harasser is a VA employee or contractor contact:</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Agency Harassment Complaint (POC)</th>
<th>Agency Discrimination Complaint (POC)</th>
<th>Additional Reporting Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>Facility HPC</td>
<td>ORMDI HPP Office</td>
<td>ORMDI EEO Counselor</td>
<td>Submit DBRS entry</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If you are a Student/Intern/Trainee and the harasser is a Veteran or Non-Department Individual contact:</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Agency Harassment Complaint (POC)</th>
<th>Agency Discrimination Complaint (POC)</th>
<th>Additional Reporting Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>Immediate Supervisor</td>
<td>VA Management Official</td>
<td>VA Police</td>
<td>ORMDI HPP Office</td>
<td>N/A</td>
<td>Submit DBRS entry</td>
<td></td>
</tr>
<tr>
<td>Non-Department Individual Contact:</td>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>Facility HPC</td>
<td>ORMDI HPP Office</td>
<td>ORMDI EEO Counselor</td>
<td>Contracting Office</td>
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</tr>
<tr>
<td>If you are a contractor and the harasser is a VA Employee or contractor contact:</td>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>Facility HPC</td>
<td>ORMDI HPP Office</td>
<td>ORMDI EEO Counselor</td>
<td>Contracting Office</td>
</tr>
<tr>
<td>If you are a contractor and the harasser is a Veteran or Non-Department Individual Contact:</td>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>Patient Advocate</td>
<td>ORMDI HPP Office</td>
<td>N/A</td>
<td>Contracting Office</td>
</tr>
</tbody>
</table>
## TABLE 5.2 VBA REPORTING PROCEDURES FOR INDIVIDUALS EXPERIENCING HARASSMENT

<table>
<thead>
<tr>
<th>Note: Harassment can be reported to any of the points of contact in any order.</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Agency Harassment Complaint (POC)</th>
<th>Agency Discrimination Complaint (POC)</th>
<th>Additional Reporting Option</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>If you are VA employee and the harasser is a VA employee or contractor contact:</strong></td>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>District HPC or NHPL</td>
<td>ORMDI HPP Office – Call 1-888-566-3982 select option 3</td>
<td>ORMDI EEO Counselor – Call 1-888-566-3982 select option 2</td>
<td>OAWP (visit <a href="https://oawp.va.gov/intake/">https://oawp.va.gov/intake/</a> for further guidance)</td>
</tr>
<tr>
<td><strong>If you are VA employee and the harasser is a Veteran or Non-Department Individual contact:</strong></td>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>District HPC or NHPL</td>
<td>ORMDI HPP Office</td>
<td>ORMDI EEO Counselor</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>If you are a Veteran beneficiary and the harasser is a VA employee or contractor contact:</strong></td>
<td>District HPC or NHPL</td>
<td>VA Management Official</td>
<td>VA Police</td>
<td>ORMDI HPP Office</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>If you are a Veteran beneficiary and the harasser is a Veteran beneficiary or Non-Department Individual contact:</strong></td>
<td>District HPC or NHPL</td>
<td>VA Management Official</td>
<td>VA Police</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>If you are a Student/Intern/Trainee and the harasser is a VA employee or contractor contact:</strong></td>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>District HPC or NHPL</td>
<td>ORMDI HPP Office</td>
<td>ORMDI EEO Counselor</td>
<td>N/A</td>
</tr>
<tr>
<td>If you are a Student/intern/Trainee and the harasser is a Non-Department Individual Contact:</td>
<td>District HPC or NHPL</td>
<td>VA Management Official</td>
<td>VA Police</td>
<td>ORMDI HPP Office</td>
<td>N/A</td>
<td>N/A</td>
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<tr>
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</tr>
<tr>
<td>If you are a contractor and the harasser is a VA employee or contractor contact:</td>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>District HPC or NHPL</td>
<td>ORMDI HPP Office</td>
<td>ORMDI EEO Counselor</td>
<td>Contracting Office</td>
</tr>
<tr>
<td>If you are a contractor and the harasser is a Veteran or Non-Department Individual Contact:</td>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>District HPC or NHPL</td>
<td>N/A</td>
<td>N/A</td>
<td>Contracting Office</td>
</tr>
</tbody>
</table>
### TABLE 5.3 NCA REPORTING PROCEDURES FOR INDIVIDUALS EXPERIENCING HARASSMENT

<table>
<thead>
<tr>
<th>Note: Harassment can be reported to any of the points of contact in any order.</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Agency Harassment Complaint (POC)</th>
<th>Agency Discrimination Complaint (POC)</th>
<th>Additional Reporting Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>If you are VA employee and the harasser is a VA employee or contractor contact:</td>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>District HPC or Cemetery Director</td>
<td>ORMDI HPP Office – Call 1-888-566-3982 select option 3</td>
<td>ORMDI EEO Counselor – Call 1-888-566-3982 select option 2</td>
<td>OAWP (visit <a href="https://oawp.va.gov/intake/">https://oawp.va.gov/intake/</a> for further guidance)</td>
</tr>
<tr>
<td>If you are VA employee and the harasser is a Veteran or Non-Department Individual contact:</td>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>District HPC or Cemetery Director</td>
<td>ORMDI HPP Office</td>
<td>ORMDI EEO Counselor</td>
<td>N/A</td>
</tr>
<tr>
<td>If you are a Veteran beneficiary and the harasser is a VA employee or contractor contact:</td>
<td>District HPC or Cemetery Director</td>
<td>VA Management Official</td>
<td>VA Police</td>
<td>ORMDI HPP Office</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>If you are a Veteran beneficiary and the harasser is a Veteran beneficiary or Non-Department Individual contact:</td>
<td>District HPC or Cemetery Director</td>
<td>VA Management Official</td>
<td>VA Police</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>If you are a Student/Intern/Trainee and the harasser is a VA employee or contractor contact:</td>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>District HPC or Cemetery Director</td>
<td>ORMDI HPP Office</td>
<td>ORMDI EEO Counselor</td>
<td>N/A</td>
</tr>
<tr>
<td>If you are a Student/intern/Trainee and the harasser is a Non-Department Individual Contact:</td>
<td>District HPC or Cemetery Director</td>
<td>VA Management Official</td>
<td>VA Police</td>
<td>ORMDI HPP Office</td>
<td>N/A</td>
<td>N/A</td>
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</tr>
<tr>
<td>If you are a contractor and the harasser is a VA employee or contractor contact:</td>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>District HPC or Cemetery Director</td>
<td>ORMDI HPP Office</td>
<td>ORMDI EEO Counselor</td>
<td>Contracting Office</td>
</tr>
<tr>
<td>If you are a contractor and the harasser is a Veteran or Non-Department Individual Contact:</td>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>District HPC or Cemetery Director</td>
<td>ORMDI HPP Office</td>
<td>N/A</td>
<td>Contracting Office</td>
</tr>
</tbody>
</table>
### TABLE 5.4 ALL OTHER VA FACILITIES AND STAFF OFFICE REPORTING PROCEDURES FOR INDIVIDUALS EXPERIENCING HARASSMENT

<table>
<thead>
<tr>
<th>Note: Harassment can be reported to any of the points of contact in any order.</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Local Point of Contact (POC)</th>
<th>Agency Harassment Complaint (POC)</th>
<th>Agency Discrimination Complaint (POC)</th>
<th>Additional Reporting Option</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>If you are VA employee and the harasser is a VA employee or contractor contact:</strong></td>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>HPC</td>
<td>ORMDI HPP Office – Call 1-888-566-3982 select option 3</td>
<td>ORMDI EEO Counselor – Call 1-888-566-3982 select option 2</td>
<td>OAWP (visit <a href="https://oawp.va.gov/intake/">https://oawp.va.gov/intake/</a> for further guidance)</td>
</tr>
<tr>
<td><strong>If you are VA employee and the harasser is a Veteran or Non-Department Individual contact:</strong></td>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>HPC</td>
<td>ORMDI HPP Office</td>
<td>ORMDI EEO Counselor</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>If you are a Veteran beneficiary and the harasser is a VA employee or contractor contact:</strong></td>
<td>HPC</td>
<td>VA Management Official</td>
<td>VA Police</td>
<td>ORMDI HPP Office</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>If you are a Veteran beneficiary and the harasser is a Veteran beneficiary or Non-Department Individual contact:</strong></td>
<td>HPC</td>
<td>VA Management Official</td>
<td>VA Police</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>If you are a Student/Intern/Trainee and the harasser is a VA employee or contractor contact:</strong></td>
<td>Immediate Supervisor</td>
<td>Another Management Official</td>
<td>HPC</td>
<td>ORMDI HPP Office</td>
<td>ORMDI EEO Counselor</td>
<td>N/A</td>
</tr>
<tr>
<td>If you are a</td>
<td>HPC</td>
<td>VA Management Official</td>
<td>VA Police</td>
<td>ORMDI HPP Office</td>
<td>N/A</td>
<td>N/A</td>
</tr>
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<td>Student/intern/Trainee and the</td>
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<tr>
<td>harasser is a Non-Department</td>
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<tr>
<td>Individual Contact:</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>If you are a contractor and the</td>
<td>Immediate</td>
<td>Another Management</td>
<td>HPC</td>
<td>ORMDI HPP Office</td>
<td>ORMDI EEO Counselor</td>
<td>Contracting Office</td>
</tr>
<tr>
<td>harasser is a VA employee or</td>
<td>Supervisor</td>
<td>Official</td>
<td></td>
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</tr>
<tr>
<td>contractor contact:</td>
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</tr>
<tr>
<td>If you are a contractor and the</td>
<td>Immediate</td>
<td>Another Management</td>
<td>HPC</td>
<td>ORMDI HPP Office</td>
<td>N/A</td>
<td>Contracting Office</td>
</tr>
<tr>
<td>harasser is a Veteran or Non-</td>
<td>Supervisor</td>
<td>Official</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Department Individual Contact:</td>
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</tbody>
</table>
f. **Harassment Witnessed by a Bystander.** Bystander Intervention is recognizing harassing and harmful behavior or interaction and choosing to respond in a way that could positively influence the outcome. Bystander intervention strategies include the Four D’s (distract, delegate, direct and document) which allows individuals (employees, contractors, Veterans and other non-Department individuals) to send powerful messages about acceptable and expected behavior in VA. Visit TMS for additional information and training courses.

(1) VA employee (Witness) Bystander Intervention: VA policy requires all employees and contractors to act when they see something, they believe is harassing behavior. All employees or contractors shall take appropriate action such as intervening and reporting the observed behavior to a management official or VA Police if necessary. VA employees and contractors will be held accountable for not reporting harassing behavior. Disciplinary action is an accountability option.

(2) Non-employee (Witness) Bystander Intervention: Veterans, beneficiaries and non-Department individuals are highly encouraged to take the Veteran Bystander Intervention online training course to learn the Four D’s of intervention in order to be able to effectively assess and address harassing behavior. Veterans completing the VA Bystander Intervention Training are instructed to contact a VA employee if they witness behavior that is inappropriate or considered harassment. Employees are responsible for reporting the incident to the appropriate official as defined in this handbook. See Tables 5.1 – 5.4 for the appropriate point of contact.

g. **Harassment Involving a Senior Leader.**

(1) Senior leader refers to an individual who is:

(a) A Senior Executive; Title 38 SES-equivalent employees; VISN and VA Medical Center (VAMC) Chiefs of Staff or equivalent positions (e.g., Chief Medical Officers); VISN and VAMC Associate Directors for Patient Care Services or equivalent positions (e.g., nurse executives); Employees appointed to senior-level (SL) and scientific and professional (ST) positions; Political appointees.

(b) Veterans law judges; Veterans Health Administration and Veterans Benefits Administration facility (e.g., VAMC) Directors, associate Directors, and Assistant Directors at the General Schedule (GS) grade 14 or above; National Cemetery Administration Cemetery Directors and District Chiefs of Operations at GS-14 or above.

(2) Harassment involving senior leaders is considered misconduct. Therefore, if management receives a report of harassment against a senior leader in the HPP forum, they are required to notify the Office of Accountability and Whistleblower (OAWP). Please refer to [VA Directive 0500](#) (Investigation of
Whistle blower disclosures and allegations involving Senior Leaders) or VA OAWP Website for more information.

(3) If OAWP agrees to conduct the investigation, management must continue to take prompt and immediate action to ensure the alleged conduct is not ongoing and the individual is protected from retaliation while the investigation is being conducted. If OAWP declines to investigate the alleged senior leader misconduct, facilities and staff offices are required to notify the ORMDI HPP office within 2 business days of OAWP’s declination and begin to conduct a fact finding into the allegations.

(4) Additional guidance for reporting allegations of unlawful activity, fraud, waste and abuse, prohibited personnel practices, violations of VA policy and gross mismanagement involving VA programs and operations employees may contact the following offices:

(a) The VA Office of Inspector General (VAOIG). For more information please visit: OIG Hotline (va.gov).

(b) The U.S. Office of Special Counsel (OSC). For more information please visit: Home (osc.gov).

h. Harassment Involving Social Media.

(1) Social media is a computer-based technology that facilitates the sharing of ideas, thoughts and information through building virtual networks and communities. The use of social media to intimidate, threaten, stalk or purposely create an unwelcoming environment is prohibited.

(2) Harassment involving social media is prohibited. If a VA employee uses social media to target and/or harass another VA employee, contractor, Veteran or non-Department individual who has visited a VA facility, management has the duty to act and take prompt and appropriate action to end the harassment and prevent further postings from occurring.

(3) Any VA employee who is a target of social media harassment by a VA Employee, Veteran, contractor or any non-Department individual should notify a management official, the HPC or the ORMDI HPP office.
6. PROCESSING ALLEGATIONS OF HARASSMENT.

a. Harassment of any type negatively impacts the work environment and productivity. It is the responsibility of each facility to address harassment allegations immediately. Managers and supervisors must take all allegations of harassing conduct seriously and take the following steps to address all allegations:

(1) **Immediately respond.** Upon receipt of a harassment allegation, management is required to address the allegations within five business days. All allegations received directly by the manager should be reported to the facility HPC within two business days from initial notification. To determine the best course of action for addressing the allegation, it is highly recommended that management consult with the HPC and/or Human Resource Employee Relations/Labor Relations before deciding which method best addresses the allegation (i.e., inquiry, factfinding or Administrative Investigative Board (AIB)). See VA Handbook 0700 for additional guidance.

(2) **Take initial intervention measures.** In certain situations, it may be necessary to separate the individuals identified in harassment allegations as an initial intervention measure. It is highly recommended that management consult with OGC to address and stop any harassing conduct and prevent further harassment while the allegations are being investigated. OGC will be available to provide guidance for issuing a Stay Away/No Contact Order and separating the individuals.

(3) **Allegations reported directly to the facility HPC.** The facility HPC is responsible for notifying the ORMDI HPP office within two business days of receiving the allegation. For sexual harassment allegations, the HPC must complete and enter VA Form 10221a through the Sexual Harassment Intake Portal within two business days of receipt of the allegation. Additional sexual harassment procedures are found in Chapter 7 of this handbook.

   (a) The facility HPC notifies the appropriate management official to begin the investigation process.

   (b) The facility HPC is responsible for monitoring the progress of the inquiry and notifying leadership if the completion of the inquiry will exceed 30 business days. The sexual harassment intake form can be found on the ORMDI HPP Website.

(4) **Allegations reported directly to the ORMDI HPP office.** Allegations reported directly to the ORMDI HPP office will be entered in the HPP Complaint Tracking System and forwarded to the appropriate NHPL/HPC for action.
(5) **Protect individuals who report allegations from retaliation.** Managers and supervisors are required to ensure individuals who report harassment are not retaliated against for making the disclosure of misconduct or reports of harassment.

(6) **Follow-up with the individual who experienced harassment.** Management officials who receive notification of harassment allegations are required to provide a written notification on the outcome of the inquiry, factfinding or AIB within three business days of the completion of the report to the person who experienced harassment. Third party reporters will not receive the report details or notification on the outcome of the inquiry, factfinding, or AIB. See Chapter 11 Definitions for third party reporter definition.

(7) **Treat all harassment allegations as confidential.** All allegations of harassment will be treated as confidential. Only relevant information will be shared to allow management to conduct the necessary inquiry or factfinding. If allegations are partially/fully substantiated, managers and employees are advised to consult with human resources for evidence file release of information requirements.

7. **PROCESSING ALLEGATIONS OF SEXUAL HARASSMENT**

a. Sexual harassment means unsolicited verbal or physical contact of a sexual nature which is threatening in character. Sexual harassment is a form of sex discrimination that violates [Title VII of the Civil Rights Act of 1964](https://www.ada.gov/tvidt.htm). Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature constitutes sexual harassment when this conduct explicitly or implicitly affects an individual's employment, unreasonably interferes with an individual's work performance, or creates an intimidating, hostile or offensive work environment.

b. Sexual harassment is gender neutral. The individual reporting harassment, as well as the individual accused of harassment, can be of any gender. Neither the individual reporting harassment nor the individual accused of harassment must be of the opposite sex. Anyone can be accused of harassment as long as the conduct fits the harassment definition. The individual reporting harassment does not have to be the target of the harassment. Examples of sexual harassment may include:

1. Sexual pranks, repeated sexual teasing, jokes, or innuendo, in person, texting or via email;
2. Verbal abuse of a sexual nature;
3. Touching or grabbing of a sexual nature;
4. Repeatedly standing too close to or brushing up against a person;
(5) Repeatedly asking a person to socialize during off-duty hours when the person has said no or has indicated he/she is not interested (supervisors should be careful not to pressure their employees to socialize);

(6) Giving gifts or leaving objects that are sexually suggestive;

(7) Repeatedly making sexually suggestive gestures;

(8) Making or posting sexually demeaning or offensive pictures, cartoons or other materials in the workplace; or on social media; and

(9) Off-duty, unwelcome conduct of a sexual nature that affects the work environment.

c. Within one business day of a sexual harassment allegation, management is required to conduct initial intervention measures to separate the person who brings forth the allegation from the person accused of sexual harassment. The person who brings forth the allegation(s) should not be moved unless he/she provides a written request stating the move is voluntary and without coercion.

d. To obtain an exception not to move the individual accused of sexual harassment for operational reasons, consult with OGC to ensure an alternative measure is put in place to protect the individual who reported the incident from further harassment and retaliation.

e. When sexual harassment reports are received, the management official and/or the HPC must report the allegation to the ORMDI HPP office within two business days. They will complete and submit VA Form 10221a through the Sexual Harassment Intake Portal.

f. Sexual harassment allegations reported to the ORMDI HPP office will be forwarded to the NHPL within one business day of receipt. The NHPL is required to notify the facility HPC within one business day. See Appendix B for HPP Complaint Process Timeline. For a sample sexual harassment complaint form visit the ORMDI HPP Website.

g. Management is required to take the necessary steps to protect employees or contractors from retaliation who, in good faith, report sexual harassment incidents even if the allegations are not substantiated. It is a violation of federal law and this policy to retaliate against someone who has reported possible sexual harassment. Violators may be subject to disciplinary action.

8. SEXUAL ASSAULT RESPONSE PROCEDURES.

a. Sexual assault includes any sexual act or behavior that is perpetrated when someone does not or cannot consent. Falling under this definition of sexual assault are sexual activities such as: forced sexual intercourse, sodomy, oral penetration or penetration using an object, molestation, fondling and attempted
rape. Sexual assault can occur in heterosexual or same-sex relationships. Individuals who experience or witness sexual assault should immediately report the incident (ideally within four hours) to:

1. The VA Police/Security. The VA Police/Security are required to take prompt action, report the incident to the Secretary of the VA and investigate all sexual assault allegations that occur on VA property. In addition to reporting the incident to VA Police/Security, individuals can also report the incident to local law enforcement.

2. Federal, state, or local law enforcement in VA facilities where there is no VA Police/Security presence. Federal, state or local law enforcement must be contacted immediately (ideally within four hours of the incident). The facility reporting the incident must also contact the VA Police/Security who has jurisdiction for that facility to ensure appropriate reporting and tracking of the incident.

3. All sexual assault allegations are required to be reported to the VA Office of Inspector General (VAOIG). For additional guidance please refer to: VA OIG Crisis Line.

4. All sexual assault allegations are also required to be reported to the Secretary of VA notification within one business day of the incident and the Secretary or authorized designee will ensure a thorough investigation is conducted and provide written notification of receipt of the allegation and a written memorandum of the outcome of the completed investigation to the individual who experienced sexual assault. Please see VA Directive 0321 for specific reporting requirements.

9. PRIVACY and CONFIDENTIALITY.

a. **Employee and Contractor Confidential Reporting.** VA adheres to confidential reporting. Information relating to reports of harassment, sexual harassment, sexual assault or hostile or abusive conduct will be maintained on a confidential basis. In cases involving VA employees and contractors, management has a duty to act. A conflict between an employee’s desire for confidentiality and the Agency’s duty to address harassment may arise if an employee informs a supervisor or manager about the alleged harassment, hostile or abusive conduct, and asks management to keep the matter confidential and take no action.

   1. Information relating to reports of harassment, or hostile or abusive conduct will be maintained on a confidential basis to the greatest extent possible, consistent with an appropriate, thorough, and impartial investigation. Information may be disclosed to conduct an effective harassment inquiry, to defend the Agency in any litigation in which the information may be
relevant and necessary, or for any other purpose consistent with law, regulation or agency policy.

(2) Inaction by the management official in such circumstances could lead to liability on the part of the Agency. Failure to act may also result in disciplinary action against the supervisor or manager. In such cases, management must carry out its duty to prevent and correct harassment or hostile or abusive behavior despite the confidentiality request from the alleged victim.

b. **Non-employee Confidential Reporting.** Under Secretaries, Assistant Secretaries and other key officials are required to establish a confidential reporting option for non-employee Veterans and non-Department individuals. Officials receiving allegations of harassment from non-Department individuals, and/or non-employee Veterans should inform the individual that every attempt will be made to honor their request for confidentiality. However, to appropriately address allegations expeditiously and thoroughly certain information is essential. This may include providing the name of the alleged harasser and potential witnesses to the Agency officials assigned to address the allegations.

c. **Privacy Act Compliance.** The DAS of ORMDI through the Chief, Harassment Prevention Program is responsible for ensuring that all records pertaining to allegations of harassment are compliant with the Privacy Act of 1974. VA follows the requirements of the Privacy Act which protects personal information that VA maintains in systems of records. A system of records is a file, database or program from which personal information is retrieved by name or another personal identifier. The Privacy Act provides protection for personal information. This typically include how information is collected, used, disclosed, stored and disposed. VA System of Records Notices are available at: [VA Privacy Service Website](#).

d. **Maintenance of Records.** Administrations and Staff Offices are required to maintain reports pertaining to the Harassment Prevention Program. Reports of harassment are required to be uploaded in the HPP Complaint Tracking System. Electronic records are the preferred method of recordkeeping. If facilities have non-electronic files, they must be stored in a secure area. The maintenance of records and any disclosure of information from these records must be in compliance with the Privacy Act, title 5 United States Code and VA Records Management policy and procedures.

10. **OTHER STATUTORY AND ADMINISTRATIVE PROCESSES.**

a. The purpose of the Harassment Prevention Program is to stop harassment that has occurred and deter its occurrence in the future. Reporting harassment to the ORMDI HPP office does not delay or stop the time limits for filing a complaint through other statutory procedures.
b. An employee who chooses to pursue statutory, administrative, or collective bargaining remedies for unlawful harassment must select one of the available forums below:

(1) EEO Complaint pursuant to 29 C.F.R. § 1614, requires an employee to contact ORMDI EEO office within 45 calendar days of the most recent incident of alleged harassment (or personnel action, if one is involved), as required in 29 C.F.R. § 1614.105(a);

(2) Negotiated Grievance Process requires an employee to file a grievance in accordance with the provisions of the Collective Bargaining Agreement;

(3) VA Administrative Grievance requires an employee to file a grievance in accordance with the provisions of VA Handbook 5021;

(4) Appeal to the Merit Systems Protection Board pursuant to 5 C.F.R. § 1201.22 an employee must file a written appeal with the Board within 30 days of the effective date of an appealable adverse action as defined in 5 C.F.R. § 1201.3, or within 30 days of the date of receipt of the Agency’s decision, whichever is later; and

(5) Whistleblower Disclosures involving senior leaders, as defined in VA Directive 0500, must be reported to OAWP. OAWP may investigate these allegations. For more information about OAWP, visit VA OAWP Website.

11. DEFINITIONS.

a. Administrative Investigation: The investigative process of gathering evidence and ascertaining facts about matters, conducted primarily to enhance administrative effectiveness and efficiency. AIBs and Factfindings are both types of administrative investigations which VA can utilize and rely upon when taking administrative actions, including disciplinary actions under VA Directive and Handbook 5021. See VA Handbook 0700 for specific requirements and guidance.

b. Administrative Investigation Boards (AIB): A type of administrative investigation under VA Directive 0700 and relevant portions of this handbook for collecting and analyzing evidence, ascertaining facts and documenting complete and accurate information regarding matters of interest to VA. This type of administrative investigation requires the most documentation and has substantial procedural requirements. See VA Handbook 0700 for specific requirements and guidance.

c. Agency Harassment Prevention Office (also known as the ORMDI Harassment Prevention Program (HPP) office): HPP is an office under the Office of Resolution Management Diversity & Inclusion and is responsible for establishing a centralized tracking system that will be the official system of record for tracking all harassment allegations, developing harassment
prevention policy and compliance procedures for all Administrations and Staff Offices within the Department of Veterans Affairs.

d. **Authorization Letter**: The document that authorizes an individual to serve as a factfinder and to conduct a factfinding. An Authorization Letter may not be necessary for every Factfinding; for example, if the initiating official is also the factfinder.

e. **Charge Letter**: The document (including amendments) that appoints members to an AIB and authorizes the AIB to conduct an administrative investigation. A Charge Letter is required for every AIB. See [VA Handbook 0700](#) for a sample Charge Letter.

f. **Convening Authority**: The authority responsible for convening and coordinating AIBs. Convening Authorities include the heads of VA Administrations and Staff Offices, chief executives of VA facilities and authority senior to any of them in the VA organization. The head of VA Administrations and Staff Offices may further define, clarify or limit this authority.

g. **Contractor**: Federal contractors are individuals or employers who enter into a contract with the United States (any Department or Agency) to perform a specific job, supply labor and materials or for the sale of products and services. A Federal subcontractor is a company that does business with another company that holds direct contracts with the Federal Government. As a part of doing business with the VA expects all contractors to adhere to the policy and procedures established by VA Directive 5979 and this handbook.

h. **Collateral Duty Cadre of Factfinders**: A group of qualified factfinders who volunteer to serve a two-year collateral duty appointment to conduct harassment factfindings received in the ORMDI HPP arena. ORMDI HPP office will authorized a Cadre member to conduct a factfinding in cases where there is a conflict of interest and no qualified factfinders are in a facility/staff office in accordance with the policy established by this handbook and VA Handbook 0700.

i. **Disruptive Behavior Reporting System (DBRS)**. The Disruptive Behavior Reporting System (DBRS) is a VHA secure, facility managed, web-based electronic system to collect and manage reports of behavioral events that cause a safety concern. The main purpose of the DBRS is to serve as a tool to promote a safe environment for patients, VA staff and visitors. Anyone with access to the VA computer network can report a disruptive behavior event in the DBRS.

j. **Equal Employment Opportunity Commission (EEOC)**: A Federal agency responsible for enforcing Federal laws that make it illegal to discriminate against a job applicant or an employee or former employee because of the person’s race, color, religion, sex, national origin, age, disability or genetic information.
EEOC also provides leadership and guidance to Federal agencies on all aspects of the Federal EEO program.

k. **Factfinder**: An individual appointed by a designated management official/initiating authority to conduct a factfinding. In some instances, the designated management official may be the same person as the factfinder.

l. **Factfinding**: Is a less formal process of investigation than an AIB; however, it is simply a different type of administrative investigation, and the results, reports and evidence can be used by the VA to take further administrative actions (process improvement, discipline, etc.). See VA Handbook 0700 Administrative Investigations and Factfindings for additional guidance.

m. **Harassment**: EEOC defines harassment as any unwelcome conduct that is based on race, color, religion, sex (including gender identity, transgender status, sexual orientation and pregnancy), national origin, age (40 or older), disability or genetic information. Harassment becomes unlawful when:

1. Enduring the offensive conduct becomes a condition of continued employment or the conduct is severe or pervasive enough to create a work environment that a reasonable person would consider intimidating, hostile or abusive.

2. Anti-discrimination laws also prohibit harassment against individuals in retaliation for filing a discrimination charge, testifying, or participating in any way in an investigation, proceeding, or lawsuit under these laws; or opposing employment practices that they reasonably believe discriminate against individuals, in violation of these laws.

3. In addition to understanding what harassment is, it is also important to differentiate between harassment and other behavior. Petty slights, annoyances and isolated incidents (unless extremely serious) will not rise to the level of illegality. Harassment also should be distinguished from management's legitimate efforts to supervise employees. for example, management is required to provide feedback to employees regarding time and attendance, conduct and work performance. Negative feedback or action from management on these topics could be unpleasant for the employee but may not rise to the level of harassment.

4. Offensive conduct may include offensive jokes, slurs, epithets or name calling, physical assaults or threats, intimidation, ridicule or mockery, insults or put-downs, offensive objects or pictures and interference with work performance. Harassment can occur in a variety of circumstances, including, the following:

   a. The individual accused of harassment or the person who experienced harassment can be a anyone to include: VA management officials,
contractors, a co-workers, Veterans or non-Department person such as a visitor or vendor.

(b) The harassment reporter does not have to be the person harassed and can be anyone affected by the offensive conduct.

Note: the conduct covered by this handbook is broader than the legal definition of unlawful harassment. VA further prohibits employees from engaging in harassing conduct for any reason regardless of whether the conduct was related to one or more of the legally protected bases

n. Harassment Prevention Program Compliance Review (HPP Assessment): Harassment Prevention Program (HPP) Compliance Reviews will be conducted by the ORMDI HPP office. The compliance reviews will focus on each facility and Staff Office within VA to ensure the Agency is meeting the VA’s goal of a harassment-free work environment. The compliance review focus areas are leadership and accountability, program compliance, harassment prevention efforts, and training and communication.

o. Initiating Authority: The authority responsible for initiating and coordinating factfindings. Initiating authorities include supervisors, heads of service lines, business offices or divisions, the heads of VA Administrations and Staff Offices, chief executives of VA facilities and authority’s senior to any of them in the VA organization. The Initiating authority could serve as the factfinder, or they may appoint others to conduct the factfinding.

p. Inquiry: An informal process by supervisors to obtain and assemble readily available information about an incident, the results of which are used for various purposes, including to determine the need for an AIB or a Factfinding.

q. Non-Compliance Letter: Administrations, Staff Offices and facility Senior Leaders at the Director level or above who fail to respond with the required documentation in the HPP Complaint Tracking System 30 business days from initial date of the allegation was reported will receive a non-compliance letter. If an extension is not approved or the facility fails to submit the required documentation in the HPP Complaint Tracking System in 60 business days from initial date the allegation was reported, a non-compliance report will be submitted to the DAS of ORMDI and the applicable Network/Executive/Regional Director. Non-Compliance reports are provided to the Secretary of VA quarterly.

r. Non-Department individual: Is defined as any visitor to a VA facility who is not an employee, contractor or Veteran who receives care or services from VA.

s. Office of Accountability and Whistleblower Protection (OAWP): OAWP promotes and improves accountability within the Department of Veterans Affairs. The office receives and investigates allegations of misconduct and poor performance against VA senior leaders and allegations of whistleblower retaliation against VA supervisors.
t. **Remediation Plan:** Is a detailed plan required to be created when a facility/staff office receives five or more substantiated sexual harassment, or sexual assault allegations or a combination thereof in the fiscal year. The plan will include actions to be taken to remedy non-compliance and prevent harassment, sexual harassment and sexual assault in the future.

(1) Remediation plans require two levels of approval, the Facility Director, and Network/Regional/Executive Director or other applicable key officials.

(2) Approved remediation plans must be submitted to the ORMDI HPP Office within five business days after second level approval.

(3) ORMDI HPP office will review and monitor remediation plans for compliance. See Appendix E for a sample remediation plan.

u. **Third Party Reporter:** The individual who is not the target of harassment but either witnessed the harassment or reports an incident concerning the harassment of another individual.

v. **U.S. Office of Special Counsel (OSC):** Covers complaints by Federal employees and applicants of prohibited personnel practices and reprisal for whistleblowing; enforces restrictions on political activity of Federal employees; and protects employment and reemployment rights of Veterans, guardsman and reservists.

w. **VA Office of Inspector General (VA OIG):** Covers complaints by VA employees and contractors of fraud, waste, abuse, misconduct by senior officials, patient abuse, serious safety violations, gross waste if funds or official time. Employees and contractors contacting VA OIG have the following reporting options:

(1) Submit an identified complaint. By submitting an identified complaint, the individual agrees that the VA OIG can disclose their name and other information the individual provided, if necessary, to ensure their issues are addressed. This level of confidentiality is appropriate for complainants seeking personal relief, such as Veterans, dependents and contractors, or for complainants comfortable being identified if needed regarding concerns involving VA programs and operations.

(2) Submit a Confidential Complaint. Individuals submitting a confidential complaint agree to provide the OIG their name, but request that their name not be disclosed outside the OIG. This category is appropriate for complainants who fear reprisal from the VA or other alleged wrongdoers for contacting the OIG.

(3) Submit an Anonymous Complaint: Individuals submitting an anonymous complaint may mean OIG will not know their name. Individuals are reminded that OIG will not be able to contact them, therefore OIG may not
have enough information to pursue their concern, and they may not be able to find out if a case was opened.

12. REFERENCES.


f. The Pregnancy Discrimination Act of 1978

g. P.L. Number 95-955, Executive Order 11478, as amended, prohibiting discrimination based on sexual orientation


i. EEOC Management Directive 715, December 3, 2019

j. EEOC Enforcement Guidance: Vicarious Employer Liability for Unlawful Harassment by Supervisors, June 18, 1999

k. EEOC Management Directive 110, as revised, August 5, 2015

l. VA Secretary Equal Employment Opportunity, Diversity and Inclusion, No FEAR and Whistle-blower Rights and Protection Policy Statement, April 15, 2021

m. VA Secretary Memo regarding the establishment of the Anti-Harassment office/HPP, February 12, 2015

n. VA Handbook 0500, Investigation of Whistle-blower Disclosures and Allegations Involving Senior Leaders or Whistle-blower Retaliation Equal Employment Opportunity Commission (EEOC)

o. Johnny Isakson and David P. Roe, M.D., Veterans Health Care and Benefits Improvement Act of 2020, Title V, Deborah Sampson, Subtitle III, Eliminating Harassment and Assault, Section 5303 (P. L. 116-315).
13. ADDITIONAL RESOURCES.

The following program resources are available at the ORMDI HPP Website:

a. Harassment Allegation Checklist for Supervisors;
b. Factfinding Materials;
c. Factfinding Guide;
d. Sample Factfinding Authorization Letter;
e. Sample Interview Questions;
f. Factfinding Report Template;
g. Factfinding CADRE application;
h. Employee/Management Decision Tree;
i. VA Handbook 0700;
j. VA Directive 0700; and
k. VA Directive 5979.
APPENDIX A: 
FREQUENTLY ASKED QUESTIONS

1. **What is the Harassment Prevention Process?** The Harassment Prevention Process is a 30-business day process designed to address allegations of harassment in all forms. The goal of the Harassment Prevention Process is to stop harassing behavior before it becomes severe and/or pervasive.

2. **What is the purpose of the process?** The purpose of the process is to ensure prompt inquiry of harassment allegations, take prompt and effective action to stop any ongoing harassment, and take the appropriate corrective action against the responsible party for substantiated allegations.

3. **Who can utilize this process?** This process may be utilized by employees, contractors, Veterans and non-Department individuals. Veterans and non-Department individuals should contact local points of contact to report harassment. For example, a non-Department individual experiences harassment in a VA health care facility should contact the Patient Advocate at that facility.

4. **When should management separate employees when a report of harassment is received?** Management has a responsibility to ensure that all employees have a safe and harassment-free work environment. The necessity to separate employees will be determined on a case-by-case basis.

5. **Is it an acceptable practice to conduct interviews with the individual accused of harassment and individual reporting harassment in the same meeting?** No. The factfinder should conduct all interviews separately.

6. **Is management required to discipline an employee if the harassment allegation is substantiated?** Discipline is not a requirement, but managers are required to ensure the harassing behavior stops. Non-compliance with the HPP Directive and Secretary of the VA EEO Policy Statement will be reported to the appropriate senior level official and to the Secretary of VA. Factfinders do not make recommendations for disciplinary actions. Deciding management officials are provided the factfinding report. Managers are strongly encouraged to consult with Human Resources (HR), Employee Relations/ Labor Relations (ER/LR) and Office of General Counsel (OGC) to determine appropriate actions for substantiated allegations.

7. **What happens when a person refuses to cooperate in an inquiry/factfinding or administration investigation?** All VA employees are required to cooperate in an inquiry, factfinding or administrative investigation. If the individual accused of harassment fails to cooperate in the investigation, management has a duty to act, and the investigation will continue. Management is advised to seek guidance for ER/LR and OGC to discuss appropriate next steps. Management should explain to the individual accused of harassment and/or a witness who fails to cooperate they
will potentially be subject to disciplinary action for failure to cooperate in the inquiry/factfinding or administrative investigation.

8. **Can you file in both the EEO and HPP arenas?** Yes. Reporting an allegation of harassment to the VA’s Harassment Prevention Program does not affect an employee’s rights under the EEO complaint process. Note: An employee who reports allegations of harassment, in accordance with the Harassment Prevention Program, has not filed an EEO complaint.

9. **What is the difference between HPP and EEO?** The Harassment Prevention Program is created to address harassing behavior before it becomes severe and/or pervasive. The EEO complaint process addresses harassment that has been determined to be severe and/or pervasive and in violation of Federal anti-discrimination laws. Under the EEO process an individual may be awarded monetary and non-monetary damages if the Agency is found liable. Individuals can file both EEO and HPP complaints on the same issue.

10. **Should management address a report of harassment filed with the HPP office if an employee already filed an EEO Complaint for the same incident?** Yes. Management is responsible for ensuring the work environment is harassment free and has a duty to act when allegations of harassment are brought to their attention even if an EEO complaint has been filed. Note: If an individual wants to report a harassment allegation to HPP after filing an EEO complaint and it is determined by ORMDI HPP office during the initial contact that the harassment has ceased, the case will not be processed by the ORMDI HPP office. The individual will be given other avenues of redress.

11. **How will the individual who experiences harassment find out the result of the inquiry?** The management official who authorized the factfinding will provide a written notification to the individual who reported the harassment via email. A sample of the notification email is available at: [ORMDI HPP Website](#).

12. **What is a HPP Compliance Review?** The HPP Compliance Review (HPPCR) is a review of VA facilities’ HPP programs. The compliance review focus areas are leadership and accountability, program compliance and harassment prevention efforts.
13. **What is the difference between the Harassment Prevention Program process and the EEO Complaint process?**

<table>
<thead>
<tr>
<th>Harassment Prevention Program (HPP) Process</th>
<th>EEO Process</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Employees should report harassing conduct immediately to supervisor, Harassment Prevention Coordinator (HPC) and the ORMDI HPP office.</td>
<td>• Employees must contact an EEO Counselor within 45 calendar days of alleged discrimination.</td>
</tr>
<tr>
<td>• Supervisor and relevant experts determine whether Factfinding is necessary.</td>
<td>• At formal level, all accepted complaints will be investigated by an EEO investigator.</td>
</tr>
<tr>
<td>• Factfinding seeks to gather information to determine whether there was misconduct.</td>
<td>• Formal investigation seeks to gather information to determine whether the Agency engaged in discriminatory conduct.</td>
</tr>
<tr>
<td>• A factfinding can result in disciplinary actions against individual(s).</td>
<td>• An investigation and finding against the Agency can result in an individual being awarded monetary and non-monetary damages.</td>
</tr>
<tr>
<td>• Internal process – employee is not entitled to a copy of the factfinding report.</td>
<td>• EEO process – the individual reporting harassment will receive a copy of the Report of Investigation.</td>
</tr>
</tbody>
</table>
## APPENDIX B: HPP PROCESS TIMELINE

<table>
<thead>
<tr>
<th>Day</th>
<th>Event Occurs</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Event Occurs</td>
<td>An individual reports an allegation of harassment. Individuals are encouraged to contact an appropriate official within 48 hours of an incident.</td>
</tr>
</tbody>
</table>
| 1   | Event is Reported | * Allegations reported directly to the ORMDI HPP office will be placed in the HPP Complaint Tracking System and assigned to the appropriate administration/staff office within one business day.  
* Allegations reported directly to management must be shared with the facility HPC who will notify the ORMDI HPP office within two business days of receipt of all harassment. Sexual harassment allegations must be reported using VA Form 10221a and submitted in the Sexual Harassment Intake Portal.  
* All sexual assault allegations should be immediately reported to VA Police/Security and/or local law enforcement for criminal investigation ideally within four hours. |
| 2   | Management official Notified | HPC should notify the appropriate management official within one business day of receipt of the allegation received from the Agency HPP office or the individual reporting the allegation. |
| 3   | Receipt of Allegation Acknowledged by Management | Management or the HPC ensures harassment allegations are acknowledged to the individual reporting the allegation within two business days from receipt of complaint. |
| 3   | Intervention Initiated | Appropriate management official should conduct an initial assessment within one business day to determine what type of intervention measures are required. (e.g. inquiry, factfinding or AIB). |
| 5   | Inquiry/Factfinding Begins | Appropriate management official in consultation with the HPC selects a factfinder within three business days of receipt of the allegation and the factfinding begins within five business days. For a copy of a factfinding template visit: [ORMDI HPP W.ebsite](#) |
| 15  | Inquiry/Factfinding Completed | Factfinding should be completed with 10 business days. Factfinder submits final report to the management official within two business days after the fact gathering, evidence collection and interviews are completed. |
| 18  | Rendering Decision | Management in consultation with ER/LR and/or OGC, will evaluate the report and decide what, if any, corrective action is required.  
* Corrective measures should be designed to stop harassment, correct its effects on the individual experiencing harassment, and ensure that the harassment does not reoccur.  
* These corrective measures need not be those that the individual who experienced harassment requests or prefers if the action taken is effective. |
### The HPP process should be completed within 30-business days beginning at the day of notification.

<table>
<thead>
<tr>
<th>Day 18</th>
<th>Individual who reported harassment is notified</th>
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<tbody>
<tr>
<td></td>
<td>• Individual who experienced harassment should receive a written notification of the outcome of the factfinding within three business days of the completion of the factfinding.</td>
</tr>
<tr>
<td></td>
<td>• The individual should not receive a copy of the factfinding report or specific details of any corrective actions.</td>
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</table>

<table>
<thead>
<tr>
<th>Day 20</th>
<th>Corrective measures determined</th>
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<tr>
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<td>• Appropriate management official should consult with HR ER/LR to propose the appropriate corrective action within one business day of all substantiated allegations.</td>
</tr>
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<table>
<thead>
<tr>
<th>Day 30</th>
<th>Closing Harassment Allegation – Facility Level</th>
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<tbody>
<tr>
<td></td>
<td>• Within three business days of a substantiated allegation(s), notify the ORMDI HPP office of the corrective action or any other measures taken to address the substantiated allegations.</td>
</tr>
<tr>
<td></td>
<td>• To officially close a harassment allegation, the facility must submit a copy of the completed factfinding or inquiry or administrative investigation, management notification, and written follow up memorandum to the ORMDI HPP office and/or HPC within 30 business days of the receipt of the report of harassment.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Day 30</th>
<th>Allegation closed – Agency Level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• HPC submits the following documents in the HPP Complaint Tracking System at the conclusion of the factfinding and a decision is rendered: Management notification, Factfinding report, written follow up memorandum.</td>
</tr>
<tr>
<td></td>
<td>• ORMDI HPP office reviews documentation for compliance, verifies the alleger is made aware of the outcome of the investigation, ensure the alleged conduct has ceased and closes the case.</td>
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APPENDIX C:
HOW TO CONDUCT A FACTFINDING

1. How to Conduct a Harassment Investigation.
   a. Managers and supervisors have a duty to investigate when they receive an allegation of harassment in the workplace. When an allegation is made, the requirement to address the allegation arises without regard to whether the individual who was harassed wants the investigation. If the individual informs management that they do not want the allegations to be investigated, management is still obligated to act once it is made aware of the incident.
   
   b. Action such as instructing the alleged harasser to avoid contact with individual is not a substitute for an investigation. As appropriate, managers and supervisors should consider taking interim measures such as a temporary reassignment of the alleged harasser to prevent potential misconduct prior to completing the investigation. A factfinding is an informal administrative investigation. The primary purpose of a factfinding is to ascertain the magnitude of a problem, gather and analyze evidence, identify and interview witnesses, summarize and record witness statements and provide a report to the management official who authorized the factfinding. For allegations involving a single instance and no witnesses the factfinding may be relatively simple.
   
   c. If the individual who experienced harassment describes more than one instance of harassment or identifies multiple witnesses the factfinding will be more involved. To determine the extent of the factfinding the manager in collaboration with the facility HPC, HR or the Agency HPP office will determine the appropriate means to address the allegation. For additional information please review VA Directive 0700 and VA Handbook 0700 Administrative Investigations and Factfinding.

2. Selecting a Factfinder.
   a. A factfinding can be conducted by any supervisor, employee relations or human resources staff, Quality Assurance staff, privacy staff, Compliance Officer or other subject matter expert, as determined by the Initiating Authority. The training level required to conduct a Factfinding is less intensive than the training needed to conduct an AIB. However, Factfinders must have a minimum of one hour of factfinding training in a program approved by OGC or VA's Law Enforcement Training Center or the ORMDI HPP office, which includes the one-hour video hosted on TMS, course number 4557027.
   
   b. If the Factfinder is in the same chain of command as the subject of the investigation, the Factfinder should be at or above the grade or organizational level of the subject.
c. In the event that there are no appropriate personnel to appoint as Factfinder within a facility or organization, the Initiating Authority may seek qualified Factfinders from other VA organizations or reach out to the ORMDI HPP office to request a factfinding cadre member to conduct the factfinding.

d. The Factfinders individual workload should be adjusted to ensure they are able to thoroughly conduct the factfinding.

e. First-line supervisors may not always be the best choice to conduct a factfinding in their department. In some cases, the supervisor may be too professionally involved with the persons being investigated or may be implicated in the allegation. Additionally, supervisors are often not properly trained to conduct harassment investigations. In such cases, third party initiated factfinding should be conducted. For additional guidance see VA Handbook 0700.

f. Persons of both genders should be available to prevent claims that an individual was uncomfortable or embarrassed to provide details to a factfinder of the opposite sex. HPP Coordinators should not conduct factfindings. HPP Coordinators are only to provide guidance to factfinders. Factfinders should be provided a copy of this handbook which outlines the roles and responsibilities of a factfinder. The ORMDI HPP office is available to assist facilities in assigning trained factfinders from the HPP Factfinder Cadre Program.

3. Planning and Preparation.

   a. Complete and forward the Factfinding Authorization Letter. Sample authorization letter is available to download from ORMDI HPP Website.

   b. Identify documents for review.

   c. Identify and schedule interviews of potential witnesses. Determine the interview order (the individual who experienced the harassment should be interviewed first). Determine the appropriate forum of inquiry (virtual or in-person interviews).


   a. Check union contract and consult with HR, ER/LR and/or OGC if bargaining unit employees are involved. Ensure any bargaining unit employee receives their Weingarten Rights. An individual accused of harassment may be an employee covered under a collective bargaining agreement and may be entitled to certain rights. The supervisor should consult with the OGC or ER/LR regarding these rights.

   b. Ask employees to sign a statement regarding acceptance or declination of union representation. Review appropriate policies and procedures and instructions including this handbook, VA Directive 5979.
c. All individuals should be interviewed separately and in private. Talk with the individual who experienced the harassment first. Review statements provided by all parties and have them sign attesting to their statements.

5. Collect the following evidence:
   a. Physical: equipment, drugs, Veterans Affairs Time and Attendance System (VATAS) records, etc.
   b. Documentary: routine business records, documents, reference materials, etc.
   c. Testimonial: Reports of contact, transcripts, documentation of verbal statements
      Demonstrative: drawings, models, maps, etc.

6. Preserve the Evidence:
   a. Secure evidence to prevent unauthorized disclosure.
   b. Establish a chain of custody for tracking the handling of evidence.

7. General Rules for Interviewing Witnesses:
   a. Maintain professional demeanor. Prepare an outline of questions to ask.
   b. Prepare a list of interviewees and schedule interviews.
   c. Question witnesses separately and always in private.
   d. Ask open-ended questions rather than leading or closed questions (e.g., yes/no questions).
   e. Ask follow-up questions to ensure sufficient detail is gained from the interview. Use who, what, when, where and how questions.
   f. Review details to ensure accuracy.
   g. Ask if there were other witnesses. Ask witnesses about their knowledge of the applicable rules and regulations.
   h. Close interview with the following questions, “Is there anything else you think I should know about this incident?” Thank the person interviewed for the time spent in the interview.

8. Individual Experiencing Harassment Interview.
   a. Advise the individual of the following:
      (1) Harassment in VA is taken seriously and will be investigated thoroughly.
(2) Confidentiality will be maintained to the greatest extent possible. Retaliation for reporting the harassment allegation will not be tolerated. The individual must report retaliation to the HPC or ORMDI HPP office or ORMDI EEO office immediately.

(3) During the interview, the factfinder should:

(a) Be sensitive to the allegations being reported.

(b) Obtain a description of each incident to include date, time, place and nature of the conduct. If an exact date cannot be obtained ask for an approximate timeframe, such as it was between Thanksgiving and Christmas.

(c) Identify any witnesses to the alleged incident(s). Identify any other persons who may have a similar claim.


a. Advise the alleged harasser of the following:

(1) The purpose of the meeting is to ask about allegations of workplace conduct.

(2) No conclusions have been determined.

(3) The interview is the alleged harasser’s opportunity to provide their version of the facts.

(4) It is expected that all participating in the factfinding will be honest and fully cooperative.

(5) Interfering with the inquiry is prohibited.

(6) Retaliation is prohibited regardless of whether the allegations are substantiated. Types of retaliation might include: Demoting, transferring, or dismissing the individual reporting the harassment or any employee involved in the inquiry.

10. Closing the Factfinding Once all the evidence is collected and interviews completed the factfinder must prepare a thorough report within two business days and submit to the designated management official. To see a template for the factfinding report go to ORMDI HPP Website.
APPENDIX D: 
HPP COMPLIANCE REVIEWS

Harassment Prevention Program (HPP) Compliance Reviews will be conducted by the Harassment Prevention Program (HPP) office. Reviews will focus on the mandatory requirements for an effective HPP Program at each facility and staff office as established by VA Directive 5979 Harassment Prevention Directive and Handbook as well as other governing laws and regulations.

Leadership and Accountability

Check the box if your organization has the following components in place:

☐ 1. The VA Directive 5979, VA Handbook 5979 and your local harassment prevention policy (if applicable) has been disseminated to all employees within the current fiscal year.

☐ 2. An approved local facility harassment prevention policy that includes:

☐ Updated language that clearly explains reporting procedures for Veteran (patients) and non-Department individuals.

☐ Reporting procedures for employees who experience harassment from Veteran (Patient)/beneficiaries, contractors, and other non-Department individuals. Clear mechanisms for employees and contractors of the Department to readily identify to whom and how to report incidents of harassment and sexual assault and how to refer non-Department individuals with respect to reporting an incident of harassment or sexual assault

☐ Requirements for bystanders and witnesses to report harassment allegations.

☐ 3. The facility/staff office has above a 98% completion rate on the mandatory Harassment Prevention & Accountability Training TMS Course ID: 45224.

☐ 4. Harassment prevention messaging is posted throughout the facility.

☐ 5. Harassment prevention messaging is posted on the facility’s intranet site.

☐ 6. The facility/staff office has appointed a Harassment Prevention Coordinator.
Program Compliance

☐ 1. No open or closed HPP Cases in the last two fiscal years over 30 days from initial contact date to case closure date.

☐ 2. All local harassment allegations reported to the Agency HPP office within two business days of receipt of allegation.

☐ 3. Remediation Plan created to address five or more substantiated sexual harassment/sexual assault allegations reported during the current fiscal year.

☐ 4. All HPP inquiries or factfinding begin within five business days of receipt of harassment allegation.

☐ 5. For all sexual harassment allegations: did the individual alleged of sexual harassment get moved/reassigned once management was made aware of the sexual harassment allegation.

☐ 6. All local reports of sexual harassment reported to the ORMDI HPP office within two business days.

☐ 8. The facility did not receive a HPP non-compliance notification during the current fiscal year.

☐ 9. Imposition of corrective action that is prompt, consistent, and proportionate to the severity of harassment, if harassment is determined to have occurred.

☐ 10. Managers and supervisors have an Equal Employment Opportunity (EEO) and Diversity and Inclusion (DI) element in their performance appraisal that contains the following language:

☐ Address allegations of discrimination and harassment.

☐ Correct harassing conduct.

☐ Take appropriate corrective or disciplinary action against employees for substantiated allegations of harassment or sexual harassment.

☐ 11. HPC has completed mandatory Harassment Prevention Coordinator training by the Agency HPP office.

☐ 12. Received approval from Agency HPP office for the current New Employee Orientation HPP Awareness Training lesson plan.
Harassment Prevention Efforts

Check the box if your organization has the following components in place:

☐ 1. The facility/staff office conducts climate surveys on an annual basis to assess the workplace environment to determine if any harassing behaviors exist.

☐ 2. The facility/staff office conducts workplace civility and bystander intervention training on an annual basis.

☐ 3. Leadership and the HPC have a written process to assess harassing behaviors and, where applicable, have documented steps taken to minimize those risks when they have occurred. Prepare to provide examples upon request.

Training and Communication

Check the box if your organization has completed the following components:

☐ 1. HPP Awareness training certified by the Agency HPP office.

☐ 2. HPP Training conducted each quarter.

☐ 3. TMS records indicates 98% of the workforce (employees, management and supervisors) completed Harassment Prevention Training annually for the last three years.
APPENDIX E:
REMEDIATION PLAN (Sample)

VA Facility/Staff Office: Date:

Facilities or Staff Offices with five or more substantiated sexual harassment/sexual assault allegations, or a combination thereof are required to complete this remediation plan.

Number of substantiated sexual assault allegations: ____________

Number of substantiated sexual harassment allegations: ____________

Brief Summary of Incidents

1. 
2. 
3. 
4. 
5. 
(Add lines, as needed)

Action Plan

a. **Directions:** List all current and prior actions taken (as applicable) to address the incidents above (e.g. VA Police investigation completed (date), disciplinary action(s) taken (date), etc.)

<table>
<thead>
<tr>
<th>Action Number</th>
<th>Provide a brief narrative of action:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Initiated</td>
<td>Measure</td>
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<tr>
<td>Action Number: 2</td>
<td>Provide a brief narrative of action:</td>
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<tr>
<td>Date Initiated</td>
<td>Measure</td>
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<th>Action Number: 3</th>
<th>Provide a brief narrative of action:</th>
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<tr>
<td>Date Initiated</td>
<td>Measure</td>
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<td>Click or tap to enter a date.</td>
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(add lines, as needed)

**Plan Approval:**

Facility Director: ___________________________  Date: __________

Network Director/Regional Director (or designee): ________  Date: __________

**Agency level review:**

Chief, Harassment Prevention Program office: __________  Date: __________

**RESOURCES AND RECOMMENDATIONS**

**Training and Recommendation (considerations)**

- ☐ Bystander intervention training / provider training
- ☐ Root Cause Analysis (RCA) Conducted (attached RCA template completed)
- ☐ Prevention of Sexual Harassment Training
- ☐ StarVA implemented (behavioral support for at-risk behaviors associated with Dementia)
- ☐ Victim / Experiencer Recovery and Harassment process standardization (job aid tools)
- ☐ Conduct Prevention and Management of Disruptive Behavior (PMDB) (Level 1) Training: Verbal de-escalation, personal safety, therapeutic containment, and sexual assault prevention
- ☐ Review / Maintenance of Physical Security Systems, including panic alarms.
☐ Conduct criminal investigation whenever criminal violation occurred on VHA property and track through VA Report Exec.

☐ Review Academic supervisory processes to ensure ongoing monitoring, assessment, training, and reporting of student concerns.

☐ Engage Union collaboration / partnership to revise reporting processes and distribute education on reporting

☐ Workplace Harassment Prevention Training for Managers

☐ Validate process of record flag review / assignment process and DBRS utilization

☐ Other (as determined by the facility)

Resources

<table>
<thead>
<tr>
<th>Name</th>
<th>Link</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Star-VA</td>
<td>Link</td>
<td>Interdisciplinary Behavioral Care for CLC Residents with Dementia</td>
</tr>
<tr>
<td>Prevention of Sexual Harassment Training</td>
<td>Link</td>
<td>TMS (VA 35637): Prevention of Sexual Harassment in the Workplace</td>
</tr>
<tr>
<td>Bystander Intervention &amp; Training</td>
<td>Link</td>
<td>Pre-training and Bystander intervention (Anti-harassment training)</td>
</tr>
<tr>
<td>PMDB Level 1 Training</td>
<td>Link</td>
<td>Prevention and Management of Disruptive Behaviors</td>
</tr>
<tr>
<td>Office of Resolution Management, Diversity &amp; Inclusion: Harassment Prevention Program (HPP)</td>
<td>Link</td>
<td>Training, tracking, monitoring, and reporting of allegations of harassment. Resources for employees, managers, union officials and more.</td>
</tr>
<tr>
<td>Workplace Harassment Prevention for Managers</td>
<td>Link</td>
<td>Training on characteristic forms of harassment and what supervisors / managers can do to discourage harassing behavior of any type.</td>
</tr>
</tbody>
</table>
Frequently Asked Questions (FAQs)

a. What is the trigger threshold requiring a facility remediation plan?
   
   **Answer:** Five substantiated events (sexual harassment, sexual assault or a combination thereof) during the fiscal year.

b. Are new remediation plans required for every trigger threshold or can plans be modified?
   
   **Answer:** Existing plans can be modified.

c. Are a minimum number of remediation actions required?
   
   **Answer:** Yes, at least two actions are required (maximums are determined by the facility, Staff Office, and/or Network/District/Executive Director or other key officials).

d. What is the process and criteria for closing a remediation action?
   
   **Answer:** Concurrence of both the facility/Staff Office Director and Network/Regional/Executive Director or other key officials required for closure of a remediation action. Copy of the completed remediation plan must be forwarded to the ORMDI HPP office within five business days of closing.

e. Do we need to list new actions if steps were already completed (e.g. VA Police investigation, etc.)?
   
   **Answer:** Ensure actions already taken are documented and dated on the plan. Status can be "closed" as appropriate. Recommend additional actions taken, as appropriate. Address changes in approach if trends are noted and remediation efforts fail to accomplish desired results.

f. How do I document modifications to the plan (e.g. due to continued occurrences of alleged sexual harassment or assault)?
   
   **Answer:** the description of action section allows sites to update status of actions. For new actions, add further lines to the tracker (including dates, measures, responsible owners, reassessment dates, and status of action).
# Root Cause Analysis

**Report Date:**

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Provide response to the tasks below</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program / Area within Facility:</td>
<td></td>
</tr>
<tr>
<td>Date of Event:</td>
<td></td>
</tr>
<tr>
<td>Alleged Victim Demographics</td>
<td></td>
</tr>
<tr>
<td>Age:</td>
<td></td>
</tr>
<tr>
<td>Gender:</td>
<td></td>
</tr>
<tr>
<td>Race:</td>
<td></td>
</tr>
<tr>
<td>Date:</td>
<td></td>
</tr>
</tbody>
</table>

## Event Details

<table>
<thead>
<tr>
<th>Provide Event details below</th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe the event and include any harm that resulted. Also, identify the cause (if known).</td>
</tr>
</tbody>
</table>

## RCA Team Members

<table>
<thead>
<tr>
<th>Provide RCA Team member names below</th>
</tr>
</thead>
<tbody>
<tr>
<td>Team Leader</td>
</tr>
<tr>
<td>Member 2</td>
</tr>
<tr>
<td>Member 3</td>
</tr>
<tr>
<td>Member 4</td>
</tr>
<tr>
<td>Member 5</td>
</tr>
</tbody>
</table>

## Action summary

<table>
<thead>
<tr>
<th>Answer the below questions and attach supporting documents (if available)</th>
</tr>
</thead>
<tbody>
<tr>
<td>What measures were in place to minimize or mitigate the risk of occurrence?</td>
</tr>
<tr>
<td>☐ YES ☐ NO</td>
</tr>
<tr>
<td>Were all appropriate staff and supervisory trainings completed by those involved in the occurrence?</td>
</tr>
<tr>
<td>☐ YES ☐ NO</td>
</tr>
<tr>
<td>Were all appropriate security measures in place and active in the area where the event occurred?</td>
</tr>
<tr>
<td>☐ YES ☐ NO</td>
</tr>
<tr>
<td>Are the expected preventive measures against this event occurring clearly described in policy, procedure, written guidelines, employment expectations, and / or included in staff training?</td>
</tr>
<tr>
<td>☐ YES ☐ NO</td>
</tr>
</tbody>
</table>
APPENDIX F:
VA SAMPLE SEXUAL HARASSMENT INTAKE FORM

Please click on the below link for access to the Sexual Harassment Intake Form. The form is for management use only.

VA Form 10221a, SEXUAL HARASSMENT INTAKE FORM